



**Accreditation Council for Pharmacy Education**

**Accreditation Standards for Continuing Pharmacy Education**

**Adoption: June 20, 2007**

**Released: October 5, 2007**

**Effective: January 1, 2009**

**Version 2: Released March 2014**

**Version 3: Released July 2017**

**Version 4: Released January 2022**

**Version 5: Released February 2023**

**Version 6: Released June 2024**

**Accreditation Council for Pharmacy Education**

**Chicago, Illinois**

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## **Accreditation Council for Pharmacy Education (ACPE) Overview**

The Accreditation Council for Pharmacy Education (ACPE) is the national agency for the accreditation of professional degree programs in pharmacy and providers of continuing pharmacy education. ACPE (until 2003 known as the American Council on Pharmaceutical Education) was established in 1932 for the accreditation of professional degree programs in pharmacy, and in 1975 its scope was broadened to include accreditation of providers of continuing pharmacy education ([www.acpe-accredit.org](http://www.acpe-accredit.org)). ACPE expanded its activities to include evaluation and certification of professional degree programs internationally in 2011 and entered into a collaboration with the American Society of Health-System Pharmacists (ASHP) to accredit pharmacy technician education and training programs beginning in 2014. The mission of ACPE is to assure and advance quality in pharmacy education. ACPE is an autonomous and independent agency whose Board of Directors is appointed by the American Association of Colleges of Pharmacy (AACP), the American Pharmacists Association (APhA), the National Association of Boards of Pharmacy (NABP) (three appointments each), and the American Council on Education (ACE) (one appointment).

State boards of pharmacy require that licensure applicants from the United States be graduates of an accredited pharmacy degree program to be eligible to sit for the North American Pharmacist Licensure Examination™ (NAPLEX®). In addition, all state boards of pharmacy require pharmacists to participate in accredited or otherwise approved continuing education activities for relicensure. A growing number of state boards of pharmacy require pharmacy technicians to participate in continuing education for re-registration or relicensure. These Standards were created in order to meet those requirements.

## **Standards for Continuing Pharmacy Education**

### **Section I: Organization of Continuing Pharmacy Education (CPE) Program**

*The purpose of the standards in this section is to ensure that the provider's continuing pharmacy education program has a clearly articulated mission, desired goals and a planning process to achieve the mission and goals. The mission, goals, and activities must be related to the vision and educational needs of the profession of pharmacy to better serve society.*

#### **Standard 1: Achievement of Mission and Goals of the CPE Program**

## **Standard 1: Achievement of Mission and Goals of the CPE Program**

**The provider must develop a mission statement specifically for the CPE program that defines the basis and intended outcomes for the majority of educational activities the provider offers.**

**Providers must create measurable goals, collect and analyze aggregate data to demonstrate achievement of goals, and provide evidence of continuous development and improvement of the CPE program.**

### Guidance:

#### Part I: CPE Program Mission

Providers must develop a mission specifically for the CPE program. The CPE mission statement should include the target audience, the scope of activities, and intended outcomes of CPE activities.

#### Part II: CPE Program Goals

Providers are required to develop goals specific to their CPE program. CPE goals should be concise and measurable statements which are aligned with the CPE mission, indicating how the CPE mission will be achieved. The mission and goals should be periodically evaluated and updated to assure consistency between the CPE mission, goals, and activities.

#### Part III: Achievement of Mission and Goals

The provider should submit objective evidence (i.e. aggregate data) documenting evaluation of CPE program mission and goal achievement. A narrative describing the rationale for the time period and activity data included in the analysis should be provided. The provider should describe how the assessment has already or will be used for continuous quality improvement of the CPE program.

## **Standards for Continuing Pharmacy Education**

### **Section 2: Content of Continuing Pharmacy Education (CPE) Activities**

*As recommended by the Health and Medicine Division (HMD) a division of the National Academies of Sciences, Engineering, and Medicine (the National Academies), formerly named the Institute of Medicine, for all health care professionals, pharmacists and pharmacy technicians must be educated to deliver patient-centered care as members of an interprofessional team, emphasizing evidence-based practice, quality improvement approaches, and informatics.*

#### **Standard 2: Gap Analysis**

#### **Standard 3: Continuing Pharmacy Education Activities**

#### **Standard 4: CPE Activity Objectives**

#### **Standard 5: Standards for Integrity and Independence**

## **Standard 2: Gap Analysis**

**The provider must develop CPE activities based on a knowledge, skill, or practice gap. The provider should identify gaps between what pharmacists and pharmacy technicians currently know or do and what is needed and desired in practice.**

### Guidance:

An identified knowledge, skill, and/or practice gap should guide content development and delivery of CPE activities. These may include legislation change, evaluation from a regulatory or accrediting body (i.e. Joint Commission), release of new or updated evidence-based treatment guidelines, self-report from practitioners, etc. Providers should employ a consistent process (and/or may use the template located on ACPE's website) identify the root of the identified gap (i.e. the specific knowledge, skill, attitude, experience) which should inform the activity type, learning objectives, active learning exercises, and outcomes.

## **Standard 3: Continuing Pharmacy Education Activities**

**The provider must structure each CPE activity to meet the knowledge-, application- and/or practice-based educational needs of pharmacists and technicians.**

### Guidance:

***Knowledge-based CPE activity:*** These CPE activities should be designed primarily for pharmacists and technicians to acquire factual knowledge. This information must be based on evidence as accepted in the literature by the health care professions. The minimum credit for these activities is 15 minutes or 0.25 contact hour.

***Application-based CPE activity.*** These CPE activities should be designed primarily for pharmacists and technicians to apply the information learned in the time frame allotted. The information must be based on evidence as accepted in the literature by the health care professions. The minimum credit for these activities is 30 minutes.

***Certificate programs (previously named Practice-based CPE activity)*** These CPE activities should be designed primarily for pharmacists and technicians to systematically acquire specific knowledge, skills, attitudes, and performance behaviors that expand or enhance practice competencies. The information within the certificate program must be based on evidence as accepted in the literature by the health care professions. The formats of these CPE activities should include a didactic component and a practice component. The minimum credit for these activities is 8 contact hours.

Providers are not required to offer all three activity types. The CPE activities should be consistent with the provider's mission and appropriate to meet the identified pharmacist and technician needs.

Providers are encouraged to *guide* pharmacists and technicians to the best combination of CPE activities to meet their practice needs.

#### **Standard 4: CPE Activity Objectives**

The provider must develop objectives for each CPE activity that define what the pharmacists and technicians should be able to do at the completion of each CPE activity.

Guidance:

Objectives must be:

- specific and measurable
- developed to specifically address the identified educational need (Standard 2)
- addressed by an active learning activity (Standard 7) and
- covered by a learning assessment (Standard 9)

#### **Standard 5: Standards for Integrity and Independence**

The provider must ensure CE activities provide healthcare professionals, as individuals and teams, with a protected space to learn, teach, and engage in scientific discourse free from influence from organizations that may have an incentive to insert commercial bias into education. The Standards for Integrity and Independence are designed to:

- Ensure that accredited continuing education serves the needs of patients and the public.
- Present learners with only accurate, balanced, scientifically justified recommendations.
- Assure healthcare professionals and teams that they can trust accredited continuing education to help them deliver safe, effective, cost-effective, compassionate care that is based on best practice and evidence.
- Create a clear, unbridgeable separation between accredited continuing education and marketing and sales

Guidance:

The provider must:

- ensure content is valid, and
- prevent commercial bias and marketing in accredited continuing education, and
- identify, mitigate, and disclose relevant financial relationships, and
- manage commercial support appropriately, and
- manage ancillary activities offered in conjunction with accredited continuing education

**Standards for Integrity and Independence, adopted from the Accreditation Council for Continuing Medical Education, 2020**

### **Section 3: Delivery of CPE Activities**

*The purpose of the standards in this section is to ensure that the provider delivers CPE activities to promote pharmacists' and technicians' learning and application of learned principles to practice. The teaching and learning methodologies used should foster the continued development of critical thinking and problem-solving skills, be applicable to the diverse learning needs of the pharmacists and technicians, and encourage the continuing professional development of pharmacists and technicians.*

#### **Standard 6: Faculty**

#### **Standard 7: Teaching and Learning Methods**

#### **Standard 8: Educational Materials**

## **Standard 6: Faculty**

**The provider must communicate and collaborate with CPE activity faculty regarding the identified educational needs, intended audience, objectives, active participation, and learning assessments for each CPE activity.**

### Guidance

- Faculty should be selected based upon their knowledge of the subject matter; experience and teaching ability; and ability to meet the educational needs of the pharmacists and technicians.
- If residents and/or students are selected as faculty for a CPE activity, the provider should ensure a preceptor mentors the resident and/or student during development of the activity. Guidance should address the expectations of adult learning principles as outlined in the ACPE Standards for Continuing Pharmacy Education including identification of an educational gap; development of measurable learning objectives; inclusion of independent, balanced, and evidenced-based content; use of active learning techniques; and incorporation of learning assessment methods.
- Information, verbal and written, should be provided to faculty to assure that CPE activities meet ACPE's *Standards for Continuing Pharmacy Education* for developing objectives, incorporating active learning opportunities, and appropriate assessments of learning.
- Faculty should be instructed to prepare pharmacists to provide patient-centered collaborative care as described in the *Pharmacists' Patient Care Process* model endorsed by the Joint Commission of Pharmacy Practitioners.
- Faculty should disclose to the provider all financial relationships with any ineligible company. In addition, the provider must have a process to identify and mitigate relevant financial relationships prior to faculty assuming their roles (Standard 5).

## **Standard 7: Teaching and Learning Methods**

**The provider must assure that all CPE activities include active participation and involvement of the pharmacist and technician.**

### Guidance:

The methodologies employed should be determined by the CPE activity planned (Standard 3), objectives, educational content, and the size and composition of the intended audience.

The provider should design and implement active learning exercises as a component of live and home study instructional methods.

## **Standard 8: Educational Materials**

**The provider must offer educational materials for each CPE activity that will enhance participants' understanding of the content and foster applications to pharmacy practice.**

### Guidance:

Educational materials should serve as a guide, provide additional sources of information, and include reference tools usable in practice.

## **Section 4: Assessment**

*The purpose of the standards in this section is to ensure that CPE activities employ appropriate learning assessments, and that feedback is provided to pharmacists and technicians in a timely manner, enabling them to apply the learned content to practice.*

### **Standard 9: Assessment of Learning**

### **Standard 10: Assessment Feedback**

## **Standard 9: Assessment of Learning**

**The provider in collaboration with faculty must include learning assessments in each CPE activity to allow pharmacists and technicians to assess their achievement of the learned content. Completion of a learning assessment is required for CPE credit.**

### Guidance:

The provider may select formal and informal techniques for assessment of learning. Informal techniques typically involve participant discussions. Formal techniques, such as tests and quizzes, are typically individualized, written, and graded. The assessment should be consistent with the identified CPE activity objectives (Standard 4) and activity type (Standard 3).

***Knowledge-based CPE activity:*** Each CPE activity in this category must include assessment questions structured to determine recall of facts.

***Application-based CPE activity:*** Each CPE activity in this category must include case studies structured to address application of the principles learned.

***Certificate programs:*** Each CPE activity in this category must include formative and summative assessments that demonstrate that the pharmacists and technicians achieved the stated objectives.

## **Standard 10: Assessment Feedback**

**The provider must ensure learner assessment feedback is provided to participants in an appropriate, timely, and constructive manner.**

### Guidance:

The feedback provided should be consistent with the learning assessment (Standard 9), activity objectives (Standard 4), and activity type (Standard 3). Verbal and written feedback may be provided as follows:

***Knowledge-based CPE activity:*** Feedback may include the correct response to questions. For incorrect responses, the provider is encouraged to communicate that the question was answered incorrectly and provide the rationale for the correct responses.

***Application-based CPE activity:*** Feedback may include the correct evaluation of case studies. When responses are incorrect, the provider is encouraged to explain the rationale for the correct responses.

***Certificate programs:*** Feedback should be provided based on the formative and summative assessments that were used to demonstrate that the pharmacist or technician achieved the stated objectives.

## **Section 5: Evaluation**

*The purpose of this section is to ensure that providers evaluate the effectiveness of CPE activities as part of the assessment of the CPE program. Providers must have an evaluation process that allows for determination of the degree to which CPE activities have met their intended outcome(s). They must use this information for continuous quality improvement of their CPE programs.*

### **Standard 11: Evaluation of CPE Activities**

## **Standard 11: Evaluation of CPE Activity**

**Providers must develop and conduct evaluations which allow pharmacists and technicians to provide feedback on CPE activities. Elements of the evaluation should be relevant to the intended outcome of the activity. Feedback should be summarized for pharmacists and technicians separately and used in a systematic fashion for the purpose of ongoing improvement of the overall CPE program.**

### Guidance:

Providers are encouraged to allow pharmacists and technicians to provide feedback in the following areas:

- applicability of the CPE activity to meet their educational needs
- achievement of each stated objective
- quality of faculty
- usefulness of educational material
- effectiveness of teaching and learning methods, including active learning
- appropriateness of learning assessment activities
- perceptions of bias or commercialism

Additional items may be incorporated to aid the provider in evaluating the effectiveness of its CPE activities and guide the development of future educational activities as well as assess achievement and impact of the provider's stated mission and goals (Standard 1).

## **Appendix I. Accreditation Council for Pharmacy Education Definition of Continuing Education for the Profession of Pharmacy**

### ***What is the definition of continuing education?***

Continuing education for the profession of pharmacy is a structured<sup>1</sup> educational activity designed or intended to support the continuing professional development of pharmacists and/or pharmacy technicians to maintain and enhance their competence. Continuing pharmacy education (CPE) should promote problem-solving and critical thinking and be applicable to the practice of pharmacy.

### ***What does ‘applicable to the practice of pharmacy’ mean?***

In general, for guidance in organizing and developing CPE activity content, providers should ensure that, as for all health care professionals, pharmacists and pharmacy technicians should develop and maintain proficiency in six core areas\*:

- delivering patient-centered care,
- working as part of interprofessional teams,
- practicing evidence-based medicine,
- focusing on quality improvement,
- using information technology, and
- developing and maintaining safe and effective medication use processes\*\*.

\*Adapted from Institute of Medicine’s Health Professions Education: A Bridge to Quality, April 2003.

The American Association of Colleges of Pharmacy (AACP) [Curricular Outcomes and Entrustable Professional Activities \(COEPA, pronounced COPA\) 2022](#) and the [PTCB CSPT Exam Content Outline](#) should be utilized by ACPE-accredited providers as guides in developing CE activity content appropriate for pharmacists and/or pharmacy technicians.

### ***How will CPE activities for pharmacists and pharmacy technicians be designated?***

Announcement materials (e.g., brochures, advertisements, e-mail blasts, or other announcements) should clearly and explicitly identify the target audience that will benefit from the content of the CPE activity. If a CPE activity includes pharmacists and pharmacy technicians in the same CPE activity specific and separate learning objectives should be described for each, pharmacists, and pharmacy technicians. Please note that CPE activities pertaining to, for example, law, may have one set of objectives for pharmacists and pharmacy technicians.

In addition, a Universal Activity Number is an identification number that is assigned to each CPE activity developed and provided, or jointly provided, by an ACPE-accredited provider. This number is developed by appending to the ACPE provider identification number (e.g. 0197), the joint provider designation number (0000 for no joint provider, 9999 for joint providers), the year of CE activity development (e.g., 23), the sequential number of the CPE activity from among the new CPE activities developed during that year (e.g., 001), and the topic and format designators (see below).

### **Joint Provider Designators:**

ACPE-accredited providers that collaborate on content development with ACPE and/or non ACPE-accredited providers are engaging in joint providership. ACPE expects all CPE activities to comply with the *Accreditation Standards for Continuing Pharmacy Education*. It is the accredited provider’s responsibility to demonstrate to ACPE compliance through written documentation.

- 0000 - no joint providership
- 9999 - joint providership with another organization

### **Format Designators:**

*Home Study Format:* Enduring content that does not have live interaction between the speaker and audience. These activities are valid for a maximum of three years, and any date between the 3-year release and expiration date is a valid date of participation to claim credit.

*Live Format:* Live interaction between the speaker and audience. While these activities are valid for a maximum of three years, specific live dates and locations must be submitted and the learner can only claim credit on those specific live dates.

*Home and Live Format:* The same activity content is being conducted, but in two different formats. The first format (Live) is conducting the content at a live session with real-time speaker/audience interaction, and the second format (Home study) is a recording of that same live session posted as enduring content. Two UANs (same sequence number) will be generated if this selection is made. Learners attending the Home study session will receive Home study credit with the H-UAN, and the learners attending the live session will receive live credit with the L-UAN.

*Both Format:* If the activity format of Home and Live is selected for a Certificate Program, a B (for "both") will populate in the final UAN, indicating this activity requires both the home study portion and live portion to be completed for the learner to claim credit. Each format has different content and a different credit amount can be applied to each format tab to make a cumulative credit amount for the entire Certificate Program. This is different than the Home and Live format for Application and Knowledge- based activities, where the Home and Live format is the same content, but created in two different formats and credit is designated on the General tab.

- L - Live activities
- H - Home study and other mediated activities
- B - Activities that contain both live and home study or mediated components (Certificate Programs)

### **Topic Designators – activities are related to:**

If a CPE activity's target audience is exclusively for *pharmacists*, the designation "P" will be used as follows:

- 01-P **Disease State Management/Drug therapy** - activities that address drugs, drug therapy, and/or disease states.
- 02-P **HIV/AIDS** - activities that address therapeutic, social, ethical, or psychological issues related to the understanding and treatment of patients with HIV/AIDS.
- 03-P **Law Related to Pharmacy Practice** - activities that address federal, state, or local laws and/or regulations affecting the practice of pharmacy.
- 04-P **Pharmacy Administration** - activities that address topics relevant to the practice of pharmacy that include the economic, social, administrative and managerial aspects of pharmacy practice and health care.
- 05-P **Patient Safety** - activities that address topics relevant to the prevention of healthcare errors and the elimination or mitigation of patient injury caused by healthcare errors.
- 06-P **Immunizations** - activities related to the provision of immunizations, i.e., recommend immunization schedules, administration procedures, proper storage

and disposal, and record keeping. This also includes review for appropriateness or contraindication and identifying and reporting adverse drug events and providing necessary first aid.

- 07-P **Compounding** - activities related to sterile, nonsterile, and hazardous drug compounding for humans and animals. This includes best practices and USP quality assurance standards, environmental testing and control, record keeping, error detection and reporting, and continuous quality improvement processes.
- 08-P **Opioids/Pain Management/Substance Use Disorder** - activities that address any component regarding the treatment and management of pain, including the prescribing, distribution and use of opioid medications, and/or the risks, symptoms, and treatment of opioid misuse/addiction.
- 99-P **Additional Topic Areas** - activities related to topics relevant to the practice of pharmacy not included in the classifications of the topic designators 01-08.

If a CPE activity's target audience is exclusively for *pharmacy technicians*, the designation "T" will be used as follows:

- 01-T Disease State Management/Drug therapy
- 02-T HIV/AIDS
- 03-T Law Related to Pharmacy Practice
- 04-T Pharmacy Administration
- 05-T Patient Safety
- 06-T Immunizations
- 07-T Compounding
- 08-T Opioids/Pain Management/Substance Use Disorder
- 99-T Additional Topic Areas

*Note:* If the CPE activity is intended for both pharmacists and pharmacy technicians, that activity will have the same Universal Activity Number with respect to the provider identification number, joint provider designation, year of release, sequence number and format; however, the topic designator in the number will be specific to each audience, either a "P" or "T." For example:

0197-0000-23-001-L05-**P** (activity number to be used for pharmacists)

0197-0000-23-001-L05-**T** (activity number to be used for pharmacy technicians)

### ***Have questions?***

If you have any questions as to what constitutes continuing education for the profession of pharmacy, please contact the ACPE staff at [ceinfo@acpe-accredit.org](mailto:ceinfo@acpe-accredit.org) or phone 312-664-3575.



## GLOSSARY

### **Accreditation**

A voluntary process in which an institution, organization or agency submits to an in-depth analysis to determine its capacity to provide quality continuing pharmacy education in accord with standards, policies and procedures.

### **Active learning**

A process whereby pharmacists and/or pharmacy technicians are actively engaged in the learning process, rather than "passively" absorbing lectures. Active learning involves reading, writing, discussion, and engagement in solving problems, analysis, synthesis, and evaluation. Faculty usually takes a more guiding role.

### **Activity**

An educational event which is based upon identified needs, has a purpose or objectives, and is evaluated to assure the needs are met. An activity is designed to support the continuing professional development of pharmacists and/or pharmacy technicians to maintain and enhance their competence. Each CPE activity should promote problem-solving and critical thinking while being applicable to the practice of pharmacy as defined by the current *Definition of Continuing Pharmacy Education* (Appendix I). The CPE activities should be designed according to the appropriate roles and responsibilities of the pharmacists and/or pharmacy technician.

### **Accredited Provider**

An institution, organization or agency that has been recognized by the Accreditation Council for Pharmacy Education, in accord with its policy and procedures, as having demonstrated compliance with the standards which are indicative of the Provider's capability to develop and deliver quality continuing pharmacy education.

### **Assessment**

The Latin root '*assidere*' means to sit beside. In an educational context it is the process of observing learning, such as describing, collecting, recording, scoring, and interpreting information about a pharmacist's and technician's learning. Assessments are used to determine achievement of objectives.

### **Case study or scenario**

A description of a situation that requires problem-solving and/or investigation by the learner, e.g. application of learned material to provide a solution to the problem.

### **Commercial Bias**

A personal judgment in favor of a specific proprietary business interest of a commercial interest.

### **Commercial Support**

Financial, or in-kind, contributions given by an ineligible company, which is used to pay all or part of the costs of a CPE activity.

**Conflict of Interest (with regard to *Standards for Integrity and Independence*)**

When an individual's interests are aligned with those of a commercial interest the interests of the individual are in 'conflict' with the interests of the public. ACPE considers financial relationships to create actual conflicts of interest in CPE when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content of CPE about the products or services of that commercial interest.

**Contact Hour**

A unit of measure of educational credit which is equivalent to 60 minutes of participation in an organized learning experience.

**Continuing Education Unit (CEU)**

An educational credit unit of measure where 0.1 CEU is equivalent to one contact hour.

**Continuing Pharmacy Education (CPE)**

Continuing education for the profession of pharmacy is a structured educational activity designed or intended to support the continuing development of pharmacists and/or pharmacy technicians to maintain and enhance their competence. Continuing pharmacy education (CPE) should promote problem-solving and critical thinking and be applicable to the practice of pharmacy.

**Continuing Professional Development (CPD)**

A self-directed, ongoing, systematic and outcomes-focused approach to lifelong learning that is applied into practice. It involves the process of active participation in formal and informal learning activities that assist in developing and maintaining competence, enhancing professional practice, and supporting achievement of career goals.

**Curricular-based**

CPE activities that are designed to be building blocks of knowledge, skills and attitudes for a specific disease state, task, etc.

**Enduring Materials (Home Study)**

Enduring materials are home study activities that are printed, recorded or computer assisted instructional materials that do not provide for direct interaction between faculty and participants.

**Evidence-based Content**

The content of the provider's CPE activities is based on evidence as accepted in the literature by the healthcare professions.

**Evidence-based Medicine**

The conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients. (Centre for Evidence-Based Medicine)

**Faculty**

A person(s) who guides and delivers or writes the content of a CPE activity.

**Financial Relationships**

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g. stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected.

**Formative Evaluation**

An evaluation process in which outcomes data and analysis are used to modify (form or reform) an activity with an eye to improving it before the activity is completed or repeated.

**Goal**

A concise written statement of what the provider intends to achieve for pharmacy and/or pharmacy technician education at a certain point in the future. The CPE goal should address how a provider will assist pharmacists and/or pharmacy technicians to maintain and enhance their professional competencies to practice in various settings.

**Ineligible Company (previously ‘commercial interest’)**

An ‘ineligible company’ (commercial interest) is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Providers of clinical services directly to patients are not ‘ineligible companies.’

**Joint Providership**

An accredited provider works with another organization for the purpose of developing a continuing pharmacy education activity.

**Live Activities**

CPE activities that provide for direct interaction between faculty and participants and may include lectures, symposia, live teleconferences, workshops, etc.

**Mission**

A statement that is consistent with the program goals and specifically indicate the provider’s short-term intent in conducting CPE activities including the intended audience and scope of activities.

**Needs Assessment**

Identification of educational needs of the pharmacists and/or pharmacy technician that serve as the basis for planning CPE activities.

**Non-commercialism**

Continuing pharmacy education activities that provide an in-depth presentation with fair, full disclosure as well as objectivity and balanced. Appropriate topics and learning activities shall be distinguished from those topics and learning activities that are promotional or appear to be intended for the purpose of endorsing either a specific commercial drug or other commercial product (as contrasted with the generic product/drug entity and its contents or the general therapeutic area that it addresses), or a specific commercial service (as contrasted with the general service area and/or the aspects or problems of professional practice that it addresses).

**Objectives**

Statements that describe what the pharmacists and/or pharmacy technician can expect to know or be able to do after completion of the CPE activity. Objectives are preferably written in behavioral terminology and should suggest outcome measures for an activity’s success or effectiveness.

**Outcome**

The end result of a learning activity measured by evaluation or change in practice.

### **Pharmacists' Patient Care Process**

Developed by a work group from 11 national pharmacy organizations to promote a consistent approach to the process of care. This document was endorsed by the Joint Commission of Pharmacy Practitioners in 2014.

[http://www.pharmacist.com/sites/default/files/JCPP\\_Pharmacists\\_Patient\\_Care\\_Process.pdf](http://www.pharmacist.com/sites/default/files/JCPP_Pharmacists_Patient_Care_Process.pdf)

### **Pharmacy Technician**

An individual working in a pharmacy who, under the supervision of a licensed pharmacist, assists in pharmacy activities that do not require the professional judgment of a pharmacist.

(<http://www.acpe-accredit.org/pdf/whitePaper.pdf>)

### **Program**

The overall CPE activities of an accredited provider.

### **Regularly Scheduled Series (RSS)**

A series of multiple live continuing pharmacy education sessions that occur on an ongoing, scheduled basis (e.g. weekly, monthly, quarterly) for the same audience. Examples of CPE activities that are consistent with the definition of regularly scheduled series include grand rounds, tumor boards, morbidity and mortality (M&M) conferences, and journal club.

### **Relevant Financial Relationships**

ACPE focuses on financial relationships with an ineligible company in the 24 month period preceding the time that the individual is being asked to assume a role controlling content of the CPE activity. Financial relationships are relevant if the educational content an individual can control is related to the business lines or products of the ineligible company.

### **Self-Assessment or Self Study**

A comprehensive review and assessment process of the provider's CPE program to document accomplishments, assess areas for improvement and outline a plan for making those improvements.

### **Summative Evaluation**

An evaluation process in which outcomes data and analysis are used to show the degree to which goals are attained at the conclusion of an activity.

### **Target Audience**

Group of individuals for which an educational activity has been designed (e.g. pharmacists, technicians, or both).

### **Universal Activity Number (UAN)**

A Universal Activity Number is an identification number that is assigned to each CPE activity developed and provided, or joint provided, by an ACPE-accredited provider. This number is developed by appending to the ACPE provider identification number (e.g., 0197), the joint provider designation number (0000 for no joint provider, 9999 for all joint providers), the year of CPE activity development (e.g., 22), the sequential number of the CPE activity from among the new CPE activities developed during that year (e.g., 001), and the topic, target audience and format designators (see below).

#### **Joint Providership Designators:**

0000 - no joint provider organization

9999 - joint provider with another organization

**Format Designators:**

- L - Live activities
- H - Home study and other enduring activities
- B - Both for Certificate Programs

**Topic Designators – activities are related to:**

- 01 - Disease State Management/Drug therapy
- 02 - HIV/AIDS therapy
- 03 - Law (related to pharmacy practice)
- 04 - Pharmacy Administration
- 05 - Patient Safety
- 06 - Immunizations
- 07 - Compounding
- 08 - Opioids/Pain Management/Substance Use Disorder
- 99 - Additional Topic Areas

**Target audience designator**

- P - Pharmacist
- T - Pharmacy Technician

If a CPE activity's target audience is exclusively for *pharmacists*, the designation "P" will be used as follows:

- 01-P Disease State Management/Drug therapy – Activities that address drugs, drug therapy, and/or disease states.
- 02-P HIV/AIDS therapy – Activities that address therapeutic, legal, social, ethical, or psychological issues related to the understanding and treatment of patients with HIV/AIDS
- 03-P Law – Activities that address federal, state, or local laws and/or regulations affecting the practice of pharmacy.
- 04-P Pharmacy Administration - Activities that address topics relevant to the practice of pharmacy that include the economic, social, administrative and managerial aspects of pharmacy practice and health care.
- 05-P Patient Safety - Activities that address topics relevant to the prevention of healthcare errors and the elimination or mitigation of patient injury caused by healthcare errors.
- 06-P Immunizations - Activities related to the provision of immunizations, i.e., recommend immunization schedules, administration procedures, proper storage and disposal, and record keeping. This also includes review for appropriateness or contraindication and identifying and reporting adverse drug events and providing necessary first aid.
- 07-P Compounding - Activities related to sterile, nonsterile, and hazardous drug compounding for humans and animals. This includes best practices and USP quality assurance standards, environmental testing and control, record keeping, error detection and reporting, and continuous quality improvement processes.
- 08-P Opioids/Pain Management/Substance Use Disorder - Activities that address any component regarding the treatment and management of pain, including the prescribing, distribution and use of opioid medications, and/or the risks, symptoms, and treatment of opioid misuse/addiction.
- 99: Additional Topic Areas – activities related to topics relevant to the practice of pharmacy not included in the classifications of the topic designators 01-08.

If a CPE activity's target audience is exclusively for *pharmacy technicians*, the designation "T" will be used as follows:

- 01-P Disease State Management/Drug therapy – Activities that address drugs, drug therapy, and/or disease states.
- 02-P HIV/AIDS therapy – Activities that address therapeutic, legal, social, ethical, or psychological issues related to the understanding and treatment of patients with HIV/AIDS
- 03-P Law – Activities that address federal, state, or local laws and/or regulations affecting the practice of pharmacy.
- 04-P Pharmacy Administration - Activities that address topics relevant to the practice of pharmacy that include the economic, social, administrative and managerial aspects of pharmacy practice and health care.
- 05-P Patient Safety - Activities that address topics relevant to the prevention of healthcare errors and the elimination or mitigation of patient injury caused by healthcare errors.
- 06-P Immunizations - Activities related to the provision of immunizations, i.e., recommend immunization schedules, administration procedures, proper storage and disposal, and record keeping. This also includes review for appropriateness or contraindication and identifying and reporting adverse drug events and providing necessary first aid.
- 07-P Compounding - Activities related to sterile, nonsterile, and hazardous drug compounding for humans and animals. This includes best practices and USP quality assurance standards, environmental testing and control, record keeping, error detection and reporting, and continuous quality improvement processes.
- 08-P Opioids/Pain Management/Substance Use Disorder - Activities that address any component regarding the treatment and management of pain, including the prescribing, distribution and use of opioid medications, and/or the risks, symptoms, and treatment of opioid misuse/addiction.
- 99: Additional Topic Areas – activities related to topics relevant to the practice of pharmacy not included in the classifications of the topic designators 01-08.

*Note:* If the CPE activity is intended for both pharmacists and pharmacy technicians, that activity will have the same Universal Activity Number with respect to the provider identification number, joint provider designation, year of release, sequence number and format; however, the topic designator in the number will be specific to each audience, either a "P" or "T." For example:

0197-0000-22-001-L05-**P** (activity number to be used for pharmacists)

0197-0000-22-001-L05-**T** (activity number to be used for pharmacy technicians)