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# Pharmacist Capability Framework

## The draft Framework

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## DRAFT PHARMACIST CAPABILITY FRAMEWORK

### Introduction

The Australian Pharmacy Council (APC) has been engaged by the Pharmacy Board (the Board) to develop a Pharmacist Capability Framework (the Framework) on their behalf. The Framework, [announced by the Board in late 2024](#),<sup>1</sup> will describe the entry-to-practice capabilities of a newly registered pharmacist who is adaptable to future practice change. The Framework serves a dual purpose to support:

- APC's accreditation functions
- the Board's regulatory functions (including registering pharmacists)

### What is a Capability Framework?

A capability framework comprises a structured assembly of behavioural capabilities that are increasingly essential in professional healthcare education, driven by the need for transparency in the training and development of practitioners.

Capability frameworks are particularly valuable in providing a structured developmental trajectory. They support not only technical skill acquisition but also the cultivation of professional identity, confidence, and reflective capacity over time. Informed by adult learning theories, such frameworks enable learners to progressively take on more responsibility and adapt to emerging professional challenges.

Capability frameworks also promote alignment across pharmacy education, regulation and employment sectors by offering a shared language for expectations. Importantly, a capability framework provides a mechanism to define expectations that are contemporary.

For the purpose of the development of the draft Pharmacist Capability Framework APC has adapted Ahpra's **definition of capabilities**: *the knowledge, skills, behaviours, professional and personal attributes needed to safely practise as a registered pharmacist in Australia. It is the extent to which pharmacists can adapt to change, generate new knowledge and continually improve their performance.*<sup>2</sup>

As part of the development work, APC has defined a **Capability framework** as: *a complete collection of capabilities that are thought to be essential to safely practise as a registered pharmacist in Australia.*

### Purpose of the Pharmacist Capability Framework (the draft Framework)

In accordance with the [Board's registration standards](#),<sup>3</sup> all pharmacy graduates must successfully complete an approved and accredited pharmacy degree program in Australia before they are eligible to apply for general registration as a pharmacist. Overseas qualified pharmacists from countries other than New Zealand, seeking general registration in Australia are required to pass an examination conducted under the auspices of APC.

Under the [National Law](#),<sup>4</sup> the Board mandates that applicants for pharmacist registration must fulfill supervised practice requirements and succeed in examinations for general registration, as outlined in the Board's Registration Standards. To maintain annual registration, pharmacists must engage in a minimum period of practice and undertake ongoing professional development.

The new Framework articulates the knowledge, skills, attitudes and behaviours expected of pharmacy graduates as they enter professional practice. It provides a structured foundation for assessing readiness for general registration,

supporting pre-registration supervised practice, and guiding professional development during this critical initial stage. The Framework ensures that graduates are equipped to deliver safe, person-centred care and contribute effectively to Australia's healthcare system from the outset of their careers.

## Scope of practice and assumptions

Significant discussions have taken place in the pharmacy profession in the last few years in relation to pharmacists' scope of practice. These discussions have been related to distinct areas of pharmacy scope and specific training requirements to 'credential' an individual pharmacist to undertake and/or be remunerated for them.

Scope of practice in this context refers to the range of professional activities that a pharmacist is trained and capable of performing. It is defined by education, professional standards and frameworks. An example can be – a pharmacist may be qualified to administer all vaccines, including paediatric ones. However, legislation and jurisdictional requirements determine what a pharmacist is legally permitted to do in a specific state or territory. In addition to legal requirements, funding models may also determine what a pharmacist does in practice. So, in some jurisdictions even if a pharmacist is trained and capable to administer paediatric vaccines, they may be legally unable to do so where legislation limits vaccination below a certain age.

The draft Framework therefore reflects contemporary and future focused pharmacy practice by outlining what pharmacists will be capable of doing. It describes scope of practice, training, emerging and evolving roles, but does not define what a pharmacist will legally be able to do in practice. This distinction highlights the gap that can occur between professional capability and legislation and underlines the need for ongoing regulatory reform to align legislation with expanding scope of practice.

The following sections describe the reasons for the inclusion of specific pharmacist scope of practice areas in the draft Framework.

### **Vaccines and other injectable medicines**

Pharmacist-administered vaccination has become an established component of pharmacy practice. Initially driven by workforce efficiency goals and public health needs, especially in rural areas, the role of pharmacists in vaccination was supported by evidence from pilot programs and policy reforms.

One of the key milestones in the implementation of pharmacist vaccination was the Queensland Pharmacist Immunisation Pilot (QPIP, 2014–2016),<sup>5</sup> which demonstrated that pharmacist-led vaccination was safe, effective, and feasible. This led to legislative changes across all Australian states and territories, authorising pharmacists to administer a range of vaccines in both community and hospital settings.

The confirmation of vaccination as an accepted component of pharmacist practice is the inclusion of vaccination training in Australian pharmacy curricula in nearly 70% of the accredited pharmacy degrees and intern training programs to date.

In addition to vaccination, pharmacist administration of medicines by injection is an increasingly recognised component of pharmacy practice. Building on the embedding of pharmacist-led vaccination in the Australian healthcare system, pharmacists are now authorised in several jurisdictions to administer a broader range of medicines, including long-acting injectable treatments such as buprenorphine for opioid dependence and

antipsychotics. This expansion reflects evolving legislative frameworks and public health priorities, particularly in improving access to care in community settings.<sup>6</sup>

Embedding this capability into the draft Framework reflects the profession's shift toward expanded clinical roles, reinforces safe and effective medicine delivery, and enhances the role in multidisciplinary care teams, and supports the sustainability of pharmacist administration of medicines by injection services nationwide.

### **Medication Management Review and Home Medicines Review**

In response to the evolving needs of Australia's healthcare system, the APC Accreditation Standards for Pharmacist Education Programs: Medication Management Review (MMR) Pharmacist, Aged Care On-site Pharmacist were introduced in 2023<sup>7</sup> to ensure the quality and consistency of pharmacist training for key Commonwealth-funded initiatives. These include the Aged Care On-site Pharmacist (ACOP) measure, and the Home Medicines Review (HMR) and Residential Medication Management Review (RMMR) programs.

Evidence consistently supports the effectiveness of pharmacists in delivering medication review services across various settings. Embedding these capabilities into the draft Framework supports the delivery of high-quality MMRs, promotes safer medication use, increases collaborative practice and enhances health outcomes for older Australians, consistent with national health priorities and funding requirements.

### **Prescribing**

Since the Pharmacy Board of Australia published its position statement on pharmacist prescribing in October 2019 and updated in 2023,<sup>8</sup> state and territory governments have authorised increased public access to health services delivered by pharmacists via pilots and trials. These services reflect a growing recognition of pharmacists' ability to contribute more directly to patient care including prescribing. Nonetheless, the approach remains fragmented, creating challenges for both the profession and the public in understanding the scope of pharmacists' roles.

The pharmacist prescribing pilots and trials being undertaken by state and territory governments are at varying stages. Some pilots in community pharmacy have concluded with pharmacists authorised to include these public health services in their scope of practice and to deliver them on an ongoing basis.<sup>8</sup> An example is the Community Pharmacy Scope of Practice Pilot, supported by Queensland Health, allowing pharmacists to prescribe for a range of conditions including gastro-oesophageal reflux, acne, allergic rhinitis, and hormonal contraception. The pilot is governed by detailed clinical protocols that ensure safe and evidence-based practice.<sup>9</sup> Queensland Health now allows pharmacist prescribing by suitably trained practitioners for acute conditions permanently from July 2025.<sup>10</sup>

The Board acknowledged these developments by confirming on 20 December 2023 that it had no regulatory barriers preventing pharmacists from participating in such initiatives legislated by state and territory governments.<sup>8</sup> On 17 September 2025, the Board announced the commencement of work to develop a proposal for an endorsement for scheduled medicines for pharmacists. This initiative marks a significant step toward establishing a nationally consistent and safe approach to pharmacist prescribing. The proposed endorsement would formalise the qualifications and regulatory framework required for pharmacists to prescribe scheduled medicines, aligning with the broader goals of the National Scheme. It reflects the Board's commitment to supporting expanded pharmacist roles while ensuring public safety through robust clinical governance and competency standards.<sup>11</sup>

Since 2016 the [National Competency Standards Framework for Pharmacists in Australia](#) (the National Competency Standards Framework),<sup>12</sup> and since 2020 the APC Accreditation Standards for Pharmacy Programs Performance Outcomes Framework,<sup>13</sup> include the skills required for undertaking prescribing. The National Competency Standards

Framework includes key competencies that align with prescribing activities, including patient assessment, clinical decision-making, and therapeutic planning. The APC Accreditation Standards for Pharmacy Programs Performance Outcomes Framework emphasises patient-centred care, interprofessional collaboration, and the safe and effective use of medicines. The frameworks demonstrate that the profession is equipped with the necessary skills and knowledge to undertake prescribing responsibilities safely and effectively.

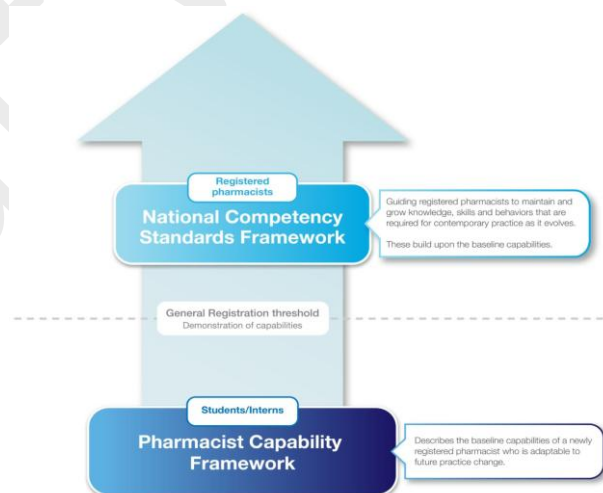
The growing evidence reflects the recognition of pharmacists' clinical capabilities and expertise, as well as highlighting their growing contribution to timely and accessible healthcare delivery.

Incorporating prescribing into the draft Framework is a logical and necessary step to reflect the current and future role of pharmacists in Australia's healthcare system, ensuring that future pharmacists at registration have the capabilities to meet evolving healthcare needs. It is noted that in addition to having the capabilities to undertake prescribing, pharmacists are also required to align with relevant state and territory legislation and Board Guidelines.

## How will the Framework be used

Following initial general registration, pharmacists need to describe their individual scope of practice and be able to identify and maintain the specific knowledge, skills and behaviours that are required to practice to the expected professional standards. The reference point for this will continue to be the National Competency Standards Framework published by the Pharmaceutical Society of Australia (PSA), as well as professional practice standards. The Competency Standards Framework will continue to support pharmacists to identify and complete the continuing professional development that is required to enable them to renew their registration annually, as well as supporting them to achieve the highest level of professional practice and to advance their scope of practice and careers.

The future application of the new Pharmacist Capability Framework at the point of registration and the National Competency Standards Framework after registration is illustrated below. The Pharmacist Capability Framework will describe the entry-to-practice capabilities of a newly registered pharmacist who is adaptable to future practice change. An Assessment Framework will be developed that will set out how future pharmacists will demonstrate their achievement against the Capability Framework.



A transition period will be determined and shared by the Board and APC for the implementation of the new Framework. Until this time, the accreditation of pharmacy programs and the initial training, assessment and registration of pharmacists who qualified in Australia or overseas will continue to be supported by the existing standards and Frameworks.

The draft Framework does not describe or mandate the educational design, program types or AQF levels that are required to train graduates to meet the Capability Framework. The APC Accreditation Standards for Pharmacy Programs (to be reviewed in 2025-26) describe and are used to assess and accredit programs by APC, that are then considered for approval by the Board. The Accreditation Standards are outcomes focused and allow flexibility in program design. Education providers are also required to meet TEQSA requirements when designing and delivering accredited programs.

## The audience for the draft Framework

The draft Framework will be used across the pharmacy profession, and in regulatory and accreditation areas.

### **Universities and Intern Program Providers**

The draft Framework provides important information for those responsible for curriculum design and will inform decisions about program content, assessment and expected outcomes for programs that lead to registration. Once the Framework is implemented, it will replace the APC Accreditation Standards for Pharmacy Programs Performance Outcomes Framework (Updated September 2023). This aligns with the broader strategic direction of the National Scheme to promote consistency and assure public safety across all regulated health professions by requiring each National Board to develop and own such a document.

### **Students and Interns**

The draft Framework outlines what students and interns need to be capable of in their journey to becoming a registered pharmacist. It will provide clarity on the knowledge, skills, attitudes and professional behaviours they are expected to develop through their education and supervised practice prior to registration.

### **Pharmacy Profession**

The draft Framework offers a shared language and reference for entry-to-practice pharmacists across all settings. It supports foundational development by articulating the capabilities expected of a pharmacist at registration. The Framework reflects contemporary practice, clarifies public expectation and supports the integration of pharmacists into interprofessional teams.

### **Other Healthcare Professionals**

The draft Framework supports interprofessional collaboration by clearly articulating the capabilities of entry-to-practice pharmacists. It enables other healthcare professionals to better understand the role, scope, and contributions of pharmacists within healthcare teams. This shared understanding fosters mutual respect, enhances communication, and promotes coordinated, interprofessional, patient-centred care across the health system.

### **Public**

The draft Framework contributes to public assurance by clearly articulating the capabilities expected of entry-to-practice pharmacists. It promotes transparency and accountability in the education and regulation of pharmacists, aligning with the National Scheme's commitment to protecting the public and fostering trust in regulated health professions.

## Acknowledging professional standards, workplace settings, and different roles

The draft Framework acknowledges the complexity of the pharmacy workforce and the variety of working environments and roles across health and care settings. This includes:

**Professional standards and policies** – the draft Framework will be used by APC in place of the APC Accreditation Standards for Pharmacy Programs Performance Outcomes Framework. It will also be used by the Board in place of the Pharmacist Competency Standards Framework for the registration of entry-to-practice pharmacists. The National Competency Standards will be revised and used by the profession as the key reference point for pharmacists beyond gaining initial registration and throughout their careers. The National Competency Standards Framework supports pharmacists in identifying and completing the continuing professional development that is required for annual registration renewal, as well as supporting them to achieve the highest level of professional practice and to advance their scope of practice and careers. The draft Framework aligns with other relevant and contemporary documents for the pharmacists' scope of practice, such as the Quality Use of Medicines Framework, the National Medicines Policy, and the Ahpra and National Boards Code of Conduct. These documents support and complement each other. The Pharmacist Capability Framework does not replace them.

**Requirements within workplace settings** – In addition to the capabilities for professional practice, pharmacists are required to align with state and territory legislation and Board Guidelines, which the draft Framework acknowledges.

**Roles** – pharmacists have different roles, responsibilities, and levels of influence. The draft Framework describes the capabilities required for general registration, without specifying the practice setting.

## Development of the draft Framework

To support the first draft of the Capability Framework a Literature review was undertaken. The literature review looked at 216 documents and articles and retrieved and analysed 138 of them (see Literature review). Thirteen were chosen to be closely compared for the development of the draft Framework for consultation:

- Aboriginal and Torres Strait Islander Health Practice Board – Professional capabilities for registered Aboriginal and Torres Strait Islander Health Practitioners, 2020<sup>14</sup>
- Australian Pharmacy Council – Accreditation Standards for Pharmacy Programs Performance Outcomes Framework, 2023<sup>13</sup>
- Australian Commission on Safety and Quality in Health Care – Antimicrobial Stewardship Clinical Care Standard, 2020<sup>15</sup>
- Australian Commission on Safety and Quality in Health Care – National Safety and Quality Health Service Standards, 2021<sup>16</sup>
- Australian Commission on Safety and Quality in Health Care – National Safety and Quality Primary and Community Healthcare Standards, 2021<sup>17</sup>
- Australasian Institute of Digital Health – Australian Digital Health Capability Framework, 2024<sup>18</sup>
- International Pharmaceutical Federation (FIP) – FIP Global Competency Framework (GbCFv2) handbook, 2023<sup>19</sup>
- National Association of Pharmacy Regulatory Authorities – Professional Competencies for Pharmacists and Pharmacy Technicians at Entry to Practice in Canada, 2024<sup>20</sup>
- NPS MedicineWise – Prescribing Competencies Framework: embedding quality used of medicines into practice (2<sup>nd</sup> Edition), 2025<sup>21</sup>
- Optometry Australia – Entry-Level Competency Standards for Optometry, 2022<sup>20</sup>
- Physiotherapy Board – Physiotherapy practice thresholds in Australia & Aotearoa New Zealand, 2023<sup>21</sup>
- Pharmaceutical Society of Australia – National Competency Standards Framework for Pharmacists in Australia, 2016<sup>12</sup>
- Royal College of Physicians and Surgeons of Canada – CanMEDS 2015 Physician Competency Framework, 2015<sup>24</sup>

A comparative analysis was conducted to identify common indicators within the different frameworks, which resulted in a comprehensive table of elements (Framework Mapping) which were categorised into the following five capability domains:

- Medicines Expert
- Collaborator
- Health Advocate
- Health Professional
- Leader and Communicator

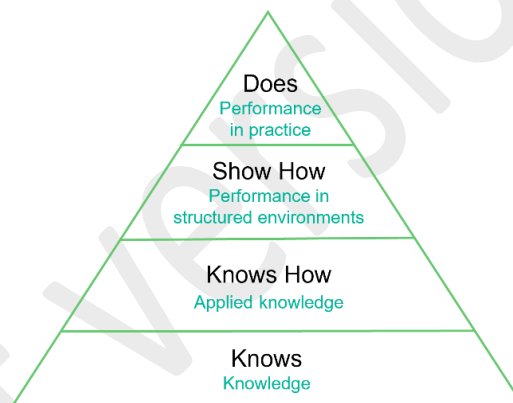
These have been used as the basis for the development of the draft Framework. The next steps in the development will be the public consultation and finalisation for Board approval.

## Format of the draft Framework

The draft Framework is structured into three key components: **Capability Domains**, **Capability Sub-domains**, and **Capability Indicators**.

Each Capability Domain represents a broad area of professional practice, which is further broken down into Capability Sub-domains that define more specific areas of capability. Within each sub-domain, Capability Indicators describe the observable behaviours and outcomes that reflect pharmacist’s capability. The framework includes two levels of indicators:

- **Foundation Indicators**, which reflect the capabilities demonstrated by pharmacy graduates upon successful completion of an approved pharmacy degree program that leads to provisional registration— typically within educational, simulated, or work-integrated learning environments. These are aligned with the lower levels of Miller’s Pyramid<sup>25</sup> - ‘*Knows to Shows How*’.
- **Entry-to-practice Indicators** describe the capabilities expected at the point of general registration as a pharmacist (after the completion of an approved program that leads to general registration **or** the PharmBA internship requirements), aligned with the ‘*Does*’ level of Miller’s Pyramid, indicating readiness for independent professional practice.



Miller, G E. The assessment of clinical skills/competence/performance. Academic Medicine 65(9):p 563-7, September 1990.

The indicators describe the different knowledge and performance expectations for the two levels of ‘foundation’ and ‘entry-to-practice’. This reflects the journey towards gaining general registration. For some indicators this progressive demonstration of performance is more significant during the internship period, for others this is a more subtle shift.

The capabilities and indicators do not have a hierarchy of importance, as they are all important aspects of the practice of a pharmacist. They are all connected and may at times be performed simultaneously. The draft Framework acknowledges the varied and different workplace settings, and roles within the pharmacy profession.

## Draft Framework | Concept

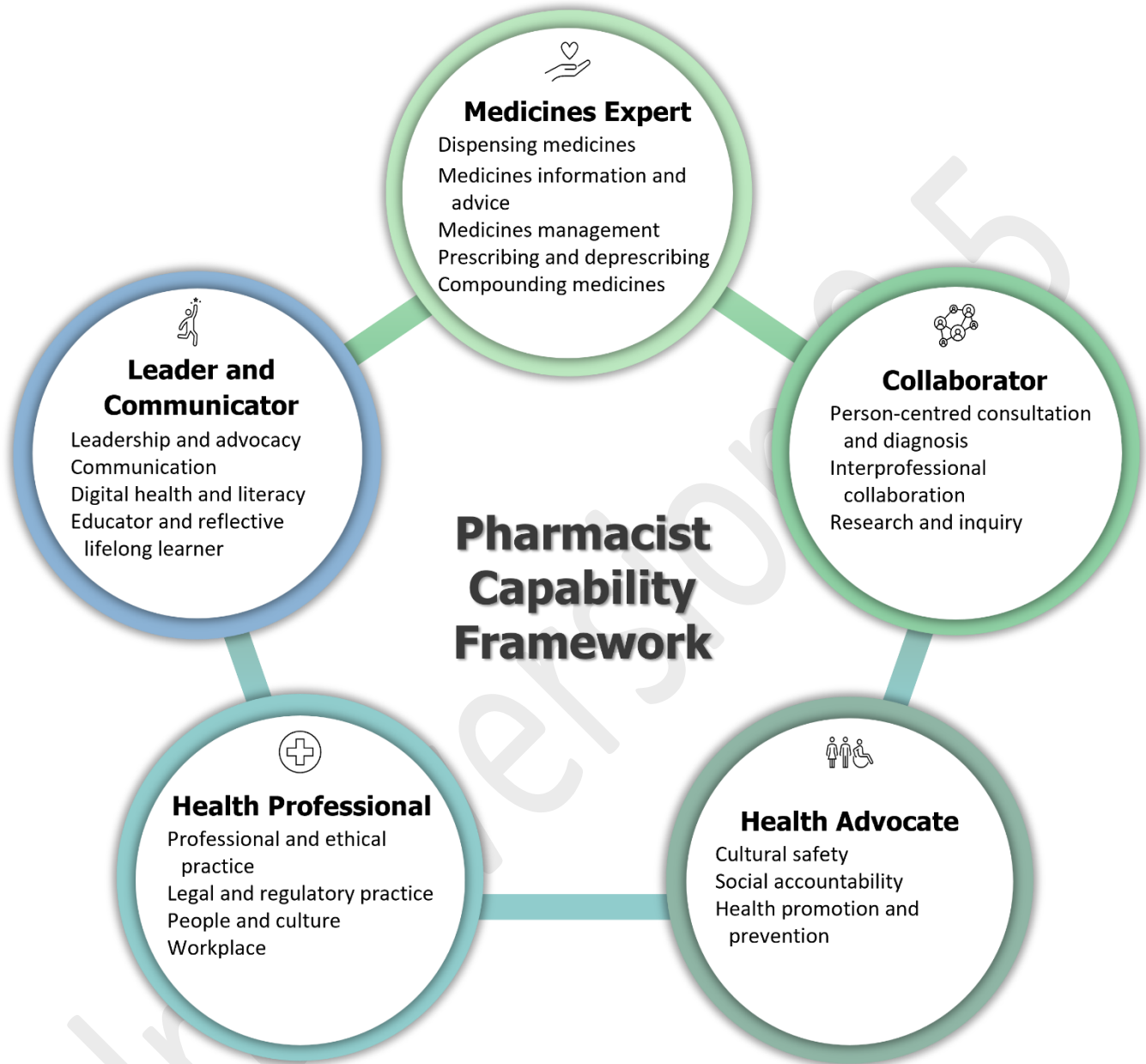
The draft Framework contains five key domains, four of which – **Collaborator, Health Advocate, Health Professional, Leader and Communicator** – are universally relevant and transferable across healthcare professions. These domains reflect core capabilities essential to delivering high-quality, patient-centred care, fostering interprofessional collaboration, and ensuring effective healthcare system functioning.

However, the domain of **Medicines Expert** is central to the pharmacy profession. It encompasses the specialised knowledge, skills, and responsibilities related to the safe, effective, and evidence-based use of medicines, which are pivotal to the pharmacist’s role.

The draft Framework’s structure also includes a distinct focus for each capability domain, from the macro-level as health advocate considering the public and pharmaceutical care to the intermediate with interpersonal interactions with the patient, consumer, and healthcare team, and finally, to the micro-level individual capabilities of the practitioner and their practice. This layered approach not only provides a shared conceptual model for understanding but also promotes professional identity by integrating multiple perspectives to inform effective decision-making. Ultimately, this ensures the draft Framework comprehensively bridges professional expertise with patient needs and broader health system priorities.


<p><b>Medicines Expert</b> Pharmacists ensure the safe, effective, and quality use of medicines by providing contemporary evidence-based expert advice and dispensing appropriate pharmaceutical products tailored to individual patient needs.</p>	<p><b>Medicines Expert</b> Pharmaceutical care focus</p> 
<p><b>Collaborator</b> Pharmacists support shared decision-making with patients, document accurately and collaborate effectively with other healthcare professionals. They foster inquiry through collaboration, critical thinking and curiosity to improve practice and optimise health outcomes.</p>	<p><b>Collaborator</b> Patient, consumer and team focus</p> 
<p><b>Health Advocate</b> Pharmacists contribute to the health and wellbeing of individuals and communities by delivering culturally safe person-centred care that respects each patient’s unique needs, goals, and preferences.</p>	<p><b>Health Advocate</b> Public focus</p> 
<p><b>Health Professional</b> Pharmacists practise in accordance with legal, ethical, and professional standards. They contribute to the effective and sustainable use of health system resources by managing workflows and participating in service planning and evaluation.</p>	<p><b>Health Professional</b> Practice focus</p> 
<p><b>Leader and Communicator</b> Pharmacists provide leadership, education and mentorship within the healthcare team, contribute to public and population health, and engage in lifelong learning to enhance practice and deliver evidence-informed care, including through digital health innovations.</p>	<p><b>Leader and Communicator</b> Practitioner focus</p> 

## Draft Framework | Graphical Representation



## Draft Framework | dv 0.5

### Medicines Expert

 <b>Medicines Expert   <i>Pharmaceutical care focus</i></b> Pharmacists ensure the safe, effective, and quality use of medicines by providing contemporary evidence-based expert advice and dispensing appropriate pharmaceutical products, tailored to individual patient needs.		
Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
Dispensing medicines (including non-prescription)	<b>Demonstrate</b> how to dispense medicines and devices, including an embedded checking process in accordance with current legislation and guidelines and to optimise patient outcomes	<b>Accurately</b> dispense medicines (including compounded medicines) and devices, including an embedded checking process in accordance with current legislation and guidelines to optimise patient outcomes
	<b>Describe</b> the appropriate, safe and secure storage of medicines in accordance with the available evidence to ensure stability and efficacy	<b>Ensure</b> the appropriate, safe and secure storage of medicines in accordance with the available evidence to ensure stability and efficacy
	<b>Demonstrate</b> how to administer medicines, including vaccines and other medicines by injection, in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines	<b>Administer</b> medicines, including vaccines and other medicines by injection, in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines
	<b>Gather</b> and analyse information about the patient and patient's health, medication history and medicines-related needs	<b>Gather</b> , analyse and interpret information about the patient and patient's health, medication history, medicines-related needs
	<b>Retrieve</b> relevant health, medical and medication information about the patient and/or consumer (including medication history and immunisation status) and from the medication record (record of allergies to medicines and Adverse Drug Reactions) to inform clinical reasoning	<b>Obtain</b> relevant health, medical and medication information from the patient and/or consumer (including medication history and immunisation status) and from the medication record (record of allergies to medicines and Adverse Drug Reactions) to inform clinical reasoning
	<b>Identify</b> , document and follow up on medicine-medicine interactions; medicine-disease interactions; medicine-patient interactions; medicines-food interactions	<b>Identify</b> , prioritise, document, resolve and follow up on medicine-medicine interactions; medicine-disease interactions; medicine-patient interactions; medicines-food interactions
	<b>Identify</b> when it is clinically inappropriate to dispense or supply medicines (this may include S2 or S3 medicines)	<b>Recognise</b> when it is clinically inappropriate to dispense or supply medicines (this may include S2 or S3 medicines)



**Medicines Expert | Pharmaceutical care focus**

Pharmacists ensure the safe, effective, and quality use of medicines by providing contemporary evidence-based expert advice and dispensing appropriate pharmaceutical products, tailored to individual patient needs.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Dispensing medicines (including non-prescription)</b> <i>(cont.)</i>	<b>Identify</b> and document dispensing near misses in accordance with local (e.g. pharmacy or hospital/health network), national (e.g. TGA) incident reporting systems	<b>Identify</b> , document and respond to dispensing near misses in accordance with local (e.g. pharmacy or hospital/health network), national (e.g. TGA) incident reporting systems and workplace procedures, ensure appropriate follow-up, communication, and continuous quality improvement
<b>Medicines information and advice</b>	<b>Critically</b> evaluate medicines information and provide evidence-based advice, according to the needs of patients and the community	<b>Critically</b> evaluate medicines information and make evidence-based decisions, according to the needs of patients and the community
	<b>Provide</b> guidance on the safe, rational and cost-effective use of medicines, devices and other healthcare options – including the selection, use, contraindications, storage, and side effects of non-prescription and prescription medicines – taking a person-centred approach to care, including their financial circumstances	<b>Educate</b> the patient on the safe, rational and cost-effective use of medicines, devices and other healthcare options – including the selection, use, contraindications, storage, and side effects of non-prescription and prescription medicines – taking a person-centred approach to care, including their financial circumstances
	<b>Support</b> patient and community use of health information technologies, digital literacy and digital communication (including digital driven health solutions and emerging technologies)	<b>Advocate</b> and support patient and community use of health information technologies, digital literacy and digital communication (including digital driven health solutions and emerging technologies)
<b>Medicines management</b>	<b>Demonstrate</b> effective critical thinking, reasoning and problem-solving strategies to conceptualise problems, formulate solutions, and support decision-making tailored to the individual circumstances, considering the potential benefits and harms (including the misuse of legal and illegal drugs)	<b>Apply</b> effective critical thinking, reasoning and problem-solving strategies to conceptualise problems, formulate solutions, and support decision-making tailored to the individual circumstances, considering the potential benefits and harms (including the misuse of legal and illegal drugs)
	<b>Formulate</b> medication monitoring and management plans, and assess impact and outcomes in collaboration with other healthcare team members	<b>Implement</b> medication monitoring and management plans, and assess impact and outcomes in collaboration with patients, consumers, carers and other healthcare team members
	<b>Identify</b> measures to enhance adherence with dosage regimens and support safe and effective administration of medications	<b>Prioritise</b> , develop and implement measures to enhance adherence with dosage regimens and support safe and effective administration of medications



**Medicines Expert | Pharmaceutical care focus**

Pharmacists ensure the safe, effective, and quality use of medicines by providing contemporary evidence-based expert advice and dispensing appropriate pharmaceutical products, tailored to individual patient needs.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Medicines management</b> <i>(cont.)</i>	<b>Identify</b> guidelines (e.g. Antimicrobial stewardship), medicines formulary system, protocols, and treatment pathways used in practice	<b>Apply</b> guidelines (e.g. Antimicrobial stewardship), medicines formulary system, protocols, and treatment pathways in practice
<b>Prescribing and deprescribing</b>	<b>Appropriately</b> select medicines and consider the implications to the wider community of prescribing a particular medicine	<b>Appropriately</b> select medicines and consider the implications to the wider community of prescribing a particular medicine
	<b>Demonstrate</b> how to assess and analyse clinical and medication-related information, formulate diagnosis, and document findings and decisions clearly, accurately, and in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines and how to communicate with patients' usual prescribers as appropriate	<b>Assess</b> and analyse clinical and medication-related information, formulate diagnosis, and document findings and decisions clearly, accurately, and in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines and communicate with patients' usual prescribers as appropriate
	<b>Demonstrate</b> how to prescribe medicines in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines	<b>Prescribe</b> medicines in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines
	<b>Identify</b> clinical situations where deprescribing would optimise patient care	<b>Recognise</b> clinical situations where deprescribing would optimise patient care and work collaboratively with the prescriber to manage deprescribing where appropriate
	<b>Identify</b> when it is clinically inappropriate to prescribe medicines	<b>Recognise</b> and act upon when it is clinically inappropriate to prescribe medicines
<b>Compounding medicines</b>	<b>Prepare</b> extemporaneously compounded medicines and determine the requirements for preparation, such as, the appropriate formulation, required calculations, procedures and use of equipment	<b>Prepare</b> extemporaneously compounded medicines and determine the requirements for preparation, such as, the appropriate formulation, required calculations, procedures and use of equipment
	<b>Prepare</b> extemporaneously compounded medications safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements	<b>Prepare</b> and supply extemporaneously compounded medications safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements

## Collaborator



### Collaborator | Patient, consumer and team focus

Pharmacists support shared decision-making with patients and collaborate effectively with other healthcare professionals. They foster inquiry through collaboration, critical thinking and curiosity to improve practice and optimise health outcomes.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
Person-centred consultation and diagnosis	<b>Identify</b> the patient's capacity to receive care and health literacy, educate accordingly on medicines and healthcare needs	<b>Assess</b> and evaluate the patient's capacity to receive care and health literacy, and educate accordingly on medicines and healthcare needs
	<b>Obtain</b> and document an accurate Best Possible Medication History (BPMH) for a patient/consumer using relevant sources of health information	<b>Obtain</b> and document an accurate Best Possible Medication History (BPMH) for a patient/consumer using relevant records and health information
	<b>Identify</b> and prioritise recommendations to manage health, medical and medication needs of patients, including both pharmacological and non-pharmacological strategies, based on the Quality Use of Medicines Framework and the best available evidence	<b>Assess</b> , diagnose, develop and prioritise recommendations to manage health, medical and medication needs of patients, including both pharmacological and non-pharmacological strategies, based on the Quality Use of Medicines Framework and the best available evidence
	<b>Identify</b> urgent care needs (physical and/or mental) of patients, manage potential risk of adverse events and suggest follow-up care	<b>Support</b> urgent care needs (physical and/or mental) of patients, manage potential risk of adverse events and act upon arranging follow-up care
	<b>Collaborate</b> with the patient and consumer in shared decision making on the appropriate use of medicines by supporting and advocating for the rights of patients and consumers to access relevant information, allow them time and respect their choices	<b>Discuss</b> , collaborate and agree with the patient and consumer in shared decision making on the appropriate use of medicines by supporting and advocating for the rights of patients and consumers to access relevant information, allow them time and respect their choices
	<b>Identify</b> the patients and consumers concerns and expectations about their health and their use of medicines	<b>Explore</b> and respond appropriately to the patients and consumers concerns and expectations about their health and their use of medicines
	<b>Demonstrate</b> how to carry out systematic medication management reviews, informed by the Quality Use of Medicines Framework, to identify and resolve potential medication-related issues and optimise the impact of medications on health outcomes in collaboration with patients, consumers and interprofessional team	<b>Carry out</b> systematic medication management reviews, informed by the Quality Use of Medicines Framework, to identify and resolve potential medication-related issues and optimise the impact of medications on health outcomes in collaboration with patients, consumers and interprofessional team



**Collaborator** | *Patient, consumer and team focus*

Pharmacists support shared decision-making with patients and collaborate effectively with other healthcare professionals. They foster inquiry through collaboration, critical thinking and curiosity to improve practice and optimise health outcomes.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Person-centred consultation and diagnosis</b> <i>(cont.)</i>	<b>Document</b> any intervention and treatment plan of the patient and ensure understanding on the safe use of medication and the plan, facilitating continuity of care during transitions of care	<b>Discuss</b> and document any intervention and treatment plan with the patient and ensure understanding on the safe use of medication and the plan, facilitating continuity of care during transitions of care
	<b>Recommend</b> appropriate monitoring of the outcomes of health and medication management plans and recommend adjusting them where appropriate in collaboration with patients, consumers and interprofessional team	<b>Develop</b> , review and implement appropriate monitoring of the outcomes of health and medication management plans and adjust them where appropriate in collaboration with patients, consumers and interprofessional team
	<b>Identify</b> when to refer the patient or consumer for further assessment and/or treatment when the suitable treatment options are outside scope of individual practice	<b>Appropriately</b> refer the patient or consumer for further assessment and/or treatment when the suitable treatment options are outside scope of individual practice
<b>Interprofessional collaboration</b>	<b>Respect</b> , understand and acknowledge the expertise, roles and responsibilities of other members of the interprofessional collaborative healthcare team to optimise patient outcomes	<b>Respect</b> , understand and acknowledge the expertise, roles and responsibilities of other members of the interprofessional collaborative healthcare team to optimise patient outcomes
	<b>Demonstrate</b> engagement in effective intra- and interprofessional relationship-building, and working in partnership to ensure teamwork, communication, consultation, conflict resolution and effective transfer of care	<b>Engage</b> in effective intra- and interprofessional relationship-building, and working in partnership to ensure teamwork, communication, consultation, conflict resolution and effective transfer of care
	<b>Demonstrate</b> mutual respect and adopt shared values of the workplace to ensure safe and effective continuity of patient care	<b>Demonstrate</b> mutual respect and adopt shared values of the workplace to ensure safe and effective continuity of patient care
	<b>Engage</b> and collaborate in therapeutic decision-making, and use appropriate referral methods when working inter-professionally	<b>Engage</b> , collaborate, consult and advise in therapeutic decision-making, and use appropriate referral methods when working inter-professionally
	<b>Provide</b> accurate and complete information to other health professionals in a timely manner when a review of medication, new medicines, modification of existing medicines or treatment plans have occurred	<b>Produce</b> and provide accurate and complete information to other health professionals in a timely manner when reviewing medication, implementing new medicines, modifying existing medicines or treatment plans




**Collaborator** | *Patient, consumer and team focus*

Pharmacists support shared decision-making with patients and collaborate effectively with other healthcare professionals. They foster inquiry through collaboration, critical thinking and curiosity to improve practice and optimise health outcomes.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Interprofessional collaboration</b> <i>(cont.)</i>	<b>Provide</b> medication management review reports to other health professionals using standardised tools and according to best practice guidelines relevant for the practice setting	<b>Creates</b> clear and concise medication management review reports to other health professionals using standardised tools and according to best practice guidelines relevant for the practice setting
	<b>Demonstrate</b> collaborative practice, research and service provision to optimise continuum of care	<b>Engage</b> in collaborative practice, research and service provision to optimise continuum of care
<b>Research and inquiry</b>	<b>Participate</b> in research and evidence-based activities to advance practice	<b>Participate</b> in research and evidence-based practice and apply (where appropriate) findings to advance practice
	<b>Demonstrate</b> knowledge and skills in inquiry by <b>formulating</b> questions, critically appraising relevant source materials, synthesising the results, and reporting and disseminating the outcomes	<b>Contribute</b> to the evidence-base through inquiry and research by identifying gaps and uncertainties in practice, critically appraising relevant source materials, synthesising the results, implementing practice change, and reporting and disseminating the outcomes
	<b>Demonstrate</b> awareness of effective processes to conduct research and evidence-based activities and for facilitating learning including aims, learning outcomes, learning activities, assessment and feedback	<b>Initiate</b> and implement research and support evidence-based activities in the workplace
	<b>Promote</b> clinical governance, quality assurance and continuous quality improvement strategies through utilising skills in collaboration, critical thinking, curiosity and creativity	<b>Implement</b> clinical governance, quality assurance and continuous quality improvement strategies through collaboration, critical thinking, curiosity and creativity

## Health Advocate

<b>Health Advocate   Public focus</b>  Pharmacists contribute to the health and wellbeing of individuals and communities by delivering culturally safe person-centred care that respects each patient’s unique needs, goals, and preferences.		
Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Cultural safety</b>	<b>Demonstrate</b> awareness of and sensitivity to Aboriginal and Torres Strait Islander Peoples health, history, communication styles and community protocols	<b>Provide</b> culturally responsive and person-centred care to Aboriginal and Torres Strait Islander Peoples respecting their health, history, culture and protocols by deep listening and embedding in practice their ways of ‘knowing, being, and doing’
	<b>Demonstrate</b> awareness of culturally safe, respectful, and person-centred care for Aboriginal and Torres Strait Islander Peoples by actively addressing the impact of colonisation, racism and systemic inequities, amplifying their voices, and understand how healthcare practices uphold their rights, preferences, diversity and cultural identities	<b>Advocate</b> and influence the delivery of culturally safe, respectful, and person-centred care for Aboriginal and Torres Strait Islander Peoples by actively addressing the impact of colonisation, racism and systemic inequities, amplifying their voices, and <b>ensure</b> that healthcare practices uphold their rights, preferences, diversity and cultural identities
	<b>Demonstrate awareness</b> , humility and sensitivity to Aboriginal and Torres Strait Islander Peoples history, health communication styles, and health definitions, including self-definition and worldview differences	<b>Ensure</b> humility and sensitivity in practice to Aboriginal and Torres Strait Islander Peoples history, health communication styles, and health definitions, including self-definition and worldview differences
<b>Social accountability</b>	<b>Identify</b> the causes of health inequities and disparities, including the impact of social determinants of health and equitable access to the health system	<b>Recognise</b> the presence and causes of health inequities and disparities, including the impact of social determinants of health, and apply the knowledge of relevant initiatives designed to provide support and equitable access to the health system
	<b>Demonstrate</b> awareness of the importance of upholding the safety, wellbeing, and dignity of older people by responding effectively to their healthcare needs, ensuring care is respectful, person-centred, and aligned with their rights, preferences, and cultural values	<b>Advocate</b> for and <b>uphold</b> the safety, wellbeing, and dignity of older people by responding effectively to their healthcare needs, ensuring care is respectful, person-centred, and aligned with their rights, preferences, and cultural values.
	<b>Create</b> a safe environment and deliver care that is patient-centred, inclusive and free from discrimination such as racism, sexism, ageism, ableism, and bias toward people from culturally and linguistically diverse backgrounds and people with disability	<b>Engage</b> in a safe environment and deliver care that is patient-centred, inclusive and free from discrimination such as racism, sexism, ageism, ableism, and bias toward people from culturally and linguistically diverse backgrounds and people with disability

**Health Advocate | Public focus**



Pharmacists contribute to the health and wellbeing of individuals and communities by delivering culturally safe person-centred care that respects each patient’s unique needs, goals, and preferences.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Social accountability</b> <i>(cont.)</i>	<b>Describe</b> socially accountable practice (including cultural and social needs; respect and responsiveness; diversity, equity and inclusiveness)	<b>Demonstrate</b> socially accountable practice (including cultural and social needs; respect and responsiveness; diversity, equity and inclusiveness)
	<b>Identify</b> and respect the lived experience and lives of – including but not limited to – people with intellectual disability, people living with a mental illness or mental disorder, individuals who identify with the LGBTIQ+ community, people who have experienced and/or are experiencing family, domestic and sexual violence	<b>Advocate</b> , recognise, respect the lived experience and lives of – including but not limited to – people with intellectual disability, people living with a mental illness or mental disorder, individuals who identify with the LGBTIQ+ community, people who have experienced and/or are experiencing family, domestic and sexual violence
	<b>Identify</b> child safety and well-being principles and respond effectively to the healthcare needs of children and young people	<b>Advocate</b> and <b>recognise</b> child safety and well-being by responding effectively to the healthcare needs of children and young people
	<b>Demonstrate</b> awareness of the importance of collaborating with the local community - including but not limited to - in the co-design, evaluation, and continuous improvement of health services to enhance climate resilience and ensure care is responsive to environmental and community health needs	<b>Develop</b> and <b>collaborate</b> with the local community - including but not limited to - in the co-design, evaluation, and continuous improvement of health services to enhance climate resilience and ensure care is responsive to environmental and community health needs
<b>Health promotion and prevention</b>	<b>Analyse</b> patient and community healthcare needs – considering the cultural and social setting of the community – by promoting health care and well-being activities that are adapted and responsive	<b>Assess</b> patient and community healthcare needs – considering the cultural and social setting of the community – by promoting health care and well-being practices that are adapted and responsive
	<b>Identify</b> and <b>facilitate</b> patient and community self-management of health, disease prevention and control through education, monitoring and health promotion activities to optimise patient health outcomes and wellbeing	<b>Advise, promote</b> and <b>support</b> patient and community self-management of health, disease prevention and control through education, intervention, monitoring and health promotion services to optimise patient health outcomes and wellbeing
	<b>Appraise</b> the identification, assessment, monitoring, mitigation and management of risk to minimise harm and maximise patient and community safety	<b>Engage proactively</b> in the identification, assessment, monitoring, mitigation and management of risk to minimise harm and maximise patient and community safety

**Health Advocate | Public focus**




Pharmacists contribute to the health and wellbeing of individuals and communities by delivering culturally safe person-centred care that respects each patient’s unique needs, goals, and preferences.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<p><b>Health promotion and prevention</b> <i>(cont.)</i></p>	<p><b>Recognise and participate</b> in national and local health priorities and initiatives, health promotion activities, and health services intended to maintain and improve health, by responding to the needs of individuals and communities, advocating with and for them to optimise health and societal outcomes</p>	<p><b>Endorse and participate</b> national and local health priorities and initiatives, health promotion activities, and health services intended to maintain and improve health, by responding to the needs of individuals and communities, advocating with and for them to optimise health and societal outcomes</p>

draft version 0.5

## Health Professional

 <b>Health Professional   Practice focus</b> Pharmacists practise in accordance with legal, ethical, and professional standards. They contribute to the effective and sustainable use of health system resources by managing workflows and participating in service planning and evaluation.		
Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Professional and ethical practice</b>	<b>Identify</b> potential ethical issues and dilemmas, including conflicts of interest, in practice and demonstrate awareness of relevant professional codes, guidelines and standards and their content	<b>Practice</b> ethically and with integrity by recognising and appropriately managing ethical issues and dilemmas, including conflicts of interest, as they arise and maintain current familiarity and compliance with professional codes, guidelines and standards
	<b>Describe</b> professional responsibility and accountability for all decisions made and actions taken, including in response to ethical issues and dilemmas	<b>Demonstrate</b> professional responsibility and accountability for all decisions made and actions taken, including in response to ethical issues and dilemmas
	<b>Maintain</b> privacy and confidentiality in interactions with patients, consumers and other healthcare professionals, including in the creation, dissemination and storage of documentation	<b>Ensure</b> privacy and confidentiality in interactions with patients, consumers and other healthcare professionals, including in the creation, dissemination and storage of documentation
	<b>Obtain</b> , when required, informed consent from the patient, which is respected and appropriately recorded	<b>Ensure</b> that when required, informed consent is obtained from the patient, respected and appropriately recorded
	<b>Demonstrate</b> knowledge on how to document and maintain accurate, timely, and comprehensive records of clinical interventions, professional advice, and decision-making processes, in accordance with legal, and ethical requirements to support continuity of care and professional accountability	<b>Document</b> and maintain accurate, timely, and comprehensive records of clinical interventions, professional advice, and decision-making processes, in accordance with legal, and ethical requirements to support continuity of care and professional accountability, when working collaboratively
	<b>Demonstrate</b> understanding of risk management by identifying organisational risks, and using clinical and other data to support risk assessments	<b>Ensure</b> risk management by identifying and documenting organisational risks, using clinical and other data to support risk assessments, act to reduce risk, and regularly review and improve the effectiveness of the risk management system
	<b>Recognise</b> and <b>formulate</b> strategies to respond appropriately to situations outside the expected <b>scope</b> of practice and/or capabilities	<b>Recognise</b> professional limitations of self and others in the team, and respond appropriately to situations outside of current scope of practice and/or capabilities



**Health Professional | Practice focus**

Pharmacists practise in accordance with legal, ethical, and professional standards. They contribute to the effective and sustainable use of health system resources by managing workflows and participating in service planning and evaluation.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
Legal and regulatory practice	<b>Demonstrate</b> contemporary knowledge and application of ethical and legal requirements relating to practice within their jurisdiction and demonstrate awareness of the processes for maintaining contemporary familiarity with key legislative instruments	<b>Practice</b> in an ethical and legal manner by complying with legal requirements and maintaining contemporary familiarity with key legislative instruments
	<b>Demonstrate</b> awareness of the importance of compliance with appropriate workplace policies, processes and protocols	<b>Contribute</b> to, maintain, comply with and regularly review appropriate workplace policies, processes and protocols to ensure safe and socially accountable provision of health care
People and culture	<b>Identify</b> organisational and management skills (e.g. management of risk, self, projects and policies) to support workforce development, effective service delivery and medicines management	<b>Demonstrate</b> organisational and management skills (e.g. management of risk, self, projects and policies) to support workforce development, effective service delivery and medicines management
	<b>Identify</b> how to manage human resources capability and promote equity, diversity and inclusion in the practice environment	<b>Plan and manage</b> human resources capability and promote equity, diversity and inclusion in the practice environment
	<b>Recognise</b> the potential of each staff member, roles and responsibilities and systems for performance management	<b>Recognise and manage</b> the potential, capacity and development of each staff member, roles and responsibilities and utilise systems for performance management
	<b>Evaluate</b> personal health and wellbeing status, identifying situations where health or wellbeing may be challenged, and developing appropriate strategies and mechanisms to minimise the impact on personal and professional life	<b>Evaluate</b> personal health and wellbeing status, identify situations where health or wellbeing may be challenged, and adopt appropriate strategies and mechanisms to minimise the impact on personal and professional life
Workplace	<b>Demonstrate</b> awareness of pharmacy inventory for appropriate conditions for secure and safe storage and distribution of medications to ensure stability and efficacy	<b>Manage</b> pharmacy inventory to ensure safe and efficient storage and distribution of medications, in accordance with the available evidence to ensure stability and efficacy
	<b>Demonstrate</b> the ability to prioritise, make accurate and timely decisions, make appropriate judgements and utilise time management skills	<b>Demonstrate</b> the ability to prioritise, make accurate and timely decisions, make appropriate judgements, and utilise time management skills

**Health Professional | Practice focus**



Pharmacists practise in accordance with legal, ethical, and professional standards. They contribute to the effective and sustainable use of health system resources by managing workflows and participating in service planning and evaluation.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Workplace</b> <i>(cont.)</i>	<b>Analyse</b> and improve the provision of pharmaceutical services, including the physical environment where they take place	<b>Optimise</b> , improve and <b>manage</b> the provision of pharmaceutical services, including the physical environment where they take place
	<b>Identify</b> and contribute to innovation, improvement and service development	<b>Identify, implement, monitor</b> and contribute to innovation in, and improvement of, service delivery
	<b>Identify</b> environmentally sustainable pharmacy practices including processes, services, and activities with high environmental impact, including promoting the safe disposal of unused, unwanted, or expired medicines to reduce harm to the environment	<b>Contribute</b> to environmentally sustainable pharmacy practice by identifying and mitigating processes, services, and activities with high environmental impact, including promoting the safe disposal of unused, unwanted, or expired medicines to reduce harm to the environment and support responsible healthcare delivery
	<b>Identify</b> the financial sources, systems and processes to access pharmaceutical products in the Australian health care system	<b>Recognise</b> and work within the financial sources, systems and processes to access pharmaceutical products in the Australian health care system, and support patients and consumers to do the same

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## Leader and Communicator



### Leader and Communicator | Practitioner focus

Pharmacists provide leadership, education and mentorship within the healthcare team, contribute to public and population health, and engage in lifelong learning to enhance practice and deliver evidence-based care, including through digital health innovations.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
Leadership and advocacy	<b>Uphold</b> and maintain the reputation and value of the profession	<b>Uphold</b> and advance the reputation and value of the profession
	<b>Provide</b> effective leadership by taking the initiative when appropriate, managing own roles and accepting responsibility and accountability to inspire confidence	<b>Demonstrate</b> effective leadership and practice management skills by taking the initiative when appropriate, managing own roles and accepting responsibility and accountability to inspire professional confidence
	<b>Demonstrate</b> self-awareness, self-regulation, emotional intelligence, resilience and motivation that may affect professional performance and/or personal development	<b>Recognise</b> and demonstrate self-awareness, self-regulation, emotional intelligence, resilience and motivation of self and others and how it may affect professional performance and/or personal development, and take appropriate actions to minimise risk to public safety
	<b>Demonstrate</b> awareness of appropriate change management principles and strategies	<b>Demonstrate</b> flexibility and adaptability to a variety of conditions and circumstances
	<b>Accept</b> personal responsibility and accountability for decisions and actions	<b>Accept</b> personal responsibility and accountability for decisions and actions in professional practice
Communication	<b>Recognise</b> situations likely to compromise performance and develop effective strategies to build resilience and minimise their impact	<b>Recognise</b> situations in professional practice likely to compromise performance and implementing effective strategies to build resilience and minimise their impact
	<b>Communicate</b> appropriately and effectively with a socially, culturally and linguistically diverse range of people in a manner which inspires confidence and trust	<b>Communicate</b> appropriately and effectively with a socially, culturally and linguistically diverse range of people in a manner which inspires confidence and trust
	<b>Demonstrate</b> tailored communication that is appropriate to the patient and consumer needs, delivered in a culturally safe way and includes consideration of their health literacy, social needs, emotional status and any language barriers	<b>Tailor</b> communication that is appropriate to the patient and consumer needs, delivered in a culturally safe way and includes consideration of their health literacy, social needs, emotional status and any language barriers
	<b>Demonstrate</b> appropriate verbal, written and non-verbal communication skills	<b>Use</b> appropriate verbal, written and non-verbal communication skills to establish and maintain rapport with a patient or consumer including when communicating through digital platforms



### Leader and Communicator | Practitioner focus

Pharmacists provide leadership, education and mentorship within the healthcare team, contribute to public and population health, and engage in lifelong learning to enhance practice and deliver evidence-based care, including through digital health innovations.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Communication</b> <i>(cont.)</i>	<b>Demonstrate</b> appropriate communication and interpersonal behaviours, using plain language and checking understanding	<b>Communicate</b> effectively using appropriate communication and interpersonal behaviours in professional practice interactions, using plain language and checking understanding
<b>Digital health and literacy</b>	<b>Identify</b> how to appropriately and securely maintain patient privacy and security of digital information related to the patient, aligned with procedural, policy, legal and ethical requirements and respecting Indigenous data sovereignty	<b>Appropriately</b> and securely maintain patient privacy and security of digital information related to the patient and workplace, aligned with procedural, policy, legal and ethical requirements and respecting Indigenous data sovereignty
	<b>Critically</b> appraise, analyse, evaluate, and/or interpret digital information and their sources	<b>Critically</b> appraise, analyse, evaluate, and/or interpret digital information and their sources
	<b>Access, use, adapt</b> and share information (when appropriate and in line with relevant legislation) and/or other technologies to meet the needs of current and emerging professional practice	<b>Access, use, adapt</b> and share information (when appropriate and in line with relevant legislation) and/or other technologies to meet the needs of current and emerging professional practice
	<b>Describe</b> digital health services that promote positive health outcomes and engage with digital technologies to facilitate discussions with the patient and consumer	<b>Participate</b> in digital health services that promote positive health outcomes and engage with digital technologies to facilitate discussions with the patient and consumer
	<b>Identify</b> emerging digital health technologies, including artificial intelligence, their applications, limitations and implementation strategies	<b>Proactively</b> engage with emerging digital health technologies, including artificial intelligence, by understanding professional obligations, applications and limitations, contributing to implementation strategies, and participating in decision-making processes to ensure ethical, safe, and patient-centred outcomes
<b>Educator and lifelong learner</b>	<b>Identify</b> how to appropriately educate patients, consumers, and other healthcare professionals and evaluate the effectiveness of the education	<b>Educate</b> patients, consumers, and other healthcare professionals and evaluate the effectiveness of the education
	<b>Identify</b> education, training and continuing professional development	<b>Identify, support</b> and <b>facilitate</b> education, training and continuing professional development
	<b>Engage</b> in ongoing professional development and education to improve expertise outside current scope of knowledge	<b>Engage</b> in ongoing professional development and education to improve expertise outside current scope of knowledge



**Leader and Communicator | Practitioner focus**

Pharmacists provide leadership, education and mentorship within the healthcare team, contribute to public and population health, and engage in lifelong learning to enhance practice and deliver evidence-based care, including through digital health innovations.

Capability Sub-domains	Foundation Indicators	Entry-to-practice Indicators
<b>Educator and lifelong learner</b> <i>(cont.)</i>	<b>Demonstrate</b> a proactive and reflective approach to developing own professional capability and expertise	<b>Engage</b> in proactive and reflective approach to maintaining and developing own professional capability and expertise to remain fit-to-practice
	<b>Undertake</b> structured reflection as a means of enhancing learning and practice and adopt lifelong learning as a structure for unknown scopes of practice and emerging areas	<b>Demonstrate</b> commitment to structured reflection, ongoing professional learning, development, improvement and lifelong learning activities for current practice, unknown scopes of practice and emerging areas
	<b>Demonstrate</b> awareness of professional limitations and adopt appropriate strategies when necessary, including additional professional education	<b>Identify and acknowledge</b> professional limitations and act upon them seeking support when necessary, including additional professional education
	<b>Demonstrate</b> the skills as coach and/or mentor to other students and colleagues, and others which are appropriate to their context	<b>Coach</b> and/or <b>mentor</b> students, interns, colleagues, other pharmacy team members and other health care professionals

draft version

## Glossary

For the purposes of this framework, the following definitions apply.

Term	Meaning
<b>Capability framework</b>	A complete collection of capabilities that are thought to be essential to safely practise as a registered pharmacist in Australia.
<b>Capabilities</b>	The knowledge, skills, behaviours, professional and personal attributes needed to safely practise as a registered pharmacist in Australia. It is the extent to which pharmacists can adapt to change, generate new knowledge and continually improve their performance.
<b>Care</b>	Where the word 'care' is used and is not preceded by a qualifying word (for example, 'episode of care', 'comprehensive care'), this encompasses broader elements of care (for example, personal or social care).
<b>Child safety and well-being</b>	Refers to the ten National Principles for Child Safe Organisations. All organisations that work with children need to know about the National Principles. The principles promote a culture of child safety and wellbeing within organisation ensuring that all policies and practices reflect the safety and wellbeing needs of children. <sup>26</sup>
<b>Climate resilience</b>	Adapting health services by identifying environmental risks to enable the health sector to become more climate resilient and able to respond to the needs of those most effected by climate change. <sup>27</sup>
<b>Consumer</b>	Also known as patients, clients, family, community, carers and secondary consumers. A person with lived or living experience who receives care from health practitioners either directly or in a secondary capacity as a family member, carer or community. <sup>28</sup>
<b>Cultural Safety</b>	Cultural safety is determined by Aboriginal and Torres Strait Islander individuals, families and communities.  Culturally safe practise is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism. <sup>29</sup>
<b>Deprescribing</b>	Deprescribing is the thoughtful and planned process of stopping (or reducing the dose) of 'inappropriate medications'. Inappropriate medications are ones where the potential harms outweigh the benefits, for example ones that are high risk, unnecessary or ineffective. The aim of deprescribing is to maximise wellness and achieve goals of care while minimising risk of medication induced harm.
<b>Diagnosis</b>	The identification of a disease, condition or injury made by evaluating symptoms and signs presented by patient. <sup>30</sup>

Term	Meaning
<b>Digital health</b>	A range of technologies that can be used to treat patients and collect and share a person's health information...and includes mobile health apps, electronic prescribing, electronic health records, telehealth, wearables and fitness trackers, robotics and artificial intelligence, among others. <sup>18</sup>
<b>Digital literacy</b>	Digital literacy is the ability to use technology to find, evaluate, organise, create, and communicate information safely and responsibly.
<b>Dispensing</b>	The review of a prescription and the preparation, packaging, labelling, record keeping and transfer of the prescribed medicine including counselling to a patient, their agent, or another person who is responsible for the administration of the medicine to that patient. <sup>31</sup>
<b>Environmental sustainability</b>	Mitigating processes, practices and services that have high environmental impact to ensure an environmentally sustainable way of providing appropriate care and reducing waste. <sup>27</sup>
<b>Health care</b>	'Health care' when referring to a noun (for example, 'the state of health care in Australia').
<b>Healthcare</b>	'Healthcare' when referring to an adjective (for example, the 'healthcare system' or 'healthcare services').
<b>Healthcare provider/ health practitioner/ clinician</b>	Trained individuals who are involved in the provision of health care in a primary and/or community healthcare setting. Healthcare providers may also be referred to as health practitioners, clinicians or by a profession-specific description, for example 'pharmacist', 'dental practitioner' or 'physiotherapist'. <sup>17</sup>
<b>Healthcare service</b>	Primary and community healthcare services, as well as other services involved in the delivery of health care to patients and consumers. Healthcare services are delivered in a wide range of settings and vary in size and organisational structure. These range from owner-operated services, where a single healthcare provider is also responsible for administrative and management operations, to complex organisations comprising of many healthcare providers, a supporting workforce, management and an overarching governing body. <sup>17</sup>
<b>Interprofessional collaborative practice (IPCP)/ Interprofessional collaboration/ collaborative practice</b>	Refers to health care practice where multiple health workers from different professional backgrounds work together, with patients, families, carers and communities to deliver the highest quality of care that is free of racism and other forms of discrimination. <sup>28</sup>
<b>Near miss</b>	Any situation where wrong or incomplete medicine, medicinal device or one which was incorrectly labelled which may or may not have caused harm to a patient, would have been given to the patient if an intervention had not been made. <sup>32</sup>

Term	Meaning
<b>Medicines</b>	<p>Therapeutic goods that are represented to achieve, or are likely to achieve, their principal intended action by pharmacological, chemical, immunological, or metabolic means in or on the body of a human.</p> <p>The term ‘medicines’ or ‘medicine’ includes all classes or types of medicines including:</p> <ul style="list-style-type: none"> <li>• scheduled medicines (e.g. controlled drugs, prescription-only medicines, pharmacist only medicines, pharmacy-only medicines)</li> <li>• unscheduled medicines (such as medicines on open sale [e.g. small packets of analgesics], and complementary medicines, also called natural and alternative medicines)</li> </ul> <p>In this document, biological agents commonly viewed as medicines are included in this definition. These may include hormones (e.g. insulin), proteins (e.g. interferons, interleukins), antibodies (e.g. monoclonal antibodies) and polypeptides.<sup>33</sup></p>
<b>Quality use of medicines (QUM)</b>	<p>A process that involves:</p> <ol style="list-style-type: none"> <li>a. Selecting management options wisely (considering the place of medicines in treating illness and maintaining health, recognising that there may be better ways than medicines to manage many disorders);</li> <li>b. Choosing suitable medicines if a medicine is considered necessary (considering the individual, the clinical condition, risks and benefits, dosage and length of treatment, any co-existing conditions, other therapies, monitoring considerations, costs for the individual, the community and the health system as a whole) and</li> <li>c. Using medicines safely and effectively (monitoring outcomes, minimising misuse, over-use and under-use, improving people’s ability to solve problems related to medication, such as negative effects or managing multiple medications).</li> </ol>
<b>Patient</b>	<p>Refer to a person or group receiving healthcare services and the term ‘consumer’ to refer to a person who has used or may use a healthcare service, or a consumer representative or advocate. The term ‘patient’ encompasses all other relevant terms that may be used in primary and community health care including ‘client’, ‘person’, and ‘people with lived experience of specific areas of ill health’.<sup>14</sup></p> <p>The term ‘patient’ is used when the source information (e.g. research study, standard) has employed this term.</p>
<b>Prescribing</b>	<p>An iterative process involving the steps of information gathering, clinical decision making, communication and evaluation which results in the initiation, continuation or cessation of a medicine.</p>
<b>Scope of practice</b>	<p>A time sensitive, dynamic aspect of practice which indicates those professional activities that a pharmacist is educated, competent and authorised to perform and for which they are accountable.</p>

Term	Meaning
<b>Systems</b>	A system includes the resources, policies, processes and procedures that are organised, integrated, regulated and administered to accomplish a stated goal. Safety and quality systems will vary depending on the size of the healthcare service and the risks associated with the services being delivered.
<b>Treatment Plans</b>	Treatment plans involve the management of a person's health condition(s), this may include the use of medicines and non-pharmacological therapies.
<b>Treatment history</b>	Treatment history should include the details of both medicines and relevant non-pharmacological therapies and an indication of their effectiveness, ineffectiveness, any harm and the person's adherence.

draft version 0.5

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