

Chapter: New York City Society of Health-System Pharmacists

Topic: Institutional Support for Board Certification of Pharmacists, including Professional Development and Workforce Advancement

Sponsors:

Marina Barsoum, PharmD, BCOP; Maabo Kludze, PharmD, MBA, BCPS; Charnaé Ross, PharmD, MSHA, BCSCP, CPHQ; Tamara Oz, PharmD, MBA, BCPPS; Rebecca Chu, PharmD, BCPS, Jason Babby, PharmD, BCPS

Whereas,

Whereas, board certification of pharmacists, as recognized by nationally accredited certifying bodies, is a validated indicator of advanced clinical knowledge, specialized competency, and professional accountability consistent with American Society of Health-System Pharmacists (ASHP) standards for contemporary pharmacy practice models^{1,2};

Whereas, published evidence and national professional policy statements demonstrate that board-certified pharmacists improve medication safety, optimize therapeutic outcomes, and enhance interprofessional collaboration and quality of care within health systems and institutional practice settings^{3,4};

Whereas, the ASHP accreditation standards for pharmacy residency programs identify board certification (or board eligibility with expected attainment) as a qualification for residency program directors and strongly encourage board certification for residency preceptors, recognizing board certification as a marker of advanced clinical competence, teaching excellence, and leadership in postgraduate pharmacy education⁵;

Whereas, board certification is listed as a qualification for Collaborative Drug Therapy Management (CDTM) in New York State, a service that expands pharmacist scope of practice and generates direct clinical and financial value for hospitals; and

Whereas, hospitals increasingly rely on board-certified pharmacists to meet accreditation standards, strengthen quality metrics, and support high-reliability care models; and

Whereas, attainment and ongoing maintenance of board certification require substantial financial, educational, and professional investment by pharmacists, including examination fees, maintenance fees, recertification costs, continuing professional development, and sustained clinical practice experience⁶;

Whereas, the absence of institutional support and financial reimbursement for board certification creates barriers to equitable professional advancement, contributes to workforce dissatisfaction and burnout, and limits pharmacists' ability to practice at the top of their license^{7,8,9};

Whereas, ASHP and affiliated state pharmacy organizations have identified structured credentialing, professional development, and recognition programs as essential strategies to strengthen pharmacist recruitment, retention, leadership development, and long-term workforce sustainability^{1,10};

Whereas, healthcare institutions that align board certification with career ladders, compensation frameworks, and leadership pathways are better positioned to meet evolving patient care demands, accreditation expectations, and value-based care initiatives^{3,10};

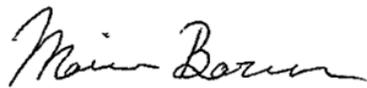
Whereas, the New York State Council of Health-System Pharmacists (NYSCHP), in alignment with ASHP policy, is committed to advocating for system-level policies that advance pharmacist professional development and improve patient-centered outcomes^{1,2};

Resolved That:

The New York State Council of Health-System Pharmacists supports the implementation of institutional policies that provide comprehensive support for pharmacist pursuing and maintaining board certification, including financial reimbursement for initial certification, maintenance fees and recertification costs, protected professional development time, mentorship, and formal recognition within career advancement and compensation frameworks, in order to strengthen the pharmacy workforce and improve patient care outcomes.

Date: January 5th, 2026

By:



Marina Barsoum, PharmD, BCOP



Maabo Kludze, PharmD, MBA, BCPS



Charnae Ross, PharmD, MSHA, BCSCP,

Handwritten signature of Tamara Oz, consisting of the letters 'TOZ' in a cursive, stylized font.

Tamara Oz, PharmD, MBA, BCPPS

Handwritten signature of Rebecca Chu, featuring a stylized 'R' followed by a long horizontal line.

Rebecca Chu, PharmD, BCPS

Handwritten signature of Jason Babby, with the first name 'Jason' and the last name 'Babby' written in a cursive script.

Jason Babby, PharmD, BCPS

References:

1. American Society of Health-System Pharmacists. (n.d.). Credentialing and privileging. ASHP. <https://www.ashp.org/pharmacy-practice/resource-centers/credentialing-and-privileging>
2. American Society of Health-System Pharmacists. (2019). ASHP long-range vision for the pharmacy workforce in hospitals and health systems (Vision Document). <https://www.ashp.org/-/media/assets/policy-guidelines/docs/endorsed-documents/pharmacy-workforce-long-range-vision.pdf>
3. Board of Pharmacy Specialties. (n.d.). Why BPS certification matters: Pharmacists. Board of Pharmacy Specialties. <https://www.bpsweb.org/pharmacists/>
4. Philip J Schneider, Craig A Pedersen, Michael C Ganio, Douglas J Scheckelhoff, ASHP National Survey of Pharmacy Practice in Hospital Settings: Clinical services and workforce—2021, *American Journal of Health-System Pharmacy*, Volume 79, Issue 18, 15 September 2022, Pages 1531–1550, <https://doi.org/10.1093/ajhp/zxac147>
5. American Society of Health-System Pharmacists. (2023). ASHP accreditation standard for postgraduate year one (PGY1) pharmacy residency programs. American Society of Health-System Pharmacists.
6. Board of Pharmacy Specialties. (n.d.). Recertification overview. <https://www.bpsweb.org/recertification-overview/>
7. Bondi DS, Acquisto NM, Buckley MS, et al. Rewards, recognition, and advancement for clinical pharmacists. *J Am Coll Clin Pharm.* 2023; 6(4): 427-439. doi:10.1002/jac5.1775
8. Kimberly A. Galt, Credentialing and privileging for pharmacists, *American Journal of Health-System Pharmacy*, Volume 61, Issue 7, 1 April 2004, Pages 661–670, <https://doi.org/10.1093/ajhp/61.7.661>
9. National Academy of Medicine. (2019). *Taking action against clinician burnout: A systems approach to professional well-being*. The National Academies Press. <https://doi.org/10.17226/25521>
10. American Society of Health-System Pharmacists. (n.d.). PAI 2030 recommendations. ASHP. <https://www.ashp.org/pharmacy-practice/pai/pai-recommendations>