Council on Credentialing in Pharmacy
Pharmacy Technician Credentialing Framework

This resource document is intended as guidance for policy development regarding the education, training, certification and regulation of pharmacy technicians in the United States.

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**CCP Mission:** to provide leadership, guidance, public information, and coordination for the profession of pharmacy’s credentialing programs.

**CCP Vision Statement:** The vision of the Council on Credentialing in Pharmacy is that all credentialing programs in pharmacy will meet established standards of quality and contribute to improvement in patient care and the overall public health.

**Purpose:**

To protect public health and safety and assist pharmacists in providing optimal medication therapy outcomes for patients, consistent with the Vision for Pharmacy Practice in 2015 issued by the Joint Commission of Pharmacy Practitioners (JCPP), CCP recommends that the profession establish national standards of quality for education, training, certification and regulation of pharmacy technicians in all practice settings. CCP urges all stakeholders (national and state pharmacy organizations, boards of pharmacy, employers and others) to take action to adopt the following credentialing framework by the year 2015 to meet the JCPP Vision for Pharmacy Practice.

**Expectations:**

A pharmacy technician is “an individual working in a pharmacy [setting] who, under the supervision of a licensed pharmacist, assists in pharmacy activities that do not require the professional judgment of a pharmacist.”

To provide a consistent basis for the effective regulation of pharmacy technicians by state boards of pharmacy that incorporates the credentialing framework described below, CCP expects that the following prerequisites will be in place:

- The term “pharmacy technician” will be reserved for individuals as defined here and as credentialed below. CCP recognizes that other categories of support personnel are employed in pharmacy settings, and advocates that the functions, roles and responsibilities of these individuals be clearly defined and distinguished from those of pharmacy technicians.
The profession will adopt uniform definitions for credentialing terms such as certification, registration, and licensure and use them in a consistent manner, to avoid confusion within the profession and the public regarding the requirements for pharmacy technicians.

While recognizing that some differences exist and need to be accommodated, the credentialing framework for pharmacy technicians will closely parallel the framework that has been established and implemented for entry-level pharmacists.

To meet societal needs for safe and optimal medication therapy management, the profession will set the direction for quality and consistency in pharmacy technician roles, educational preparation, credentialing and regulation.

**CCP Pharmacy Technician Credentialing Framework**

The following elements comprise the CCP framework for the education, training, certification, and regulation of pharmacy technicians:

1. One valid national task analysis of entry-level pharmacy technicians in all pharmacy work settings will be used as the foundation for technician education, training, examination, and certification. This task analysis should be performed with the input and participation of all interested stakeholders in accordance with nationally accepted standards, and administered and revised on a regular basis to ensure that its content reflects contemporary practice.

2. Educational outcomes and competencies based on the task analysis will be established for use in the education, training, examination, and certification of pharmacy technicians.

3. A model curriculum for the education and training of entry-level pharmacy technicians will be developed and adopted based on the outcomes and competencies identified from the national task analysis. The educational preparation will include both didactic and experiential components.

4. A national programmatic accreditation system will evaluate pharmacy technician education and training programs against the nationally established standards.

5. State boards of pharmacy will regulate pharmacy technicians and require them to complete a nationally accredited education and training program and pass a competency-based examination that is psychometrically sound, nationally accredited, and based on the task analysis.

6. State boards of pharmacy will develop a “pharmacy technician in training” category.

7. State boards of pharmacy will require pharmacy technicians to maintain their competency through ongoing approved education, training and development.

8. State boards of pharmacy will develop a method of reciprocity between states for pharmacy technicians.
Definitions:

**Certification** is a voluntary process by which a non-governmental agency or an association grants recognition to an individual who has met certain predetermined qualifications specified by that organization. This formal recognition is granted to designate to the public that the individual has attained the requisite level of knowledge, skill, and/or experience in a well-defined, often specialized, area of the total discipline. Certification usually requires initial assessment and periodic reassessments of the individual’s knowledge, skills and/or experience.²

**Institutional Accreditation** is a status achieved by a college or university that meets the quality standards and fulfills the requirements designated by the accreditation organization. All aspects of the college or university, including academic quality, administrative effectiveness, and all other related services of the institution, are reviewed by the accreditation organization.³

**Licensure** is the process by which an agency of government grants permission to an individual to engage in a given occupation upon finding that the applicant has attained the minimal degree of competency necessary to ensure that the public health, safety, and welfare will be reasonably well protected. Within Pharmacy, a pharmacist is licensed by a state board of pharmacy.⁴

**Pharmacy Technician** is “an individual working in a pharmacy [setting] who, under the supervision of a licensed pharmacist, assists in pharmacy activities that do not require the professional judgment of a pharmacist.”¹

**Programmatic Accreditation** is a status achieved by a specific program of education in a specified field of study that meets the quality standards and fulfills the requirements designated by the accreditation organization. The quality review process is focused on evaluating a specific academic field of study (e.g., pharmacy technician). Review involves the curriculum, training, instructors, and oversight for the field of study being reviewed. Often these programs occur in an institution that has already received institutional accreditation.³

**Recertification** is the process of maintaining one’s certification status; this may be done through completing approved education, training, or other development programs, or through reexamination.

**Registration** is the process of making a list or of being enrolled in an existing list; registration should be used to help safeguard the public through interstate and intrastate tracking of the technician work force and preventing individuals with documented problems from serving as pharmacy technicians.⁵
**Background:**

The Joint Commission of Pharmacy Practitioners (JCPP) Vision Statement for 2015 states that “Pharmacists will be the health care professionals responsible for providing patient care that ensures optimal medication therapy outcomes.” To help make this vision a reality, pharmacists will need the support of well-qualified, competent pharmacy technicians to ensure they can fulfill their professional role.

Medication therapy continues to be a significant and vital component of medical care. Therapies are growing in number and complexity at a time when the profession continues its evolution toward a practice with primary emphasis on ensuring optimal therapeutic outcomes for patients. The expanded and appropriate use of pharmacy technicians, together with automation and technology support, is essential to this evolution. While certain functions may be appropriately delegated to pharmacy technicians by pharmacists, who are legally responsible through state licensure for the care and safety of patients, such delegation presents an opportunity for error if the individual is not adequately educated, trained, and supervised.

The profession has elevated the pharmacist’s educational preparation by moving to the Doctor of Pharmacy (PharmD) curriculum for all graduates, and some organizations have proposed additional residency training for some pharmacists. However, there has been limited movement on developing standardized training to ensure a competent qualified pharmacy technician workforce to handle the tasks delegated to them.

The public has become increasingly aware of the potential for medical errors through reports in the media and from Institute of Medicine (IOM) reports, including “To Err is Human: Building a Safer Health System,” “Health Professions Education: A Bridge to Quality,” and “Preventing Medication Errors.” The IOM reports call for standards-based educational preparation for health care professionals by utilizing accrediting bodies to help implement changes, as well as for the advancement of clinical services of pharmacists.

A survey conducted in 2007 showed that Americans have strong misperceptions about the required qualifications for the people helping pharmacists prepare prescriptions in pharmacies. 91% support strong regulations to require pharmacy technicians to be trained and certified to protect patient safety across the country.

Historically, invitational conferences on pharmacy technicians were held as early as 1988 (“Technical personnel in pharmacy: Directions for the profession in society”) and a white paper on pharmacy technicians was published in 1996. CCP served as a co-convener for the 2002 national “Stepping Stone Summit, Summit Two: Pharmacy Technicians”. Following the conference, an update to the original white paper of 1996, entitled “The white paper on pharmacy technicians 2002: needed changes can no longer wait” clearly articulated the need for action by the pharmacy profession to have a shared vision for pharmacy technicians that includes their roles, responsibilities, education, training, credentialing, and regulation.
Following the 2002 national “Stepping Stone Summit Two: Pharmacy Technicians,” CCP requested that the Accreditation Council for Pharmacy Education (ACPE) initiate a profession-wide dialogue concerning the possible development of nationally accepted standards and an accreditation process for pharmacy technician education and training. During 2003 ACPE coordinated ten open hearings, and collected individuals’ and organizations’ written responses. In 2004 ACPE provided CCP with the compilation of all submissions and summaries of the open hearings. The conclusion at that time was that there was insufficient consensus on the best ways to train and utilize such support personnel and that the profession was not ready to endorse standards and an accreditation process for pharmacy technician education and training at the national level.

Recently there has been increased interest by boards of pharmacy in addressing pharmacy technician registration, training and certification resulting in part from the national attention by the public and media surrounding medication errors. The National Association of Boards of Pharmacy (NABP) convened a task force on standardized pharmacy technician education and training in the fall of 2008. The task force’s report was presented at the May 2009 NABP meeting.16

Despite these developments and repeated calls for action, the pharmacy profession has not embraced a standardized framework for pharmacy technician education, training, and certification at this time, although limited progress has been made over the past 20 years.

**Current status of training standards, certification and regulation:**

The NAPB Survey of Pharmacy Law (June 30, 2008) identified 323,169 pharmacy technicians.17 This number does not include data from 11 states and the District of Columbia. A reasonable extrapolation would predict well over 414,000 pharmacy technicians in the United States and Puerto Rico.

A model curriculum for pharmacy technician training has been collaboratively developed by the American Association of Pharmacy Technicians (AAPT), the American Pharmacists Association (APhA), the American Society of Health-System Pharmacists (ASHP), the National Association of Chain Drug Stores (NACDS), and the Pharmacy Technician Educators Council (PTEC). It is based upon a task analysis performed by the Pharmacy Technician Certification Board (PTCB).

ASHP offers the only nationally recognized accreditation process for pharmacy technician training programs in the United States. The ASHP accreditation standard incorporates information from the PTCB task analysis in its program requirements. These training programs are offered in a variety of practice settings, including employer-based training in chain drug stores, armed forces health facilities, hospitals, community colleges, vocational/technical schools, and university programs. ASHP accreditation requires 600 hours of contact over a minimum of 15 weeks.18
As of January 2009, 147 technician training programs had sought ASHP accreditation. Data from PTCB (February 2009) have identified 613 schools or training programs attended by candidates sitting for the PTCB certification examination, suggesting a rate of programmatic accreditation of less than 25%. Nevertheless, over 32,000 technicians have completed an ASHP accredited training program. It is estimated that these accredited programs will train approximately 12,000 individuals in 2009, with the three largest chain drug store corporations representing more than half of the predicted number of graduates.

Numerous unaccredited on-line programs exist that provide no standardized educational or experiential training components. Total length of training and other components vary significantly in these programs. Other than the ASHP standard, and state boards of pharmacy training requirements, there is not a consistent standard for training requirements or for transferability of training from one site, or state to another. On-the-job training, historically the primary method for technician education, remains a significant factor in the current technician training environment.

There are two certification examinations for pharmacy technicians in the United States. PTCB has certified over 300,000 pharmacy technicians since 1995. The Institute for Certification of Pharmacy Technicians (ICPT) has certified 5,100 pharmacy technicians since 2005. Each organization uses its own task analysis as a basis for its certification examination.

State requirements for technicians vary extensively. The 2008 NABP Survey of Pharmacy Law reported that 10 states plus the District of Columbia still do not require pharmacy technicians to be licensed, registered or certified. Even the term pharmacy technician is not consistently used by all state boards of pharmacy; several use terms such as “unlicensed personnel” or “pharmacy personnel.” Thirty-one state boards of pharmacy have some training requirements, and 16 states require technician examinations.

**Summary**

Both pharmacists and the public require assurance that pharmacy technicians are well qualified to handle the tasks and responsibilities delegated to them. Although several CCP member organizations have position statements or policies regarding pharmacy technicians, it is incumbent on the entire profession to provide uniform and specific direction for the training and credentialing of this component of the profession’s workforce - a component that is crucial both to ensure patient safety and to achieve the progress and success of the profession in serving its patients professionally and effectively.

Pharmacy must adopt uniform national standards for pharmacy technician education, training, certification, and regulation in order to meet the JCPP 2015 Vision. Therefore CCP strongly encourages the adoption of this pharmacy technician credentialing framework by all appropriate practice, educational, and regulatory bodies.
References

13. Technical personnel in pharmacy: Directions for the profession in society; proceedings of an invitational conference conducted by the University of Maryland Center on Drugs and Public Policy and sponsored by the ASHP Research and Education Foundation. Am J. Hospital Pharm., March 1989; 46:491-557.


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**Member Organizations of the Council on Credentialing in Pharmacy**

American Association of Colleges of Pharmacy  [www.aacp.org](http://www.aacp.org)
American College of Apothecaries  [www.americancollegeofapothecaries.com](http://www.americancollegeofapothecaries.com)
American College of Clinical Pharmacy  [www.accp.com](http://www.accp.com)
Accreditation Council for Pharmacy Education  [www.acpe-accredit.org](http://www.acpe-accredit.org)
Academy of Managed Care Pharmacy  [www.amcp.org](http://www.amcp.org)
American Pharmacists Association  [www.aphanet.org](http://www.aphanet.org)
American Society of Consultant Pharmacists  [www.ascp.org](http://www.ascp.org)
American Society of Health-System Pharmacists  [www.ashp.org](http://www.ashp.org)
Board of Pharmaceutical Specialties  [www.bpsweb.org](http://www.bpsweb.org)
Commission for Certification in Geriatric Pharmacy  [www.cccp.org](http://www.cccp.org)
Institute for the Certification of Pharmacy Technicians  [www.nationaltechexam.org](http://www.nationaltechexam.org)
Pharmacy Technician Certification Board  [www.ptcb.org](http://www.ptcb.org)
Pharmacy Technician Educators Council  [www.rxptec.org](http://www.rxptec.org)

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