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Abstract

This paper discusses the essential aspects of how pharmacists gain credentials and privileges in the modern health sector. With pharmacists now handling clinical services in addition to their old duties, it is necessary to have more reliable ways to confirm their skills and expertise. The paper points out that credentialing checks a pharmacist's qualifications through confirmed schooling, licensing and experience, while privileging allows a licensed pharmacist to perform particular tasks because they have passed tests or exams. This area of study considers various approaches for putting the profession to work in different settings, managing problems such as limited resources, different regulations and a lack of specific benchmark skills. The document offers guidelines on how to develop systems that protect patients and maintain their safety, along with supporting pharmacists' career growth. Pulling from effective practices and new trends, the paper proposes a plan to tailor assessments of pharmacist skills and assist in their progression. By carrying out proper credentialing and privileging, healthcare organizations can make the most of pharmacists' skills and still ensure important quality assurance.

Keywords: Pharmacy credentialing, privileging, clinical competency, scope of practice, quality assurance, patient safety, pharmacist qualifications, primary source verification, advanced pharmacy practice, board certification, professional development, competency assessment, interprofessional collaboration.

1. Introduction

With healthcare rapidly changing today, making sure health professionals are competent and capable is now more important than before. Healthcare systems prioritizing the improvement of patient care, better health for the public and lower healthcare costs depend on verifying and validating the expertise of those who work in health care. These days, pharmacists are relied upon for more duties than simply dispensing pills, since their responsibilities have increased(1).

The Progress Of Pharmacies

There have been significant changes in the pharmacy field in the last few decades. Previously, pharmacists only distributed and prepared medication, but now they are important members of various healthcare teams. They are responsible for supervising medications, evaluating patients, developing treatment plans, vaccinating them and in most places, starting or adjusting drug therapies when working with other healthcare professionals. The progress is a result of new treatments requiring attention and the healthcare system seeing pharmacists as able to improve patient health at a lower cost.

Because pharmacy profession is growing, it has also become necessary to systematically verify that pharmacists have the skills and competencies for providing more advanced care to patients. This process is made up of the activities known as credentialing and privileging.

Credentialing and Privileging Explained

When something is credentialed, it means the professional's certifications are reviewed and formally verified. Typically, pharmacists must have a certain educational background, be licensed, have completed training, earned various certifications, continued their education and had experience in their practice. It ensures a pharmacist meets the necessary requirements to deliver certain patient care services in a specific environment.

Although privileging is similar to credentialing, it is meant to prove something else. It is a method for an organization to approve a healthcare worker to offer special patient care services based on their qualifications and training. People granted clinical privileges have been certified by the college as being able to handle these duties properly(2).

In healthcare organizations, credentialing and privileging generally work as part of the same process. They join to

develop a quality assurance system that fits the service conditions in a particular environment.

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The Basic Requirements for U.S. Pharmacists

Now, every US-trained pharmacist is necessary to earn core credentials for entering the field of pharmacy practice. The first step is attending a recognized Doctor of Pharmacy (Pharm.D.) program to learn the basics needed for today's pharmacists. After completing schooling, individuals must take the NAPLEX which is given by the National Association of Boards of Pharmacy on behalf of state pharmacy boards and also take the exam required by each state for licensure.

Licensure lets those concerned know that new pharmacists have the basic knowledge and skills necessary to begin practicing as pharmacists. Then, as demands for healthcare increased, pharmacists saw this baseline as merely their starting point.

Roles in Their Early Careers

Because healthcare is so advanced today, most professionals need more than basic qualifications to serve patients. Because of this, there are now many specialty courses and certificates available to pharmacists. Having a residency or fellowship, passing a board exam and taking courses in certain areas gives pharmacists opportunities to build expertise in various fields, including oncology, critical care, ambulatory care, infectious diseases and others.

Since pharmacists are now taking on more advanced roles, health systems and other settings have acknowledged that formal procedures are needed to outline and track their advanced abilities. Because of this recognition, systems have been set up for pharmacists similar to the ones long used for physicians and other health professionals.

Exploring the Function of the Council on Credentialing in Pharmacy

CCP has become the main group that sets the guidelines and frameworks for credentialing pharmacists. The CCP is formed by national organizations from different pharmacy sectors to lead, direct and organize pharmacy credentialing programs.

CCP has put together several important resources for advancing credentialing such as the "Guiding Principles for Post-licensure Credentialing of Pharmacists." This means that the process always strives to be thorough and clear,

supporting the needs of each patient(4).

This resource guide is designed to help you learn about the field of global health.

This guide is meant to add to the CCP's existing advice and aid organizations in the implementation or update of credentialing and privileging programs for pharmacists. It contains valuable details on putting these procedures into practice in different health organizations, using insight and knowledge from those who have applied pharmacists to their credentialing and privileging processes.

Importantly, this guide provides useful tips but does not set a clear standard for everyone. It is clear to the CCP that such processes need to be adjusted accordingly in different settings and kinds of organizations. Instead of proposing one single way of doing things, this source gives rules and cases that can be adjusted for each situation without lowering how credentialing and privileging ensure the quality of healthcare.

With the advancement of pharmacy practice, verification of pharmacist abilities will always change. This guide is important because it supplies those responsible with methods for updating their credentialing and privileging to recognize the key contributions of pharmacists to health care. Now, every US-trained pharmacist is necessary to earn core credentials for entering the field of pharmacy practice. The first step is attending a recognized Doctor of Pharmacy (Pharm.D.) program to learn the basics needed for today's pharmacists. After completing schooling, individuals must take the NAPLEX which is given by the National Association of Boards of Pharmacy on behalf of state pharmacy boards and also take the exam required by each state for licensure(5).

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2. Purpose of Credentialing and Privileging

Providing Quality and Safe Care for Patients

Besides providing documentation, the purpose of credentialing and privileging is to secure patients' safety and ensure they are well taken care of. In this era when the health field is more specialized than ever, it is vital for healthcare organizations to confirm that their staff members can do the job they have been given. Now that many pharmacists are actively involved in patient care, it is crucial to have safe and effective ways to check the medication simply and accurately.

With credentialing, it is confirmed that a pharmacist has met the necessary educational, training, licensing and job experience criteria. This ensures that the pharmacist's skills meet the required qualifications for their job. With the proper credentialing, all stakeholders are made sure that pharmacists hold the essential skills to practice within the correct standards.

Following the basic approach, Privileging matches each clinical activity with the ability to perform it. It is better to find out sure skills for different services by verifying what is truly required for each patient, instead of making general assumptions about staff based on certificates. Being specific about pharmacists' duties prevents potential risks to patients and also increases opportunities for them to take part in care(7).



FIGURE 1 Healthcare Excellence Pyramid

Gaining An Understanding of the Differences Between Credentialing and Privileging

Credentialing and privileging might be implemented in the same environment, but they have different main objectives. Knowing the differences allows for building good methods to evaluate the skills and qualifications of pharmacists.

Credentialing deals with determining if a pharmacist has the essential background to practice at that location. This means gathering information, examining and reviewing the qualifications of a practitioner, including their degree, training, license, certifications, further studies and work experience. Some organizations conduct background checks when they make a new hire and also repeat this process once or twice a year. Credentialing leads to a conclusion that the pharmacist meets the minimum requirements for work or placement in a company.

In contrast, privileging focuses on a particular question: Which clinical services can this pharmacist perform? It emphasizes checking someone's abilities for specific jobs, instead of overall expertise. Decisions about privilege are made when it is clear that the provider can do the task from evidence, direct experience and recommendations from

peers. After privileging, the pharmacist knows which patient care services the organization allows them to provide. Both approaches come together to ensure pharmacists are practicing only within their professional and medical skills. Because of this, it matters more when pharmacists aim to provide advanced clinical care that calls for special training(8).

Helping employees advance in their professional careers

Such systems also contribute to the growth of pharmacists by providing opportunities for their greater involvement in healthcare. By outlining what is needed in each clinical activity, these processes guide employees as they grow in their careers.

With knowledge of the necessary qualifications, pharmacists can find and do the right things to earn those privileges. By applying this method, individual workers improve their skills and benefit their organizations because advancement programs support the organization's main objectives.

Furthermore, offering initial certification and higher levels of practice to experienced pharmacists can improve their job satisfaction and help them stay with a company. As a result of these processes, employers can sort workers according to their skills and assign different jobs and salaries based on this objectivity.

Promoting Teamwork among Health Professionals

When teams look after patients, credentialing and privileging support each team member in gaining trust and understanding their role in healthcare. Ensuring pharmacists' skills and work allows responsibility are detailed, makes it easier for other healthcare workers to recognize how pharmacists assist patients and their care.

It matters most in team health practice, as this is where pharmacists occasionally assist with things generally done by doctors or other trained healthcare providers. Having team members recognized through formal credentialing and privileging prevents confusion and disagreements about who has which clinical duties.

When organizations link pharmacist credentialing and privileging with the process used for other healthcare professionals, they demonstrate respect and fairness among all professionals. Participating in credentialing and privileging provides pharmacists with a better image as clinical workers instead of just being seen as supporting staff.

Complying with Required Regulations and Accreditation

More organizations in the healthcare sector are being urged to adopt common credentialing and privileging systems for all professionals which includes pharmacists. The Joint Commission accreditation body has set standards that call for organizations to confirm the skills and qualifications of those who deliver patient care services. Furthermore, participating in collaborative drug therapy management and similar activities is being regulated by many state boards, including standards for pharmacists' abilities and credentials.

The use of strong clearance systems for pharmacists ensures the organization complies with its internal and external rules. When a system is well designed, it produces documentation that is easily given to inspectors during visits, showing that the rules are followed.

Promoting Always Better Quality

This ensures that pharmacist performance can be continuously monitored and improvements made in their work. Setting clear guidelines for clinical abilities and assessing employees against them often leads to discovering what needs to be improved individually and organizationally.

Every time a person's credentials and privileges are reviewed, it gives a natural chance to review how they are performing and create a plan for development. This method of assessing performance allows pharmacists to preserve the vital skills needed for their responsibilities and discover aspects of their job that might be improved by learning more(9).

3. What Constitutes a Credential in Pharmacy Practice

In essence, a credential is proof provided in writing that a person is qualified for a job. For pharmacists, their qualifications consist of different documents that collectively state their readiness to offer specified pharmacy services. They provide proof that a pharmacist is qualified, capable and properly trained in all these aspects.

The standard way to become a pharmacy professional is to earn a Doctor of Pharmacy (Pharm.D.), the professional

degree that allows them to practice. To make sure pharmacists are prepared for safe practice, they must follow the foundational credential with a state license that requires them to pass national and state tests.

Over the course of their careers, many pharmacists can earn additional qualifications. Completing these programs is recognized by issuing a residency certificate which prepares doctors for certain types of care either in a specific place or among a particular group. Specialty training in certain fields of pharmacy or drug sciences is also recognized by issuing a fellowship certificate.

By achieving a board certification, a pharmacist proves they understand and practice specific skills and knowledge valued by a reputable certifying body. The Board Certified Pharmacotherapy Specialist (BCPS), Board Certified Oncology Pharmacist (BCOP) and Board Certified Ambulatory Care Pharmacist (BCACP) are among the many certifications given by organizations including the Board of Pharmacy Specialties.

They are used to prove that a person has participated in specialized training to improve their skills in a certain field. Instead of testing a specific set of skills, certificates often indicate that someone has finished a particular set of lessons, unlike board certifications which look at the entirety of a doctor's knowledge in one place. Some examples are immunization training programs, medication therapy management certificate courses and different programs dealing with different diseases.

These statements show the credits received for continuous learning in the field. They serve to confirm that a pharmacist has participated in approved training to build on what they learned in school. Individually these things might seem little, but they all add up to illustrate how dedicated a pharmacist is to new developments and learning.

Pharmacists can also earn additional qualifications that allow them to interact with other types of professionals. Becoming a Certified Diabetes Educator (CDE), a Certified Asthma Educator (CAE) or Board Certified-Advanced Diabetes Management (BC-ADM) is a way for healthcare professionals to demonstrate their expertise in dealing with diseases that matter to several health professionals. They play an important role when pharmacists team up with other professionals to manage groups of patients(10).

From applying to getting an answer: the Credentialing Process

A structured methodology called credentialing is used to look into and assess the abilities of a pharmacist. While each organization may follow certain specifics, the main process is the same and aimed at assessment of a practitioner's readiness for their intended job.

Usually, the process starts with the pharmacist giving a detailed application about why they are qualified. The application often requires detailed accounts of a person's educational background, training sessions, license status, work history in different areas and specially issued certifications. Standard forms collected by many organizations provide them with uniform data to help with a fair assessment.

Moreover, it is common for the application to require statements about professional behavior, disclosure of previous disciplinary actions, details of malpractice suits and consent for the organization to review the information. There are cases where specific types of professional liability insurance are required to practice a particular profession.

After sending the application, the next step is verification. During this important stage, the organization confirms the credentials of each pharmacist by directly contacting the source of the qualification documents and not just accepting those the applicant provided. In most cases, this means confirming the degree is complete, checking if the license is valid, and confirming specialty certifications with specialty groups.

Verification can be carried out by specialized staff in the organization or by employing outside organizations that handle this kind of work. Reviewing the National Practitioner Data Bank usually forms part of the verification process, since it holds records about malpractice payments and disciplinary actions applied to healthcare practitioners.

After verification is done, the pharmacist's credentials file is analyzed closely according to the company's set requirements. In some cases, one person specializing in pharmacy analyzes the candidate or committees with members from pharmacy, medicine, nursing and administration carry out this role. The purpose of the review is to confirm that the applicant is qualified for the available position or role.

The review often checks the experience a pharmacist has performing these services, confirms their education and training in this field and documents that they presently meet the standards for the services in question. The team may review quality scores, information on patient results and what other doctors suggest.

After analyzing the details, a judgment is formed about the pharmacist's permit. It is possible that all the requested

credentials will be approved, some but not all will be approved or none will be approved and the reasons are given. Once the decision is made, the pharmacist officially learns of it and is informed about the appeal processes if they dissent from the outcome.

You should be aware that credentialing requires recurring checks, as it does not happen just once. The majority of organizations arrange for their practitioners to have their credentials evaluated every two to three years. Because of recredentialing, pharmacists need to continuously improve their qualifications. It also provides a chance to evaluate their skills and actions since the first credentialing cycle.

What Are My Rights and Responsibilities When Applying?

During the credentialing process, there are set rules for pharmacists and credentialing organizations to ensure everything is fair and transparent. It is important for everyone involved to know what each party owes.

When they are being certified or credentialed, pharmacists should undergo review using clear, regularly applied guidelines set for their area of expertise. They should be allowed to see and check all the details submitted during credentialing, make corrections if needed and get updates on how their application is progressing. If their credentials are not fully approved or limited, pharmacists ought to be informed of the cause and have access to appeal processes.

Meanwhile, pharmacists must fulfill many duties related to credentialing. It is necessary for them to provide the truth, give all the needed details, immediately communicate changes in their background and cooperate with review procedures. When any gaps are found, pharmacists must draw up and carry out solutions instead of only challenging the identified problems.

4. Knowledge of Privileges in the Practice of Pharmacy

In healthcare and pharmacy, a privilege means being formally authorized by an organization to look after and treat certain patients. Rather than proving education and experience, privileges are required to give doctors the right to perform certain medical roles. While credentials highlight a pharmacist's qualifications, privileges describe what duties are assigned to them in a workplace setting.

Among these privileges are being able to arrange for laboratory tests, adjust drug dosages, help with vaccinations, look after all a patient's medicines and carry out clinically important duties such as handling anticoagulation. The amount and type of privileges a pharmacist can have are different in different settings, reflecting changes in the rules, expectations and demands of each practice.

What constitutes a privilege at one place may not allow you to do the same things at another place. Based on their patient populations, types of services and standards, each healthcare institution has its own set of privileging guidelines. Using this strategy, rights are designed to match what the organization can achieve and what the locals expect.

Also, privileges are given to each pharmacist depending on what they can demonstrate rather than being a standard given to all in the same role. This way of thinking notices that pharmacists who have the same qualifications might be more experienced in some areas of clinical work than in others. If privileges are based on each pharmacist's skills, the organization's goals for patient care can be accomplished with sufficient safety measures.

With changes in how pharmacies operate, the concept of privileging for pharmacists has gone through significant development. At first, privileging systems were made for physicians, but now other independent practitioners are using them, leading to their increased use among pharmacists. By becoming clinical practitioners, pharmacists are now perceived as needing careful exams to assess their competency like other health workers who guide treatment decisions.

The Process of Privileging Starts from When a Request is Made to When it is Approved

Usually, a formal request from the pharmacist is the first step in the privileging process. The request states the services the pharmacist wants to deliver and also includes papers that show their skills and qualifications for them. Organizations often provide standard forms that show the different privileges and explain how to obtain them.

In response to the request, the organization checks whether the pharmacist is ready to perform the specific tasks asked. It means reviewing whatever evidence of skills exists, checking a person's track record of doing similar tasks in other jobs and testing their knowledge in a variety of ways. While credentials verification is mainly about

reviewing documents, privileging assessment involves direct examination of a person's abilities.

To test clinical competence, one can observe physicians work directly, assess them using cases, conduct mock exercises and review their older work-related data. In initial privileging, many organizations use an FPPE that involves evaluating a pharmacist's work during a set period while they are still being supervised. It ensures you watch how the pharmacist functions in the environment they are part of.

In privileging, the roles and authority of clinicians are confirmed by clinical experts in their specific fields. In hospitals, the director of pharmacy, clinical pharmacy managers and medical representatives may participate in working with pharmacists in different fields. Because of this multidisciplinary process, clinical policies are considerate of different viewpoints and are consistent with how the organization handles clinical care.

After scrutinizing all the details, the reviewer decides on the best options for the requestor. A recommendation could be for the learner to get all privileges granted, some privileges, a small set with extra conditions or none at all with an explanation of required improvements. Leaders in the organization use the suggestions to reach a final choice and then discuss their choice with the pharmacist.

If privileges are granted with conditions to a pharmacist, the limits should be clearly defined and the process for their elimination should also be set out. Typically, this involves monitoring by a manager, evaluating previous cases, completing more training or confirming the ability to use certain skills by doing assessment tasks. If these conditions are met, the pharmacist might apply to have these limitations removed from their privileges.

It is common for some organizations to introduce privileging gradually for new or less-experienced pharmacists. Generally, privileges start out being limited under careful observation and get extended as the pharmacist proves to be competent. This process ensures that pharmacists grow in their skills and the company is properly protected from risks.

Category	Description
Definition of Privilege	Formal authorization to perform specific clinical duties based on skill, not just education or certification.
Examples of Privileges	Ordering lab tests, adjusting medications, administering vaccines, managing anticoagulation, and overseeing medication therapy.
Institutional Variation	Privileges differ across healthcare settings due to local needs, services offered, and institutional policies.
Individual Assessment	Privileges are assigned based on a pharmacist's proven competence, not equally given to all with similar credentials.
Privileging Process	Begins with a formal request → review of qualifications → assessment (e.g., FPPE) → approval or conditional granting by clinical experts.
Renewal (OPPE)	Occurs every 1–2 years, using performance data (e.g., outcomes, adherence to guidelines, patient feedback) to maintain or modify privileges.
Expanding Privileges	Pharmacists can request more privileges by showing evidence of new competencies, certifications, or training.
	Privileges may be limited or revoked due to underperformance, lack of practice, or patient care concerns; reasons must be explained with recovery path.

TABLE 1 Aspects Of Pharmacist Privileging In Healthcare

Guarding and Protecting Your Status

Privileging is always changing and must be reassessed regularly to be maintained. Generally, organizations ask pharmacists to be reassessed every one to two years to check whether they are still suitable for their job. This process ensures quality and creates a regular route for learning and developing skills.

A typical way to review the renewed pharmacist's performance is to check how they used their privileges and skills as described in their grant. Generally, data collected during OPPE is used in this review to find patterns in how someone performs and the final results. Some OPPE metrics for pharmacists are whether their recommendations are correct, how closely they stick with standards, the documentation techniques they use, event-related issues and how their patients feel.

Along with checking performance, license renewal also assesses whether a pharmacist has applied knowledge learned in continuing education to their workplace. Evidence of maintaining and upgrading clinical competence is shown by documenting improvement in knowledge and skills. Many organizations expect their members to take continuing education classes regarding privileged activities to be eligible for membership renewal.

Any new certifications or completed training by the pharmacist can also be used to consider expanding their privileges. It also reviews all the outcomes and complaints from the review period and decides if the expiration or modification of existing privileges is necessary. By using this approach, the motor company ensures that privilege renewal is based on current skills rather than qualifications gained long ago.

Pharmacists who would like to get more privileges can ask for them during the renewal process. In order to complete these requests, professionals usually show evidence of new skills they have acquired since the previous time they were privileged to perform these tasks.

On the other hand, the privilege renewal process can lead to losing or narrowing the privileges you received at an earlier stage. These barriers generally arise for doctors who lack enough patient cases to maintain skills, who perform poorly compared to expectations or who are noticed in reviews of quality care. Whenever there are limitations placed, organizations usually clarify the reasons and give options for the pharmacist to restore their previous rights as improper areas are corrected.

Pharmacists have additional roles during privileging maintenance that go past regular reviews. They have to examine and control their own actions to ensure they are complying with their authorized duties and skills. If pharmacists anticipate that their ability to carry out important functions could be limited by, for example, illness, long hiatuses from practice or different helpers available, they must notify leaders in their organization.

Regularly assessing your performance is a main duty of accountability in privileged positions. Staying aware of their strengths and weaknesses at all times, pharmacists show that they are devoted to patient safety and high-quality services. Because of this commitment, medical professionals are open about problems with their practice and always look for additional ways to be up-to-date in their privileged duties.

5. Conclusion and Future work

The use of solid credentialing and privileging systems is an essential measure in advancing the future of pharmacy practice. From the examples in this resource guide, it is apparent that these steps are necessary for patient protection, proving pharmacists' abilities, defining their roles, encouraging teamwork and helping them develop. When pharmacists are credentialed and privileged, their patients, collaborating doctors and nurses, employers, payers and regulators can feel confident that the pharmacist is properly skilled to care for patients.

The listed principles demonstrate that credentialing and privileging are essentially the same in some key concepts. The criteria contained in them are based on factual information and target the skills needed for certain types of practice. The requirements are easy to understand and are always handled the same way by all staff members. They are carefully planned, allowing an adequate review of skills rather than only focusing on details stored in documents. Moreover, these rules adapt as necessary to meet changes in how medicine is practiced, what laws apply and what patients require.

It is necessary that these systems maintain a proper balance by protecting patients and their safety while enabling physicians to improve their work. This is achieved by dividing important requirements from preferred ones, setting reasonable ways to gain expertise and recognizing how pharmacists can develop matching levels of competency. Rightly functioning credentialing and privileging programs support pharmacists in the scope of their work, not hold them back without purpose or reason.

Issues and Barriers That Exist Today

While everyone agrees on the importance of credentialing and privileging for pharmacists, these systems are still encountering serious challenges in many areas. Overcoming these problems is necessary to promote the use of important quality assurance methods.

An ongoing issue is that some organizations lack the necessary resources, particularly because they have small administrative staff. Since it takes a lot of knowledge and time to implement these processes, credentialing can be a challenge for community pharmacies, ambulatory clinics and other similar venues. It is important for us to explore

methods that allow for high-quality, yet simple, management.

Because laws governing pharmacists differ from state to state, those systems that allow pharmacists to influence care must consider the rules in each jurisdiction. It is challenging for businesses present in several states to ensure equal and lawful approaches. Since legislative and regulatory changes affect pharmacy practice, the credentialing and privileging process should be flexible to those changes.

Advanced practices in pharmacy are challenged due to the lack of widely accepted sets of competencies. Many advanced functions in pharmacy are not regulated by standard or agreed-upon milestones as in other branches of medicine. The lack of clear criteria because of this gap causes some organizations to make different decisions than others. Ensuring that competency frameworks are validated is a crucial requirement for the advancement of privileging.

Lack of unity in language and concepts throughout the industry also makes it difficult for everyone to adopt new technologies. It is common for a lot of pharmacists and pharmacy leaders to misunderstand the main differences between credentialing and privileging. Everyone must be able to communicate and understand in the same way to make these systems widely used.

New Trends and Opportunities

A number of trends on the horizon could be used to strengthen and improve current credentialing and privileging processes for pharmacists. The new technology will help change future methods and could deal with current difficulties.

Since pharmacists are now providing more clinical care in many places, the development of credentialing and privileging will increase. More involvement of pharmacists in caring for patients makes it necessary to accurately evaluate their abilities in these areas. Expanding the profession leads to the opportunity to develop frameworks that highlight the role of pharmacists in taking care of patients.

Advances in technology are opening new doors to make the credentialing and privileging processes more efficient. Digital credentialing makes it simpler and quicker to check and confirm someone's educational background which saves time for administrators. Similar to that, online collections of work and analysis software can make it easier to monitor pharmacist performance and rely on data during decisions about privileges. They could play a key role when dealing with inconsistent medical resources that make it difficult to implement certain measures.

Focusing more on teamwork among healthcare professionals allows for aligning pharmacist credentialing and privileging with similar approaches for others in the field. Today's trend towards teamwork in healthcare may benefit from making credentialing and privileging systems automatic which can recognize pharmacists as recognized professionals in the process.

When certain payment policies rely on achievement instead of hours spent, more reasons exist for establishing recognized credentials and privileges. Since payment of healthcare claims now often relies on meeting certain quality standards and having credentialed pharmacists, organizations must make sure their pharmacists are kept up to date. As a result, more settings may embrace credentialing and privileging practices.

What the Area Still Needs

Focusing on research and development in key areas will be necessary for advancing pharmacy credentialing and privileging systems. With these projects, current concerns will be solved and the foundation for future projects will be improved.

Making and testing standardized assessments for competency is extremely important. There are several assessment methods, but most have yet to be tested thoroughly in the field of pharmacy. Guides drawn from research on how reliable, valid and feasible various assessment methods are would assist organizations putting privileging systems into practice. As a result, advanced pharmacy practice requires specialty tools that assess complex areas such as clinical decisions, communication and other crucial skills.

This area could benefit from research that seeks to understand the effects of such processes on outcomes and the safety of patients. Supporting the idea of credentialing and privileging with data from actual studies would help people appreciate them more and adopt them faster. The study may analyze results that happened prior to implementation and then again after implementation or among businesses that have various procedures for verifying pharmacists' credentials.

Attention should be given to developing novel ways to grant community pharmacies recognition. Since hospital

settings give structure to tasks for pharmacists, community locations have to deal with challenges stemming from their business systems, constrained ways of working and fewer administrative staff. Creating and testing simple techniques for these environments could improve credentialing and privileging for pharmacists working in all fields. As pharmacists take on larger duties, relying on credentialing and privileging will help ensure a high standard of care and aid in their advancement. The profession should deal with existing difficulties, capitalize on emerging prospects and do necessary research and development to make sure it consistently verifies pharmacists for advanced practice. This approach will result in better safety, quality and complete use of skills for patients and pharmacists.

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Conflicts of interest

The authors have no conflicts of interest to declare

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