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Accreditation Standards for Pharmacist Prescriber Education Programs

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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.

Australian Pharmacy Council Ltd

(ACN 126629 785)

The Australian Pharmacy Council (APC) is the national accreditation authority for pharmacy education and training. We do this under the National Registration and Accreditation Scheme (NRAS) working with the Pharmacy Board of Australia and Ahpra.

We're an independent, not-for-profit company. Our work protects public health by setting and maintaining high standards of pharmacy education.

We help pharmacists deliver effective health care to meet our community's changing needs. We do this through skills assessments and accreditation of programs and providers.

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Abbreviations

Abbreviation	Meaning
Ahpra	Australian Health Practitioner Regulation Agency
APC	Australian Pharmacy Council
AQF	Australian Qualifications Framework
ASQA	Australian Skills Quality Authority
CPD	Continuing Professional Development
EPA	Entrustable Professional Activity
HEI	Higher education institute
IPE	Interprofessional Education
NRAS	National Registration and Accreditation Scheme
OSCE	Objective Structured Clinical Examination
PharmBA	Pharmacy Board of Australia
QUM	Qualify Use of Medicines
RPL	Recognition of Prior Learning
RTO	Registered Training Organisation
TESQA	Tertiary Education Quality and Standards Agency
WBA	Workplace-based assessment
WIL	Work-integrated learning

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 in healthcare occurs when multiple health workers from different professional backgrounds provide comprehensive services by working together with patients, their families, carers and communities to deliver the highest quality of care. ²
Consumer, Health consumer	A consumer is a person who uses (or may use) a health service, or someone who provides support for a person using a health service. Consumers can be patients, carers, family members or other support people. ³
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. ⁴
Criteria	Specific statements against which the program is to be evaluated, and which are designed to be addressed by an education provider when undergoing accreditation.
Entry criteria	A set of conditions that permits a learner to enrol and commence training.

² World Health Organisation. Framework for Action on Interprofessional Education & Collaborative Practice. 2010. Available from: <https://www.who.int/publications/i/item/framework-for-action-on-interprofessional-education-collaborative-practice>

³ Australian Commission on Safety and Quality in Health Care. Understanding My Healthcare Rights. A guide for consumers. Available from: https://www.safetyandquality.gov.au/sites/default/files/2020-12/11467_acsqhc_consumerguide_a4_web_fa01.pdf

⁴ Ahpra. Definition of cultural safety for the National Scheme. 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>

Term	Definition
Graduate	A learner who has successfully completed the pharmacist prescriber education program
Interprofessional education <i>Also known as interprofessional learning</i>	Refers to educational experiences where learners from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes. ⁵
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.
Prescribing	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. ^{6,7}
Prescribing Competencies Framework	A national prescribing competencies framework which describes prescribing expectations for prescribers in Australia, regardless of profession. ⁷
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 consistent with the defined expectations provided by the education provider.
Program provider	The unit within the provider organisation that is responsible for delivering the program.
Provider organisation	The organisation providing the education program.
Recognition of prior learning (RPL)	Formal acknowledgement of the knowledge, skills, competence, expertise, and capabilities that individuals possess as a result of prior learning that may have occurred through formal, informal or non-formal means, through self-study, work, or other life experiences.

⁵ Ahpra Accreditation Committee. Proposed initial glossary of accreditation terms. Available from: <https://www.ahpra.gov.au/About-Ahpra/Who-We-Are/Agency-Management-Committee/Accreditation-Committee/Past-consultations.aspx>

⁶ Health Workforce Australia. The Health Professionals Prescribing Pathway. Final Report. 2013. Available from: <https://www.aims.org.au/documents/item/400>

⁷ NPS MedicineWise Prescribing. Competencies Framework. Embedding quality use of medicines into practice. Second edition. 2021. Available from: <https://www.nps.org.au/prescribing-competencies-framework>

Term	Definition
Scope of Practice	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. ⁸
Supervisor	A registered health professional who works as a member of a healthcare team and provides work-based supervision to the learner under direction or delegation by the primary supervisor.
Work-integrated Learning (WIL)	A range of approaches that integrate theory with practice, usually encompassing opportunities for learners to undertake experiences in a workplace.

⁸ National Competency Standards Framework for Pharmacists in Australia. 2016. Available from: <https://www.psa.org.au/wp-content/uploads/2018/06/National-Competency-Standards-Framework-for-Pharmacists-in-Australia-2016-PDF-2mb.pdf>

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
- 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 practitioners⁹.

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

Accreditation of pharmacy education programs

The Australian Pharmacy Council (APC) works as part of the *National Registration and Accreditation Scheme* (NRAS or National Scheme), under the *Health Practitioner Regulation National Law Act* (the 'National Law'). We work under assignment of the Pharmacy Board of Australia (PharmBA), the National Board responsible for the regulation of the pharmacy profession in Australia.

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.

⁹ Ahpra (2021). Regulatory principles for the National Scheme. Accessed 12-Oct-23 at [Australian Health Practitioner Regulation Agency - Regulatory principles for the National Scheme \(ahpra.gov.au\)](https://www.ahpra.gov.au/Regulatory-principles-for-the-National-Scheme)

Individuals must have completed accredited and approved pharmacy programs (degree and intern training program) in order to be eligible for registration as a pharmacist.

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 Regulation¹⁰.

The development of the accreditation standards for pharmacist prescriber education programs has followed this procedure.

Accreditation process

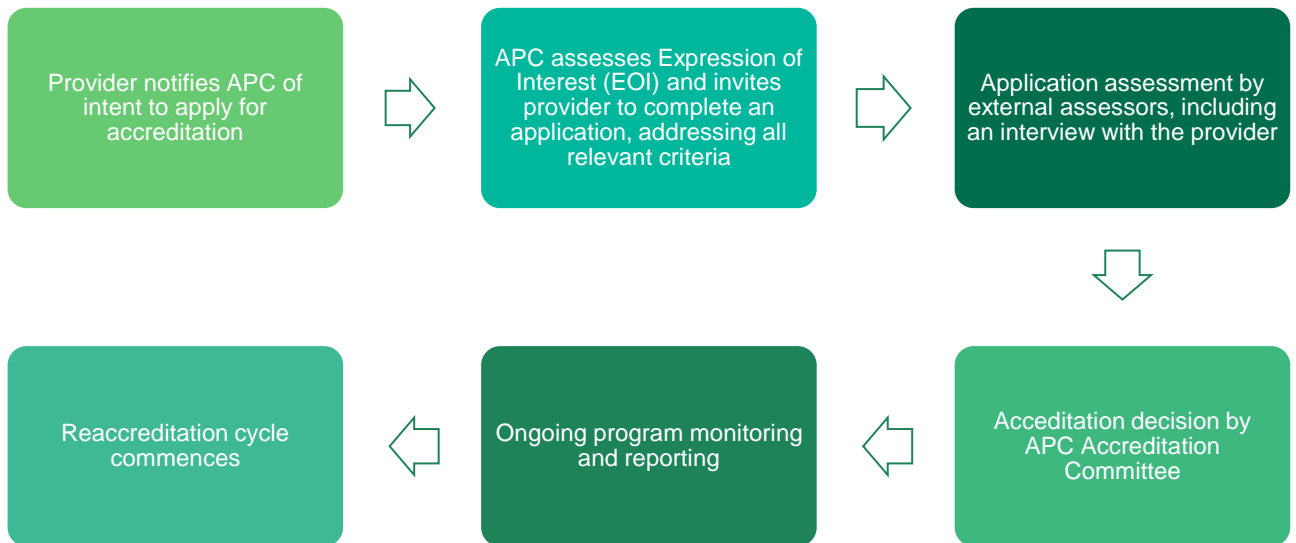
The accreditation process (*Figure 1*) includes accreditation applications, site evaluations as required, audit reports and ongoing monitoring to assess compliance. Changes to programs must be notified in advance of their implementation to allow for an assessment of the possible impact on accreditation status.

Pharmacist prescriber education programs are required to meet all accreditation standards to achieve accreditation. A program may be accredited with conditions if the program substantially meets the accreditation standards and there is good reason to believe that the program will meet all accreditation standards within a reasonable time frame.

Accreditation may be granted for a maximum period equal to the accreditation cycle determined by the APC Accreditation Committee. Accredited programs are subject to regular monitoring to ensure that they continue to comply with all accreditation standards throughout their period of accreditation. Provisions exist for conditions to be imposed, or the accreditation of a program to be revoked at any stage should there be evidence that the program is no longer compliant.

¹⁰ 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>

Figure 1: Accreditation Process



Preamble

Accreditation standards for pharmacist prescriber education programs

The Accreditation Standards for pharmacist prescriber education programs (the Standards) will ensure that graduates from an accredited program:

- meet the competencies in the NPS MedicineWise Prescribing Competency Framework (2nd Edition)¹¹ 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
- are flexible, adaptable and responsive to the evolving needs of individuals and communities and fully comprehend their role as prescribers within that changing environment.

Education program purpose

The Standards will not need to be applied to all programs that pharmacists complete to prescribe according to authorisations in relevant legislation. The standards will be applied to a program that requires all competencies in the NPS Prescribing Competency Framework to be met.

The Performance Outcomes Framework that accompanies the Standards is aligned to the NPS MedicineWise Prescribing Competency Framework (2nd Edition)¹² which describes the practice expectations of Australian prescribers regardless of profession.

Education program content

Program content is not defined by APC to allow for diverse and innovative educational offerings, however, should be underpinned by quality use of medicines (QUM) principles.

Content should be aligned with a clear program purpose and learning objectives and may include specific clinical content consistent with learners' scope of practice. The application of the principles of safe and effective prescribing to the clinical context will form an important component of prescriber training, consistent with established processes for learning to prescribe.

Performance outcomes should be assessed in the relevant clinical context. Learning outcomes that specify required clinical skills and knowledge should be included according to the program purpose.

¹¹ NPS MedicineWise Prescribing. Competencies Framework. Embedding quality use of medicines into practice. Second edition. 2021. Available from: <https://www.nps.org.au/prescribing-competencies-framework>

¹² NPS MedicineWise Prescribing. Competencies Framework. Embedding quality use of medicines into practice. Second edition. 2021. Available from: <https://www.nps.org.au/prescribing-competencies-framework>

Intended cohort

The Standards have been developed with the intention that learners will be pharmacists with general registration. Therefore, there is an expectation of foundational clinical competence and a level of professional experience of learners enrolling in programs.

Future incorporation of these standards in entry level program standards will be considered once the role of pharmacist prescribers has been established and during the periodic review cycle of those standards. APC will conduct the review according to the Ahpra procedures which require a robust and transparent process including wide-ranging consultation.

Practical considerations

The Standards highlight the importance of supervised practical experience, or work-integrated learning (WIL) 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 the education process.

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.

Pharmacist prescribing and scope of practice

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^{13 14}:

“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.”

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’.¹⁵

¹³ NPS MedicineWise. Prescribing Competencies Framework. 2021. Available from: [Prescribing Competencies Framework - NPS MedicineWise](#)

¹⁴ 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

¹⁵ 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>

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.

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

Prescribing must be undertaken according to the parameters of the prescribing context. Factors such as the practice setting, service delivery model, contribution of other health practitioners within the multidisciplinary team, and the specific preferences and needs of the consumer influence prescribing. The demonstration of prescribing performance by learners must include consideration of, and an appropriate response to, relevant factors.

Introduction

The purpose of accreditation is to assure the quality of pharmacy education programs, and to promote ongoing quality assurance. The accreditation of education and training programs is intended both to serve and to safeguard the public and society more generally by ensuring that learners of programs are able to demonstrate defined performance outcomes relevant to the activity or role.

The Accreditation Standards for pharmacist prescriber education programs may differ to some extent in purpose, design, and delivery, and as a consequence, provision has been made for these differences through the use of outcomes-based Accreditation Standards.

The Accreditation Standards have been structured into five domains, with each domain comprising:

- a standard (statement) which outlines the scope of the domain; and
- criteria against which education providers will provide evidence of compliance.

The five domains are:

1. Safe and socially accountable practice
2. Governance and quality
3. Program
4. Learner experience
5. Outcomes and assessment

Domains and Standards (statements)

The following table summarises the Accreditation Standards Framework. Subsequent sections provide details of the criteria and their accompanying notes.

Domain	Standard (statement)
1. Safe and socially accountable practice	The program develops pharmacist prescribers who are competent to prescribe safely with a socially accountable responsible, person-centred approach to practice. ¹⁶
2. Governance and quality	Program governance, quality assurance and quality improvement structures and systems are effective in developing and delivering sustainable, high-quality pharmacist prescriber education programs.
3. Program	Program design, implementation and resourcing enable graduates of the program to demonstrate achievement of all prescribing performance outcomes.
4. Learner experience	Learners are provided with equitable and timely access to information and support relevant to the program.
5. Outcomes and assessment	Graduates of the program demonstrate achievement of all the required performance outcomes and to a standard commensurate with competent, safe, and socially accountable professional prescribing practice.

¹⁶ World Health Organization (WHO). (1995), cited in International Pharmaceutical Federation (FIP). (2014). *Quality assurance of pharmacy education: the FIP Global Framework. 2nd edition*. Accessed 6-Oct-22 at http://www.fip.org/files/fip/PharmacyEducation/Quality_Assurance/QA_Framework_2nd_Edition_online_version.pdf

Criteria and Notes

Domain 1 Safe and socially accountable practice

The program develops pharmacist prescribers who are competent to prescribe safely with a socially accountable, person-centred approach to practice.

Criterion 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 health care; addressing community aspirations for health; and a commitment to public service and safety.

Statement of intent

To ensure that learners, as health professionals, are committed to safe and socially accountable practice and recognise their responsibility and obligation to serve society by seeking both to prevent harm and to promote optimal health outcomes.

Notes

Development of the knowledge, skills, behaviours and attitudes congruent to safe and socially accountable practice are addressed in initial training for pharmacists. The professional accountability for these competencies for registered pharmacists is addressed in professional codes of ethics and practice standards and are a requirement of registration. Pharmacist prescriber program content is expected to be underpinned by these principles, and to reflect the diversity and specific needs of the population receiving care by graduates of the program.

Criterion 1.2

Effective fitness-to-practise monitoring and management processes are implemented in relation to learners which promote and protect the safety of the public at all times.

Statement of intent

To ensure that the program provider is aware of, monitors, and manages learners' capacity to perform to an appropriate and safe standard during the program, including in work-integrated learning (WIL) environments.

Notes

Program providers should consider any setting specific requirements or competencies necessary for learners to demonstrate prior to WIL to ensure the safety of the public. For example, mandatory vaccinations, police checks, safety training, working with vulnerable people checks, familiarity with local policies and procedures. It is acknowledged that WIL may be conducted in learners current place of employment where these workplace requirements would already be met.

Criterion 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.

Statement of intent

To ensure learners have demonstrated a level of competency before providing services to patients related to the stage and scope of practice of the program.

Notes

Registered pharmacists can practice within their existing individual competency. Learners should demonstrate the achievement of competencies related to new knowledge, skills, behaviours, and attitude relevant to prescribing before undertaking WIL.

Education providers should consider the objectives of the WIL experience (which may differ throughout the program, where WIL opportunities are staged) and linked behaviours that are required to support the objectives. The most suitable assessment method/s to assess required behaviours may include a range of valid and reliable tools. The focus of each assessment should be clear and should reflect the expected behaviours, relevant to prescribing, at a specific time point in the program.

Criterion 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.

Statement of intent

To ensure public safety through monitoring and maintaining compliance to professional and ethical standards.

Notes

This criterion requires providers to demonstrate not only that they have in place appropriate standards of professional and ethical practice/conduct, but also have processes in place for communicating standards and expectations to staff, supervisors, and learners (relevant to their role) and how the provider will monitor compliance with them.

Learners and supervisors who are registered pharmacists or other health practitioners are accountable for their practice and conduct through the registration standards, code and guidelines of the PharmBA or their respective National Board.

Criterion 1.5

Program graduates have demonstrated an understanding of their legal, ethical and professional responsibilities in relation to prescribing.

Statement of Intent

To ensure pharmacists develop and maintain current knowledge and application of legal, ethical, and professional responsibilities relevant to their practice environment and jurisdiction in relation to prescribing.

Notes

Program content should address the range of current legal, ethical, and professional responsibilities that are relevant to prescribing. Providers should ensure that learners are familiar with sources of information, including relevant federal, state or territory legislation and regulations. Programs should include teaching content and assessments that develop and assess an understanding of practice scope, including how it is defined, its relevance to prescribing and the consequences of working outside practice scope.

Program content should ensure learners are aware of their responsibility to document clinical decision-making for the benefit of all members of the healthcare team, and to maintain a clinical record for each consumer that includes clinical reasoning, shared decision making, treatment plans etc, in order to support longitudinal care and practitioner accountability for their practice. Program content should develop and assess learner ability to define their intended scope of prescribing practice, consistent with competence, authority and accountability.

Criterion 1.6

The program includes sufficient high quality, supervised WIL in relevant settings to facilitate learners to consolidate prescribing competencies and demonstrate performance outcomes.

Statement of Intent

To ensure learners are able to demonstrate achievement of the performance outcomes in practical 'real-life' environments.

Notes

The program should provide opportunities for all learners to access work-integrated learning in an environment, and for a duration, that supports the ability to practice and demonstrate achievement of all performance outcomes.

WIL opportunities should be available, and innovative, to address individual learner requirements or general barriers to undertaking WIL.

WIL activities could include, and are not limited to, supervised placements, shadowing an experienced practitioner, case-based discussion with supervisor via videoconference, simulation etc.

Relevant aspects of WIL that should be considered in the context of the program purpose include the quality of the workplace culture, availability of appropriate supervision, opportunities to undertake a breadth of prescribing experiences, exposure to a broad mix of

patients, opportunities for increasing responsibility and autonomy in care provision commensurate with competence, and opportunities to develop confidence in communication and interprofessional interactions.

Providers are also responsible for collecting evidence that learners have achieved the required performance outcomes by monitoring assessments carried out within WIL. There is no requirement to include a specified number of hours of WIL within a program.

Criterion 1.7

Processes support effective relationships between the program provider, the learner, the WIL site, and the primary supervisor. All parties agree to, and comply with, documented processes to support a safe and quality WIL experience.

Statement of Intent

To ensure the provider has appropriate oversight of the WIL program to deliver a quality and safe experience for learners and allow them to achieve the required performance outcomes to an appropriate level.

Notes

Program providers are required to have documented expectations in place to support a safe and quality WIL experience. There should be processes for monitoring and evaluating the quality and appropriateness of WIL sites and primary supervisors. This will require the provider to document standards and criteria, to maintain signed contractual agreements with WIL sites and/or supervisors relating to the rights, responsibilities and expectations of all providers, sites, supervisors and learners, and to maintain communication channels which facilitate effective monitoring of those agreements. It is acknowledged that there may be circumstances where the WIL site is the learner's own workplace and standards should consider this whilst maintaining the intent of this criterion.

Processes that direct and support the selection of quality primary supervisors should be in place with clear communication of the qualifications and experience expected and their roles and responsibilities.

It is not expected that providers will certify that all WIL sites and supervisors are fully compliant with the standards, but that they have processes which facilitate detection of poor compliance and means by which poor compliance is addressed.

The safety of a WIL site includes aspects such as cultural, physical and emotional safety, particularly but not exclusively as described under workplace health and safety principles and legislation. It also includes the expectation that learner experience and outcomes will not be influenced by actual or perceived conflicts of interest.

It is not expected that providers will certify that all WIL sites and supervisors are fully compliant with the standards, but that they have processes which facilitate detection of poor compliance and means by which poor compliance is addressed.

Criterion 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 legislation and frameworks.

Statement of Intent

To ensure providers meet their obligations under relevant legislative and regulatory frameworks.

Notes

This criterion requires providers to demonstrate that they have appropriate processes in place in relation to the learner impairment provisions of the Health Practitioner Regulation legislation together with any jurisdictional requirements for eligibility to undertake WIL (such as criminal record checks, working with vulnerable people checks).

Domain 2 Governance and quality

Program governance, quality assurance and quality improvement structures and systems are effective in developing and delivering sustainable, high-quality pharmacist prescriber education programs.

Criterion 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.

Statement of Intent

To ensure that the provider organisation has a unit (the 'program provider') which is responsible for the program and its outcomes.

Notes

The term 'program provider' refers to that part of the provider organisation which is directly responsible for delivery and quality assurance/improvement of the program and may be designated internally by another title (such as Faculty, Division, Discipline, Branch, Section, Unit or Team).

Criterion 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).

Statement of Intent

To ensure that the provider has appropriate organisational governance in place to maintain sustainability of the organisation to continue to deliver the program and protect learners' rights.

Notes

Organisations registered with TEQSA or ASQA must report and meet minimum governance standards and there is no intention to duplicate this reporting. However, program quality relies on organisational-level standards being reflected and met at the program level by the unit delivering the program.

Criterion 2.3

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.

Statement of Intent

To ensure processes are in place for appropriate design, implementation and continuous quality improvement of the program and the capability of the program to produce graduates who meet the performance outcomes.

Notes

Program providers are required to outline how the governance structures and processes of the organisation are implemented at the program delivery level, and to indicate the relationships between the provider organisation and the program provider. Focus should be on how structures, processes and relationships provide appropriate oversight by the provider organisation and autonomy of the program provider, to ensure the quality of the program and that graduates are able to demonstrate the required performance outcomes.

Criterion 2.4

The maintenance, assurance and improvement of program quality is facilitated by effective relationships and accountability between the program provider and the provider organisation.

Statement of Intent

To ensure that the program provider has the support of their organisation to deliver the program.

Notes

Program providers are required to demonstrate that they have the support and backing of the provider organisation to ensure ongoing viability, and that the program provider is appropriately accountable for their performance to the organisation.

Criterion 2.5

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.

Statement of Intent

To ensure effective professional leadership of the program consistent with its defined purpose.

Notes

The designated leader is able to demonstrate experience and expertise relevant to the program, and leadership skills commensurate with the level of appointment.

Criterion 2.6

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.

Statement of Intent

To ensure effective financial and administrative operation of the program provider underpins the sustainability of the program.

Notes

Program providers are required to have processes by which financial and other resources are secured for the delivery of the program, and the level of autonomy available to the designated leader in managing those resources. Processes for anticipating and planning for future as well as current needs should be included. The focus should be on demonstrating that the processes are capable of delivering sufficient resources for ongoing sustainability and viability of programs which are fit-for-purpose.

Criterion 2.7

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.

Statement of Intent

To ensure the program provider has a specific strategic plan which is aligned to the purpose and objectives of the program to ensure it remains current with contemporary prescribing practice.

Notes

Program providers are required to have a specific (tailored) strategic plan which may differ significantly from that of the provider organisation but should be consistent with the relevant elements of it. The provision of the provider organisation's strategic plan is not sufficient for demonstrating compliance with this criterion.

Program providers must demonstrate how the strategic plan is implemented, evaluated and reviewed at the program level, and how this contributes to the ongoing fitness-for-purpose of the program.

Criterion 2.8

Risks to the sustainable delivery of the program are regularly monitored and evaluated, and appropriate mitigation strategies are clearly documented.

Statement of Intent

To ensure a focus on the identification, monitoring and mitigation of risks to the ongoing and sustainable delivery of the program.

Notes

Program providers are required to demonstrate processes for the identification, monitoring and mitigation of risks to the ongoing sustainable delivery of the program (including but not limited to financial, program demand, leadership, staffing, physical resources, supervisor capacity, reputational risks, and implications for learners). The provider organisation's Risk Management Plan is unlikely to include sufficient detail in relation to these specific risks and is likely to contain much material which is not relevant to program delivery.

Program providers must provide a specific (tailored) analysis of key risks, their likelihood of occurring, potential consequences and appropriate risk mitigation and management strategies. Mechanisms by which risks are monitored and reviewed, and of outcomes resulting from undertaking risk mitigation and/or management should be demonstrated.

Domain 3 Program

Program design, implementation and resourcing enable graduates of the program to demonstrate achievement of all prescribing performance outcomes.

Criterion 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.

Statement of Intent

To ensure the program is upheld by a clearly articulated educational philosophy.

Notes

Program providers should provide a clear and explicit rationale for the design and delivery of their program. It is expected that the rationale is based on contemporary educational theories and/or practice, but a detailed theoretical description is not required.

The emphasis should be on how the philosophy/strategy is implemented, focusing on the alignment between the philosophy/strategy and overall program goals or objectives, the curriculum, and the approaches to learning, teaching and assessment.

The role of both face-to-face and non-face-to-face learning opportunities should be justified.

Criterion 3.2

Program design, content, delivery, and assessment align with contemporary evidence-based prescribing practice and are designed to facilitate achievement and demonstration by learners of the performance outcomes. Emerging developments and legislation relevant to prescribing are reflected in the program (including WIL) in a timely manner consistent with the defined program purpose.

Statement of Intent

To ensure the program is designed and delivered to support learners to achieve and demonstrate the required performance outcomes.

To ensure the program remains contemporary and responsive to best practice guidelines and evidence in prescribing and related fields consistent with the program purpose.

Notes

Program providers should articulate the mechanisms, including stakeholder engagement, for assuring that curriculum content, delivery and assessment remain current, together with mechanisms for identifying emerging developments, scopes of practice and technologies, and incorporating them into the curriculum.

Criterion 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 consistent with its defined purpose. Outcomes from these processes are clearly communicated in a timely manner to stakeholders.

Statement of Intent

To ensure that the program is responsive to the needs, expectations and feedback of stakeholders.

Notes

In order to ensure that programs remain consistent with their defined purpose in an evolving environment, providers are expected to undertake regular evaluation and review of all aspects of their programs as a means of quality assurance and improvement.

This criterion differs from 3.2 in that while both address program quality, 3.2 focuses on processes for assuring the quality of current program content, and 3.3 focuses on the processes used to assure the quality of the program overall, and to facilitate quality improvement.

Program providers are required to have formal and informal mechanisms of meaningful engagement with and responsiveness to stakeholders.

Criterion 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.

Statement of Intent

To ensure that providers promote the lifelong development of cultural safety among both staff and learners.

To ensure that the content, delivery and assessment of material relating to First Nations cultures, cultural safety and improved health outcomes are culturally appropriate.

Notes

It is highly desirable to involve Aboriginal and Torres Strait Islander peoples in the direct delivery of the program where possible. However, as a minimum, providers are expected to demonstrate how they promote appreciation of cultural differences and the ongoing development of cultural safety among both staff and learners, and how they ensure that the content, delivery and assessment of material relating to Aboriginal and Torres Strait Islander cultures, cultural safety and improved health outcomes are culturally appropriate.

Criterion 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 learner skills that enable the provision of culturally safe, inclusive and responsive person-centred care.

Statement of Intent

To ensure that providers promote appreciation of cultural diversity including and not limited to diversity in race, ethnicity, gender, language, religion, age, disability, geographic location and sexual orientation.

Notes

Cultural diversity includes but is not limited to diversity in race, ethnicity, language, gender, religion, age, disability, geographic location and sexual orientation.

Program content should address unique considerations in providing care to a culturally diverse population.

Criterion 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.

Statement of Intent

To ensure that sufficient resources are available for delivery of the program consistent with its defined purpose.

Notes

Program providers should identify the required resources for delivery of the program, ensure that they are current, fit-for-purpose and sufficient for the learners needs. Provisions for anticipated changes to the resource needs in the short-term or foreseeable future should be evident.

Program providers should articulate the processes or mechanisms for evaluating resource requirements, reviewing current capacity to resource the program appropriately, and identifying where resources will need to be augmented or updated.

Where it is the learner's responsibility to provide their own specific resources, this should be clearly indicated in the program information available to prospective learners.

Criterion 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.

Statement of Intent

To ensure that their overall staffing profile includes sufficient experience and expertise to ensure program quality.

Notes

Program providers should ensure that the leadership and staff complement is appropriate to deliver and support the program.

Program providers should provide evidence of the experience and expertise of staff as it relates to the program overall, including aspects such as program leadership, curriculum design and review, coverage of curriculum content, facilities and educational support (including administrative, technical, ICT), and outline the processes by which all staff are able to access appropriate support and resources including regular opportunities for professional review and development.

Providers must demonstrate that their overall staffing profile includes sufficient and relevant experience and expertise consistent with the program purpose, to ensure program quality and that learners have access to professionals to assist in developing appropriate attributes.

Criterion 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.

Statement of Intent

To ensure participation in collaborative interprofessional practice at a level commensurate with the required performance outcomes for the program.

Notes

Program providers must demonstrate that the graduates are able to participate in collaborative interprofessional practice that is expected of safe and competent prescribers and health professionals.

It is expected that a range of interprofessional learning activities are incorporated throughout the program, including in work-integrated learning, to ensure learners are able to demonstrate achievement of the required performance outcomes.

Criterion 3.9

The program provider operates in an environment informed by contemporary scholarship, research and enquiry.

Statement of Intent

To ensure the program is informed and supported by current and emerging evidence.

To ensure that graduates have the skills to maintain and contribute to evidence-based practice that optimises health outcomes for patients.

Notes

Program providers are required to have mechanisms by which they incorporate the outcomes of relevant contemporary research into the program, and promote the utilisation of skills in scholarship, research and enquiry in the learner's practice.

Pharmacy practice, including prescribing, is underpinned by evidence. Pharmacist prescribers must be able to source, interpret and apply the best available current evidence to optimise health outcomes and be involved in the generation of new evidence.

Domain 4 Learner experience

Learners are provided with equitable and timely access to information and support relevant to the program.

Criterion 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.

Statement of Intent

To ensure that providers have selection policies and criteria that are consistent, fair, lawful and do not discriminate.

Notes

Program providers are required to demonstrate how policies and procedures are applied at the program level. Providers must provide evidence of how they will apply entry criteria and/or prerequisite requirements.

Criteria for modification of standard admission requirements (including recognition of prior learning (RPL), if offered) must be explicit and applied consistently.

RPL processes should consider methods for assessing applicants existing qualifications and experience, including how demonstration of the required performance outcomes can occur and how gaps will be addressed. RPL processes may consider any reduced requirements for experienced learners bridging these gaps (e.g., requirement for WIL).

Criterion 4.2

Program information, including program purpose, 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.

Statement of Intent

To ensure that program information is accurate, comprehensive and accessible in order for prospective learners to make an informed decision to apply to the program.

Notes

Program providers should indicate where program information is located (such as websites), and who is responsible for ensuring the content is accurate and comprehensive.

Programs should also outline the processes for handling program enquiries from prospective applicants.

Criterion 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.

Statement of Intent

To ensure learners are supported to complete their training.

Notes

Program providers should outline the resources which are available to students including, but not limited to, orientation and induction processes; academic, general welfare and wellbeing support; learning resources (physical spaces, online learning management system, information and library resources, self-directed learning resources); and effective supervision.

Criterion 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.

Statement of Intent

To ensure learners are aware of their rights and are treated fairly.

Notes

Program providers should articulate how their structures and processes facilitate equitable participation in their programs by learners from diverse backgrounds (including reasonable adjustments in the case of disability).

Providers should outline how learners and the staff interacting with them, are familiarised with their obligations under anti-discrimination legislation.

Criterion 4.5

The program provider ensures that learners are aware of and able to access effective appeals and grievance processes, and that these processes are managed consistently, fairly and with appropriate impartiality and confidentiality to ensure that learners are treated justly.

Statement of Intent

To ensure the provider has in place processes to manage appeals and grievances from learners.

Notes

See Criterion 4.6 notes.

Criterion 4.6

The program provider identifies and manages all actual, perceived and potential conflicts of interest proactively, consistently and fairly.

Statement of Intent

To ensure the provider manages conflicts of interest fairly.

Notes

Criteria 4.5 and 4.6 complement Criterion 4.4 by requiring program providers to treat learners fairly and justly by ensuring that processes for addressing learner concerns exist, that learners are able to access these processes in a timely manner, that the processes are carried out appropriately, and that the outcomes are not influenced by actual or perceived conflicts of interest.

The program provider must ensure that appropriate policies and processes are in place for learners who wish to raise concerns or grievances, including about supervisors or WIL experiences, or appeal against a decision affecting their progress through the program. These policies and processes should be actively and clearly communicated.

Criterion 4.7

Learners are actively engaged with governance and program management structures and decision-making processes, through both formal and informal mechanisms.

Statement of Intent

To ensure learners have the opportunity to provide feedback on the program through formal and informal mechanisms.

Notes

Program providers should engage learners in governance structures to provide the opportunity for formal feedback and input into the delivery of the program and developing a culture of continuous quality improvement.

Domain 5 Outcomes and assessment

Graduates of the program demonstrate achievement of all required performance outcomes to a standard commensurate with competent, safe, socially accountable prescribing practice.

Criterion 5.1

The program has an assessment strategy that describes the purpose and range of assessments, aligns assessments to program learning outcomes, and ensures all performance outcomes are assessed in relevant prescribing contexts including WIL settings.

Statement of Intent

To ensure that the assessment strategy provides a range of authentic assessments throughout the program to demonstrate that graduates have met all performance outcomes.

Notes

Program providers are required to demonstrate the rationale for the timing and choice of assessments, and alignment between learning objectives, performance outcomes and assessments.

Criterion 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 progressive evidence of learner competence leading to demonstration of all performance outcomes.

Statement of Intent

To ensure that a range of assessments are included in the program to measure the achievement of all performance outcomes and are valid, reliable, and consistently applied.

Notes

Program providers are required to demonstrate the rationale for the choice of assessments, and alignment between performance outcomes and assessments. Detailed mapping without an accompanying narrative explanation is insufficient.

Program providers may consider a range of assessment modes/mechanisms (to accommodate barriers and provide flexibility) provided there is evidence that the learner meets the performance outcomes.

Criterion 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.

Statement of Intent

To ensure the peer review/moderation of assessments are implemented as part of a continuous quality improvement process to ensure they remain contemporary and consistent with the program purpose.

Notes

Program providers are required to have an external evaluation and/or moderation process that provides an informed commentary on the program, particularly in relation to the assurance that graduates are safe and competent to practise on successful completion of all program assessments. External evaluation or moderation should complement internal quality assurance processes for assessment (Criterion 5.4).

Criterion 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.

Statement of Intent

To ensure that there are clear criteria for assessments that are shared with learners and the staff or assessors undertaking the assessments.

Notes

Program providers should outline the processes by which assessment tasks and criteria are developed and reviewed and indicate explicitly how the level of expected performance in each assessment task is communicated to students and assessors.

Criterion 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.

Statement of Intent

To ensure that assessors have the necessary skills and support to undertake the role, and make judgements objectively, fairly, and impartially.

Notes

Program providers must hold staff undertaking assessments, including evaluation of RPL, accountable for their decisions, particularly where a learner is assessed as having failed to meet the requirements. There should be mechanisms for learners to receive specific feedback from assessors.

Accountability requires assessors to make judgements objectively, fairly and impartially, and to be able to explain the rationale for their decisions based on the assessment criteria required under Criterion 5.4.

Program providers should have processes for ensuring health professionals involved in workplace-based assessments are aware of their role and responsibility in assessing learners against assessment criteria and are trained and/or supported to undertake the assessments.

Criterion 5.6

Learners are provided with appropriate, timely and sufficient feedback to enable them to improve future performance.

Statement of Intent

To ensure learners are given feedback on their performance in order to reflect, respond and learn from feedback.

Notes

Program providers are required to have mechanisms for enabling or providing learners with formal and informal constructive feedback on their performance and progress through the program, including during WIL.

Criterion 5.7

Comprehensive assessment/s of prescribing performance is/are completed to provide evidence of the learner's ability to perform the entire prescribing process consistent with defined performance outcomes.

Statement of Intent

To ensure that learners are assessed on their ability to complete the entire prescribing process and demonstrate consolidated prescribing skills.

Notes

Learning to prescribe requires practise. Program providers are required to facilitate opportunities for learners to practise and demonstrate achievement of all performance outcomes across the prescribing process.

The performance outcomes are observable statements describing what a graduate of the program is able to do.

Development of the skills, knowledge and behaviours to be a safe and competent prescriber are expected to be developed and consolidated throughout the program and build towards the learner demonstrating competence across the entire prescribing process of information gathering, clinical decision-making, communication and evaluation in a complete consultation.

It is expected that learners will be assessed on their ability to complete an entire patient consultation, demonstrating consolidated competencies across the full prescribing process consistent with the performance outcomes.

Evidence of the ability to complete individual steps in the prescribing process (e.g., assessing the patient or making a clinical decision regarding medicine/s to prescribe) in isolation will not be adequate evidence to meet this criterion.



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