

Date: July 19, 2010
To: All BPS Certificants
From: Chair, Board of Pharmacy Specialties
Subject: BPS Update

Your specialty certification is recognition of your commitment to excellence, and assurance to health professionals and the public that you are accomplished in your specialty area. The Board of Pharmacy Specialties (BPS) is committed to maintaining both of these important attributes of specialty certification. As you may know, BPS is actively searching for a new Executive Director as Richard J. Bertin, RPh, PhD, retires at the end of this year. Once the new executive is in place, the BPS Board is committed to a major strategic planning process that will solicit input from the profession concerning the future directions of our certification process. Ultimately, BPS is fully committed to a system of psychometrically sound, legally defensible, and economically sustainable specialty certifications to meet the needs of pharmacy and the public.

Recently, the President of the American College of Clinical Pharmacy (ACCP) sent a letter to their members on the subject of their “Board Certification Quandary” (see <http://www.accp.com/docs/misc/BoardCertificationQuandary.pdf>). In the spirit of open debate, and a willingness to consider disparate views, we call your attention to that letter. At the same time, I thought it important to confirm to our present and future certificants the commitment BPS shares in serving the needs of the profession and the public with the highest quality, psychometrically sound and legally defensible specialty certification system achievable. In fact, BPS has been doing that for its entire 35 year history.

BPS has worked with multiple national pharmacy organizations (ACCP, APhA, ASHP, A.S.P.E.N., CPNP, HOPA, and others) for more than three decades to operate our profession’s largest and most successful post-licensure certification program. We have recognized and developed certification processes for six specialty practice areas, now with over 9000 active certificants worldwide. BPS’ certification programs are accredited by the National Commission for Certifying Agencies and are respected around the world for their high quality and standards. We have an excellent, committed staff and utilize psychometric and other types of consultants of the highest caliber. These efforts are undertaken because we want our certificants, their employers, and their patients to benefit from truly meaningful credentials that set the highest standards for specialty-level knowledge and skills in pharmacy and enhanced patient care.

BPS is currently working with the Council on Credentialing in Pharmacy and others on a framework for the future of post-licensure credentials for pharmacists. In addition to implementing the newest specialty in ambulatory care pharmacy, we are also investigating other potential new specialties with the goal of achieving additional certifications aligned with accredited residency programs and specialty areas of pharmacy practice. When the ambulatory care specialty is in place in 2011, we will offer specialty exam-based or added qualifications credentials corresponding to 929 of the 1183 currently accredited residency programs in 12 practice areas. We are also implementing new electronic processes that will reduce the cost and

time to develop a new specialty and create and maintain current item banks – a critical but costly process for any high-level examination.

The ACCP letter urges BPS to restructure its certification process to incorporate a two-level process, with an initial exam of “core” patient care competencies that could be followed by a second examination in “specialty” or “subspecialty” areas. ACCP has not yet provided any substantial study or other evidence that this process would be superior to the current approach and that it could be conducted in a psychometrically sound and economically sustainable manner. Further, there is no evidence that the current process fails to meet contemporary societal or professional needs. We are hopeful ACCP will provide additional insight on how their conclusions were reached. As the letter acknowledges, a host of logistical issues would need to be addressed if such a change were made.

The BPS Board has examined ACCP’s proposal and obtained considerable external consultation on the topic. As you are aware, the current accreditation standards of pharmacy education in the U.S. and the NAPLEX examination are both committed to ensuring that every new pharmacist can identify practice standards for safe and effective pharmacotherapy and optimize therapeutic outcomes in patients. External psychometric experts have advised BPS that it would be exceedingly difficult to create a mid-level (“core”) credential for pharmacists that is sufficiently different from entry-level licensure. Based on these considerations, the BPS Board determined that it would be unwise to consider such restructuring *at this time*. The BPS Board has committed to revisiting its strategic plan in 2011 and will then seek input from the entire profession. In that venue, there will be ample opportunity for ACCP and all other interested parties to provide well-supported recommendations for specific changes to the BPS process.

BPS shares ACCP’s ultimate goal to benefit patients by ensuring that the pharmacy profession continues to have a credible, quality-assured, and robust system of specialty certification. I have no doubt that, working together, the profession can achieve that goal.

Importantly, BPS depends on the volunteer efforts of its certificants and subject matter experts to develop and maintain each exam item bank and complete the periodic role delineation studies required for each specialty. All certificants (or future certificants in the case of ambulatory care or other emerging specialties) are regularly invited to assist with these processes. I encourage you to take an active role, which will help to optimize the efficiency of these processes. Lastly, as BPS initiates its strategic planning process in early 2011, I pledge to you that BPS will provide all stakeholders with the opportunity to help guide the evolution of this important credentialing process in pharmacy. I hope that each of you will take advantage of this opportunity to participate.

Sincerely,



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