Canadian Pharmacy Residency Board Conseil canadien de la résidence en pharmacie

CPRB PROGRAM PROGRESS REPORT - Year 1 and Year 2

The information provided will assist the Canadian Pharmacy Residency Board (CPRB) survey team in the evaluation of the pharmacy residency training program. Please forward the original copy of this report and additional attachments to the CPRB Coordinator at cprb@chsp.ca

Please complete this form exactly as indicated and do not alter the format.

Application is hereby made for continuation of accreditation of our pharmacy residency program. We accept and understand the principles and requirements expressed in the residency accreditation process of the Canadian Pharmacy Residency Board (CPRB).

Name of person responsible for completing this template:	
Name of health care organization / Faculty:	
Address:	
City: Province:	Postal Code:
Phone:	Fax:
Date:	
Signature, Residency Program Director	Signature, Residency Program Coordinator
Name	Name
Title	Title
Phone	Phone
Fax	Fax
Email	Email

Guidelines for writing Progress Reports

Restate each recommendation from the survey report summary page(s). Your report should address the findings in the same numerical order as listed in the summary section of the survey report. Please include the standard number with each recommendation (e.g., 2.2.3.4).

Describe progress that has been made in implementing remedies to recommendations. Information should be presented in a way that conveys the steps that have been taken since the accreditation survey to address areas that were cited in the survey report.

Your responses should describe specific changes that have been implemented and the specific time of implementation. If changes have not occurred but are planned, timelines for future plans must be provided.

Attach appendices to support responses when appropriate. Appendices might include examples of forms or other concise, specific examples of pertinent documents. In all cases, copies of completed documents, as opposed to blank forms, should be forwarded to illustrate to the Board how the documents have been utilized.

Please report on <u>all</u> full recommendations from your report in section IV below. Please report on consultative recommendations in section V below.

I. Organization and Pharmacy Updates

Fronde the Board with apaat	es to your organization t	and pharmacy acparen	nerte since the last sur	vey visit.

Organization and Pharmacy Updates (continued)

Please continue listing organization & pharmacy updates from the previous page here if more space is needed).			

II. Residency Program Information

Number of Resident(s)

Recruited

Residency Year

Include a summary of admissions to the program, certificate conferrals, and withdrawals from the program since the last accreditation survey visit (it is not necessary to include the resident names in this summary).

Number of Certificate(s) Granted

Recruitment to and graduation from the program since the last accreditation survey visit.

If residency cortific	cates were not granted place	o ovolajn why	
ir residency certific	cates were not granted, pleas	e explain why.	

Withdrawals

III. Residency Program Changes

	1				
How has your resider	cy program change	ed since the last	t accreditation surve	ev visit or progres	ss report?

nclude any steps taken to bring the program into alignment with the version of the Standards in force at the time the progress Report is filed (find latest versions on the CPRB website here: https://cshp-scph.ca/standards) and any other programmatic changes that are in addition to Section IV (Review of progress since last accreditation award).				

IV. REVIEW OF PROGRESS SINCE LAST ACCREDITATION AWARD

Please remember to restate <u>each</u> full recommendation from the survey report summary page(s), and include the associated Standard number (e.g., 2.1.3.1). Make copies of this table, if required, to fit all recommendations.

Recommendation:			
Associated Standard #:			
Progress:	Complete	In-Progress	Not Yet Started
Activities to date:			
Further follow-up required:			
Target date for completion:			
Recommendation:			
Associated Standard #:			
Progress:	Complete	In-Progress	Not Yet Started
Activities to date:			
Further follow-up required:			
Target date for completion:			
Recommendation:			
Associated Standard #:			
Progress:	Complete	In-Progress	Not Yet Started
Activities to date:			
Further follow-up required:			
Target date for completion:			
Recommendation:			
Associated Standard #:			
Progress:	Complete	In-Progress	Not Yet Started
Activities to date:			
Further follow-up required:			
Target date for completion:			
Recommendation:			
Associated Standard #:			
Progress:	Complete	In-Progress	Not Yet Started
Activities to date:			
Further follow-up required:			
Target date for completion:			
Recommendation:			
Associated Standard #:			
Progress:	Complete	In-Progress	Not Yet Started
Activities to date:			
Further follow-up required:			
Target date for completion:			

V. REVIEW OF PROGRESS TOWARDS CONSULTATIVE RECOMENDATIONS SINCE LAST ACCREDITATION AWARD

(Please list <u>all</u> consultative recommendations, highlighting progress made towards those that have been completed or are inprogress. Make additional copies of this table, if needed).

Recommendation: Associated Standard #:	
Associated Standard #:	
Associated Standard #.	
Progress: Complete In-Progress Not Yet Started	
Comments (optional):	
Recommendation:	
Associated Standard #:	
Progress:CompleteIn-ProgressNot Yet Started	
Comments (optional):	
Recommendation:	
Associated Standard #:	
Progress:CompleteIn-ProgressNot Yet Started	
Comments (optional):	
Recommendation:	
Associated Standard #:	
Progress:CompleteIn-ProgressNot Yet Started	
Comments (optional):	
Recommendation:	
Associated Standard #:	
Progress: Complete In-Progress Not Yet Started	
Comments (optional):	
Recommendation:	
Associated Standard #:	
Progress: Complete In-Progress Not Yet Started	
Comments (optional):	
Decomposed deticals	
Recommendation:	
Associated Standard #:	
Progress: Complete In-Progress Not Yet Started	
Comments (optional):	
Recommendation:	
Associated Standard #:	
Progress: Complete In-Progress Not Yet Started Comments (optional):	
Comments (optional):	

Adapted with permission from the ASHP Guidelines for Preparing Responses to Residency Accreditation Survey Reports and Progress Reports document.