

Credentialing Guidelines and Requirements

A Candidate Guidebook

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Credential Overview

Who We Are

The Pharmacy Technician Certification Board (PTCB) was established in January 1995 and is governed by five organizations: the American Pharmacists Association, the American Society of Health-System Pharmacists, the Illinois Council of Health-System Pharmacists, the Michigan Pharmacists Association, and the National Association of Boards of Pharmacy. PTCB is a national credentialing organization that enables pharmacy technicians to work more effectively with pharmacists to offer safe and effective patient care. PTCB develops, maintains, promotes, and administers a nationally accredited certification program for pharmacy technicians, Certified Pharmacy Technician (CPhT). In addition, PTCB offers a specialty certification program for CPhTs that perform sterile compounding, Certified Compounded Sterile Preparation Technician® (CSPT®), as well as Assessment-Based Certificate Programs.

Distinction Between Certification and Certificate Programs

Certification is a voluntary process by which a non-governmental body grants time-limited recognition and use of a credential to individuals who have demonstrated that they have met predetermined and standardized criteria for required knowledge, skills, or competencies. To retain the credential, certificants must meet requirements for renewal. The credential awarded by the certifying organization denotes that the participant possesses particular knowledge, skills, or competencies.

Assessment-Based Certificate

An Assessment-Based Certificate Program is a non-degree granting program that provides education/training to participants to aid them in acquiring specific knowledge, skills, and/or competencies associated with intended learning outcomes, evaluates participants' accomplishment of the intended learning outcomes, and awards a certificate only to those participants who meet the performance, proficiency, or passing standard for the assessment.

Certification Program	Assessment-Based Certificate
PURPOSE: Recognize professionals who meet established knowledge, skills, or competencies	PURPOSE: Recognize participants who demonstrate proficiency in specific knowledge, skills, and/or competencies
Assesses knowledge, skills, and/or competencies previously acquired	Typically requires education/training
Goal is to validate the participant's competency through a conformity assessment system	Goal is for participants to demonstrate proficiency in specific knowledge, skills, and/or competencies
Assessment is best used to assure baseline competencies and to differentiate professionals; independent of a specific learning event	Assessment is best used to evaluate participants' proficiency in specific knowledge, skills, and/or competencies
Assessment content is usually broad in scope	Assessment content is usually narrow in scope
Awards designations to recognize achievement	Awards a certificate of proficiency to participants who demonstrate proficiency in specific knowledge, skills, and/or competencies

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Credential Maintenance Requirements and Trademark Use

Individuals who meet eligibility requirements and pass the appropriate PTCB certification exams may use the CPhT (Certified Pharmacy Technician) or the CSPT® (Certified Compounded Sterile Preparation Technician®) designation. To maintain certification, PTCB certificants must recertify in accordance with PTCB's requirements. Refer to the recertification section for specific program requirements.

There are no renewal requirements for Assessment-Based Certificate Programs.

The Benefits of PTCB Credentials

PTCB credentials are valid nationwide. However, regulations to work in a pharmacy as a pharmacy technician vary from state to state. Individuals should contact their local state board of pharmacy or visit the National Association of Boards of Pharmacy website for more information regarding pharmacy technician requirements. Benefits of PTCB credentials may include an increase in job promotion opportunities, recognition within the pharmacy profession, and an increased focus on patient safety. Pharmacists recognize that through the credentialing programs, PTCB technicians demonstrate the qualifications and knowledge necessary to perform the duties and responsibilities of a pharmacy technician.

Construction of PTCB Exams

The methods used to construct PTCB Exams adhere to the procedures recommended in the Standards for Educational and Psychological Tests (APA, NCME, AERA; 2014), and in the guidelines published by the National Commission for Certifying Agencies (NCCA) and the Council on Licensure, Enforcement, and Regulation (CLEAR). PTCB's Exam Development Committees consist of pharmacists, CPhTs, and pharmacy technician educators from various practice settings and geographic areas. Each question is carefully written, referenced and reviewed to determine its relevance and accuracy. All questions and exams are reviewed by Exam Development Committees to ensure they are current and reflect the content outline.

Scaled Scores and Equating

Consistent with industry-standard procedures, PTCB uses multiple exam forms, which are different versions of the same exam designed to test the same content. The use of scaled scores is necessary because different exam forms are administered every year and forms may fluctuate slightly in difficulty. A candidate's scaled score, rather than raw score, is reported and used to determine Pass/Fail. Scaled scores are comparable across candidates despite slight differences in exam difficulty from one exam to another, and therefore allow all candidates to be held to the same scoring standard.

PTCB uses multiple forms containing different items to minimize item exposure and ensure the continuing relevance of test items. To ensure the Pass/Fail results of candidates taking two different forms are equivalent, PTCB uses a process known as Item Response Theory (IRT) pre-equating. Equating ensures that the same passing standard is applied from exam to exam regardless of fluctuations in the overall difficulty level from one exam form to another.