

In This Issue

- › ASHP Covid-19 Resource Center
 - Pandemic Effects on Residency Training
- › 2020 NPPC
- › 2020 National Match Results
- › Commission on Credentialing Highlights
 - COVID-19 Pandemic and licensure
 - Length of Accreditation Granted
 - Other Commission Activity
- › New PGY2 residency program- Population Health Management and Data Analytics
- › Updated: Standards, Competency Areas, Goals, and Objectives Revisions
- › Pre-Candidate to Candidate Status Change
- › Annual Residency Accreditation Report and Preceptor Survey – trends/results
- › Resident Survey – initial survey
- › Most Common Survey Citings- PGY1 Standards
- › PharmAcademic™ Release Notes and Tips
- › ASHP Residency Showcase™ Information for MCM20
- › News: Growth of Pharmacy Technician Training Programs
- › News: ASHP Membership Forums
- › Resident Visits to ASHP Headquarters
- › News: Accreditation Services Office
 - Virtual Accreditation Survey
- › Surveyor Tips: In The Know
- › News: ASHP Foundation
- › Available from ASHP



ASHP is committed to supporting members and non-members in response to the COVID-19 pandemic.

We have launched a new [COVID-19 Resource Center](#) microsite that is updated regularly and includes open access to our evidence-based online resources and tools on [ashp.org](#), making them widely available to all pharmacists and healthcare professionals. The [COVID-19 Connect Community](#) also serves as a forum for any healthcare providers to ask questions, share experiences, post resources, and more. Live and recorded ASHP COVID-19 Webinars providing perspective and insight from experiences during the COVID-19 pandemic are also available.

Additionally, included on the [COVID-19 Resource Center](#) microsite is the [Residency Training](#) page dedicated to resources for residency programs, including the document “Pandemic Effects on Residency Training Q&A.” This document addresses the following topics relative to the pandemic: Colleges and Schools of Pharmacy; 2020-2021 Residency Year Planning; Furlough or Termination of Pharmacy Residents During Pandemic; Accreditation Surveys & Survey Related Info; Resident COVID-19 Illness & Quarantine; and lastly Requirements for Successful Completion of Residency. This document is updated regularly based on questions posed to the accreditation services office.

Further, the “[ASHP Statement on Pharmacy Residency Furloughs Resulting from the COVID-19 Pandemic Emergency](#)” established ASHP’s strong opposition to resident furlough or termination during the pandemic emergency.

These are just a few of the many examples of things ASHP is doing to help our country, and our members care for their patients during this challenging time.

The 2020 National Pharmacy Preceptors Conference (NPPC) Goes Virtual!

ASHP's National Pharmacy Preceptors Conference will take place in October as a virtual event. Watch for forthcoming programming details and registration information at preceptors.ashp.org. We remain committed to leveraging technology solutions to deliver the dynamic, high-quality educational content and professional development experiences our members expect from us.

2020 National Match Results

Results from the 2020 Phase I Pharmacy Resident Match were released on March 13, 2020. More than 8,775 graduating pharmacy students and new practitioners participated in the Resident Matching Program seeking PGY1 and PGY2 residencies, of which there were 5,327 positions. An additional 498 PGY1 residents participated in the early commitment process to stay on at their site to complete a PGY2 residency, resulting in a total of 4,425 positions filled during Phase I.

Here's how the 2019 Phase I Match Day compared to last year:

- 3,671 PGY1 positions matched, 4% increase in filled positions over last year (3,530)
- 1,252 PGY2 positions matched, 7.2% increase in filled positions over last year (1,167) includes early commitments (754 matched + 498 early commits)
- 4.2% increase in participating PGY1 applicants overall
- 12% increase in participating PGY2 applicants overall
- Decrease from 36.1% to 35.2% of PGY2 positions filled by early commitment process

Results from the 2020 Phase II Pharmacy Residency Match were released on April 8, 2020. One thousand, four hundred and ninety-four applicants (1,494) participated in Phase II of the 2020 Match compared with 1,622 in the Phase II match in 2019. This represents a 7.9% decrease in Phase II applicants.

The results of Phase I and Phase II 2020 Pharmacy Residency Match*:

- Total of 4,768 applicants matched (4,425 in Phase I + 343 in Phase II)
- Overall position fill rate for PGY1 and PGY2 positions was 99.1% (compared to 99.9% in 2019)
- At the end of the 2020 Match (at the conclusion of Phase II), there were 43 unfilled positions (5 PGY1 and 38 PGY2) and 2,596 unmatched applicants (2,281 PGY1 + 315 PGY2)

(*Total is not the sum of Phase I and Phase II due to changes occurring during the phases.)

Obtaining a residency continues to be competitive. This year at the conclusion of the 2020 Match (after Phase II), 2,281 individuals seeking PGY1 residencies did not match, and 5 PGY1 positions remained unfilled. Pharmacists seeking PGY2 residencies saw somewhat less competition, with 315 unmatched individuals seeking to fill 38 PGY2 open positions. The number of applicants entering the post-match scramble 2020 for PGY1 positions was much more competitive than in 2019 (2,115 individuals for 11 positions). Further, the number of applicants in 2020 for PGY2 was also more competitive than in 2019 (258 individuals and 26 positions). Overall, the number of residency positions has increased by 823 positions or 48% nationwide. The growth of PGY2 positions has outpaced the growth of PGY1 positions, at 9.9% and 2%, respectively.

[Read More](#)

Commission on Credentialing Highlights

COVID-19 Pandemic and Licensure

On May 12, 2020 the Commission on Credentialing and ASHP Board of Directors approved an extension of the licensure requirement for residents until January 1, 2021. This is a temporary waiver of the requirement that residents be licensed for 2/3 of the residency year (e.g., July 1st residency start requires licensure by November 1st). This waiver is for the 2020/2021 residency year only. Accreditation Services, through our partners at NABP, continues to monitor pandemic-related effects on residency and will take future action, if necessary, to ensure residents and programs receive relief from any further delays in testing or licensure.

PLEASE NOTE: Incoming residents are expected to schedule and take all required licensing exams at the earliest date possible.

The Commission on Credentialing (COC) met March 6-8, 2020.

The following actions were taken by the Commission on Credentialing:

Length of Accreditation Granted at the March 2020 COC meeting

Residency	Total #	Conditional Accreditation	1yr	2yr	3yr	4yr	5yr	7yr	8yr Full Cycle	Withhold	Defer	Discontinue
New	94	0	9	0	0	23	0	0	58	3	1	X
Reaccreditation	119	0	10	0	0	27	0	0	81	X	0	1
Special Cases	120	1	14	12	86	2	2	1	0	1	0	1
TOTAL	333	1	33	12	86	52	2	1	139	4	1	2

The following voted actions by the Commission on Credentialing were recently approved by the ASHP Board of Directors:

Voted To Approve:

- The revisions to the PGY2 Population Health Management and Data Analytics Competency Areas, Goals, and Objectives (CAGOs) with required implementation by July 1, 2020, for new programs and for existing programs by July 1, 2021.

- The revisions to the PGY2 Investigational Drugs and Research Pharmacy Competency Areas, Goals, and Objectives (CAGOs) with required implementation by new programs on July 1, 2020.
- The revisions to the PGY2 criteria for the recognition of a novel PGY2 residency in a new advanced area of pharmacy practice and review process.
- The changes to 24-month residency programs that requires a distinct postgraduate year one (PGY1) and postgraduate year two (PGY2) program structure that uses the PGY1 Competency Areas, Goals, and Objectives (CAGOs) for year one and the PGY2 CAGOs for year two. Programs will be required to issue a completion certificate for the PGY1 year at the end of year one and a PGY2 completion certificate at the end of year two. Implementation will be required for all incoming residents in July 2021.
- The amended changes to standards guidance for standard 4.8.d: an established, active practice in the area for which they serve as preceptor; to include the following language: Active practice is defined as maintaining regular and on-going responsibilities for the area where the pharmacist serves as a preceptor (may be part-time and/or at a remote location but must be actively engaged).
- The amended changes to the definition of moonlighting in the Duty Hours Policy that currently defines moonlighting as: “voluntary, compensated, **pharmacy**-related work...”, to **any** voluntary compensated work performed.
- The recommendation of the Quality Subcommittee that any program not submitting the required Annual Residency Accreditation Survey Report be placed in conditional status with intent to withdraw accreditation at the end of the residency year following notification by certified letter and after 30-days has elapsed without submission.

The next meeting of the Commission on Credentialing will be held on August 14-16, 2020.



NEW: PGY2 Residency Program – PGY2 Population Health Management and Data Analytics

The story behind the new program type

During the review of the Competency Areas, Goals, and Objectives (CAGOs) for the PGY2 Pharmacy Outcomes and Healthcare Analytics residency program, it was noted that although the program was applicable to large health systems, active programs were historically run in the Veterans Administration (VA) Healthcare system. The goal and outcomes of the residency discipline were distinct and effective, yet additional residency programs were not growing beyond the VA health system over the years. The Commission on Credentialing requested that the active and interest-ed pharmacy residency programs review and redesign the CAGOs, so the discipline could have a broader reach and implementation. The result was a revision of the CAGOs and residency title to, **PGY2 Population Health Management and Data Analytics**, which embodies a similar vision of the original and incorporates a more comprehensive approach to population health management. The newly designed and approved CAGOs enable more organizations to be able to incorporate and implement this pharmacy residency program, to further positively impact patients through a population health and data analytics approach.

Current PGY2 Pharmacy Outcome and Healthcare Analytics (old terminology) programs in the VA, are opting to implement the redesigned PGY2 Population Health Management and Data Analytics CAGOs early, for the class starting July 2020 (early optional date vs. required implementation date of July 1, 2021).

Updated Documents and Revisions Posted to Website

Updated guidance documents have been posted and can be found posted [here](#).

Transitioning from Pre-Candidate to Candidate Status

Congratulations to those new programs that were in the pre-candidate phase of the accreditation process and matched with your first resident(s) during Phase I in March, Phase II in April, or filled positions in the post-Match scramble! When your resident(s) begin the program in July 2020, you must submit an application for accreditation to Accreditation Services (to transition to candidate status). The application forms are listed by types of programs and are located on our website on the [Residency Program Resources](#) page under “Applying for Accreditation” and scroll down to “Application Forms”.

Our receipt of the application for accreditation lets us know that your program has its first resident(s) and is ready to be placed on the wait-list for an accreditation survey visit in 2021. The date we receive this application is also the date that PGY1 pharmacy residency programs may use to retroactively apply for CMS pass-through funding once accreditation is achieved.

Annual Residency Accreditation Report and Preceptor Survey

Highlights from the 2019 Annual Residency Report and Preceptors Survey

From the COC Update presented at the Midyear Clinical Meeting 2019

The Annual Residency Accreditation Report survey was initiated in September 2018 to collect data on all accredited residency programs. It is sent out each September through PharmAcademic and allows collection of data in support of the accreditation process and program status concerning performance and quality.

Data from the fall 2019 Annual Residency Accreditation Report survey showed an 8.1% increase for all residency positions over 2018. This increase represented 399 positions across all residency types. Specifically, there was an increase of 232 PGY1 positions, 160 PGY2 positions, and seven combined PGY1/PGY2 positions. Specifically, for PGY1 positions, the additional 232 positions in 2019 represented a 6.4% increase over the total PGY1 positions available in 2018. The breakdown of PGY1 positions included 207 new PGY1 pharmacy positions, 19 new PGY1 community positions, and six new PGY1 managed care positions in 2019.

At the end of the 2018-19 residency year, 39% of PGY1 graduates, 41% of combined PGY1/PGY2 graduates, and 32% of PGY2 graduates were hired by their training site. Also, at the end of the 2018-19 residency year, 58% of graduates went on to pursue further training compared to 54% for the year before.

Next, the survey asked if graduated residents took positions requiring residency training. Results confirmed that 71% of PGY1 graduates, 83% of PGY1/PGY2 combined program graduates, and 83% of PGY2 graduates did take positions requiring residency training.

When asked if programs were promoting diversity in residency classes through the recruiting process, the majority of all program types responded that they have procedures in place to enable implementation of diversity policy and achieve diversity goals for their programs. Likewise, almost 100% of programs responded that they are following their institution's non-discrimination policies in resident recruitment.

Regarding pharmacy services, the survey reported that overall, 4% of programs reported that pharmacy services had been discontinued due to budgetary issues in the prior 12 months.

Additionally, in the fall of 2019, the initial Preceptors' Survey was distributed to collect data from the preceptors' perspective. Preliminary results from the first preceptor's survey were presented at the Midyear Clinical Meeting. The survey response rate at the time was 70%. When





asked the number of hours preceptors spend with residents in a typical week, the results ranged from 18 hours for PGY1 program preceptors, to 16 hours for PGY2 preceptors to 14 hours for preceptors in combined PGY1/PGY2 programs. When asked whether preceptors were required to participate in residency programs, a majority replied, “yes.” Conversely, when asked if they had a choice, would they prefer NOT to precept residents, the response was an overwhelming, “No!” This response is a positive sign that the preceptors find it a rewarding experience.

Regarding residency projects, not all preceptors are involved. It was close, but the “no” responses were higher than the “yes” responses to this question. Of those who were involved, the vast majority felt prepared for the role of project mentor. The survey also highlighted that without residency-based research, most project preceptors would not otherwise be involved in research.

The majority of respondents answered “no” when asked if their program’s residency requirements and expectations exceed the capacity of the resident to complete the required work. Conversely, the majority of respondents also answered “yes” when asked, “Is there is an established and effective process in your program for addressing problems related to your resident(s) progress?”

When asked if preceptors were provided education and resources to manage preceptor well-being and resilience, most preceptors in all program types answered affirmatively.

The two surveys returned some useful information to support the accreditation process. What is next? The last piece of information needed to provide a complete picture will come from the resident survey launched this May. The final step will be to analyze the trends from that survey and create a report that includes data from all three surveys to support the 8-year accreditation cycle and provide an aggregate picture of what is happening in residency training.

NEW: Annual Resident Survey

Accreditation Services announces the release of the first Annual Resident Survey through PharmAcademic. All residents graduating in 2020 will receive the survey. The survey is designed to gather feedback from residents on their residency experience, confirm compliance with duty hour policies, and collect resident opinions related to the effectiveness of their program in supporting residency training. All responses are anonymous and will only be viewed in aggregate by ASHP.



Residents will receive an email notification and task on their PharmAcademic Global Task List 45 days prior to their program end date. The survey has 28 questions and should only take a few minutes to complete.

RPDs can monitor survey completion (Manage Program > Tools > Review ASHP Survey Completion).

Our partners at PharmAcademic developed a document which includes instructions on submitting the survey and provides a list of the survey questions.

Most Common Survey Citings PGY1 Standard

March 2020 COC: Top Areas of Partial Compliance with PGY1 Pharmacy Residencies

2014 PGY1 Standard: Top Items Overall by Frequency Cited

Standard Number	Standard Verbiage	Percent of Time Cited
3.4c(1)	At the end of each learning experience, residents receive, and discuss with preceptors, verbal and written assessment on the extent of their progress toward achievement of assigned educational goals and objectives, with reference to specific criteria.	99%
3.3c(1)a	Learning experiences are documented and include: <ul style="list-style-type: none"> a general description, including the practice area and the roles of pharmacists in the practice area; 	85%
3.3c(1)b	<ul style="list-style-type: none"> expectations of residents; and, 	86%
3.3c(1)d	<ul style="list-style-type: none"> for each objective, a list of learning activities that will facilitate its achievement. 	84%
1.6	Requirements for successful completion and expectations of the residency program are documented and provided to applicants invited to interview, including policies for professional, family, and sick leave; policies regarding licensure requirements; consequences of any such leave on residents' ability to complete the residency program; and for dismissal from the residency program.	76%
3.4d(2)	On a quarterly basis, the RPD or designee assesses residents' progress and determines if the development plan needs to be adjusted.	73%
3.4c(2)	For learning experiences greater than or equal to 12 weeks in length, a documented summative evaluation is completed at least every three months.	72%

2014 PGY1 Standard: Top Items Cited Related to Program Policies

Standard Number	Standard Verbiage	Percent of Time Cited
1.6	Requirements for successful completion and expectations of the residency program are documented and provided to applicants invited to interview, including policies for professional, family, and sick leave; policies regarding licensure requirements; consequences of any such leave on residents' ability to complete the residency program; and for dismissal from the residency program.	76%
2.4b	Residents' acceptance of the terms and conditions, requirements for successful completion, and expectations of the residency program is documented prior to the beginning of the residency.	68%
2.7a	The RPD documents residents' completion of the program's requirements.	57%
2.2	The program complies with the ASHP <i>Duty-Hour Requirements for Pharmacy Residencies</i> .	53%
2.4a	The RPD provides residents accepted into the program with information on the pre-employment requirements for the organization (e.g., licensure and human resources requirements, such as drug testing, criminal record check) and other relevant information (e.g., benefits, stipend).	53%

2014 PGY1 Standard: Top Cited Items - Program Structure & Preceptors

Standard Number	Standard Verbiage	Percent of Time Cited
3.4c(1)	At the end of each learning experience, residents receive, and discuss with preceptors, verbal and written assessment on the extent of their progress toward achievement of assigned educational goals and objectives, with reference to specific criteria.	99%
3.3c(1)a	Learning experiences are documented and include: <ul style="list-style-type: none"> a general description, including the practice area and the roles of pharmacists in the practice area; 	85%
3.3c(1)b	<ul style="list-style-type: none"> expectations of residents; and, 	86%
3.3c(1)d	for each objective, a list of learning activities that will facilitate its achievement.	84%
3.4d(2)	On a quarterly basis, the RPD or designee must assess residents' progress and determines if the development plan needs to be adjusted.	73%
3.4c(2)	For learning experiences greater than or equal to 12 weeks in length, a documented summative evaluation must be completed at the 3-, 6-, and 12-month points.	72%

2014 PGY1 Standard: Top Cited Items – Pharmacy Services

Standard Number	Standard Verbiage	Percent of Time Cited
6.5b	Pharmacy leaders ensure compliance with: current national practice standards and guidelines. (i.e., ASHP Best Practices; USP Chapter 797/800 requirements, and ISMP Targeted Medication Safety Best Practices for Hospitals.)	67%
6.6k	The medication system includes the following components (as applicable to the practice setting): a system to ensuring accountability and optimization for the safe use of medication-use system technologies.	57%
6.2d	The pharmacy is an integral part of the health-care delivery system at the practice site in which the residency program is offered, as evidenced by the following: pharmacy services extend to all areas of the practice site in which medications for patients are prescribed, dispensed, administered, and monitored.	57%
6.7l	The following patient care services and activities are provided by pharmacists in collaboration with other health-care professionals to optimize medication therapy for patients: a system to ensure and support continuity-of-care during patient care transitions.	43%

Critical Factors appear in bold.

Please refer to Fall 2019 for the Most Common PGY2 Citings. Stay tuned for updated PGY2 Citings in Fall 2020.

PharmAcademic Enhancements 5.13.2020

Removal of Taught (Only) Objectives

Included in RPD Communication

Please see the PharmAcademic help document, “Adding a Learning Experience” for more information.

Programs will only select “Taught and Evaluated” when assigning objectives to learning experiences. If programs had objectives marked as “Taught” on a learning experience:

- Those objectives are no longer selected on the Educational Objectives tab
- Activities mapped to those objectives are listed on the Activities tab, but they need to be removed or mapped to an objective marked as “Taught and Evaluated.”

Educational Goals and Objectives Taught and Evaluated for this Learning Experience
Select which objectives will be taught and evaluated (TE) for the learning experience. These objectives, along with the corresponding goals, will appear on summative evaluations for the learning experience. Additionally, a learning activity is required for each objective selected as TE.

Select Curricular Set: PGY1 Pharmacy (2014)

PGY1 Pharmacy (2014)

R1 Patient Care
R1.1 In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, including those with multiple comorbidities, high-risk medication regimens, and multiple medications following a consistent patient care process

TE	Blooms	Objective
<input checked="" type="checkbox"/>	R1.1.1 Cognitive - Applying	Interact effectively with health care teams to manage patients' medication therapy
<input checked="" type="checkbox"/>	R1.1.2 Cognitive - Applying	Interact effectively with patients, family members, and caregivers
<input checked="" type="checkbox"/>	R1.1.3 Cognitive - Analyzing	Collect information on which to base safe and effective medication therapy
<input type="checkbox"/>	R1.1.4 Cognitive - Analyzing	Analyze and assess information on which to base safe and effective medication therapy

PGY2 Appendices in PharmAcademic

Included in RPD Communication

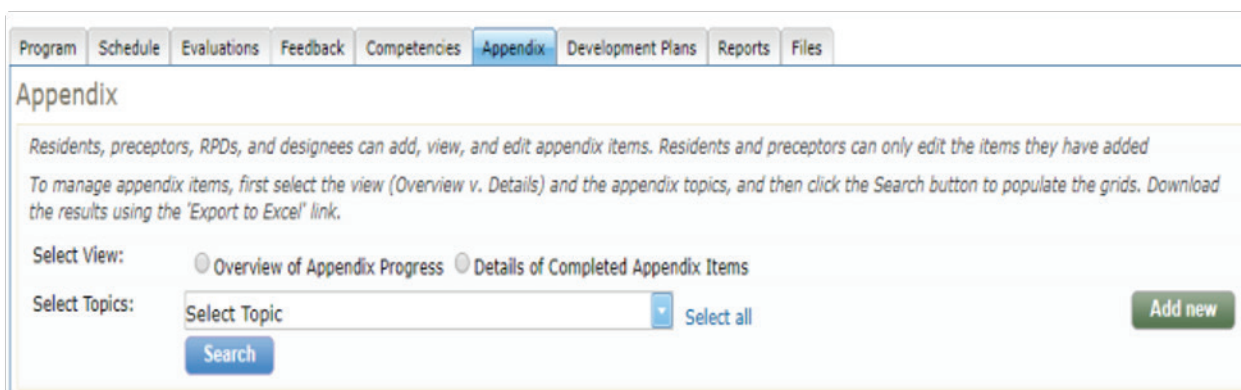
Please see the PharmAcademic help document, “Tracking PGY2 Appendix Progress.”

PGY2 Residents, Preceptors, RPDs, and Designee(s) can track the resident’s progress on the Appendix of Disease States/Content Areas for their program. Programs were instructed that using PharmAcademic to track appendix requirements is not required at this time.

Highlights:

- Will be available for PGY2 residents beginning in the 2020 residency year.
- Residents and Preceptors have a shortcut to the Appendix tab on the new My Progress tab located on the PharmAcademic Home page. There are also links to other items, such as the development plan.

- Appendix items can be added by the Resident, RPD, Designee(s), and Preceptors on the resident’s schedule on the new Appendix tab located on the “Resident Viewer.”
- There are two grids or “views” available to view and manage appendix items: “Overview of Appendix Progress” and “Details of completed Appendix Items.”



Team-Based Summative Evaluations – Goes in effect when the 2020 residency year begins

Included in RPD Communication (with training video)

Please see the PharmAcademic help document, “Completing and Co-Signing Evaluations.” (There is a link to a training video in the help document as well.)

Effective for the 2020-2021 residency year: all programs will use “Team-based summative evaluations” if they have learning experiences on resident schedules with multiple preceptors selected.

For team-based summative evaluations, each preceptor will receive a summative evaluation to complete. Each preceptor will receive an email notification 2-weeks prior to the due date and a task on their PharmAcademic Global Task List.

The team of preceptors (other than the primary preceptor) will have the opportunity to complete a summative that looks and functions similarly to a single-preceptor summative evaluation. Supporting preceptors will not be able to mark ACHR, but their ratings and comments will be available for the primary preceptor to view, consider, and select once the supporting preceptor’s evaluation is submitted.

The primary preceptor will be able to view the status of the team’s evaluations, selected ratings, and comments from submitted team evaluations.

The primary preceptor will select final ratings, mark ACHR (when allowed), add comments, and/or select comments from the team to include in the final summative evaluation.

The only evaluation that is REQUIRED to be submitted is the final team summative evaluation completed by the primary preceptor. Only the final evaluation will be viewable by the resident. If sent back for edit, the final evaluation will be returned to the primary preceptor for revisions.

Changes to Residency Close-Out Documents

During the close-out process, RPDs are **required** to upload the residency certificate.

Resident Close-Out

Residency Certificate

Required: Upload the resident's residency certificate. The certificate will be available on the resident's Files tab and in their portfolio.

Document Type: Residency Certificate

File*: No file chosen

New Planning Report

We added a new report, similar to the “Goals and Objectives Taught and Evaluated in Learning Experiences” report, except that it is blank so RPDs can use it to plan their program.

Residency Reports

- Goals and Objectives for Program Planning
- Goals and Objectives Taught and Evaluated in Learning Experiences
- Active Residents Master Schedule
- OverDue Evaluations

Text Changes per ASHP Request

Added PHI warnings in all places residents might upload or save information in the Portfolio and Resident Files tab.

Program Schedule Evaluations Feedback Competencies Development Plans Reports **Files**

Resident Files

Documents added to this tab will also be available in the resident's portfolio.

Files for this Resident | Add File

Please do not add any Protected Health Information (PHI) in PharmAcademic.

Date	File	Comments	Size	Uploaded By	
11/25/2019	Diploma.docx		0.38 MB	Chris Jackson	Delete
11/25/2019	Residency Agreement.pdf		0.04 MB	Chris Jackson	Delete

Added text to Manage Program > Details page advising programs to use ASHP standard preceptor and learning experience evaluations.

ASHP recommends programs use the standard ASHP Preceptor and Learning Experience evaluations.

Select Preceptor Evaluation to Use:

Select Learning Experience Evaluation to Use:

PharmAcademic Tips:

Do you have a resident to enroll in PharmAcademic that didn't go through Match process and have forgotten the steps? Check out the HELP tab in PharmAcademic, then scroll to:

Management of Residents

- Enrolling a Resident
- Creating and Updating a Resident Schedule
- Adding Resident Files
- Closing Out a Resident
- Tracking Graduate Information

Go to page 4 of the “Enrolling a Resident” document.

The Help Documentation tab is so useful. The HELP tab is located in the upper left corner of the home page. Consider printing the Help Documentation list to aid you throughout the residency year when you encounter questions.

ASHP Residency Showcase™ Information for Programs

Due to uncertainty in the marketplace, the 2020 Residency Showcase online application will open later than it has in past years. We hope that will provide programs enough time to develop a clearer plan for Midyear before they request booth space. The 2020 application site will open July 15 and will remain available through August 7. All applications submitted while the application system is open will receive equal consideration.

Important dates:

- July 15, 2020 – The 2020 Residency Showcase application system will open.
- August 7, 2020 – The 2020 Residency Showcase application system will close.
- August 24, 2020 – Booth space assignments and access to promote program listings will be distributed.
- August 28, 2020 – Residency Showcase booth selection will open for any program who did not participate in the application process. Unassigned booths will be open for purchase. Programs without a reservation can select their location and size in the interactive floor plan.

For more information, please visit the [2020 Residency Showcase Information for Programs website](#) or contact us at showcase@ashp.org.



NEWS: Growth of Pharmacy Technician Training Programs

Pharmacy technicians play an increasingly important role in public safety with expanding and evolving responsibilities and expectations. In recognition of these changes, many state boards of pharmacy now require completion of an ASHP/ACPE accredited pharmacy technician education and training program to practice as a pharmacy technician in their state.

Health systems are increasingly interested in developing accredited pharmacy technician training and education programs to ensure the quality of newly hired technicians. These programs can also contribute to the enhancement of skill sets for currently employed technicians and help to improve retention. Matt Kelm, Pharm.D., M.H.A., Associate Chief Pharmacy Officer at Duke University Hospital in Durham, North Carolina and the home of the Duke University Health System Pharmacy Technology Training Program, quoted for a recent brochure promoting health-system sponsored programs explains the rationale. “Health system pharmacy departments have a lot of experience training pharmacy residents and students, so it’s a logical extension to include pharmacy technicians in that educational effort,” said Dr. Kelm. The Duke program was founded in April 2018.

Other health-systems that have embraced the development of internal, accredited programs include:

- Yale New Haven Hospital
- Lee Health
- Indiana University Health
- Mayo Clinic
- Cleveland Clinic School of Pharmacy Technology
- University of Wisconsin School of Medicine and Public Health
- Avera Health (candidate status)
- NYU Langone Health Department of Pharmacy
- Sanford Medical Center Fargo (candidate status)
- Oregon Health and Science University (candidate status)
- Beaumont Health (candidate status)
- Baptist Hospital of Miami (candidate status)
- Gunderson Health System (candidate status)
- Baptist Health, Alabama (candidate status)

If you have any questions about starting a program at your hospital or health-system, please contact Lisa Lifshin at llifshin@ashp.org. Many HSPAL pharmacy residents have been involved in setting up the foundations of ASHP/ACPE accredited pharmacy technician education and training programs during their training programs.

News: ASHP Membership Forums

2020 Regional Residency Conference Reflections

The Regional Residency Conference season looked and felt quite different in 2020. ASHP applauds you for the work done in adapting in-person event plans and leveraging your creativity to support residents in sharing their year-long projects. We missed seeing many of you at the in-person conferences via representation by our New Practitioners Forum Advisory Group members and keynote presentations by our ASHP Board of Directors members. If you are interested in having ASHP participate in your 2021 conference either via New Practitioners Forum volunteer outreach or a keynote presentation, please contact Christina Martin, ASHP Director, New Practitioners Forum, at cmartin@ashp.org. In the meantime, check out this recent publication from Julie Dagam & colleagues on “[Partnering with a state pharmacy society to develop and implement a statewide residency conference](#)”.

Experience the ASHP Resident Visit Program

Mark your calendar for your 2020-2021 residents to participate in the [ASHP Resident Visit Program](#). All RPDs will receive an email in mid-July with additional information, including event dates and agenda. This is a great opportunity for residents to learn about ASHP initiatives, identify areas to contribute to the profession, and to network with ASHP staff and resident peers.

ASHP Creates New Section of Pharmacy Educators

ASHP is pleased to announce the creation of a new membership section that will further strengthen and significantly enhance ASHP's efforts to lead in the preparation of the pharmacy workforce. The new ASHP Section of Pharmacy Educators will provide a unique and distinct membership home and leadership voice within ASHP for pharmacy school faculty, deans, and preceptors who are involved in the training of pharmacists. ASHP members interested in serving on the section's leadership should [submit an application](#) by July 24, 2020. For more information, visit [ASHP's website](#).

NEWS: Accreditation Services Office

Congratulations

Accreditation Services Office (ASO) would like to recognize Dr. William (Bill) Miller who was voted to receive the Harvey A.K. Whitney Lecture Award for 2020. Bill served on the ASHP Commission on Credentialing for a six-year period and was chair for two years. In addition, he has served as both a guest and lead accreditation surveyor for ASHP for 32 years. The annual Harvey A.K. Whitney Lecture Award recognizes individuals who have made outstanding contributions to health-system pharmacy. The award is considered to be health-system pharmacy's highest honor. Due to the pandemic, Dr. Miller will receive the award and deliver his lecture at the 2021 Summer Meeting.

Surveyor Tips: In The Know

Preceptor Development Resources on the ASHP Website

Accreditation Services now has available for your use examples of policies and procedures created by ASHP lead surveyors that meet the intent of Standards 1 and 2. Feel free to “steal shamelessly” from these examples and use as needed in support of your program(s). By providing these examples, the lead surveyors believe more time during survey can be committed to Standards 3 and 4 which are the crux of residency training.

The following documents are available from the [Program Resources](#) Example Documents Section on our website:

- Preceptor Development Plan – *Example*
- Learning Activity – *Example*
- Rating Scale Definition – *Example*
- Certificate Requirements – *Example*
- PGY1 Completion Requirement Checklist – *Example*
- PGY1 Completion Requirements – Manual Excerpt – *Example*
- PGY2 Completion Requirements Checklist – *Example*
- Pharmacist Licensure Policy for Residents – *Example*
- Duty Hour Moonlighting Example Policy – *Example*
- Duty Hour Moonlighting Alternate Example Policy – *Example*

Programs are also encouraged to check our website for the following useful [Interview Recruitment Tools and Resources](#):

- Incorporating multiple mini-interviews – *AJHP article*
- Streamlining the residency interview process using Web-based teleconferencing – *AJHP article*
- PGY1 Residency Applicant Screening and Ranking Process – *Example*
- PGY2 Residency Applicant Screening and Ranking Process – *Example*
- PGY2 Residency Applicant Screening and Ranking Process with Early Commitment Outlined – *Example*
- Resident Candidate Rank Process – *Example*
- Resident Pre-Interview Screening Tool – *Example*
- Resident Post-Interview Screening Tool – *Example*
- Resident Contract Letter – *Example*
- Resident Contract Letter Alternate Version – *Example*

We hope you find these resources helpful in the administration of your programs. While these examples meet the intent of the accreditation standard, programs are encouraged to customize the documents accordingly to meet the needs of your program and to align with your organization’s internal policies and procedures where appropriate.

Virtual Surveys during the Pandemic

Q: My program is scheduled for an onsite survey. Will my survey be conducted during the pandemic?

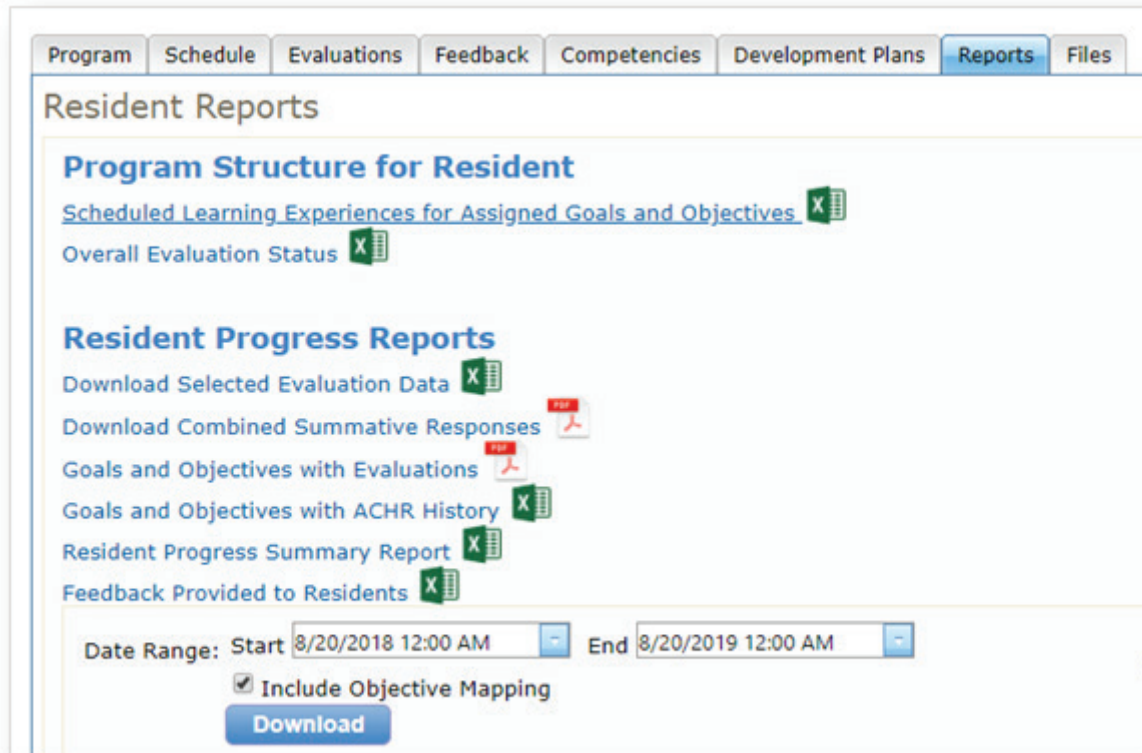
A: **Accreditation Services is conducting scheduled accreditation surveys virtually through Labor Day, September 7, 2020.** Virtual surveys may be required through the remainder of the calendar year and beyond until travel restrictions are lifted; organizations resume unrestricted access to facilities; and staff safety can be ensured. Assigned lead surveyors will be in contact with programs scheduled for a survey to provide additional information and a framework for the survey process. Programs are encouraged to contact their lead surveyors directly with any questions regarding the survey process.

Dashboards in PharmAcademic

RPDs often ask how surveyors will use the Dashboards in PharmAcademic. Becoming familiar with the tabs on the Dashboard in PharmAcademic will help you understand what surveyors look for and provide RPDs with useful information for the ongoing management of their residency program.

- Program tab – includes ALERTS from PharmAcademic and the GRID which includes your on-site survey schedule and your annual residency accreditation report. Note: ASHP does not require a certain number of formative feedback entries per resident even though the national average is provided in this section. The number of residents that were enrolled in PharmAcademic more than a month after the program start date will appear as an alert.
- Learning Experience tab – also includes ALERTS from PharmAcademic to keep the RPD updated and your program structure broken down by year, learning experience, preceptor, and evaluation demographics. A flag will appear if there are objectives selected in a learning experience that have no activities, or if the general description, or expectations for learners are missing.
- Preceptor tab – provides preceptor summary data compared to the national average although the most useful function may be the Preceptor Grid which the RPD can use to see summative evaluations submitted on time; documented verbal feedback, and details of precepting by the residents. This can be helpful for evaluating your preceptors as required by the Standard. It is broken down by year and by preceptor.
- Resident tab – will ALERT the RPD if there are missing development plans and objectives not TE. Reports included per resident are G&O Coverage and Evaluation data including details about each objective (ACHR, average score, and most recent score). This helps the RPD demonstrate the resident's progression throughout the year and if changes need to be made to the development plan. Filter resident data by selecting Academic Year(s) and Resident(s) from the drop-down list.

- Evaluation Tools tab – Contains a grid of each evaluation type. This shows if evaluations required by the program are submitted on time and if any have been sent back for edit. For each evaluation type, surveyors or RPDs can see at a glance the # of evaluations delivered, submitted, submitted within 7 days of the due date, submitted within 8-14 days of the due date, submitted > 15 days past the due date, not submitted, or sent back for edit. Of note, evaluations sent back for edit do not count as late if the evaluations were initially submitted on time.



For more information on the Dashboards, refer to the document *"Using Dashboards to Review Program Information"* which can be found in the Help Documentation section in PharmAcademic. If you have further questions about the Dashboards feature, please ask your residency surveyor or PharmAcademic at support@mccreadiegroup.com.

NEWS: ASHP Foundation

The ASHP Foundation awards \$25,000 grants to assist institutions with offering a new or expanded residency position. The overarching goal of this program is to expand the number of ASHP-accredited PGY1 and PGY2 pharmacy residency positions. Grants are supported by Abbvie and Merck. The online application for the next round of grants will be available on September 1, 2020.

[Read more](#)

Congratulations to the following recipients of the 2020-2021 Pharmacy Residency Expansion Grants, announced February 2020:

- **Parkview Health**

PGY1 Pharmacy Residency

Fort Wayne, Indiana

Residency Program Director: Tara K. Jellison, Pharm.D., M.B.A.

Director of Pharmacy: Ed Strubel, Pharm.D.

- **Baptist Health Floyd**

PGY1 Pharmacy Residency

New Albany, Indiana

Residency Program Director: Abbey Breit, Pharm.D., BCPS

Director of Pharmacy: Michael McLain, Pharm.D., M.B.A.

- **University of Illinois at Chicago College of Pharmacy at Rockford**

PGY1 Pharmacy Residency

Rockford, Illinois

Residency Program Director: Kevin Rynn, Pharm.D.

Director of Pharmacy: Christopher Schriever, Pharm.D., M.S.

- **Geisinger Medical Center**

PGY2 Critical Care Residency Program

Danville, Pennsylvania

Residency Program Director: Sarah F. Hale, Pharm.D., BCPPS

Director of Pharmacy: Angela Slampak-Cindric, Pharm.D., BCPS, BCCCP

- **University of Maryland Medical Center**

PGY2 Solid Organ Transplant Pharmacy Residency

Baltimore, Maryland

Residency Program Director: Tracy M. Sparkes, Pharm.D., BCPS

Director of Pharmacy: Joseph DiCubellis, R.Ph., MPH

Available from ASHP

AHFS® Clinical Drug Information (CDI) FREE for ASHP resident members!

AHFS CDI is your mobile comprehensive, interactive treatment and drug therapy solution (a \$96 cost to nonmembers). You can easily switch between concise, direct point-of-care, actionable drug information with AHFS DI Essentials, or the full database contents of AHFS Drug Information. Resident members can access their personalized free redemption code by logging into their ASHP account and then using the redemption code at ahfscdi.com to get fast access to comprehensive, evidence-based drug information.



Teaching Certificate for Pharmacists

Earn an ASHP Professional Certificate in Teaching with our online home-study program. Our certificates provide high-quality, manageable and practical professional development opportunities for pharmacy personnel. Learning modules are presented in manageable segments and participants claim CE as each module is completed. Developed in partnership with the University of Kentucky, the Teaching Certificate for Pharmacists includes three distinct tracks that offer a well-rounded learning experience: the Core Track covers the fundamentals of teaching practice, the Academic Teaching Track concentrates on traditional didactic instruction, and the Experiential Teaching Track focuses on teaching in practice environments. [Learn more](#)



ASHP provides free board review material for residents and new practitioners with the Review and Recertification Reward Program

Save \$1500 on preparation costs associated with board exam preparation. The Review and Recertification Reward Program (RRRP) eases the financial burden on residents and new practitioners preparing for board certification during this unique time in their pharmacy careers.

ASHP provides free study resources including the Online Review course, Practice exam, Core Therapeutic Modules, and other preparatory material. In return, you complete your recertification cycle with ASHP for only \$10 per month. That price is guaranteed for the entire 7-year recertification cycle and includes more than the required hours for each specialty. The RRRP is a



member-only benefit and available for the Ambulatory Care Pharmacy, Critical Care Pharmacy, Geriatric Pharmacy, Pediatric Pharmacy, and Pharmacotherapy specialties. Ambulatory Care and Geriatric Pharmacy activities are offered jointly with the American College of Clinical Pharmacy (ACCP). [Learn more](#)

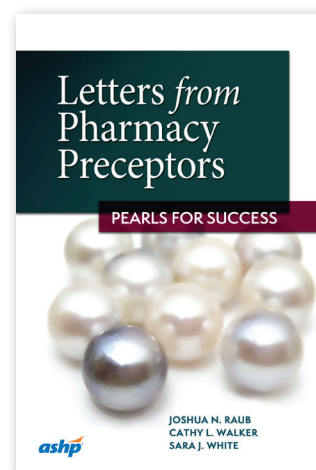
The Essential Guide to Pharmacy Residency Research

COMING SOON! The Essential Guide to Pharmacy Residency Research provides a “how to” for pharmacy residents, students, and practitioners on how to design, start, and complete a research project. Each step in the research process is explained using a practical approach, with helpful tips and key takeaways to consider as you progress through each phase of your project. The topics covered in this book include developing a research question, selecting a study design, submitting an Institutional Review Board protocol, designing data collection tools, identifying appropriate statistical tests, and interpreting biostatistics.



Letters from Pharmacy Preceptors: Pearls for Success

The latest in ASHP’s Letters series, Letters from Pharmacy Preceptors: Pearls for Success is comprised of 22 personal letters from award-winning pharmacy preceptors from a wide variety of practice settings and organizations. Each letter is filled with practical advice, insights, and compelling stories to inspire generations of future pharmacy leaders. Led by Co-Editors Joshua Raub, Sara J. White, and Cathy Walker, this compilation draws on the vast experience, knowledge, and expertise from past recipients of the ASHP Foundation’s Pharmacy Residency Excellence Award who have been recognized in their program achievements and leadership in the training of pharmacy residents. [Order your copy today!](#)



The Preceptors Handbook for Pharmacists, 4th edition

ASHP’s significantly updated 4th edition continues to be the go-to, authoritative resource for both new and experienced pharmacy preceptors. It expands the content to include current challenges and issues impacting preceptors due to fundamental changes in modern practice and provides guidance to help preceptors create a lifelong impact on young pharmacists. [Order your copy today!](#)

