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# Accreditation Standards for Pharmacist Prescriber education programs

Draft Accreditation Standards

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## Abbreviations

Abbreviation	Meaning
Ahpra	Australian Health Practitioner Regulation Agency
APC	Australian Pharmacy Council
CPD	Continuing Professional Development
NRAS	National Registration and Accreditation Scheme
PharmBA	Pharmacy Board of Australia
RPL	Recognition of Prior Learning
WIL	Work-integrated Learning
WBA	Workplace Based Assessment

## Glossary

Term	Definition
Accreditation	Evaluation of a program against defined standards that ensures that the education and training is rigorous and prepares individuals to practise safely.
Accredited	A training program that has been assessed by the authorised organisation as meeting the relevant Accreditation Standards. It is not a self-assessment.
Assessment	Gathering evidence to determine a learner knows, understands, and can do the role. Comprehensive assessment approaches include a combination of formal and informal assessment (formative, interim, and summative).
Collaborative practice	Collaborative practice happens when multiple health workers from different professional backgrounds work together with patients, families, carers and communities to deliver the highest quality of care. <sup>1</sup>
Consumer	A person who has used, currently uses, or will use health care services. This includes the person's family and carers.

<sup>1</sup> World Health Organization. Framework for Action on Interprofessional Education & Collaborative Practice. 2010. [Accessed 31 August 2023]. Available from: <https://www.who.int/publications/i/item/framework-for-action-on-interprofessional-education-collaborative-practice>

Cultural safety	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>2</sup>
Graduate	A learner who has successfully completed the training program.
Interprofessional education, Interprofessional learning	Interprofessional education occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes <sup>3</sup> .
Learner	A person who has enrolled in the program.
Performance outcomes (framework)	Complement the Accreditation Standards and provide observable and measurable statements of the performance to be achieved and demonstrated by graduates of a program.
Primary supervisor	A registered health professional with current prescribing qualifications and experience relevant to the learner's scope of practice who formally agrees to supervise and provide mentorship to a learner.
Program provider	The unit within the provider organisation that is responsible for delivering the program.
Provider organisation	The organisation providing the education program.
Supervisor	A registered health professional who works as a member of a healthcare team and provides work-based supervision to the learner.
Work-integrated Learning (WIL)	Work integrated learning (WIL) describes a range of approaches that integrate theory with practice, usually encompassing opportunities for learners to undertake experiences in a workplace.

<sup>2</sup> Ahpra. Aboriginal and Torres Strait Islander Health Strategy. Definition of Cultural Safety for the National Scheme. 2023. [Accessed 30 August 2023] Available from: <https://www.ahpra.gov.au/About-Ahpra/Aboriginal-and-Torres-Strait-Islander-Health-Strategy.aspx#:~:text=Cultural%20safety%20definition&text=Provision%20of%20a%20rights%2Dbased,to%20learning%2C%20education%20and%20training>

<sup>3</sup> World Health Organization. Framework for Action on Interprofessional Education & Collaborative Practice (2010). [Accessed 30 August 2023]. Available from: <https://www.who.int/publications/i/item/framework-for-action-on-interprofessional-education-collaborative-practice>

# Preamble

## Pharmacy regulation

In Australia, the pharmacy profession is regulated by the Pharmacy Board of Australia (PharmBA) under the National Registration and Accreditation Scheme (the National Scheme, 2010), created under the Health Practitioner Regulation National Law Act (the National Law, 2009) and enacted in all states and territories.

The objectives of the National Scheme are to:

- provide for the protection of the public by ensuring that only health practitioners who are suitably trained and qualified to practise in a competent and ethical manner are registered
- facilitate workplace mobility across Australia by reducing the administrative burden for health practitioners wishing to move between participating jurisdictions or to practise in more than one participating jurisdiction
- facilitate the provision of high-quality education and training of health practitioners
- to build the capacity of the Australian health workforce to provide culturally safe health services to Aboriginal and Torres Strait Islander Peoples
- facilitate the rigorous and responsive assessment of overseas-trained health practitioners
- facilitate access to services provided by health practitioners in accordance with public interest
- enable the continuous development of a flexible, responsive and sustainable Australian health workforce and to enable innovation in the education of, and service delivery by, health practitioners<sup>4</sup>.

Pharmacists must be registered with the PharmBA in order to practise in Australia.

## The role of the Australian Pharmacy Council

The Australian Pharmacy Council (APC) has been appointed by the Pharmacy Board of Australia under the National Law as the independent accreditation authority for pharmacy within the National Scheme.

The accreditation functions of APC are undertaken by the Accreditation Committee (AC) under delegation from the APC Board and include the development of accreditation standards for pharmacy programs, the accreditation of pharmacy degree and intern training programs in accordance with the provisions in the National Law and accrediting organisations to accredit continuing professional development (CPD) activities delivered to pharmacists.

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<sup>4</sup> Ahpra (2014). Procedures for the development of accreditation standards. Accessed 6-Oct-22 at <https://www.ahpra.gov.au/Publications/Procedures.aspx>

## Development of new accreditation standards

The National Scheme is administered by the Australian Health Practitioner Regulation Agency (Ahpra) which is responsible for its implementation across Australia. Ahpra has established procedures for the development and review of accreditation standards and require that proposals for new accreditation standards must:

- take into account the objectives and guiding principles of the National Law
- meet the consultation requirements of the National Law
- take account of relevant international standards and statements relating to education and training in the profession, and the accreditation standards applied in countries with comparable education and practice standards for the profession
- take into account the Council of Australian Governments Principles for Best Practice Regulation<sup>5</sup>.

## Development of accreditation standards for pharmacist prescriber education programs

The pharmacist role in medicines management and safety continually evolves to meet the needs of the public and includes prescribing.

The NPS MedicineWise Prescribing Competency Framework 2nd Edition defines prescribing for all prescribers in Australia as:

*“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<sup>6</sup>.”*

Should an emerging role require education and training that supports broader prescribing by pharmacists than currently authorised in states and territory medicines legislation the PharmBA will require appropriate standards for the accreditation of education and training programs. These standards may be included in a proposal to the Ministerial Council to support the development of an endorsement for scheduled medicines for pharmacists.

The PharmBA has requested APC develop accreditation standards for pharmacist prescriber education programs. In undertaking this role, APC has produced standards that will ensure graduates from an accredited program:

- meet the competencies in the NPS MedicineWise Prescribing Competency Framework (2<sup>nd</sup> Edition) which describes the practice expectations of Australian prescribers regardless of profession
- are competent and qualified to prescribe medicines according to their scope of practice as authorised under state and territory medicines and poisons legislation
- are ethical, safe practitioners for the benefit and well-being of the public they serve

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<sup>5</sup> COAG (2007). Best Practice Regulation: A guide for ministerial councils and national standard setting bodies. Accessed 6-Oct-22 at <https://www.pmc.gov.au/resource-centre/regulation/best-practice-regulation-guide-ministerial-councils-and-national-standard-setting-bodies>

<sup>6</sup> This definition of prescribing may be different to the definition of prescribing provided in the legislation governing the use of medicines in each state and territory

- are flexible, adaptable and responsive to the evolving needs of individuals and communities and fully comprehend their role as prescribers within that changing environment.

## Scope of practice for pharmacist prescribers

A pharmacist's scope of practice is defined as '*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.*'<sup>7</sup>

This definition highlights that a pharmacist's scope of practice comprises:

- Competence – based on education, training and professional experiences,
- Authority – defined by federal and state/territory legislation and regulation and local systems and policies, and
- Accountability – articulated in applicable professional practice standards and competencies.

The scope of prescribing practice must be applied to the prescribing context and will be influenced by factors such as the practice setting, service delivery model, the contribution of other health practitioners working in the multidisciplinary team, and the specific preferences and needs of the consumer.

Demonstration of prescribing performance for pharmacist learners should occur in the context of the prescriber's practice scope.

As the definition describes, a pharmacist's scope of practice changes with time. This is an important consideration that is relevant to all areas of practice, including prescribing.

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<sup>7</sup> Pharmaceutical Society of Australia. National Competency Standards Framework for Pharmacists in Australia. Canberra. 2016. Available from: <https://my.psa.org.au/s/article/2016-Competency-Framework>

## Notes regarding this draft

This is the first draft of the Accreditation Standards that has been informed through our first round of consultation. Feedback was received from 179 respondents via various mechanisms. The consolidated feedback report has been published on our website and can be found [here](#).

The Standards are aligned with our *Accreditation Standards for Pharmacy Programs* which is consistent with accreditation standards for programs across the regulated health professions.

- (a) Throughout the draft, the following changes have been made:
  - 'student' has been changed to 'learner' to reflect the existing qualifications of the learner, given that early cohorts may be registered pharmacists.
  - 'unit delivering the program' has been changed to 'program provider'
- (b) Standard statements have been amended to specifically reflect prescribing practice, while attempting to maintain alignment with the entry level standards.
- (c) Where the draft standards depart from those developed for [entry level pharmacy programs](#), the changes have been noted in the table below and indicated as either:
  - *Updated* to reflect the focus on prescribing practice
  - *New* criteria specific to pharmacist prescriber education programs.

The Standards highlight the importance of supervised practical experience and experiential learning to the development of safe, effective prescribing skills. It is acknowledged that the role of the supervisor is crucial to successful outcomes and that clear responsibilities and robust relationships between the supervisor, learner and program provider will be required to support this. APC also recognises that, at times, supervision may be delegated to other members of the healthcare team. As such, the term 'primary supervisor' is used to describe the prescriber responsible for co-ordinating and overseeing learner supervision and the provision of effective mentorship to support their learning, while recognising the valuable contribution of other members of the healthcare team.



## Draft Accreditation Standards for Pharmacist Prescriber Education Programs

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 1 Safe and socially accountable practice</b>		
The program develops pharmacist prescribers who are competent to prescribe safely with a socially responsible, person-centred approach to practice.	1.1 The program is underpinned by the principles of cultural safety, respect and responsiveness; equity, diversity and inclusiveness; person-centred care; reduction of disparities in healthcare; addressing community aspirations for health and a commitment to public service and safety.	<b>Updated</b> Program “is underpinned by the principles of...” compared to “promotes the development of knowledge, skills...”. This change reflects the fact that learners will be registered pharmacists who will have these skills.
	1.2 Effective fitness-to-practice monitoring and management processes are implemented in relation to learners which promote and protect the safety of the public at all times.	<b>Unchanged</b>
	1.3 All learners have demonstrated relevant pre-requisite knowledge, skills, behaviours and attitudes before undertaking supervised work-integrated learning (WIL) as a component of the program.	<b>Updated</b> Criteria amended to specifically address the need for demonstrated competence prior to undertaking work-integrated learning (WIL), as opposed to before interacting with the public.  Program providers will be expected to explain the specific requirements (knowledge, skills, behaviours and attitudes) learners must demonstrate prior to undertaking WIL and how competence will be demonstrated.
	1.4 All teaching staff, supervisors and learners are held accountable to endorsed standards of professional and ethical practice and conduct at all times, including during WIL.	<b>Updated</b> Inclusion of supervisors in the criteria and specific mention of the need to remain accountable at all times, including during WIL.
	1.5 Program graduates have demonstrated an understanding of their legal, ethical and professional responsibilities in relation to prescribing.	<b>Updated</b> Recognising that learners may be registered pharmacists; the criteria has been amended to:

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 1 Safe and socially accountable practice</b>		
		<p>(a) Clarify that the understanding of legal, ethical and professional responsibilities is in relation to prescribing practice and</p> <p>(b) Remove reference to the following, which form part of expected pharmacist practice: <i>“awareness of relevant processes for managing concerns in relation to their practice and/or the practice of others, and recognition of mechanisms for familiarising themselves with changes in requirements.”</i></p>
	<p>1.6 The program includes sufficient high quality, supervised WIL in relevant settings to facilitate learners to consolidate prescribing competencies and demonstrate performance outcomes.</p>	<p><b>Updated</b></p> <p>The importance of WIL to the development of prescribing skills and knowledge is acknowledged. However, as registered health professionals, WIL will likely occur in the pharmacist’s workplace. As such it will include interaction with patients appropriate to the pharmacist prescriber’s intended area of prescribing practice, rather than exposure to a ‘diverse range of patients.’</p>
	<p>1.7 The program includes processes to support effective relationships between the program provider and the WIL site to ensure that sites supporting supervised WIL agree to, and comply with, all requirements regarding procedures, role of the primary supervisor, and learner supervision.</p>	<p><b>Updated</b></p> <p>As noted above in criteria 1.6, the practice environment in which WIL is undertaken will not be assigned to the learner but will most commonly be the pharmacist’s workplace. Agreements between the workplace and education provider <b>are required</b>, to ensure the quality of the supervision and the importance of both the primary supervisor and learner understanding their roles in the training process.</p>
	<p>1.8 Effective processes are in place to ensure that the program provider complies with all obligations under the Health Practitioner Regulation National Law Act, Pharmacy Board of Australia and relevant national and state/territory frameworks.</p>	<p><b>Updated</b></p> <p>Requirement to comply with requirements under the National Law, Pharmacy Board and relevant national / state / territory frameworks (entry level standards phrased as ‘and/or’).</p>

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 2 Governance and quality</b>		
Effective governance structures and quality assurance systems support the delivery of sustainable, high quality pharmacist prescriber education and training.	2.1 The program is delivered by a clearly identifiable operational unit (the program provider) within the provider organisation. The program provider operates with appropriate autonomy, authority and responsibility for designing, implementing, evaluating and resourcing the program.	<b>Updated</b> Removal of reference to intern training provider (ITP) as not relevant. Removal of reference to Higher Education Institution or Registered Training Organisation.
	2.2 The program provider is registered with either the Tertiary Education Quality and Standards Agency (TEQSA) (HEIs) or Australian Skills Quality Authority (ASQA) (RTOs).	<b>Unchanged</b>
	2.3 The program is an Australian Qualifications Framework (AQF) Level 8 program of study.	<b>New criteria</b> Provides guidance to education providers regarding the intended level of learning.
	2.4 Governance structures and processes within the provider organisation direct and support the design, implementation, evaluation and quality improvement at the program level and ensure that graduates are able to demonstrate the performance outcomes.	<b>Unchanged</b>
	2.5 The maintenance, assurance and improvement of program quality is facilitated by effective relationships and accountability between the program provider and the provider organisation.	<b>Unchanged</b>
	2.6 The program provider has a designated leader with relevant experience and expertise who is responsible for ensuring the effective provision of professional and academic leadership, engagement and advocacy for the program provider and the profession within and beyond the provider organisation.	<b>Updated</b> Removal of the requirement for pharmacy-specific experience and expertise.

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 2 Governance and quality</b>		
	2.7 There are clearly defined, robust, transparent and effective mechanisms by which the designated leader secures and is accountable for the financial and other resources necessary to ensure the sustainable operation of the program.	<b>Unchanged</b>
	2.8 The program provider operates under a clearly defined strategic plan which is aligned with that of the provider organisation, congruent with the vision, purpose and goals of the program provider, and systematically reviewed and updated to ensure fitness-for-purpose and currency with contemporary prescribing practice.	<b>Updated</b> Focus on prescribing practice.
	2.9 Risks to the sustainable delivery of the program are regularly monitored and evaluated, and appropriate mitigation strategies are clearly documented.	<b>Unchanged</b>

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Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 3 Program</b>		
Program design, implementation and resourcing enable graduates of the program to demonstrate achievement of all prescribing performance outcomes	3.1 The program is underpinned by a coherent, contemporary, and clearly articulated educational philosophy and/or learning and teaching strategy, which is clearly reflected and articulated in the program goals/objectives, curriculum, learning and teaching approaches, and assessment methodology.	<b>Unchanged</b>
	3.2 Program design, content, delivery and assessment reflect contemporary evidence-based prescribing practice and are designed to facilitate achievement and demonstration by learners of the performance outcomes. Emerging developments relevant to prescribing are incorporated into the program (including WIL) in a timely manner to ensure that the program remains fit-for-purpose.	<b>Updated</b> <ul style="list-style-type: none"> <li>(a) Focus on prescribing practice</li> <li>(b) Removal of reference to the pace of learning</li> <li>(c) Removal of reference to emerging scopes of practice.</li> </ul>
	3.3 Program planning, design, implementation, evaluation, review and quality improvement processes are carried out in a systematic and inclusive manner, involving input where relevant from staff, learners, graduates, supervisors, health professionals with prescribing expertise, employers, patients and consumers, Aboriginal and Torres Strait Islander peoples, and other key external stakeholders to ensure that the program remains fit-for-purpose. Outcomes from these processes are clearly communicated in a timely manner to stakeholders.	<b>Updated</b> Reference to health professionals with prescribing expertise as contributors to the program planning, design, implementation, evaluation, review and quality improvement processes.
	3.4 Program design, content, delivery and assessment specifically emphasise and promote Aboriginal and Torres Strait Islander cultures, cultural safety and improved health outcomes. Aboriginal and Torres Strait Islander peoples should have direct input into curriculum design and content, and where possible should be involved directly in delivery and assessment.	<b>Unchanged</b>

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 3 Program</b>		
	3.5 Program design, content, delivery and assessment promote an understanding and appreciation of cultural diversity by both staff and learners, and the development of skills that enable the provision of culturally safe, inclusive and responsive person-centred care.	<b>Unchanged</b>
	3.6 Resources including physical facilities, infrastructure, technological capacity and information resources available to learners undertaking the program are current, fit-for-purpose, sufficient for the needs of the learner cohort and systematically reviewed and updated on a regular basis.	<b>Unchanged</b>
	3.7 The program provider maintains a leadership and staff complement which is demonstrably sufficient for the needs of the program, appropriately qualified and experienced, sustainably resourced and supported, and provided with regular opportunities for relevant professional review and development.	<b>Unchanged</b>
	3.8 The program provides sufficient opportunities for all learners to engage in interprofessional learning and practice (in real and/or simulated environments) to enable graduates to achieve the required performance outcomes including the provision of person-centred care, as a collaborative member of an interprofessional team.	<b>Updated</b> Highlighting the specific relevance of person-centred, collaborative practice in the context of prescribing, as detailed in the performance outcomes framework.
	3.9 The unit delivering the program operates in an environment informed by contemporary scholarship, research and enquiry.	<b>Updated</b> Highlighting that prescribing programs should operate in an environment informed by contemporary evidence and are not expected to develop learners research skills.

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 4 Learner Experience</b>		
Learners are supported to complete their training	4.1 Selection policies and criteria for entry to the program are transparent, equitable, and applied fairly and consistently to ensure that applicants are not subject to unfair/unlawful discrimination.	<b>Unchanged</b>
	4.2 Program information, including selection policies, criteria and processes, program structure, inherent requirements, recognition of prior learning (RPL) processes, experiential and WIL requirements, PharmBA requirements, current accreditation status and any other relevant information is accurate, accessible and comprehensive to ensure that potential applicants are given sufficient guidance to make an informed decision.	<b>Updated</b> <ul style="list-style-type: none"> <li>(a) Inclusion of 'Program structure'. Given that learners will commonly be practising pharmacists, clear advice regarding the structure of the program is required to enable an understanding of program commitments.</li> <li>(b) English language proficiency will not be required for registered pharmacists as this is a Board requirement for general registration.</li> </ul> A comprehensive description of RPL requirements will be required.
	4.3 The program provider ensures that learners are able to access relevant resources and support systems that assist learners to achieve the performance outcomes regardless of practice setting.	<b>Updated</b> <p>Removal of 'in a timely manner' due to the expected short duration of programs compared to entry level programs.</p> <p>Addition of 'regardless of practice setting' acknowledging that pharmacists practise in a variety of settings and should be supported to achieve performance outcomes regardless of the practice setting.</p>
	4.4 The program provider ensures that the principles of equity and diversity are embedded in the program to ensure the absence of unfair/unlawful discrimination.	<b>Unchanged</b>
	4.5 The program provider ensures that learners are aware of and able to access effective appeals and grievance processes, and that these	<b>Unchanged</b>

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 4 Learner Experience</b>		
	processes are managed consistently, fairly and with appropriate impartiality and confidentiality to ensure that learners are treated justly.	
	4.6 The program provider identifies and manages all actual, perceived and potential conflicts of interest proactively, consistently and fairly.	<b>Unchanged</b>
	4.7 Learners are actively engaged with governance and program management structures and decision-making processes, through both formal and informal mechanisms.	<b>Unchanged</b>

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Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 5: Outcomes and assessment</b>		
<p>Graduates of the program demonstrate achievement of all required performance outcomes to a standard commensurate with competent, safe, socially accountable prescribing practice</p>	<p>5.1 The program has an assessment strategy that describes the purpose and range of assessments, links assessments to program learning outcomes, and ensures all performance outcomes are assessed in relevant prescribing contexts, including WIL settings.</p>	<p><b>Updated</b> Reflective of prescribing practice and program focus and conduct of assessments in WIL settings.</p>
	<p>5.2 A range of relevant, evidence-informed assessment methods including formative, summative, and workplace based are implemented progressively throughout the program to ensure that the overall assessment system is valid, reliable and provides evidence of learner competence.</p>	<p><b>Updated</b> Reflective of prescribing practice and program focus.</p>
	<p>5.3 The program provider has effective policies and procedural controls in operation for external evaluation or moderation to assure integrity, reliability, fairness and transparency in the assessment of learners, and uses the feedback to develop the program.</p>	<p><b>Unchanged</b></p>
	<p>5.4 All assessments are undertaken fairly and according to clear criteria. The standard of performance expected of learners is explicit and clearly communicated to learners, staff and health professionals involved in the assessment.</p>	<p><b>Updated</b> Reflective of prescribing practice and program focus.</p>
	<p>5.5 Staff and health professionals who assess learners in the academic and WIL environments are suitably qualified, experienced and prepared for the role, provided with appropriate guidance and support and are held accountable for their decisions to ensure that assessment is carried out fairly, impartially and consistently.</p>	<p><b>Unchanged</b></p>
	<p>5.6 Learners are provided with appropriate, timely and sufficient feedback to enable them to improve future performance.</p>	<p><b>Unchanged</b></p>

Standard statement	Criteria	Comparison with accreditation standards for entry level pharmacy programs
<b>Domain 5: Outcomes and assessment</b>		
	5.7 Final comprehensive summative assessment/s of the prescribing process, mapped to the Prescribing Competencies Framework, is/are completed to demonstrate achievement of prescribing performance according to performance outcomes.	<b>New criteria</b>

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