ACCP Position Statement

Postgraduate Year One Pharmacy Practice Residency Equivalency

American College of Clinical Pharmacy

Key Words: residency, equivalency, pharmacy practice, postgraduate year one, PGY1.

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The American College of Clinical Pharmacy (ACCP) supports the development and implementation of a systematic process by which pharmacists can voluntarily evaluate, document, and demonstrate the equivalency of their practice experience, skills, and knowledge to the expected outcomes of an accredited postgraduate year one (PGY1) pharmacy practice residency program. The process would be established to further the achievement of ACCP's vision that, by 2020, pharmacists providing direct patient care will have the knowledge and skills developed through the completion of an accredited pharmacy residency program.

It is ACCP's belief that a significant number of pharmacists with clinical experience, skills, and expertise comparable to those achieved by the completion of an accredited pharmacy residency program are in practice. These pharmacists are unlikely to pursue formal residency training several years after earning their professional degree.

The process should be designed so that it does not provide an alternative pathway for, nor discourage the pursuit of, accredited pharmacy residency training devised for new or very recent graduates of pharmacy degree programs. The process should be available for a reasonable but finite period that aligns with the expected growth of accredited residency programs and positions that will meet the needs of new graduates of pharmacy degree programs who enter direct patient care practice.

Background

One of the official positions of the ACCP is that, by 2020, pharmacy residency training should be a prerequisite for pharmacists engaged in direct patient care. This position, together with the rationale underpinning it, is presented in the report of the 2004 ACCP Task Force on Residencies.¹ Before that report was released, as well as since its distribution, ACCP, in collaboration with other national pharmacy organizations, has actively pursued policy and legislative efforts, educational programming, and other organizational activities to foster the continued growth and development of new accredited residency training programs. In addition, the College has advocated an increase in the number of positions within existing programs, in an effort to expand residency training capacity in the United States.

However, expanding the residency-training infrastructure of the profession remains a challenge, particularly in light of the substantial growth in the number of pharmacy schools and the almost 50% increase in the number of professional degree program graduates during the past decade. It is also intuitively evident that, from years of practice, a substantial number of practitioners have developed the abilities that meet or exceed those obtained through the completion of an accredited PGY1 residency program. Indeed, one of the purposes of residency training is to provide, in a focused program, the educational and training experiences that will equip residency graduates with the skills of more experienced, clinically mature practitioners. Moreover, such experienced practitioners should be afforded a corresponding opportunity and process to demonstrate their capabilities to

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current and future employers, health professional colleagues, and patients.

Consequently, a Task Force on Residency Equivalency was established by ACCP to examine the prospect of a "residency equivalency" process. This Task Force was charged to "define the professional experience that should serve as a PGY1 residency equivalency," including the identification of a range of quantitative and qualitative experiences that practitioners could document through a residency equivalency "portfolio." The Task Force's report provides a structured discussion of the issues and challenges inherent in such a process, examines the current outcomes of PGY1 residency programs, and proposes a conceptual framework for developing an equivalency process.²

It is ACCP's belief that the development of such a process for demonstrating experience equivalent to that obtained through formal PGY1 pharmacy residency training will be valued by pharmacists and the health care system in the finite period between its implementation and the achievement of a pharmacy residency program capacity sufficient to meet the needs of the clear majority of pharmacists who will be practicing as direct patient care providers, as envisioned by ACCP and other member organizations of the Joint Commission of Pharmacy Practitioners. The College seeks to work with all interested stakeholders to fashion a process that is efficient, equitable, and desirable for practitioners across the full spectrum of pharmacy practice.

References

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