



# Review of the Accreditation Standards for Pharmacist Prescriber Education Programs

Preliminary Consultation Feedback Report

18 June 2026

## Acknowledgement of Country

We gratefully acknowledge the Ngunnawal people, the traditional owners of the land on which the APC is based. We pay our respects to the Ngunnawal people and recognise their deep connection to this incredible place we now share. We also pay our respects to the resilience, strength and wisdom of Aboriginal and Torres Strait Islander Elders, past and present across the nation.

We recognise First Nations people's vast knowledge in native plants and their uses. Indigenous Australians were our first pharmacists. Country has provided medicines and healing throughout history. We acknowledge this important connection to Country and the impacts colonisation continues to have on this integral practice.

Canberra means meeting place in Ngunnawal, and is a place where people have been meeting, living and learning for thousands of years. We hope to continue this tradition as we work toward our vision of collaborative, committed and safe pharmacy practice.

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## Preliminary Consultation Feedback Report

The Australian Pharmacy Council (APC) would like to express our sincere thanks to the individuals, groups and organisations who provided feedback during the preliminary consultation phase of the review of the Accreditation Standards for Pharmacist Prescriber Education Programs (the Standards). We appreciate and value your input which will play a vital role in refining and strengthening the draft Standards to ensure it meets the needs of the profession.

This report outlines the review process of the Accreditation Standards for Pharmacist Prescriber Education Programs (the Standards) and summarises the consultation and engagement activities undertaken during the preliminary consultation to inform the draft Standards. It also presents the thematic analysis of the feedback from the consultations on the draft Standards and how these have informed the revision of the draft.

### Background

At the Health Ministers' Meeting held in June 2025, Ministers noted that the jurisdictional expansion of community pharmacist's scope of practice was at differing stages and approaches, and that there were risks associated with states and territories progressing these trials independently. Following the outcomes of the meeting, the Pharmacy Board of Australia (the Board) began its work in September 2025 to progress an endorsement for scheduled medicines for pharmacists, with the intent to support a consistent, safe, and nationally coordinated approach to pharmacist prescribing.

To support this work, the APC is undertaking a [review of the Accreditation Standards for Pharmacist Prescriber Programs](#) (the Standards) as requested by Health Ministers through the Board.

In April 2026, the Board commenced [public consultation on a draft Endorsement](#) for scheduled medicines for pharmacists. The Board's consultation documents include:<sup>1</sup>

- i. draft Registration standard: Endorsement for scheduled medicines
- ii. draft Guidelines: Endorsement for scheduled medicines

The final scope of the endorsement will inform the review of the Standards.

APC's accreditation standards and processes are critical for ensuring pharmacists are equipped with the education and competencies required to safely and effectively prescribe medicines under evolving legislative frameworks. National consistency in pharmacist prescribing will be underpinned by our work.

### Project Objective

The goal of this project is to prepare a revised version of the draft Standards which will ensure graduates of accredited pharmacy prescriber education programs are competent and qualified to prescribe medicines according to their scope of practice as authorised under State and Territory poisons medicines legislation.

This project will also align with the Board's request for the revision and support their work in progressing a national endorsement for pharmacist prescribing to help achieve greater consistency across the jurisdictions.

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<sup>1</sup> Pharmacy Board of Australia. Public consultation Endorsement for scheduled medicines for pharmacists. [\[Internet\]](#) 2026. Accessed April 21, 2026.

## What we have done so far

There are six stages to the review of the Standards:

1. Project initiation
2. Literature Review and Preliminary consultation preparation
3. Preliminary consultation
4. Public consultation
5. Reviewing the draft Framework
6. Finalisation and approval

The first three stages of the process have now been completed. The draft Standards has been refined through the preliminary consultation feedback and prepared for the public consultation.

## Consultation Approach

The consultation approach for the revision of the Standards aligns with Ahpra's [Procedures for the development of accreditation standards](#) and [Consultation process of National Boards](#) as follows:



Figure 1 Ahpra & National Boards - [Consultation process of National Boards](#)

In line with Ahpra's consultation processes, APC offers a range of opportunities for stakeholders, the public and the profession to provide input into the development of the Standards is offered. Feedback and input from stakeholders are being gathered through:

- one-on-one meetings
- targeted stakeholder meetings
- written submissions via email
- online Survey form

## Consultation Documents

The first part of our consultation process was supported by the following documents:

- Preliminary Consultation paper (including consultation questions, Statement of Health Impact and Statement of assessment against Ahpra's Principles – Accreditation Standards)
- Literature review and environmental scan
- Draft of the Accreditation Standards for Pharmacist Prescriber Programs
- Summary of proposed changes to the Pharmacist Prescriber Standards

## How feedback was gathered

During the preliminary consultation period, feedback was gathered through a range of targeted engagement methods to ensure meaningful input from key stakeholders. The following outlines the methods used to gather feedback from stakeholders.

### Surveys

A pre-consultation survey was conducted in preparation for the review of the Standards, seeking high-level feedback from those who engage with the Standards, including education providers, assessors and other stakeholders. The survey helped us understand how the current Standards were being used in practice, what was working well, and understand what the challenges are.

## Pharmacy Board of Australia's Forum

As part of the Board's work in establishing an endorsement for scheduled medicines for pharmacists, the Board held a forum in October 2025 to gather feedback from stakeholders. Feedback on the draft Standards was also sought. A follow-up consultation survey was also sent to the attendees. APC has considered all feedback received during the discussions and via the follow-up survey.

### One-on-one meetings

To ensure that the Standards are contemporary and relevant to the practice, a series of meetings with targeted stakeholders were undertaken during this preliminary consultation period. These meetings were held with selected organisations and representatives from teams working on pharmacist scope expansion from each state and territory.

### Written submission

Key stakeholders were asked to submit their feedback via the organised meetings or by sending their responses to the consultation questions through email, which are described in the tables in Consultation Outcomes section.

## Consultation Outcomes

Several consultation methods were undertaken to ensure feedback was gathered from key stakeholders. During the preliminary consultation robust engagement and interest was noted across the consultation methods with the following table summarising the number of attendees or responses to the respective engagement method.

| Type of engagement                | Number of responses/attendees/meetings |
|-----------------------------------|--|
| Surveys                           | 23                                     |
| Pharmacy Board of Australia Forum | 87                                     |
| One-on-one meetings               | 11                                     |
| Written submissions               | 6                                      |

## Evaluation of Responses

This section of the report summarises the qualitative feedback received during the preliminary consultation and is broken down into their respective consultation method.

The initial surveys and discussions from the Forum provided a clear direction for the subsequent stages of the preliminary consultation. The following table includes the focus areas that were identified in the feedback received from the surveys and forum and summary of that feedback. The feedback informed the next stages of the preliminary consultation.

| Focus Areas            | Summary of feedback  |
|------------------------|--|
| Clinical capabilities  | Strong feedback identified that clinical capabilities in the Standards could be further strengthened and emphasised                                      |
| Education and training | There was overwhelming support for the Standards to be aligned with the latest <a href="#">National Prescribing Competencies Framework (3rd edition)</a> |

|   |  |
|---|--|
|   | Just over half (55%) of the respondents supported prescribing training being included in the entry-to-practice training  |
| Develop new Performance Outcomes or use the National Prescribing Competencies Framework 3rd edition | General consensus was in support of replacing the Performance Outcomes with the current edition of the National Prescribing Competencies Framework. This will also align pharmacy with other prescribers |
| Expected minimum level of training/qualification  | Respondents expressed varying opinions on the expected minimum level of training/qualification pharmacists should obtain in order to be able to enrol in prescribing training                            |

In line with the feedback received from the surveys and discussions, the draft Standards and consultation materials were further refined for the one-on-one meetings with the Department of Health and Aged Care, State and territory health departments, jurisdictional pharmacy leadership and medical peak bodies seeking feedback in specific areas of the draft Standards.

The following summarises the feedback received in response to the consultation questions via the one-on-one meetings or through a separate written submission.

For this part of the consultation 219 pieces of feedback were received, analysed and categorised. All feedback was carefully grouped to the relevant preliminary consultation questions allowing for a detailed understanding of themes, gaps and recommendations raised by the stakeholders. Feedback was categorised thematically and analysed, resulting in five key themes:

- Content and terminology
- Prescribing scope of practice
- Program requirements
- General and structure
- Implementation

The table below describes the distribution of feedback across the five key themes, as well as providing data on the actions taken by APC. Some feedback resulted in changes to the draft Standards, and others were 'for noting'.

| Feedback received   Total = 219 |       |            |
|---------------------------------|-------|------------|
| Actioned   36% Noted   64%      |       |            |
| Theme                           | Total | Percentage |
| Content and terminology         | 73    | 37%        |
| Prescribing scope of practice   | 23    | 11%        |
| Program requirements            | 47    | 23%        |
| General and structure           | 25    | 12%        |
| Implementation                  | 35    | 17%        |

## Feedback in response to consultation questions

The following tables summarise the responses to the draft Standards received during the preliminary consultation phase. They are grouped according to each of the relevant consultation questions.

The tables also describe 'what APC did in response to the feedback received' and how that has influenced the revised version of the draft Framework for public consultation.

| <b>Question 1</b><br>Is the content and structure of the proposed draft revised standards clear and relevant?<br>a. Y/N - if no, could you provide suggestions for improvement? |   |
|---|---|
| Comments  | What APC did in response to feedback received   |
| General consensus is that the draft revised standards are clear and relevant.   | APC acknowledges the positive feedback, noting no specific action required.   |
| Feedback supports the alignment with the National Prescribing Competency Framework as this provides a cohesive structure across prescribing professions.                        | APC acknowledges the general consensus in favour of aligning the Standards with the current National Prescribing Competencies Framework.<br>APC will retire the Performance Outcomes. |

| <b>Question 2</b><br>Are there any concepts missing from the proposed draft revised standards that should be included?<br>a. Y/N - if no, could you provide suggestions for improvement?   |  |
|--|--|
| Comments   | What APC did in response to feedback received  |
| Feedback acknowledged and highlighted the importance of strengthening key clinical capabilities given their fundamental importance to safe and effective pharmacist prescribing practices emphasising the following areas: <ul style="list-style-type: none"> <li>clinical reasoning and decision-making</li> <li>clinical escalating and safety netting</li> <li>comprehensive patient records</li> </ul> | APC has developed the Learning Domains for Pharmacist Prescriber Education Programs document, with the intent of being used together with the National Prescribing Competency Framework in the development and review of degree program curriculum.<br><br>APC has also revised the Standards and enhanced the information in the evidence guide relevant to criterion 5.8.  |
| Feedback raised concerns regarding potential ambiguity regarding the scope of pharmacist prescribing practice.   | The Pharmacy Board's draft endorsement for scheduled medicines requires pharmacists to document their scope of prescribing practice and does not limited scope of setting this occurs. This expectation is also reflected in the Standards in Criterion 1.1.<br><br>In addition, criterion 3.5 emphasises that programs must ensure relevance to the learner's scope of prescribing practice as well as embedding an understanding of contemporary pharmacists prescribing settings.<br><br>Learning domains are intended to support the development of prescribing capabilities. Pharmacists are expected to only prescribe within their individual scope of practice, informed by their education, training, competence, clinical experience and the regulatory requirements of the jurisdiction in which they practise. |
| Consideration should be given to the role of Artificial Intelligence (AI) and other digital-support tools in contemporary prescribing.   | The Learning Domain 5 within the Learning Domains for Pharmacist Prescriber Education Programs document includes concepts regarding AI.  |

|   |   |
|---|---|
| Public Health was highlighted as an important concept that could be strengthened in the Standards.  | APC has included in Learning Domain 5 concepts about public health, particular with regards to preventing disease and promoting health lifestyle.   |
| <p>Comments and recommendations on strengthening the following concepts within the Standards:</p> <ul style="list-style-type: none"> <li>• Interprofessional collaboration and communication pathway</li> <li>• System-thinking including continuity of care</li> </ul> | <p>APC has revised the Standards and has strengthened Criterion 3.4, and its relevant evidence guide to emphasise on the identified concepts.</p> <p>These concepts have also been included in Learning Domain 5.</p> |

### Question 3

Do the draft revised standards support the delivery of suitable training for pharmacists to be able to prescribe under legislation in your jurisdiction?

| Comments  | What APC did in response to feedback received                               |
|---|---|
| The different jurisdictions agree that the revised standards support the delivery of suitable training for pharmacists.   | APC acknowledges the positive feedback, noting no specific action required. |
| However, there are significant concerns regarding whether the proposed training model can reliably deliver competencies in diagnostic reasoning and management of undifferentiated presentations. | APC has included in Learning Domain 5.                                      |

### Question 4

Criterion 2.1 specifies the requirements of education providers who deliver prescribing training and refers to allowing TEQSA (university) or ASQA (RTO) registered organisations. Does this align with your expectations for program design and delivery?

| Comments  | What APC did in response to feedback received   |
|---|---|
| There was conflicting feedback regarding prescribing training being delivered by an organisation registered with ASQA. Some supported allowing AQSA-registered providers to deliver prescribing training, while others considered the requirements for facilities and resources needed to support the development of clinical skills for prescribers, are more aligned with TEQSA registration. | <p>APC has considered this feedback and has removed reference to AQSA registration to ensure national consistency and quality across the programs.</p> <p>One of the questions that will be asked in the public consultation is regarding stakeholders' expectations for pharmacists prescribing program design and delivery.</p>   |
| Expected minimum level of training and qualifications was discussed at length in meetings and the written submissions. Most jurisdictions agreed with the minimum being Australian Qualification Framework (AQF) level 8.   | <p>The Standards specify that the programs are required to meet a minimum AQF level of 8 or above.</p> <p>In addition, APC has now included specific minimum requirements in Criterion 4.1 which specifies that admission is limited to pharmacists who hold general registration.</p> <p>APC acknowledges that feedback received on the proposal to set the minimum training level at AQF level 8 was widely accepted. One response indicated a preference that the minimum training level be raised to AQF level 9.</p> |

### Question 5

Would the draft Standards result in any potential negative or unintended consequences for Aboriginal and/or Torres Strait Islander Peoples?

| Comments   | What APC did in response to feedback received   |
|--|---|
| The feedback and discussions did not identify particular concern regarding the Standard's potential negative or unintended consequences for Aboriginal and/or Torres Strait Islander Peoples.  | APC acknowledges the positive feedback, noting no specific action required.   |
| Most supported and agreed that the Standards emphasised the importance of cultural safety and noted that any implementation of pharmacist prescribing services must ensure equitable access for Aboriginal and Torres Strait Islander Peoples. | APC acknowledges this feedback and will ensure ongoing and direct consultation in the development of transition and implementation plans. |

### Question 6

Are there any other regulatory impacts of the Standards that we should be aware of?

| Comments  | What APC actioned   |
|---|---|
| National portability of pharmacist prescriber qualifications across different practice settings and jurisdictions was raised. | The draft Standards are being revised to support the prescribing endorsement that is being progressed by the Pharmacy Board. APC acknowledges the nuances in what prescribing pharmacists are <i>permitted</i> (or authorised) to do in different jurisdictions, and what the workplace expects and allows. |
| The feedback received did not identify further regulatory impacts of the Standards.   | APC acknowledges the positive feedback, noting no specific action required.   |

### Question 7

Are there any implementation issues the Board should be aware of for the final Standards?

| Comments  | What APC actioned   |
|---|---|
| Questions were asked regarding the eligibility of pharmacists who have completed pharmacist prescriber training programs accredited against the 2023 standards prior to the Pharmacy Board establishing an endorsement pathway. Stakeholders were seeking clarity on training and registration requirements moving forward. | APC has noted the feedback and that the Pharmacy Board will confirm transition arrangements as part of the implementation of a future endorsement model. APC will provide advice to the Pharmacy Board on transition to the revised Accreditation Standards for programs that are currently accredited against the 2023 Standards.  |
| Management of conflict of interest in having the same pharmacist prescribe and dispense a script.   | APC has incorporated the management of conflict of interest into these Standards as a necessary step to reflect the role of pharmacists in Australia's healthcare system, ensuring that prescriber pharmacists have the competencies to identify, disclose and manage conflict of interest, ensuring the safety of the public and reinforcing safe and effective prescribing. |

## The Next Steps

The next step in the Standards development process is gathering feedback on the revised version of the draft Standards from a wider audience including pharmacists, health professionals, consumers, and interested parties to ensure it is clear, contemporary, and fit for purpose.

APC has will release the revised draft and the public consultation materials in June. An online form for written submissions will be open from **22 June to 3 August 2026**.

APC will consider all feedback received from the public consultation in the preparation of the draft Standards. The final draft will then be presented to the Board for their approval.

## Need more information

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