Report of the 2006-2007 Task Force on Standardizing Student Pharmacist Experiential Requirements

Members Present:
Gay Dodson (TX), Chair; David Todd Bess (TN); Patricia Donato (NY); Benjamin Fry (TX); Richard Jones (ID); Edward McGinley (NJ); Kevin Mitchell (OH); Elizabeth Russell (VA); James E. Turner (OH).

Ex Officio Members Present:
Brad Cannon, Director of Faculty Development, University of Illinois at Chicago, American Association of Colleges of Pharmacy (AACP); Avery Spunt, Assistant Dean and Professor, Midwestern University College of Pharmacy; Peter Vlasses, Executive Director, Accreditation Council for Pharmacy Education (ACPE).

Observers:
Arlene Flynn, Vice President for Professional Affairs, American Association of Colleges of Pharmacy (AACP); Michael Rouse, Assistant Executive Director, Accreditation Council for Pharmacy Education (ACPE).

Others Present:
Karen M. Ryle, Executive Committee Liaison; Carmen A. Catizone; Michael Hearn; Melissa Madigan; Charisse Johnson; Chris Siwik, Gertrude Levine, NABP staff.

Introduction:
The Task Force on Standardizing Student Pharmacist Experiential Requirements met on December 7, 2006 and December 8, 2006.

Review of the Task Force Charge:
Task Force members reviewed their charge and accepted it as follows:
1. Recommend standardized experiential requirements, taking into consideration Accreditation Council for Pharmacy Education’s (ACPE) Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree, Standard No. 14, Curricular Core–Pharmacy Practice Experience; and

2. Review and revise, where appropriate, the Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy to reflect the recommended standardized experiential requirements.

Overview of Presentations:
Dr Cannon provided both a historical perspective of apprenticeship and a contemporary view of experiential learning in the formal education of pharmacists. He also discussed the current challenges of academia in providing quality experiential learning experiences that optimally
reinforce learning gained in the didactic curriculum. Recognizing the release of the revised Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (ACPE Standards 2007), Dr Cannon addressed how these standards will potentially impact schools of pharmacy in terms of recruiting additional experiential learning sites and adequately assessing whether or not students have met the stated competencies. He concluded with various initiatives spearheaded by AACP and its membership in standardizing experiential calendars, evaluations, goals and objectives, and preceptor site requirements.

Dr Vlasses provided a detailed overview of ACPE Standards 2007, gave a summary of stakeholder feedback to the Standards, and discussed how the AACP Center for the Advancement of Pharmaceutical Education Outcomes, the North American Pharmacists Licensure Examination® blueprint, the Joint Commission of Pharmacy Practitioners’ Vision of Pharmacy Practice 2015, and reports of the Institute of Medicine influenced the revisions. Dr Vlasses provided insight on the Standards applicable to experiential education, emphasizing recent revisions that require more introductory pharmacy practice experiences and ensure that preceptors receive orientation, ongoing training, and professional development opportunities.

**Recommendation 1: Consistent with ACPE Standards 2007, the Task Force recommends the following revisions to the Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act).** Further, the Task Force recommends that boards of pharmacy, in their efforts to encourage uniformity with respect to pharmacy practice experience requirements, adopt and incorporate relevant Model Act provisions.

The Task Force recommends the following amendments to the Model Act. The revisions recommended by the Task Force are denoted by underlines and strikethroughs.

**Article I**

**Title, Purpose, and Definitions**

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**Section 105. Definitions.**

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(iii) “Pharmacy Intern” means an individual who is:

(1) Currently licensed by this State to engage in the Practice of Pharmacy while under the personal supervision of a Pharmacist and is enrolled in a professional degree program of a school or college of pharmacy that has been approved by the Board and is satisfactorily progressing toward meeting the requirements for licensure as a Pharmacist; or  

(2) a graduate of an approved professional degree program of a school or college of Pharmacy or a graduate who has established educational equivalency by obtaining a Foreign Pharmacy Graduate Examination Committee™ (FPGEC®) Certificate, who is currently licensed by the Board of Pharmacy for the purpose of obtaining practical experience as a requirement for licensure as a Pharmacist; or
(3) A qualified applicant awaiting examination for licensure or meeting Board requirements for re-licensure; or
(4) An individual participating in a residency or fellowship program.

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(oooo) “Preceptor” means an individual who is currently licensed as a Pharmacist by the Board of Pharmacy, meets the qualifications as a Preceptor under the Rules of the Board, and participates in the instructional training of Pharmacy Interns.

Comments

Section 105(iii). Comment.
Most Pharmacy Interns are either enrolled in a professional degree program or post-graduate program (residency or fellowship), or have graduated from a board approved professional degree program and are awaiting examination. In some cases, however, boards of pharmacy also designate pharmacists whose licenses have lapsed or been inactive for a significant period of time as “Pharmacy Intern,” allowing these pharmacists to obtain practical experience so that their license can be re-activated. Additionally, Boards may grant the “Pharmacy Intern” designation to those Pharmacists seeking practical experience following a period of license suspension or revocation.

Boards of pharmacy may consider limiting the Pharmacy Interns’ duration of registration especially if the boards find that Pharmacy Interns are not successfully progressing toward Pharmacist Licensure in an acceptable and reasonable time frame.

Preceptors should be appropriately qualified and possess ample experience for the proper instructional training of Pharmacy Interns. It is strongly encouraged that Preceptors pursue continuing professional development for their practitioner-educator role expectations.

Licensing

Introductory Comment to Article III
Article III of the Model Act specifies the requirements for initial licensure of Pharmacists, transfer of licensure, registration to engage in the Practice of Telepharmacy Across State Lines, and renewal of licenses and registrations. In each of these areas, the Act sets forth basic Criteria and delegates to the Board the authority for implementing those Criteria. The Board does this by utilizing appropriate administrative enforcement mechanisms and by the issuance of specific rules.
Section 301 establishes the basis for this Article by making it unlawful for any unlicensed Person to engage in the Practice of Pharmacy, and by enabling the Board to exact penalties for unlawful practice. In the area of initial licensure (Section 302), the Board must implement the Act by approving professional degree programs of Pharmacy, by specifying the examination to be employed (Section 302[b]), by establishing internship pharmacy practice experience standards (Section 302[c]), and by ensuring that all other prerequisites are met by each applicant to whom it issues a license. The Act also reflects the efforts of NABP to continue uniform standards for transfer of licensure (Section 303).

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Section 302. Qualifications for Licensure by Examination.
(a) To obtain a license to engage in the Practice of Pharmacy, an applicant for licensure by examination shall:
(1) Have submitted a written application in the form prescribed by the Board of Pharmacy;
(2) Have attained the age of majority;
(3) Be of good moral character;
(4) Have graduated and received the first professional undergraduate degree from a college or school of Pharmacy that has been approved by the Board of Pharmacy;
(5) Have graduated from a foreign college of Pharmacy, completed a transcript verification program, taken and passed a college of Pharmacy equivalency exam program, and completed a process of communication ability testing as defined under Board of Pharmacy regulations so that it is assured that the applicant meets standards necessary to protect public health and safety;
(6) Have completed an internship pharmacy practice experience program or other program that has been approved by the Board of Pharmacy, or demonstrated to the Board’s satisfaction that experience in the Practice of Pharmacy which meets or exceeds the minimum internship pharmacy practice experience requirements of the Board;
(7) Have successfully passed an examination or examinations given by the Board of Pharmacy; and
(8) Have paid the fees specified by the Board of Pharmacy for the examination and any related materials, and have paid for the issuance of the license.
(b) Examinations.
(1) The examination for licensure required under Section 302(a)(7) of the Act shall be given by the Board at least two (2) times during each year. The Board shall determine the content and subject matter of each examination and approve the site and date of the administration of the examination.
(2) The examination shall be prepared to measure the competence of the applicant to engage in the Practice of Pharmacy. The Board may employ, cooperate, and contract with any organization or consultant in the preparation and grading of an examination, but shall retain the sole discretion and responsibility for determining which applicants have successfully passed such an examination.
(c) Internship Pharmacy Practice Experience Programs and Other Training Programs.
(1) All applicants for licensure by examination shall obtain practical experience in the Practice of Pharmacy concurrent with or after college attendance, or both, under such terms and conditions as the Board shall determine.
(2) The Board shall establish such licensure requirements for Pharmacy Interns and standards for internship pharmacy practice experiences, or any other experiential program necessary to qualify an applicant for the licensure examination, and shall also determine the qualifications of Preceptors used in practice experience programs.

Section 303. Qualifications for Licensure Transfer.
(a) In order for a Pharmacist currently licensed in another jurisdiction to obtain a license as a Pharmacist by license transfer in this State, an applicant shall:
(1) Have submitted a written application in the form prescribed by the Board of Pharmacy;
(2) Have attained the age of majority;
(3) Have good moral character;
(4) Have possessed at the time of initial licensure as a Pharmacist all qualifications necessary to have been eligible for licensure at that time in this State;
(5) Have engaged in the Practice of Pharmacy for a period of at least one (1) year or have met the internship pharmacy practice experience requirements of this State within the one (1) year period immediately previous to the date of such application;

(6) Have presented to the Board proof of initial licensure by examination and proof that such license is in good standing;

(7) Have presented to the Board proof that any other license granted to the applicant by any other state has not been Suspended, Revoked, or otherwise restricted for any reason, except nonrenewal or for the failure to obtain the required continuing education credits, in any state where the applicant is currently licensed but not engaged in the Practice of Pharmacy; and

(8) Have paid the fees specified by the Board.

(b) No applicant shall be eligible for license transfer unless the state in which the applicant was initially licensed as a Pharmacist also grants licensure transfer to Pharmacists duly licensed by examination in this State, under like circumstances and conditions.

Section 302(a)(4). Comment.
It is contemplated that Boards will approve those programs whose standards are at least equivalent to the minimum standards required by the Accreditation Council for Pharmacy Education (ACPE). This would include college-structured pharmacy practice experience externship programs and continuing education programs. See Comment to Section 213(a)(4) above for further discussion of the Board’s proper role in the accreditation process.

Section 302(c). Comment.
As college-based pharmacy practice experience programs become uniform under the most recent revision of ACPE’s Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007), and when boards of pharmacy are convinced that schools and colleges of pharmacy are meeting these Accreditation Standards and Guidelines and the competency requirements set out by the boards, boards should begin to broadly accept and recognize college-based pharmacy practice experience programs completed by students in other jurisdictions and eliminate requirements that such students obtain additional pharmacy practice experience hours in addition to those obtained as part of the college of pharmacy curriculum.

Because of the potential lack of uniformity among non-college-based pharmacy practice experience programs, it is recommended that Boards exercise their prerogative to accept only at their discretion non-
college based pharmacy practice experiences completed by interns in other jurisdictions. Because of the continuing lack of unanimity concerning internship programs, it is hoped that these programs will be relatively uniform, as suggested in the NABP Bylaws, and that Boards will exercise the prerogative to accept comparable programs of other jurisdictions in their discretion as permitted in Section 306.

**Section 302 (c)(1). Comment.**
Although boards of pharmacy mandate a specified number of hours of pharmacy practice experiences as a prerequisite to licensure, boards of pharmacy are also encouraged to deem those requirements met if boards find that the college-based pharmacy practice experiences meet or exceed the hourly pharmacy practice experience requirements.

As indicated in the Model Rules for Pharmacy Interns, applicants for licensure as Pharmacists shall submit evidence that they have satisfactorily completed: 1) an objective assessment mechanism intended to evaluate achievement of desired competencies as delineated in ACPE’s Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007); and 2) not less than 1,740 hours of pharmacy practice experience credit under the instruction and supervision of a Preceptor. Boards may consider moving away from requiring a specific number of contact hours should it be determined that ACPE’s Accreditation Standards and Guidelines result in appropriate preparation for students and objective assessment mechanisms demonstrate such.

**Section 302 (c)(2). Comment.**
Boards of pharmacy are strongly encouraged to utilize ACPE’s Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007) as a basis for the establishment and revision of board standards for pharmacy practice experiences. These Accreditation Standards and Guidelines also contain additional guidance on the desired behaviors, qualities, and values of preceptors.

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Examination Committee™ (FPGEC®) Certificate, who are currently licensed by the Board of Pharmacy for the purpose of obtaining practical experience as a requirement for licensure as a Pharmacist; or
c. are qualified applicants awaiting examination for licensure or meeting Board requirements for re-licensure; or
d. are participating in a residency or fellowship program.

have completed the ____ year of the five year or six year Pharmacy curriculum, or who have obtained Foreign Pharmacy Graduate Examination Committee (FPGEC) certification.

Section 2. Identification.
The Pharmacy Intern shall be so designated in his/her professional relationships, and shall in no manner falsely assume, directly or by inference, to be a Pharmacist. The Board shall issue to the Pharmacy Intern a license for purposes of identification and verification of his/her role as a Pharmacy Intern, which license shall be surrendered to the Board upon discontinuance of internship pharmacy practice experiences for any reason including licensure as a Pharmacist. No individual not properly licensed by the Board as a Pharmacy Intern shall take, use, or exhibit the title of Pharmacy Intern, or any other term of similar like or import.

Section 3. Supervision.
A Pharmacy Intern shall be allowed to engage in the Practice of Pharmacy provided that such activities are under the direct supervision of a Pharmacist. A Pharmacist shall be in continuous personal contact with, and actually giving instructions to, the Pharmacy Intern during all professional activities throughout the entire internship pharmacy practice experience period. The Pharmacist shall physically review the Prescription Drug Order and the Dispensed product before the product is delivered to the patient or the patient’s agent. The Pharmacist is responsible for the work of the Pharmacy Intern.

Section 4. Change of Address.
All Pharmacy Interns shall notify the Board immediately upon change of employment and residence address.

Section 5. Evidence of Completion.
Applicants for licensure as Pharmacists shall submit evidence that they have satisfactorily completed: 1) an objective assessment mechanism intended to evaluate achievement of desired competencies; and 2) not less than 1,740 + 500 hours of internship pharmacy practice experience credit under the instruction and supervision of a Preceptor.

Comments

Section 1. Licensure. Comment.
ACPE’s Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007) require schools and colleges of Pharmacy seeking and maintaining ACPE accreditation to incorporate introductory pharmacy practice experiences within their professional curricula, and such experiences must account for not less than 5% of the total curricular length (not less than 300 contact hours). Under the direct supervision of a Preceptor and usually taken throughout the first three academic years of the professional program, these introductory pharmacy practice experiences expose students to and allow students to participate in activities such as processing/Dispensing Medication Orders, conducting Patient interviews, or presenting Patient cases in an organized format.
It is also encouraged that boards of pharmacy allow pharmacy students to be registered as “Pharmacy Interns” as early as initial enrollment in a board-approved professional program as long as the pharmacy student has begun to take professional degree courses.

According to ACPE Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007), most pharmacy practice experiences must be under the supervision of qualified Pharmacist Preceptors licensed in the United States. Realizing that in some cases non-Pharmacist Preceptors can also provide valuable learning opportunities, it is hoped that boards of pharmacy recognize these experiences and that schools and colleges of pharmacy ensure, in most cases through faculty, that the desired competencies are being met.

These requirements coincide with ACPE’s Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007). Boards of pharmacy are strongly encouraged to utilize these Standards and Guidelines as a basis for the establishment and revision of board standards for pharmacy practice experiences.

Introductory pharmacy practice experiences, which are not less than 300 contact hours, are in addition to the advanced practice experiences taken during the final professional year, which account for not less than 25% of the curricular length or 1,440 contact hours. The total pharmacy practice experience hour requirement, therefore, is not less than 1,740 hours. Boards may consider moving away from requiring a specific number of contact hours should it be determined that ACPE’s Accreditation Standards and Guidelines result in appropriate preparation for students and objective assessment mechanisms demonstrate such.

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Model Standards for Pharmacy Internship Practice Experience Programs

Section 1. Preceptor.
(a) The Pharmacy Intern, excluding those who are currently enrolled in a professional degree program of a school or college of pharmacy approved by the Board and satisfactorily progressing toward meeting the requirements for licensure as a Pharmacist, shall notify the Board of Pharmacy within two weeks of beginning practice as a Pharmacy Intern, on a form provided by the Board, of the identity of the internship pharmacy practice experience site and of the Preceptor. The Preceptor shall have been engaged in the Practice of Pharmacy for at least two years on a full-time basis immediately prior to serving as a Preceptor.

(b) A Preceptor may be responsible for the training of more than one Pharmacy Intern. The number of Pharmacy Interns engaged in the Practice of Pharmacy at any time is limited to not more than two for each Pharmacist on duty. The number of Pharmacy Interns the Pharmacist can appropriately precept as approved by the Board.
Section 2. Internship Training. Pharmacy Practice Experience Programs.

(a) The Pharmacy at which a Pharmacy Intern is being trained shall provide an environment that is conducive to the learning of the Practice of Pharmacy by a Pharmacy Intern. Pharmacy Practice Experience sites shall meet the standards approved by the Board. It is expected that the Pharmacy Intern will be exposed to all facets of the Practice of Pharmacy in that setting, including but not limited to the following:

1. Evaluation of Prescription Drug Orders;
2. Preparation and Labeling of Drugs;
3. Dispensing of Drugs;
4. Patient profile update and review;
5. Drug Regimen Review;
6. Patient Counseling;
7. Proper and safe storage of Drugs; and
8. Allowable use and disclosure of Protected Health Information.

(b) Internship Pharmacy practice experience in non-traditional practice sites (e.g., industry-sponsored programs) must be approved by the Board of Pharmacy prior to granting of internship credit.

(c) When a Pharmacy Intern desires to obtain credit for training received in a state other than this State, he/she shall abide by all the provisions of the internship pharmacy practice experience rules in that state, and shall provide evidence from that state’s Board of Pharmacy of the number of clock hours of experience actually participated in by the Pharmacy Intern.

Comments

Section 2. Pharmacy Practice Experience Programs. Comment.

Boards of pharmacy are strongly encouraged to utilize ACPE’s Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree (effective July 1, 2007) as a basis for the establishment and revision of board standards for pharmacy practice experiences.

Background:

Consistent with the stated charges of the Task Force, the Members agreed that the Model Act should be amended to conceptually reflect the recent revisions of ACPE Standards 2007.

First, noting that there presently exists confusion within the profession regarding the terminology defining practice experiences and programs, the Task Force recommended that the words “internship,” “externship,” “clerkship,” and other similar terms within the Model Act be replaced with the term “pharmacy practice experience,” found in ACPE Standards 2007. Additionally, the Task Force recommended that NABP encourage boards of pharmacy to do the same.

Second, the Task Force asserted that ACPE Standards 2007 should be used as the foundation for any required standards relating to college-based pharmacy practice experiences; therefore, the
Task Force incorporated and cited ACPE Standards 2007 throughout the Model Act where appropriate.

Another major revision to the Model Act, as outlined in Section 5, Evidence of Completion, of the Model Rules for Pharmacy Interns, increased the hours of practice experience needed under the instruction and supervision of a preceptor from 1,500 contact hours to 1,740 contact hours. ACPE Standards 2007 requires that at least 30% of the professional curriculum be dedicated to experiential education: not less than 5% for introductory pharmacy practice experiences and not less than 25% for advanced pharmacy practice experiences. Introductory pharmacy practice experiences, which are integrated in the beginning years of the professional degree program, introduce professionalism and allow the development of practical skills early in a student’s professional learning. Since the professional degree program must minimally consist of four academic years or the equivalent number of hours or credits, the contact hour requirements for introductory pharmacy practice experiences and advanced pharmacy practice experiences are not less than 300 contact hours and not less than 1,440 contact hours, respectively, totaling not less than 1,740 hours.

Additionally, recognizing the ACPE mandate for colleges of pharmacy to incorporate introductory pharmacy practice experiences early within the professional curriculum, the Task Force recommended that boards recognize pharmacy practice experiences from the time a student matriculates into a professional degree program. Currently, per the 2007 Survey of Pharmacy Law, some states do not recognize practical experience hours until the completion of the first professional year. Knowing this, the Task Force agreed that boards should, if necessary, revise regulations or statutes that do not recognize practical experience gained via introductory pharmacy practice experiences.

Lastly, the Task Force suggested other changes to the Model Act; for example, the Task Force recommended that the definition of “Pharmacy Intern” be amended to recognize that some boards grant the “Pharmacy Intern” designation to pharmacists who are satisfying practice experience requirements for re-licensure. Also, the Task Force recommended that preceptor/pharmacy intern ratio limitations be eliminated and that states allow preceptors to determine the number of pharmacy interns they are able to appropriately instruct while simultaneously maintaining the quality of the pharmacy practice experience.

Recommendation 2: The Task Force recommends that the NABP Executive Committee consider amending the NABP Bylaws to reflect the new, expanded internship hour requirements of ACPE Standards 2007 after requirements become effective July 1, 2007, and once states begin to amend their laws and regulations as recommended by NABP in the Model Act. The recommended Bylaws amendment reads as follows:

Bylaws

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Article II

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NABP Clearinghouse Participation Requirements

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(a) Active member boards shall utilize the NABP Clearinghouse to process requests for the transfer of examination scores and licenses in accordance with the following requirements:

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(iv) The applicant demonstrates that 1,740 hours of practical pharmacy experience under the instruction of a licensed pharmacist have been acquired.

Background:
The Task Force noted that, as states adopt requirements that increase the number of practical experience hours as found in the Model Act, it may be appropriate to make a corresponding change to the current Clearinghouse Participation Requirements found in the NABP Bylaws, which currently require that active member boards ensure that licensure transfer applicants demonstrate the acquisition of at least 1,500 hours of practical pharmacy experience under the instruction of a licensed pharmacist.

Recommendation 3: The Task Force recommends that boards of pharmacy and colleges of pharmacy work together to ensure that college-based pharmacy practice experience programs meet the competencies and expectations as outlined by ACPE Standards 2007. In furtherance of this recommendation, the Task Force recommends that NABP, with AACP, provide increased guidance to their respective membership on the structure and organization of NABP/AACP District Meetings and encourage their members to meet jointly at District Meetings. In addition, the Task Force strongly encourages colleges of pharmacy to include board of pharmacy representation on appropriate college committees and to appoint a liaison to attend Board meetings and provide input as allowed by Board rules.

Background:
At some NABP/AACP District Meetings, board of pharmacy representatives are not allowed to attend AACP business meetings. With this in mind and with assistance from NABP and AACP, the Task Force agreed that boards of pharmacy and colleges of pharmacy should utilize the NABP/AACP District Meetings as a venue to facilitate discussion on issues of mutual concern, including, but not limited to, the status and quality of pharmacy practice experience programs. The Task Force also strongly encouraged colleges of pharmacy to include board of pharmacy representatives on applicable committees and, if appropriate, to appoint liaisons to attend board of pharmacy meetings to facilitate continued collaboration between the boards and the colleges of pharmacy.

Recommendation 4: As ACPE Standards 2007 are fully phased in, implemented, monitored, and assessed, the Task Force recommends that boards of pharmacy monitor the
implementation of these Standards and, if necessary, consider mandating or continue to mandate requirements for pharmacy practice experiences beyond what is required by college-based pharmacy practice experience programs to ensure that pharmacy practice experience competencies are being met. Further, the Task Force encourages boards of pharmacy to monitor the achievement of these competencies through the use of consortia or other mechanisms led by the boards of pharmacy.

Background:
Task Force members, in discussing their anecdotal experiences, expressed concern that some newly-graduated pharmacists seem unprepared to practice in traditional pharmacy settings. Although, members believe that these concerns will be addressed with broad and full implementation of ACPE Standards 2007, they found it necessary to recommend, in the interim, that boards of pharmacy mandate or continue to mandate, if necessary, requirements beyond what is required by professional curricula to ensure that students become competent entry level-practitioners.

In addition, as the appropriate tools are developed to assess student achievement of pharmacy practice experience competencies, the Task Force encourages boards to utilize or implement mechanisms to monitor college practice experience programs. An example of this effort can be found in Texas. The Texas State Board of Pharmacy annually reviews college-based practical experience programs to determine if the programs demonstrate the competency objectives outlined by Board rules and are capable of being met by each student-intern. The Board also reserves the right to set conditions relating to the approval of such programs and requires the colleges of pharmacy, through examination, to ensure that each student-intern completing the practical programs meets the competency objectives.

Recommendation 5: The Task Force recommends to the Executive Committee that NABP consider a meeting session at the NABP Annual Meeting or other meeting to provide a venue for the boards of pharmacy to discuss pharmacy practice experience requirements and related concerns.

Background:
The Task Force also recommended that the Executive Committee consider a designated session at the Annual Meeting or other meeting so that the boards could discuss issues and concerns relating to professional education.