GUIDANCE DOCUMENT
Accreditation Standards for
Pharmacy Technician Education and Training Programs

Introduction to Guidance Document

The Guidance Document consists of the Accreditation Standard for Pharmacy Technician Education and Training Programs with insertions. Each insertion is intended to provide more detail on the standard under which it appears as well as examples of evidence that may be presented to demonstrate compliance with that part of the standard. The guidance is enclosed in text boxes to differentiate it from the Standard.

Introduction

These standards have been developed to:
- protect the public,
- serve as a guide for pharmacy technician education and training program development,
- provide criteria for the evaluation of new and established programs, and,
- promote continuous improvement of established programs.

Nothing in the standards shall prevent individual training programs from establishing more stringent requirements than those specified herein. Further, in instances where more stringent requirements have been established or adopted by state law, regulation, or governmental agency, those requirements will take precedence, for the purposes of ASHP accreditation of programs, within the corresponding state or jurisdiction.

The importance of academic freedom is recognized by ASHP. Therefore, the standards are stated in terms which allow flexibility in the development of an educational program. ASHP encourages experimentation, innovation, alternative methods for meeting these standards, organizational individuality, and achievement of excellence in accredited programs.

The roles of pharmacy technicians are evolving and vary according to state and setting. Pharmacy technicians assist and support licensed pharmacists in providing health care and medications to patients. Pharmacy technicians must have a broad knowledge of pharmacy practice and be skilled in the techniques required to order, stock, package, compound, and otherwise prepare medications.

Definition of Terms

In these standards, the following definition of terms will be used:
- "will," "shall," and "must" - an absolute requirement;
- "should" and "may" - a recommended guideline;

- educational goals - broad, general statements of intended learning;
- educational objectives - specific descriptions of what students need to be able to do in observable, measurable terms, the sum of which lead to achievement of the educational goal; and,
- learning activities or instructional strategies - methods employed to enable learners to acquire the knowledge and/or skills defined in educational goals and objectives.

Standard 1: Administration

1.1 Organizational Accreditation
Pharmacy technician education and training programs may be conducted by health care organizations, academic institutions, private organizations, or governmental organizations (e.g., Department of Veterans Affairs, Department of Defense, and Public Health Service). These organizations must be accredited, when applicable, by the appropriate agency or agencies and shall be responsible for ensuring compliance with the requirements for meeting this standard. The technician education and training program shall be subject to similar general administrative control and guidance employed by the organization for other allied health care training programs. The organization conducting the program must provide financial support to the program sufficient to enable the program to achieve its stated goals. The organization must ensure that physical facilities for all parts of the program are appropriate, safe, and sufficient to enable students to meet the programs' educational goals and must allow for confidential meetings between students and faculty.

General Guidance   The role of the program within the community is the need for pharmacy technicians in the community. Examples of ways to show this include: logging requests from pharmacies for graduates from the technician program, including pharmacists and/or technicians from local pharmacies on the advisory committee who can attest to the need for technicians locally, track placements after completion of program.
Examples of Evidence :   • Copies of accreditation certificates   • Budget for the program

1.2 Strategic Plan
The program must develop a strategic plan that is reviewed and revised, if appropriate, at least annually. The plan must: reflect the role of the program within the community; include long-term program goals, specific measurable objectives, strategies for achieving the goals and objectives, a schedule for analyzing and evaluating the plan, and progress on the plan; and address program outcomes (e.g., graduation rates).

Examples of Evidence :   • Copy of strategic plan   • Indicates response to needs of community

1.3 Program Director Authority and Responsibility
The program director shall have authority and responsibilities that are commensurate with those of other allied health, technical, or vocational training programs offered by the organization. This individual must have appropriate authority to direct all aspects of training. The program director must have the

opportunity to contribute to the development, revision, and selection of qualifications of the applicants for acceptance as trainees.

1.4 Advisory Committee
An advisory committee comprising a broad-based group of pharmacists, faculty, pharmacy technicians, and others as deemed appropriate must be established and meet at least twice a year. The advisory committee must have specific authority for affirming:
   1.4.a. the curriculum makes possible the attainment of all educational goals and objectives;
   1.4.b. criteria for experiential training sites;
   1.4.c. criteria for admission;
   1.4.d. criteria for successful completion of the program; and,
   1.4.e. the training program's strategic plan.

General Guidance:
Meetings may be held in person or electronically.
Examples of Evidence :
- Description of advisory committee   - Roster of advisory committee. Names, job titles and facility should be included.   - Minutes for three years (if applicable) of advisory committee meetings, including documentation of attendance by appropriate attendees (i.e., external stakeholders).   - a-e should be reviewed regularly (annually)   - evidence in advisory committee minutes that it affirmed 1.4.a-e by consensus

1.5 Non-Discriminatory Practice
Reasonable accommodation must be made for students and applicants with disabilities.

Examples of Evidence:
Copies of, or links to, information about program that includes statement about reasonable accommodations made by the program. There should be no discrimination regarding race, color, religion, gender, national origin, age, or sexual orientation.

1.6 Information about the Program
The organization shall provide applicants with information about:
   1.6.a. qualifications to enroll;
   1.6.b. the purpose of the training program;
   1.6.c. requirements for state registration or licensure as a pharmacy technician;
   1.6.d. legal restrictions on national and state registration;
   1.6.e. prospects for employment;
   1.6.f. realistic salary expectations or referral to local, state, or national statistics for salary expectations;
   1.6.g. total program cost; and,
   1.6.h. the program's dismissal policies.

Examples of Evidence:
Copies of, or links to, information about program provided to students to include each of the areas listed from 1.6.a - 1.6.h

1.7 Records
Records related to the following must be maintained and stored for three years or the time period
specified in institutional policy:
    1.7.a. qualifications of the program director and instructors;
    1.7.b. training activities that delineate the scope and period of training;
    1.7.c. activities performed in the didactic, simulated, and experiential segments of the program; and,
    1.7.d. annual review of the qualifications of the experiential training sites, experiential training site
    pharmacy services, and the onsite experiential site coordinator.

Examples of Evidence:
Model Curriculum template
Forms based on examples on ASHP website, such as:
- Format of Advisory Committee Agenda
- Format of Advisory Committee Minutes / Template
- Roster of Advisory Committee Members
- Format of Advisory Committee Responsibilities Checklist
- Format of Program's Strategic Plan / Implementation Management Grid
- Format of Experiential Site and Pharmacy Service Qualifications
- Format of Preceptor Qualifications

For 1.7.c. Examples of evaluation tools and course syllabi

For 1.7.d. Signoffs at the site are needed

Standard 2: Program Faculty (Director, Instructors, Experiential Site Coordinators)

2.1 Program Director
    2.1.a. The program director must be accountable for the overall quality of the program. He/she shall
    have considerable latitude in delegating instructors' and experiential site coordinators'
    responsibilities.
    2.1.b. The program director must:
      (1) be a licensed pharmacist or a nationally certified pharmacy technician;
      (2) have at least five years of experience in pharmacy practice prior to entering the position;
      (3) adhere to the state's regulations for licensure or registration in the practice of pharmacy; and,
      (4) demonstrate on-going continuing education in the field of pharmacy and/or education.

Examples of Evidence :
- If pharmacist, pharmacy license
- If technician, proof of national certification and/or graduate of an accredited pharmacy
  technician training program and state licensure or registration, if applicable.
- Completed Academic and Professional Record

    2.1.c. If the program director is a pharmacy technician, he/she:
      (1) should have graduated from an ASHP-accredited pharmacy technician training program; and,
      (2) must possess or be pursuing actively, with a written plan for achieving, an Associates Degree or
      an appropriate state teaching credential at a minimum.

> **Examples of Evidence** :
> - Training program certificate
> - Diploma or written plan for attaining degree

2.1.d. To stay current with professional issues, the program director must be a member of a national pharmacy or education association and a state pharmacy association. He/she must ensure that memberships in pharmacy and education associations are represented among the program faculty members.

> **Examples of Evidence** :
> Membership cards or documents for state and national organizations
>
> The state pharmacy association can be a technician or a pharmacist association.

2.1.e. The director must ensure that there is a sufficient complement of appropriate program faculty and staff to meet the needs of the program and to enable compliance with the standards.

> **Examples of Evidence** :
> - List of faculty
> - Faculty Academic and Professional Records
> - Interview/feedback from students

2.1.f. In the simulated portion of the program, the program director must take necessary precautions to ensure an effective and safe level of direct supervision of students.

2.2 Faculty/Instructors
2.2.a. Faculty/instructors must have demonstrated expertise in the areas in which they are instructing and adhere to state regulations for licensure or registration to practice as a pharmacist or pharmacy technician. They must have a minimum of three years of experience in the practice setting or area of expertise in which they are teaching.

> **Examples of Evidence** :
> - If pharmacist, pharmacy license.
> - If technician, registration.
> - Academic and Professional Records, including presentations, lectures to other pharmacy groups, types of professional development in pharmacy technician practice, offices held.

2.3 Experiential Site Coordinator
2.3.a. The experiential site coordinator is the person who works at the experiential site and coordinates or oversees students' activities at the practice site.
2.3.b. Experiential site coordinators must have demonstrated contribution and commitment to pharmacy practice and patient care, and have at least three years experience in the type of pharmacy setting for which they are training students.

> **Examples of Evidence** :
> - Completed ASHP Academic and Professional (AP) Form

2.3.c. If experiential site coordinators delegate training responsibilities, it must be to an experienced staff member.

Examples of Evidence: • List that includes amount of experience.

2.3.d. Experiential site coordinators must act as a liaison between site and the program director to ensure that the student receives the intended educational experience and is evaluated effectively.

Standard 3: Education and Training Program

3.1 Preparation
The curriculum must prepare students for practice as entry-level pharmacy technicians in a variety of contemporary settings (e.g., community, hospital, home care, long-term care) and students must acquire knowledge, skills, and abilities needed for practice.

Examples of Evidence : • Syllabus • Completed Model Curriculum template • Grid of goals and where taught and evaluated in program

3.2 Program Currency
The program curriculum must be current.

Examples of Evidence : • Syllabus • Completed Model Curriculum template

3.3 Program Length and Composition
3.3.a. The training schedule must consist of a minimum of 600 clock hours of health-related education and training, extending over a period of 15 weeks or longer.
3.3.b. The period of training must include didactic, simulated, and experiential training.
3.3.c. The minimum number of hours for each component is as follows: Didactic – 160 hours; Simulated – 80 hours; Experiential – 160 hours. The remaining hours may be allocated to these three areas as the program director and faculty see fit.
3.3.d. Students' experiential activities should be performed in at least two different types of contemporary pharmacy settings, one of which must be a dispensing pharmacy (e.g., hospital, community).
3.3.e. Self-paced and hybrid programs must document their method of time calculation for the didactic portion of the program.
3.3.f. Didactic
The didactic component is that part of the curriculum that does not require a separate simulated or experiential setting. It must progress from more basic to more complex information, concepts, and skills.

General Guidance:

Definitions: "Hybrid" programs combine online and in-person programming covering the goals and objectives of the program.

"Clock hours" = 60 minutes

Examples of Evidence :
- Copies of materials provided to students, such as textbooks, workbooks, study materials, written exams, oral exams and practice examinations (paper or online)
- Listing of experiential sites, including location(s) where each student is scheduled.
- Completed Model Curriculum template with breakdown of hours of program
- Provide documentation of hours spent in each portion of the program, including experiential. For example, experiential time sheets.

3.3.g. Simulated
(1) The simulated component is defined as practice of skills without impact, or potential for impact, on patients and must occur before the experiential component. The final phase of the simulated component of the program must include observation, feedback, and evaluation by an instructor/faculty member.
(2) The simulated component must include sufficient equipment and supplies to realistically simulate an actual work environment.
(3) While each skill may be taught in isolation, by the end of the simulated component, students must perform each skill in a sequential manner the way the skill is performed in a pharmacy.
(4) The simulated component of the program must be adequate in scope to prepare trainees for practice in a variety of contemporary pharmacy settings.
(5) The amount of time each trainee spends in the simulated portion of the program must be documented.
(6) Equipment and supplies must be appropriate and sufficient to enable students to achieve the program's educational goals.

Examples of Evidence:
The following list of skills should be considered in the program. Simulation with actual equipment and supplies is preferred. In its absence, realistic models/mock-ups are expected.
- Fill prescriptions
- Complete unit dose packaging
- Fill automated dispensing cabinet (ADC)
- Extemporaneously compound oral**,** topical and sterile products and suppositories
- Prepare sterile compounded chemotherapy agents
- Prepare total parenteral nutrition (TPN), including the use of different syringe sizes and bag sizes (mini and LVP)
- Prepare investigational drugs
- Prepare oral syringes, including pediatric syringes
- Prepare unit dose carts
- Prepare emergency drug carts/boxes
- Fill narcotics cabinet
- Monitor refrigerator temperature/systems
- Apply proper hand-washing procedures with an operational sink
- Employ aseptic technique in accordance with USP 797 requirements
- Utilize pharmacy references
- Utilize outpatient and inpatient computerized systems

- Reconstitute lyophilized powders
- Manipulate ampules
- Maintain electronic medical records
- Use computers and printers to produce medication labels
- Handle over-the-counter (OTC) products
- Operate durable medical devices
- Maintain inventory records (automated vs Want Book)
- Utilize appropriate interpersonal skills when speaking with customers on the phone or in person.
- Prepare medications for nursing home patients
- Maintain medication administration records
- Implement tall man lettering and other "look alike, sound alike" (LASA) techniques for medication error reduction
- Operate cash register

Equipment and supplies that may assist in providing adequate practice of these skills, e.g., retail vs hospital equipment and supplies, wall of meds (IV and PO), tall man lettering, computer systems.
- References (online and text)
- Packaging equipment and supplies
- Blister packs
- Computers
- Printer
- Calculators
- Software for medication profiles
- Cash Register
- Refrigerator with thermometer
- Scales and/or balances with weights
- Ingredients for compounding
- Spatulas
- Ointment slab
- Cylinders
- Beakers
- Spatulas
- Suppository molds
- Hot plate
- Compounding logs
- Pill counting trays
- Weighing papers or boats
- Cleaning supplies i.e.: alcohol and gauze
- Rx bottles and vials with lids
- Automated simulation software
- Automated drug distribution cabinets
- Medication carts
- Shelving with practice medications and bins
- Inventory practice software
- Countertop surfaces for working
- Oral syringes with caps

- Labels
- Narcotic cabinet
- Written practice prescriptions
- Written physician's orders
- Patient profiles
- Reference library
- Laminar IV hood
- Sink
- Biological safety cabinet
- Automatic fill or TPN compounder
- Vials
- IV Solutions
- Filters
- Stocked IV room shelving
- Syringes
- Needles
- Solutions for admixing
- Powder vials for reconstitution
- Sticky mat
- Gloves
- Gowns
- Masks
- Goggles
- Shoe covers
- Hair covers
- IV cleaning supplies

3.3.h. Experiential
(1) Experiential sites must be selected by the program director or a qualified pharmacy technician instructor who participates in the pharmacy technician education and training program.
(2) Experiential training sites must be only in organizations that have sought and accepted outside appraisal of facilities and patient care practices. The external appraisal must be conducted by a recognized organization appropriate to the practice setting.

General Guidance:
This must include, but not be limited to:
- Health-system facilities must be accredited by one of the following: The Joint Commission, the American Osteopathic Association, the National Committee for Quality Assurance, Centers for Medicare and Medicaid Services (CMS), Det Norske Veritas (DNV) or Center for Practice Accreditation (CPPA). In addition, they must have a permit without sanctions from the State Board of Pharmacy.
- Community pharmacies must demonstrate substantial conformance with applicable professionally developed and nationally applied practice standards and have a permit without sanctions from the State Board of Pharmacy
- Managed care facilities must be accredited by URAC and/or have a permit without sanctions from the State Board of Pharmacy

• Home care facilities must have a permit without sanctions from the State Board of Pharmacy • Long term care facilities must have a permit without sanctions from the State Board of Pharmacy and/or the Department of Health.
Examples of Evidence: • Sample checklists used to document site compliance of proper licensing, permits and/or accreditations • Copies of licenses, permits

(3) The program director or qualified designee (pharmacy technician, pharmacist) must document that each experiential site has proper licensing.

(4) The program director or qualified designee (pharmacy technician or pharmacist) must determine annually that the site employs properly qualified staff and will provide students with experience in a high-quality pharmacy practice.

(5) The program director or qualified designee (pharmacy technician or pharmacist) must determine that students will have the opportunity to practice a sufficiently wide range of activities to enable them to prepare for the experiential component of the program.

(6) The program director or designee must review experiential training sites annually.

(7) The program director must ensure experiential sites and technician education and training programs have affiliation agreements that are up-to-date.

(8) The program director and faculty must ensure adequate and appropriate experiential sites for the experiential portion of the program.

Examples of Evidence : • Files of annual forms or checklists used to document site compliance of proper licensing, permits and/or accreditations which are signed by the program director or designee and the responsible person at the experiential site. Include space for special pharmacy services and/or equipment. • Samples of affiliation agreements that are signed off by the individual reviewing sites for quality

3.4 Sequence of Instruction
The sequence of activities to transition from simulated to experiential must be:
    3.4.a. observation (student observes expert performing task);
    3.4.b. simulation (including observation, feedback, and evaluation by an expert); and,
    3.4.c. experiential performance under supervision.

3.5 Distance Education
Distance learning programs seeking ASHP accreditation must comply with this accreditation standard. In addition, program directors and faculty must make appropriate and effective use of technology to teach the specified objectives. The technology must be readily accessible by students.

Examples of Evidence : Access to technology for surveyors to review teaching, evaluation, and tracking of student progress.

3.6 Education and Training Program Goals
    3.6.a. The education and training program shall be based on the following goals that reflect current and future pharmacy technician functions and responsibilities at the entry-level. While not intended to be prescriptive, the *Model Curriculum for Pharmacy Technician Training,* provides sets of

educational objectives identified for achieving each of the goals listed below. In addition, the model curriculum provides guidance for grouping and sequencing instruction. It is recommended as a guide for meeting the standard and for training. This resource can be obtained from the ASHP website at www.ashp.org/technicians/model_curriculum/index.html. The program director and faculty may add educational goals and objectives that meet current needs of the community and pharmacy profession for pharmacy technician services.

Examples of Evidence :
- Syllabus for each class.
- Crosswalk or curriculum mapping of goals to each section of the curriculum (didactic, simulated, experiential).
- Use of forms and templates on ASHP website.

3.6.b. Goals

General Guidance:
For guidance on the goals, refer to the Model Curriculum.

Personal/Interpersonal Knowledge and Skills
- (1) Demonstrate ethical conduct in all job-related activities.

- (2) Present an image appropriate for the profession of pharmacy in appearance and behavior.

- (3) Communicate clearly when speaking and in writing.

- (4) Demonstrate a respectful attitude when interacting with diverse patient populations.

- (5) Apply self-management skills, including time management, stress management, and adapting to change.

- (6) Apply interpersonal skills, including negotiation skills, conflict resolution, and teamwork.

- (7) Apply critical thinking skills, creativity, and innovation to solve problems.

Foundational Professional Knowledge and Skills
- (8) Demonstrate understanding of healthcare occupations and the health care delivery system.

- (9) Demonstrate understanding of wellness promotion and disease prevention concepts, such as use of health screenings; health practices and environmental factors that impact health; and adverse effects of alcohol, tobacco, and legal and illegal drugs.

- (10) Demonstrate commitment to excellence in the pharmacy profession and to continuing education and training.

- (11) Demonstrate knowledge and skills in areas of science relevant to the pharmacy technician's role, including anatomy/physiology and pharmacology.

(12) Perform mathematical calculations essential to the duties of pharmacy technicians in a variety of contemporary settings.

(13) Demonstrate understanding of the pharmacy technician's role in the medication-use process.

(14) Demonstrate understanding of major trends, issues, goals, and initiatives taking place in the pharmacy profession.

(15) Demonstrate understanding of non-traditional roles of pharmacy technicians.

(16) Identify and describe emerging therapies.

(17) Demonstrate understanding of the preparation and process for sterile and non-sterile compounding.

Processing and Handling of Medications and Medication Orders

(18) Assist pharmacists in collecting, organizing, and recording demographic and clinical information for direct patient care and medication-use review.

(19) Receive and screen prescriptions/medication orders for completeness, accuracy, and authenticity.

(20) Assist pharmacists in the identification of patients who desire/require counseling to optimize the use of medications, equipment, and devices.

(21) Prepare non-patient-specific medications for distribution (e.g., batch, stock medications).

(22) Distribute medications in a manner that follows specified procedures.

(23) Practice effective infection control procedures, including preventing transmission of blood borne and airborne diseases.

(24) Assist pharmacists in preparing, storing, and distributing medication products requiring special handling and documentation [(e.g., controlled substances, immunizations, chemotherapy, investigational drugs, drugs with mandated Risk Evaluation and Mitigation Strategies (REMS)].

(25) Assist pharmacists in the monitoring of medication therapy.

(26) Prepare patient-specific medications for distribution.

(27) Maintain pharmacy facilities and equipment, including automated dispensing equipment.

(28) Use material safety data sheets (MSDS) to identify, handle, and safely dispose of hazardous materials.

Sterile and Non-Sterile Compounding (must choose sterile, non-sterile, or both during simulation experience)

(29) Prepare medications requiring compounding of sterile products (if selected).

(30) Prepare medications requiring compounding of non-sterile products (if selected).

(31) Prepare medications requiring compounding of chemotherapy/hazardous products (if selected).

Procurement, Billing, Reimbursement and Inventory Management
(32) Initiate, verify, and assist in the adjudication of billing for pharmacy services and goods, and collect payment for these services.

(33) Apply accepted procedures in purchasing pharmaceuticals, devices, and supplies.

(34) Apply accepted procedures in inventory control of medications, equipment, and devices.

(35) Explain pharmacy reimbursement plans for covering pharmacy services.

Patient- and Medication-Safety
(36) Apply patient- and medication-safety practices in all aspects of the pharmacy technician's roles.

(37) Verify measurements, preparation, and/or packaging of medications produced by other healthcare professionals (e.g., tech-check-tech).

(38) Explain pharmacists' roles when they are responding to emergency situations and how pharmacy technicians can assist pharmacists by being certified as a Basic Life Support (BLS) Healthcare Provider.

(39) Demonstrate skills required for effective emergency preparedness.

(40) Assist pharmacists in medication reconciliation.

(41) Assist pharmacists in medication therapy management.

Technology and Informatics
(42) Describe the use of current technology in the healthcare environment to ensure the safety and accuracy of medication dispensing.

Regulatory Issues
(43) Compare and contrast the roles of pharmacists and pharmacy technicians in ensuring pharmacy department compliance with professional standards and relevant legal, regulatory, formulary, contractual, and safety requirements.

(44) Maintain confidentiality of patient information.

Quality Assurance
(45) Apply quality assurance practices to pharmaceuticals, durable and non-durable medical equipment, devices, and supplies.

(46) Explain procedures and communication channels to use in the event of a product recall or shortage, a medication error, or identification of another problem.

Standard 4: Students

4.1 Student Recruitment, Acceptance, and Enrollment

4.1.a. A policy and process must be documented and provided to student recruitment personnel (staff who enroll prospective students, such as telephone marketers, enrollment advisors, and admissions representatives), that includes guidance to them as follows:

(1) prior to the application process, providing prospective applicants complete and accurate information on the total student financial obligation they will incur by participating in the program;

(2) prior to enrollment, providing students complete and accurate information about financing options and answering any questions; and,

(3) prior to enrollment, informing applicants that illicit drug use, criminal background checks, and immunization status may prevent future employment as a pharmacy technician, and that externship sites, employers, and State Boards of Pharmacy have regulations about drug use and criminal backgrounds.

Examples of Evidence :
- Copies of applicable policies

4.1.b. Subject to and in accordance with applicable state and/or territorial laws, the organization must establish qualifications that applicants must possess to ensure that they are reasonably likely to be able to achieve the educational goals and objectives of the program.

4.1.c. Subject to and in accordance with applicable state and/or territorial laws, the organization must also determine with reasonable certainty, prior to acceptance of the applicant, that the applicant has proper qualifications to enroll. At a minimum, the student must:

(1) be attending high school, possess a high school equivalency certificate, or be a high school graduate;

(2) have English language proficiency (including reading, writing, and speaking), except in cases where the native language of the country or territory in which the program is taking place is different (e.g., Puerto Rico);

(3) have math proficiency sufficient to fulfill the requirements of pharmacy technician job responsibilities; and,

(4) meet the minimum age requirements, which must be based on state requirements for employment of pharmacy technicians.

General Guidance:
- Documentation of how age is verified.
- Legal language added in response to some state laws that prohibit assessments of candidates to certificate programs. Check relevant state laws.

Examples of Evidence :
- Written policy – excerpts of "Admissions Training Manual" (if available).
- Copies of materials provided to students
- Admission policy

- Proof of students attending high school, high school equivalency certificate or high school diploma
- Student entrance or assessment exam may be used to determine reading, writing, math, and English proficiency, examples of entrance/assessment exams include Health Occupations Basic Entrance Test (HOBET), Career Program Assessment (CPAt), and Computer-Adaptive Placement and Assessment System Exam (COMPASS)
- Sample of entrance/assessment exams
- Criteria for acceptance

4.1.d. Subject to and in accordance with applicable state and/or territorial laws, the program must have a documented process to assess applicants' background pertaining to any illicit drug use and criminal background. This information must be used to make appropriate decisions regarding acceptance.

General Guidance:
- Specific disclosures related to criminal background checks (BGC), drug screening (testing) and immunization status to inform students of the requirements by employers and Boards of Pharmacy.
- Cannot be in conflict with state laws.
- Students must be able to be placed in experiential portion of the program.
- Programs that accept federal funds are cautioned not to accept students who are expected not to be able to graduate.

Examples of Evidence :
- Criteria regarding criminal background checks

4.2 Student Identity Verification
Distance learning programs and program-related off-campus activities must verify that a student who registered for distance education or is participating in program-related off-campus activities is the same student attending the clinical experiential portion of the program, receiving credit, and graduating.

Examples of Evidence :
Description of process used to verify.

Standard 5: Evaluations and Assessments

5.1 Scope and Appropriateness of Students' Evaluation
5.1.a. The program director must ensure that students' achievement of educational objectives is evaluated appropriately, to include their knowledge, skills, and abilities leading to entry-level pharmacy technician job competencies.

General Guidance:
- Include examples of completed evaluation forms for didactic, simulated and experiential portions of the program.
- Student evaluation should be based on a variety of assessment practices – standardized formal and informal assessments; test and grades; formative and/or summative assessments.

5.1.b. Assessment of students' achievement must occur in each component of the program (didactic, simulated, and experiential).
   (1) If permitted by the program, policies and procedures must be developed and implemented for transfer credit and course waivers.

5.2 Frequency and Relevance of Students' Evaluation Feedback
The program director must ensure that students' evaluation is ongoing, systematic, and assesses students' progress toward meeting the requirements for graduation. Students must receive frequent feedback on their performance that enables them to identify strengths and weaknesses, and gives them direction on how to improve. Evaluations shall be documented and kept on file.

General Guidance:
- Include examples of completed evaluation forms.
- Student evaluation should be based on a variety of assessment practices – standardized formal and informal assessments; ongoing and/or end of training section assessments used to assess student knowledge.
- Skill assessment forms should be provided to students in the assessment process that contains specific criteria allowing student mastery of the skill being tested.
- Provide verbal and written criteria-based feedback on assessment

Examples of Evidence :
- Copies of evaluations based on the goals and objectives of each component of the program.
- Copies of skill assessment or check off forms with descriptive feedback to the student.
- Documentation on how assessment is managed in the program.
- Samples of completed student performance evaluations on two different types of experiential rotations.
- Written comments
- Interview

5.3 Post Program Preparation
The program director or designee must provide students with information and resources to prepare them for employer-accepted and nationally recognized certification, registration, and/or licensure.

5.4 Faculty Evaluation
Faculty members, including the program director, instructors, and site coordinators must be evaluated regularly. An evaluation process shall be defined and implemented, and incorporate feedback from students and graduates. In addition, a process for review and use of the information gained from evaluations for continuous improvement must be defined and implemented.

Examples of Evidence:
- Student surveys giving feedback on instructors.
- Written policy/process for review.

5.5 Program Assessment
The program's staff must conduct regular and ongoing assessments of program effectiveness and use the evaluations for continuous improvement of the program. Measures shall include, but are not limited to:
   5.5.a. performance on national certification or licensure exams;

5.5.b. program completion;

5.5.c. program satisfaction, including student, graduate, and employer satisfaction; and,

5.5.d. job placement.

General Guidance:

- The most common "Job Placement Rates" reported to accreditation and State agencies are often not comparable due to differences (i.e., differences in cohorts, definitions of placement, timeframes.) Three positive or job placement definitions varies by agency, examples of various definitions include; placement in field (direct use of skills); indirect placement (indirect use of skills taught in program); serving in the military; continuing education.
- Most agencies allow exclusion from placement (unavailable for employment) such as death; others may allow pregnancy; serious health related condition; incarceration; and VISA restrictions
- Retention is a key indicator of students' satisfaction in the program.
- Written policy

Standard 6: Graduation and Certificate

6.1 Conditions for Graduation

The program director must ensure that a process for determining requirements for graduation is documented and implemented.

6.2 Certificate

6.2.a. Programs shall recognize those pharmacy technicians who have completed successfully the pharmacy technician training program by awarding an appropriate certificate or diploma.

6.2.b. The certificate must be signed by the highest ranking officer of the institution and the program director.

6.2.c. Programs must not issue a certificate to an individual who has failed to complete the prescribed program or to meet the intent of this accreditation standard.

6.2.d. The certificate must contain the name of the organization, program name and location, student name, completion date, and confirmation that the program is ASHP-accredited or in an ASHP candidate status.

Examples of Evidence :

Sample copy of certificate

Criteria for graduation

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Approved by the ASHP Board of Directors on October 30, 2015 and the Accreditation Council for Pharmacy Education Board of Directors on November 7, 2015; Developed by the Pharmacy Technician Accreditation Commission. This version supersedes the *ASHP Accreditation Standard for Pharmacy Technician Training Programs*, approved April 12, 2014 and will be effective January 1, 2016.