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Accreditation Standards for Pharmacist Prescriber Education Programs

Evidence Guide

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List of Abbreviations

Abbreviation	Meaning
Ahpra	Australian Health Practitioner Regulation Agency
APC	Australian Pharmacy Council
PharmBA	Pharmacy Board of Australia
WBA	Workplace Based Assessment
WIL	Work-integrated Learning
RPL	Recognition of Prior Learning

The Australian Pharmacy Council (APC) is the independent accreditation authority for pharmacy education and training programs in Australia.

We work as part of the *National Registration and Accreditation Scheme* (NRAS or National Scheme), under the *Health Practitioner Regulation National Law Act¹* (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.

APC accreditation helps to protect the health and safety of the Australian community by establishing and maintaining high-quality standards for pharmacy education, training, and assessment.

For more information about the accreditation of Pharmacist Prescriber education programs, refer to the [Accreditation Standards for Pharmacist Prescriber Education Programs](#).

How to use this document

Introduction

This document complements and supports the [Accreditation Standards for Pharmacist Prescriber Education Programs](#). This resource is intended to support education providers when completing applications for accreditation and for those involved in making accreditation decisions.

Purpose, format and structure

When seeking accreditation of a new program, or re-accreditation of an existing program, education providers must demonstrate that the program is compliant with all criteria included in the Accreditation Standards. Each criterion in the Accreditation Standards is accompanied by a *Statement of Intent* and explanatory *Notes* to support providers to understand the purpose or intent of the criterion.

Compliance is demonstrated through a narrative which explains how the program meets each criterion and is supported by selected relevant evidence provided as appendices.

The Accreditation Standards are outcomes-focused, which allows program providers to develop their own innovative programs that produce graduates who meet the performance outcomes. APC does not mandate what evidence is required to determine compliance. The purpose of this Evidence Guide is to provide guidance on the type of evidence which may demonstrate compliance regardless of the program design.

The **Evidence Guide** addresses the demonstration of compliance by providing for each criterion:

- **Evidence descriptors** that provide a more detailed description of what is expected to be included in the narrative response for that criterion.
- **Evidence examples** of potentially relevant evidence to support your narrative.

¹ National Registration and Accreditation Scheme (National Scheme) as established under the National Law in each Australian State and Territory.

The examples are suggestions only and may or may not be relevant to a particular program. The list of examples is not exhaustive, and there may be other evidence that could be provided.

Principles

The following principles should be considered when preparing your application:

1. It is the responsibility of the provider to explain how and why their program meets the Accreditation Standards, using a concise narrative approach, supplemented, where appropriate, by relevant documentary evidence.
2. The narrative should be focused on addressing the evidence descriptors and be concise and pertinent.
3. This document provides guidance for providers; it is not intended to be prescriptive or restrictive.
4. Since the narrative is primary, supporting documentation should be restricted to that which provides relevant supporting evidence. This may involve provision of selected or edited extracts of larger documents.
5. Documents which relate to the provider organisation may be referenced, but do not need to be provided in full if they are publicly available (for example, via websites). The operationalising of organisation level processes must be described in the narrative.
6. A document which is provided as evidence for multiple criteria should be provided once only, with appropriate cross-referencing in the narrative. The naming/numbering used for evidence examples should follow APC guidance.
7. Visual illustrations of data (e.g. diagrams and charts) are encouraged but must be appropriately labelled and explained in the narrative.

Curriculum and assessment mapping

Reference is made throughout the Evidence Guide to curriculum and assessment mapping. These are likely to differ to some extent in format, reflecting the different, although related, purposes they serve.

Curriculum maps are likely to focus on indicating the placement, timing and sequencing of content and learning activities, whereas **assessment maps** are more likely to focus on the nature and timing of assessments within the program.

Mapping for pharmacist prescriber education programs should reflect the content of the **Performance Outcomes Framework** which has been aligned to the NPS Prescribing Competencies Framework (2nd edition)².

Maps are also likely to differ in terms of granularity and level of detail. **Maps** may be at a macro level (demonstrating in broad terms the structure of the program overall) or include more specific details (to illustrate sections of the program).

It is important to note that **no single format of curriculum or assessment mapping is mandated**. Providers should select an approach which best suits their narrative and

² 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>

circumstances. **Maps** are one form of supporting evidence and intended to support the narrative rather than dominate or replace it.

Mapping to the Performance Outcomes Framework

For criteria which require demonstration of the achievement of performance outcomes, the narrative and supporting evidence outlined in the **Accreditation Standards Evidence Guide** should include **mapping** of curriculum content and assessments to the performance outcomes.

It is expected that program design will facilitate learner development, and demonstration, of prescribing skill progressively across the program. Opportunities to practise skills, and assessments that contribute to learning, should be evident across the program to provide evidence of learner ability to complete all performance outcomes. It is important for learners to consolidate their individual prescribing competencies into a reliable skill set that can be applied to each consumer's individual circumstance. It is therefore important for education providers to assess learner ability to complete the entire prescribing process consistent with the performance outcomes.

Evidence Guide

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	Evidence descriptor	Evidence examples
<p>Criterion 1.1</p> <p>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.</p>	<p>Explain how and where these principles underpin the curriculum.</p> <p>Evidence for this criterion is likely to be based primarily on mapping of curriculum and assessments to performance outcomes including how opportunities are provided in learning to consider the diversity and specific needs of the population receiving care and how the principles are reflected in expected pharmacist prescribing practice, including during WIL experiences and assessments.</p> <p>Providers may make reference to appropriate quality and clinical standards such as the National Safety and Quality Health Service (NSQHS) Standards³ and Australian Healthcare Charter of Rights⁴.</p> <p>Full versions of external standards do not need to be provided.</p>	<ul style="list-style-type: none"> • Program level outcomes or equivalent • Curriculum or assessment examples • Curriculum and assessment maps including those referencing performance outcomes • WIL objectives and assessments; Roles and responsibilities of primary supervisor and learner during WIL • Assessment rubrics.
<p>Criterion 1.2</p> <p>Effective fitness-to-practise monitoring and management processes are implemented</p>	<p>Explain how fitness-to-practise is defined and communicated to learners.</p>	<ul style="list-style-type: none"> • Policies and procedures • Informational materials

³ <https://www.safetyandquality.gov.au/standards/nsqhs-standards>

⁴ Australian Commission on Safety and Quality in Health Care. Australian Charter of Healthcare Rights (second edition). 2020. Available from: <https://www.safetyandquality.gov.au/our-work/partnering-consumers/australian-charter-healthcare-rights>

Criterion	Evidence descriptor	Evidence examples
<p>in relation to learners which promote and protect the safety of the public at all times.</p>	<p>Outline the processes which are in place to identify concerns about learners' fitness-to-practise and describe how concerns are managed.</p> <p>Evidence may include (but is not limited to):</p> <ul style="list-style-type: none"> • required health practitioner registration • specific learning and teaching activities • screening activities (e.g., criminal record checks, vaccination records etc) • assessments and evaluations. 	<ul style="list-style-type: none"> • Curriculum and assessment maps • Protocols for raising and addressing concerns • Incident reports and logs.
<p>Criterion 1.3</p> <p>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.</p>	<p>Noting registered pharmacists can practise within their existing individual competency, identify the points in the program where interactions and services are included in WIL that address new competencies that the learner is developing, relevant to the program. Explain how they are adequately prepared and assessed to ensure public safety is protected.</p> <p>Evidence may include (but is not limited to):</p> <ul style="list-style-type: none"> • expected behaviours at specific stages of the program • assessments • processes for communicating and assessing required behaviours prior to WIL • processes to address identified inadequacies prior to undertaking WIL. 	<ul style="list-style-type: none"> • Curriculum and assessment maps • Policies and procedures • WIL handbooks • Cross-reference to risk management documentation and evidence associated Criterion 1.6, 1.7 may also be relevant.

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 1.4</p> <p>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.</p>	<p>Identify the professional standards, codes and guidelines to which are in place to ensure appropriate standards of professional and ethical practice and conduct for staff and learners.</p> <p>Examples of resources which may be relevant include (but are not limited to):</p> <ul style="list-style-type: none"> • codes of ethics • codes of conduct • relevant PharmBA guidelines. <p>Explain the processes by which expected standards of behaviour, including during WIL, are reinforced to staff and learners and the processes and procedures in place for monitoring compliance with them.</p> <p>Outline processes which are in place to identify concerns about staff and learners' professional and ethical practice and conduct and describe the ways in which these concerns are managed.</p>	<ul style="list-style-type: none"> • Policies and procedures • Assessment maps • Learner orientation and/or induction processes • Staff orientation and/or induction processes • Supervisor orientation and/or induction processes • WIL handbook • Protocols for raising and addressing concerns • Incident reports and logs.

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 1.5</p> <p>Program graduates have demonstrated an understanding of their legal, ethical, and professional responsibilities in relation to prescribing.</p>	<p>Identify the legal, ethical and professional standards, codes and guidelines relevant to prescribing to which learners are introduced.</p> <p>Explain the ways in which they engage with these resources, and how they demonstrate their understanding and application of them, including the differences between jurisdictions.</p> <p>Examples of resources which may be relevant include (but are not limited to):</p> <ul style="list-style-type: none"> • the Poisons Standard (SUSMP) or equivalent • state or territory controlled substances, drugs and poisons legislation • Health Practitioner Law • privacy laws • work, health and safety law. <p>Outline processes which are in place to identify concerns about learners' professional and ethical practice and conduct and describe the ways in which these concerns are managed.</p>	<ul style="list-style-type: none"> • Policies and procedures • Curriculum and assessment maps • Incident reports and logs.
<p>Criterion 1.6</p> <p>The program includes sufficient high-quality supervised WIL in relevant settings to facilitate learners to consolidate prescribing competencies and demonstrate performance outcomes.</p>	<p>Describe how WIL is integrated into the program and the rationale for its design.</p> <p>Outline the goals and/or purposes of WIL opportunities and explain how learners achieve and demonstrate the expected outcomes.</p>	<ul style="list-style-type: none"> • Curriculum and assessment maps • WIL map • WIL outlines or descriptions, learning objectives, assessment tasks, eligible assessors

Criterion	Evidence descriptor	Evidence examples
	<p>Explain how WIL sites are chosen and allocated and outline how their quality and suitability is evaluated. Relevant aspects include (but are not limited to) the:</p> <ul style="list-style-type: none"> • quality of the workplace culture • availability of a primary supervisor with defined credentials (refer to Glossary and Criterion 1.7) • identifying, reporting and managing conflicts of interest. • opportunities to observe and/or 'shadow' prescribers • opportunities to engage in a range of activities and services and to become competent through repetition • exposure to a broad mix of patients • opportunities to engage in a range of prescribing relevant activities and services and to practise the prescribing process • opportunities to develop confidence in communication and interprofessional interactions. <p>It is not necessary for all sites to be able to demonstrate all listed quality elements, but program providers must provide evidence that the site is a suitable learning environment for learners.</p>	<ul style="list-style-type: none"> • Simulation activity details • Summaries of WIL site details • Policies and procedures, including site selection, verifying supervisor credentials, managing conflicts of interest • Guidelines, handbooks or manuals for learners, primary supervisors, and sites • WIL quality evaluation and assurance policies and procedures • Process for providing feedback to and from learners, primary supervisors, sites and providers.
<p>Criterion 1.7</p> <p>Processes support effective relationships between the program provider, the learner, the WIL site, and the primary supervisor.</p>	<p>Describe the processes and expectations with which all parties must be compliant, how these are communicated, and the processes in place to identify and manage concerns regarding any aspect of the agreed processes.</p>	<ul style="list-style-type: none"> • Policies and procedures • WIL handbooks and manuals • WIL contracts and agreements

Criterion	Evidence descriptor	Evidence examples
<p>All parties agree to, and comply with, documented processes to support a safe and quality WIL experience.</p>	<p>As a minimum, the following should be addressed:</p> <ul style="list-style-type: none"> • quality and suitability of the site for the WIL required (as set out under Criterion 1.6) • roles, rights, responsibilities and expectations of education providers, sites, learners and supervisors, including the primary supervisor and professional colleagues who contribute to supervision • required qualifications and experience of the primary supervisor, including whether these must align with the learner’s intended area of prescribing practice • how the cultural, physical and emotional safety of learners will be maintained. <p>Evidence may include (but is not limited to):</p> <ul style="list-style-type: none"> • documents (e.g. contractual agreements) outlining the processes and expectations • processes for communicating with each party and obtaining a commitment to meet the expectations • policies and processes for reporting and managing concerns about any aspect of the expectations • records of concerns raised, and actions taken, including processes for communicating outcomes and monitoring ongoing performance • primary supervisor eligibility (e.g. current Ahpra registration, current prescribing qualification, recent prescribing experience, relevance to defined area of 	<ul style="list-style-type: none"> • Eligibility criteria for primary supervisors • Examples of communications (e.g., emails, newsletters, web forums; feedback requests; concerns raised and addressed) • Emergency protocols for learners • Incident reports • Site visit reports • Learner and supervisor feedback regarding WIL processes and experiences • Cross-reference to risk management documentation may also be relevant.

Criterion	Evidence descriptor	Evidence examples
	<p>practice, supervisory experience and/or qualifications, communication skills, capacity to commit to the role, availability to the learner, ability to use required technology to support undertaking the role).</p>	
<p>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.</p>	<p>Outline the processes which are in place to ensure that the program provider is aware of and meets its obligations under the registered pharmacist impairment (and conduct) provisions of, where relevant:</p> <ul style="list-style-type: none"> • the Health Practitioner Regulation legislation • the PharmBA Guidelines for Mandatory Notifications and Code of Conduct. <p>Outline any jurisdictional requirements for eligibility to undertake WIL placements (e.g. criminal record checks, vaccination records, working with vulnerable people checks etc).</p>	<ul style="list-style-type: none"> • Policies and procedures • Relevant excerpts from committee meeting minutes and action plans • Incident reports and logs.

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	Evidence descriptor	Evidence examples
<p>Criterion 2.1</p> <p>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.</p>	<p>Outline the structure of the organisation within which the program provider operates.</p> <p>Clearly indicate the reporting lines of the program provider and the authority delegated to it by the provider organisation which ensure that the program provider has sufficient autonomy and responsibility for designing, implementing, evaluating and resourcing the program.</p> <p>The primary focus should be on aspects of the organisation which are relevant to the delivery of the program.</p>	<ul style="list-style-type: none"> • Organisational charts highlighting the relationship between the provider organisation and the program provider • Program/curriculum approval policies and procedures • Delegation policies (or equivalent) of relevance to the program (from the provider organisation to the program provider).
<p>Criterion 2.2</p> <p>The program provider is registered with either the Tertiary Education Quality and Standards Agency (TEQSA) (HEIs) or Australian Skills Quality Authority (ASQA) (RTOs).</p>	<p>Indicate the registration and/or approval details, and the approval timeframe (e.g. expiry or renewal date).</p> <p>If the provider organisation has conditions or other constraints on its registration. If so, state whether or not they are relevant to the sustainable delivery of the program, and if they are, explain how they are being addressed and the implications for the program provider and/or program if these issues cannot be resolved.</p>	<ul style="list-style-type: none"> • Written notification from the relevant authority (TEQSA or ASQA) or an excerpt/screenshot from a relevant website • Cross-reference to risk management documentation may also be relevant where conditions on registration have been applied.

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 2.3</p> <p>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.</p>	<p>Explain how the provider organisation's governance structures and processes are implemented at the level of the program, and how these structures and processes maintain both appropriate oversight by the organisation and autonomy of the program provider.</p> <p>Evidence may include (but is not limited to):</p> <ul style="list-style-type: none"> • descriptions of the specific means by which the organisation's structures and processes are implemented or operationalised at the program provider level • records of meetings and/or communications relating to decisions made by the program provider and/or organisation which demonstrate oversight and/or autonomy. 	<ul style="list-style-type: none"> • Organisational charts highlighting the communication lines between the provider and the program provider • Committee structures highlighting how the program provider is represented when decisions affecting the program are made • Committee terms of reference • Relevant excerpts from committee meeting minutes and action plans • Review schedules and outcomes.
<p>Criterion 2.4</p> <p>The maintenance, assurance and improvement of program quality is facilitated by effective relationships and accountability between the program provider and the provider organisation.</p>	<p>Outline the processes by which the provider organisation assures the quality of the programs offered by the program provider (e.g. learner feedback, internal reviews, audits, external evaluations, stakeholder feedback, benchmarking).</p> <p>Explain how the outcomes of quality assurance processes are communicated between the provider organisation and the program provider, and how changes which are made as a result are implemented, documented and reported.</p> <p>Evidence for this criterion may include quantitative and qualitative data from quality assurance and improvement processes, which, if included, should be accompanied by appropriate analysis and interpretation.</p>	<ul style="list-style-type: none"> • Policies and procedures • Evaluation and review cycles • Relevant excerpts from committee meeting minutes and action plans • Outcomes of quality assurance processes.

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 2.5</p> <p>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.</p>	<p>Outline the qualifications, expertise and experience of the designated leader and explain how these demonstrate suitability and relevance for the role and purpose of the program.</p> <p>Evidence may include a curriculum vitae (CV), but this must be accompanied by commentary on the relevant elements of the CV and other aspects of the individual's leadership qualities and professional background/contributions.</p> <p>Outline the place of the designated leader within the provider organisation's hierarchy, and the extent to which the program provider is represented on critical committees or task groups which have a significant impact on the operations of the unit.</p>	<ul style="list-style-type: none"> • Position description including level of autonomy, responsibilities, reporting lines and delegations • Organisational charts highlighting place of designated leader in provider organisation structure (including representation on committees) • Curriculum vitae.
<p>Criterion 2.6</p> <p>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.</p>	<p>Outline and explain the financial responsibilities delegated to the designated leader, clearly highlighting the constraints within which the leader may act autonomously, and the processes for securing additional resources when needed.</p> <p>Explain the implications of the financial delegations and constraints for the program provider's capacity to sustain its operations and offer a viable program.</p> <p>Where the leader does not have complete financial autonomy, outline any organisational policies and/or undertakings which provide assurance of the necessary ongoing financial support.</p> <p>Where the provision of resources other than financial is delegated to persons other than the unit leader, explain how</p>	<ul style="list-style-type: none"> • Financial delegation policies • Financial reports • Terms of reference, minutes and action plans of provider organisation committees responsible for resource allocation and/or infrastructure funding • External sources of funding • Cross-reference to risk management documentation may also be relevant.

Criterion	Evidence descriptor	Evidence examples
	<p>the leader influences decisions relating to the resources necessary to sustain the program.</p> <p>These resources include (but are not limited to):</p> <ul style="list-style-type: none"> • staffing • physical facilities and infrastructure • technological capacity • information and communication services • learner support services • professional development opportunities for staff. <p>Evidence may include relevant financial and other reports, encompassing past performance and forecasts for the future, but must be accompanied by a commentary identifying key elements.</p>	
<p>Criterion 2.7</p> <p>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.</p>	<p>Program providers must have a specific (tailored) strategic plan at program delivery level which may differ significantly from that of the provider organisation but should be demonstrably consistent with the relevant elements of it.</p> <p>Specifically, the plan is required to include only those elements of the organisation's plan which are applicable to the program provider or delivery of the program. The plan should be structured in a format which is appropriate to the program provider's vision, purpose and goals. Additionally, units must explain how the strategic plan is implemented,</p>	<ul style="list-style-type: none"> • Strategic plan at program provider level which demonstrates consistency with the principles of the strategic plan at provider organisation level • Delegation of responsibility for strategic planning • Relevant excerpts from committee meeting minutes and action plans • Planning and review schedules and outcomes.

Criterion	Evidence descriptor	Evidence examples
	<p>evaluated and reviewed, and how this contributes to the ongoing fitness-for-purpose of the program.</p> <p>The provision of the provider organisation’s strategic plan alone is not sufficient for demonstrating compliance with this criterion.</p>	
<p>Criterion 2.8</p> <p>Risks to the sustainable delivery of the program are regularly monitored and evaluated, and appropriate mitigation strategies are clearly documented.</p>	<p>Explain the processes by which risks to the ongoing, sustainable delivery of the program are identified, assessed, monitored, mitigated and managed at program level.</p> <p>Risks to the delivery of the program include (but are not limited to):</p> <ul style="list-style-type: none"> • financial • program demand • leadership • staffing • physical and other resources • WIL/supervisor capacity • reputational • catastrophic event. <p>Evidence may take the form of a risk management plan, which must be relevant at program delivery level. Provision of the provider organisation’s risk management plan is not sufficient as evidence of compliance with this criterion as it is unlikely to include sufficient detail in relation to the specific</p>	<ul style="list-style-type: none"> • Risk management plan (or equivalent) at program level • Risk reporting and assessment • Business continuity plan • Relevant excerpts from committee meeting minutes and action plans • Risk records (e.g. registers, logs) • Cross-reference to other criteria may also be relevant.

Criterion	Evidence descriptor	Evidence examples
	<p>risks associated with program delivery and is likely to contain much material which is not relevant to program delivery.</p> <p>A suitable risk management plan includes (but is not limited to):</p> <ul style="list-style-type: none"> • analysis of key risks • assessment of the likelihood of their occurrence • potential consequences, including impact on the learner • risk mitigation strategies • risk management strategies • mechanisms at the program level by which risks are monitored and reviewed • timeframes and responsible persons • outcomes resulting from undertaking risk mitigation and/or management activities. 	

Domain 3 Program

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

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 3.1</p> <p>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.</p>	<p>Describe the educational rationale for the design and delivery of the program, and show how it has shaped goals/objectives, curriculum, learning and teaching approaches, and assessment methodology.</p> <p>The focus should be on the coherence of the structure, content and approach of the program as a whole, rather than a detailed breakdown of individual teaching and learning episodes.</p>	<ul style="list-style-type: none"> • Summary table of program structure (e.g. subjects and WIL undertaken in each study period) • Statement of educational philosophy and/or strategy • Program maps highlighting alignment (including the role of experiential learning) • Assessment maps or matrices.
<p>Criterion 3.2</p> <p>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.</p>	<p>Explain how the unit undertakes the process of curriculum design, review and renewal in order to ensure content, delivery and assessment remain current and consistent with the defined program purpose. This will generally include a discussion of the nature of contemporary evidence-based prescribing practice.</p> <p>When proposing a <u>new program</u> or a <u>material (major) change</u> to an existing program, outline the processes for:</p> <ul style="list-style-type: none"> • identifying the impetus or stimulus for change • developing the proposal (including input from external stakeholders) 	<ul style="list-style-type: none"> • Statement of program purpose • Curriculum and assessment maps indicating alignment with program purpose • Processes for, and examples of, internal and external program reviews and evaluations • Processes for, and examples, of learner and other stakeholder feedback • Learner outcomes (e.g. progression rates, completion)

Criterion	Evidence descriptor	Evidence examples
	<ul style="list-style-type: none"> • identifying and incorporating the contemporary evidence-base • implementing the change or program • evaluating the outcomes of the new or changed program. <p>When applying for <u>re-accreditation</u>, outline the processes for regular review of the program. Describe the processes for:</p> <ul style="list-style-type: none"> • undertaking evaluations of the program by relevant stakeholders • identifying areas of strength and areas where improvement is needed • making revisions and minor changes • evaluating and communicating the outcomes of the changes. <p>In both cases, the focus should be on describing how the processes support the development/review of a program which is consistent with its purpose and is appropriate for the contemporary context in which it is delivered. Explain how the program is directed towards the achievement and demonstration by learners of the required performance outcomes. The description should also include evidence that the curriculum and assessment are aligned with and address all the current performance outcomes.</p> <p>Learner perceptions of aspects of the overall program such as quality, relevance, workload and sequencing are likely to</p>	<p>rates, time to successful completion of WIL)</p> <ul style="list-style-type: none"> • RPL policies and procedures • Cross-referencing to Criterion 3.3 is likely to be relevant.

Criterion	Evidence descriptor	Evidence examples
	<p>be significant, however providers are expected to provide a commentary on the results.</p> <p>Explain how the program has been designed to allow RPL to take place, including strategies for learning and assessment that considers the skills and experience of individual learners. The explanation should include:</p> <ul style="list-style-type: none"> • how assessments are designed to ensure demonstration of all the required performance outcomes • how RPL is awarded for individual units of the program • how learning and assessment tasks requiring completion are determined. 	
<p>Criterion 3.3</p> <p>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</p>	<p>Describe how the processes of stakeholder consultation both internally (within the program provider) and externally (involving persons outside the program provider) assure the quality of the program overall and facilitate quality improvement.</p> <p>The narrative should explain:</p> <ul style="list-style-type: none"> • the rationale for inclusion of the stakeholders who are consulted • processes and mechanisms through which their input is received • how their input is used • how the outcomes of stakeholder consultations are evaluated 	<ul style="list-style-type: none"> • Flowchart highlighting specifically where internal and external stakeholders are involved in the processes described • Policies, procedures and schedules for the processes described • Composition, terms of reference, minutes and action plans of relevant committees/advisory groups. • Cross-referencing to the outcomes of evaluation activities (e.g. learner feedback, other stakeholder feedback surveys), and outcomes of external moderation and review

Criterion	Evidence descriptor	Evidence examples
are clearly communicated in a timely manner to stakeholders.	<ul style="list-style-type: none"> • how outcomes are communicated to stakeholders. 	processes (Criterion 5.3) may be relevant.
<p>Criterion 3.4</p> <p>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.</p>	<p>Outline how and where these elements are included in the curriculum, and the rationale for their inclusion.</p> <p>Explain how the input of Indigenous people is achieved, and their role in design, content, delivery and assessment to ensure appropriateness and relevance.</p>	<ul style="list-style-type: none"> • Curriculum and assessment maps • Composition, terms of reference, minutes and action plans of relevant committees/advisory groups • Unit outlines • Teaching allocations.
<p>Criterion 3.5</p> <p>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.</p>	<p>Outline how and where these elements are included in the curriculum and the rationale for their inclusion.</p> <p>Evidence relating to this criterion is likely to be varied and to some extent dependent on context. Program providers are expected to demonstrate that all learners are able to provide sensitive and responsive care consistent with the principles of cultural safety, to recognise the influence of cultural diversity, and to tailor their interactions and care to the individuals with whom they come into contact.</p> <p>Cultural diversity encompasses the varying social, economic and geographic circumstances of consumers as well as their cultural backgrounds, disability status, religions, beliefs and</p>	<ul style="list-style-type: none"> • Curriculum and assessment maps • Unit outlines • Minutes and action plans of relevant committees/advisory groups • Staff development and training programs.

Criterion	Evidence descriptor	Evidence examples
	<p>practices, languages spoken, sexual orientation, gender identity, gender expression, and sex characteristics.⁵</p> <p>Evidence based on simulation may be used since it is recognised that geographical and other considerations will restrict the ability for learners to interact directly with every possible culture. Program providers should focus on providing evidence that learners have consistently demonstrated the delivery of care consistent with the principles of cultural safety and responsiveness in whatever context they are placed.</p> <p>Describe how staff demonstrate their understanding and appreciation of cultural diversity. Evidence for this aspect may include relevant training and examples from their teaching or other activities.</p>	
<p>Criterion 3.6</p> <p>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.</p>	<p>Describe the resources available and explain how they meet the current needs of the program.</p> <p>Evidence may include a list of available resources but must also include an explanation of how their fitness-for-purpose is evaluated. This may include the quality and sufficiency of:</p> <ul style="list-style-type: none"> • teaching spaces for classes of the required size (if applicable) • access to information sources • spaces (physical and/or virtual) for learner interactions (if applicable) 	<ul style="list-style-type: none"> • Summaries of available resources • Learner and staff feedback (e.g. satisfaction) • Terms of reference, minutes and action plans of relevant committees • Needs analysis documentation • Internal and/or external evaluation documentation

⁵ ACSQHC (2020) Definition of diversity, Accessed 16-Nov-23 at [Resources for the NSQHS Standards | Australian Commission on Safety and Quality in Health Care](#)

Criterion	Evidence descriptor	Evidence examples
	<ul style="list-style-type: none"> technologies for communication technologies associated with contemporary educational and professional practice. <p>Describe the processes by which the sufficiency and quality of resources are reviewed and evaluated, and improvements are undertaken.</p> <p>Outline the processes by which adequate financial support is gained for both urgent and longer-term resource requirements.</p> <p>The focus of this criterion is on ensuring that the resources are fit-for-purpose. Evidence should also include evaluation of the capacity of the resources to support anticipated changes in enrolment, and key resource risks to the sustainable delivery of the program.</p> <p>Resources required for the program but not provided by the program provider should be explicitly indicated to potential learners, including any support available for the learner to access the resources.</p>	<ul style="list-style-type: none"> Records of recent changes may be relevant as evidence of current fitness-for-purpose. Cross-referencing to risk management documentation may also be relevant.
<p>Criterion 3.7</p> <p>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</p>	<p>The focus of this criterion is on ensuring that the staffing profile is sufficient and appropriate for the quality and sustainability of the program, thus both quantitative and qualitative evidence and analysis are expected.</p> <p>Evidence should also include evaluation of the capacity of staff to support anticipated changes in enrolment and key staffing risks to the sustainable delivery of the program.</p>	<ul style="list-style-type: none"> Structured staff listings including relevant details of individuals' expertise and experience Organisational charts Terms of reference, minutes and action plans of relevant committees

Criterion	Evidence descriptor	Evidence examples
<p>opportunities for relevant professional review and development.</p>	<p>Explain why the staff cohort currently available to the program is sufficient and appropriate. Evidence may include a staff list outlining qualifications, experience, expertise, responsibilities and other indicators but must also include an explanation of how the program requirements are met. This may include a description of how:</p> <ul style="list-style-type: none"> • the expertise and experience of academic staff are aligned with the curriculum content, delivery and assessment • program leadership is structured and provided • the need for sessional, specialist practitioner and/or other supervisory staff is determined and the process for their recruitment, induction and ongoing support • the need for professional, technical and administrative staff is determined and the process for their recruitment, induction and ongoing support • learners are exposed to professional practitioners and role models to enable them to develop professional attributes and behaviours. <p>Staff CVs are not expected or required. The focus is on the capacity of the staff cohort overall to ensure sustainable delivery of the program, not on the specific capabilities of each individual staff member.</p> <p>Outline the relevant support, guidance and resources available to staff, and the processes for regular review of their performance.</p>	<ul style="list-style-type: none"> • Staff professional/performance review and development policies and procedures (at the program level) • Recruitment policies and procedures (at the program level) • Staff induction processes and documentation (at the program level) • Cross-referencing to risk management and curriculum documentation is likely to be relevant.

Criterion	Evidence descriptor	Evidence examples
	<p>Explain how professional development needs are identified, and appropriate opportunities for development activities are made available, including those relating to leadership roles.</p>	
<p>Criterion 3.8</p> <p>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.</p>	<p>Outline how and where opportunities for interprofessional learning are included in the program and the rationale for their inclusion.</p> <p>Describe how opportunities address the required performance outcomes for interprofessional and collaborative practice, including collaboration with consumers.</p> <p>Evidence based on simulation may be used since it is recognised that geographical and other considerations may restrict the ability of learners to participate directly and regularly in clinical interprofessional teams. However, the program provider should focus on providing evidence that learners have consistently demonstrated appropriate interprofessional skills and behaviours in whatever context they are placed.</p>	<ul style="list-style-type: none"> • Curriculum and assessment maps • WIL map, including activities and assessments • Unit outlines, learning objectives, and task descriptions • Learner feedback and reflections • Stakeholder evaluations, including where possible, those from consumers.
<p>Criterion 3.9</p> <p>The program provider operates in an environment informed by contemporary scholarship, research and enquiry.</p>	<p>Explain how evidence derived from contemporary scholarship, research and enquiry is incorporated into the program. This may include evidence relating to prescribing and/or the practice of pharmacy more broadly. Pedagogical evidence may also be relevant.</p> <p>Outline how and where opportunities for the use of skills in research, analysis, enquiry, and application of current evidence to prescribing, consumer advice and</p>	<ul style="list-style-type: none"> • Curriculum and assessment maps • Assessment rubrics • Unit outlines.

Criterion	Evidence descriptor	Evidence examples
	recommendations are included in the curriculum, in order for learners to demonstrate the required performance outcomes.	

Domain 4 Learner experience

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

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 4.1</p> <p>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.</p>	<p>Explain how the policies, procedures and criteria for entry into the program ensure that applicants are treated fairly and without unfair/unlawful discrimination.</p> <p>Explain how and when exceptions to selection policies and criteria are made in the case of individual applicants, outline the criteria which are taken into consideration, and explain how these criteria are applied consistently to ensure applicants are treated fairly and without unfair/unlawful discrimination.</p> <p>Explain how the program applies RPL policies and procedures including how RPL is assessed and awarded for individual units of the program.</p>	<ul style="list-style-type: none"> • Published entry criteria • Policies and procedures for special consideration and reasonable accommodations relating to admission • Policies and procedures for RPL (cross-referencing with Criterion 3.2 may be appropriate) • Examples of the application of entry or RPL criteria to program requirements • Minutes and action plans of relevant committees • Communications relating to decisions to make or refuse exceptions.
<p>Criterion 4.2</p> <p>Program information, including program purpose, selection policies, criteria and processes, program structure, inherent requirements, recognition of prior learning (RPL)</p>	<p>Explain how, when and where the relevant information is made available, including who is responsible for ensuring currency and accuracy.</p> <p>Outline the processes for receiving, managing and responding to enquiries from potential applicants.</p>	<ul style="list-style-type: none"> • Promotional and informational materials • Excerpts/screenshots from websites

Criterion	Evidence descriptor	Evidence examples
<p>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.</p>	<p>Explain how these processes and the provision of information are appropriate and sufficient to facilitate learners to make informed decisions.</p>	<ul style="list-style-type: none"> • Minutes and action plans of relevant committees • FAQs • Enquiry logs.
<p>Criterion 4.3</p> <p>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.</p>	<p>Outline the processes and mechanisms for communicating program information about resources and support systems with learners and explain how they are used by both staff and learners, including an analysis of their effectiveness. These may include:</p> <ul style="list-style-type: none"> • orientation and induction processes • academic, general welfare and wellbeing support • learning resources (such as physical spaces, online learning management system, information and library resources, self-directed learning resources) • peer support networks • effective supervision and mentoring. <p>Describe how the timing of communications appropriately address and balance both learner and staff needs and explain how urgent communication with learners is facilitated.</p>	<ul style="list-style-type: none"> • Informational materials • Excerpts/screenshots from websites • Electronic and other communications methods • Learner feedback • Orientation and induction processes • Supervision processes and expectations • Required resources including software and other technology to support learning, including during WIL experiences.
<p>Criterion 4.4</p>	<p>Outline the processes for identifying learners with backgrounds or circumstances which create challenges for equitable participation</p>	<ul style="list-style-type: none"> • Policies and procedures for reasonable accommodations,

Criterion	Evidence descriptor	Evidence examples
<p>The program provider ensures that the principles of equity and diversity are embedded in the program to ensure the absence of unfair/unlawful discrimination.</p>	<p>in the program (including but not limited to cultural and linguistic diversity, disability, health issues and geographical location), and describe the programs and mechanisms which are available for their support.</p> <p>Explain how these programs and mechanisms provide opportunities for increased equity, how learners are advised about the options open to them, and how outcomes for learners are monitored.</p> <p>Explain how decisions are made and applied regarding reasonable accommodations, and in particular how any policies and/or procedures of the provider organisation are implemented at the level of program delivery.</p>	<p>accessibility options, counselling, and other relevant learner services</p> <ul style="list-style-type: none"> • Informational materials • Minutes and action plans of relevant committees • Decision logs • Staff orientation and induction processes • Learner feedback.
<p>Criterion 4.5</p> <p>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.</p>	<p>Describe the program provider's policies and processes for responding to:</p> <ul style="list-style-type: none"> • learner appeals against decisions which affect them • concerns and grievances raised by learners. <p>Where relevant, explain how the policies and processes of a provider organisation are implemented at the level of program delivery.</p> <p>Explain how the program provider ensures learners are made aware of these policies and processes, and how it ensures:</p> <ul style="list-style-type: none"> • consistency of approach • procedural fairness • transparency 	<ul style="list-style-type: none"> • Policies and procedures • Informational materials • Excerpts/screenshots from website • Electronic and other communications • Records of appeals and outcomes • Records of complaints and outcomes • Learner feedback.

Criterion	Evidence descriptor	Evidence examples
	<ul style="list-style-type: none"> • impartiality • appropriate confidentiality • timeliness of resolution. 	
<p>Criterion 4.6</p> <p>The program provider identifies and manages all actual, perceived and potential conflicts of interest proactively, consistently and fairly.</p>	<p>Outline the program provider’s conflict of interest policy and processes, and explain how conflicts of interest are:</p> <ul style="list-style-type: none"> • identified • documented • communicated • managed. <p>Outline the mechanisms for the development, implementation, communication and regular review of the policy and processes, and where relevant explain how the policies and processes of the provider organisation are implemented at the level of program delivery.</p>	<ul style="list-style-type: none"> • Conflict of interest policy and procedures directly relating provider and/or program, including WIL • Conflict of interest registers • Incident reports and logs • Policy review schedule • Minutes and action plans for relevant committees/advisory groups • Examples of communications regarding specific incidents and/or possible conflicts.
<p>Criterion 4.7</p> <p>Learners are actively engaged with governance and program management structures and decision-making processes, through both formal and informal mechanisms.</p>	<p>Describe the mechanisms for involving learners in the governance and operational aspects of the program and explain how their participation and engagement influences decisions relating to the program and learner experiences of it.</p>	<ul style="list-style-type: none"> • Organisational charts • Processes for learner consultation and engagement • Membership, terms of reference and minutes of committees with learner members

Criterion	Evidence descriptor	Evidence examples
		<ul style="list-style-type: none"> • Examples of specific learner contributions • Processes for feedback to learner cohort.

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	Evidence descriptor	Evidence examples
<p>Criterion 5.1</p> <p>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.</p>	<p>Describe the overall assessment matrix, and the types of assessment tools which are used.</p> <p>Outline how assessments are aligned with learning outcomes and learning activities and explain the rationale for the choice of assessment approaches adopted, including any relevant evidence.</p> <p>Explain how assessments support learning progressively throughout the program and provide evidence of the learner's ability to demonstrate all required performance outcomes at specific timepoints (e.g. prior to WIL, and at the conclusion of the program).</p>	<ul style="list-style-type: none"> • Curriculum and assessment maps • Assessment matrices and rubrics • Internal and external review policies and reports • Learner feedback • Primary supervisor feedback • Policies and procedures for evaluating learner performance as a whole (e.g. Boards of Examiners).
<p>Criterion 5.2</p> <p>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.</p>	<p>Explain how validity and reliability are evaluated and/or measured, where relevant.</p> <p>Maps of curriculum and assessments to the performance outcomes are likely to form a major part of the evidence, and where provided must be well described in the narrative.</p>	

Criterion	Evidence descriptor	Evidence examples
<p>Criterion 5.3</p> <p>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>Outline the policies and processes for independent or external review of assessments for the purposes of quality assurance and improvement.</p> <p>Explain how these are implemented, and how the outcomes are used to develop the program, including the scope of the reviews and how:</p> <ul style="list-style-type: none"> • reviewers are selected and recruited • the timing and cycles of reviews are determined • recommendations are considered • changes are implemented • outcomes are communicated • effects of changes are evaluated. <p>Where relevant, explain how the policies and processes of a provider organisation are implemented at the level of program delivery.</p>	<ul style="list-style-type: none"> • Policies and procedures • Review/moderation schedules • Review/moderation agreements • External moderation reports • Excerpts of committee meeting minutes and action plans • Learner, primary supervisor and assessor feedback.
<p>Criterion 5.4</p> <p>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>Outline the policies and processes for internal development and review of assessments, and where relevant, explain how the policies and processes of a provider organisation are implemented at the level of program delivery.</p> <p>Explain how:</p> <ul style="list-style-type: none"> • expected standards of performance are determined • criteria for successful completion of assessment tasks are established 	<ul style="list-style-type: none"> • Policies and procedures as implemented at the program level (e.g. use of text-matching software) • Assessment task descriptions and rubrics • Assessment instructions/guidance for learners, primary supervisors and assessors

Criterion	Evidence descriptor	Evidence examples
	<ul style="list-style-type: none"> • criteria for assessment of learner performance are developed and reviewed, and rubrics developed where relevant • assessment tasks are reviewed/validated prior to delivery • criteria and rubrics are communicated to learners, staff and health professionals involved in the assessment • outcomes of assessments are reviewed and evaluated • any problems identified with an assessment task are addressed appropriately and in a timely manner. <p>If relevant, explain how assessments undertaken in WIL experiences are designed to be carried out fairly across the learner cohort and a variety of practice settings. Outline specific mechanisms available to support and/or facilitate assessments in particular settings.</p>	<ul style="list-style-type: none"> • Examples of completed assessments (representing different levels of performance) and feedback provided • Feedback from assessors and primary supervisors • Incident and appeal reports.
<p>Criterion 5.5</p> <p>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>Outline the policies and processes for ensuring that assessments (including evaluation of RPL) are carried out consistently by appropriate qualified assessors, and where relevant, explain how the policies and processes of a provider organisation are implemented at the level of program delivery.</p> <p>Explain how:</p> <ul style="list-style-type: none"> • assessors are allocated to particular assessment tasks • assessors are provided with assessment criteria, rubrics, other necessary resources and opportunities to seek clarification • where relevant, appropriate assessment briefing and/or training is provided 	<ul style="list-style-type: none"> • Assessment policies and procedures as implemented at the program level (e.g. double-marking, expectations of feedback to be provided by assessors) • Assessor and supervisor recruitment, selection (e.g., for OSCEs), induction, training and briefing documentation

Criterion	Evidence descriptor	Evidence examples
	<ul style="list-style-type: none"> assessment feedback (including that relating to formative assessments) is formulated, provided to, and discussed with learners. <p>Outline the processes for recruitment of assessors, including primary supervisors and other contributors who are external to the program provider, and describe the training and other support available to them.</p> <p>Outline the mechanisms for monitoring intra- and inter-assessor consistency in applying assessment criteria, and procedures for moderating or adjusting assessment outcomes where appropriate.</p> <p>Explain the program provider’s expectations of assessors for providing justification of their assessment decisions, particularly where the assessor judges that the assessment fails to meet the minimum criteria.</p>	<ul style="list-style-type: none"> Peer review or moderation processes for individual assessment tasks Cross-referencing to evidence associated with Criterion 3.7 is likely to be relevant.
<p>Criterion 5.6</p> <p>Learners are provided with appropriate, timely and sufficient feedback to enable them to improve future performance</p>	<p>Outline the policies and procedures relating to the provision of feedback to learners on performance in assessments, and explain the expectations and rationale for:</p> <ul style="list-style-type: none"> turnaround times extent of personalised feedback inclusion of suggestions for future improvement. <p>Describe the extent to which these expectations are met. Learner feedback is likely to be a primary source of evidence.</p> <p>Outline support and/or training provided for assessors and primary supervisors, including that related to the provision of feedback.</p>	<ul style="list-style-type: none"> Assessment policies and procedures as implemented at the program level (e.g. turnaround times, expectations of feedback to be provided by assessors) Learner feedback and satisfaction, including through formal evaluations and informal mechanisms Induction/training programs or supports for primary supervisors and assessors.

Criterion	Evidence descriptor	Evidence examples
	Describe the level of, and role, of consumers in assessments, including the provision of feedback to learners.	
<p>Criterion 5.7</p> <p>Comprehensive assessment/s of prescribing performance is/are completed to provide evidence of learner’s ability to perform the entire prescribing process consistent with defined performance outcomes.</p>	<p>Outline how learners are provided opportunities to practise their developing prescribing skills throughout the program.</p> <p>Describe how learners demonstrate their ability to perform all performance outcomes longitudinally across the program and how their ability to complete an entire prescribing consultation, using consolidated prescribing competencies, is assessed.</p>	<ul style="list-style-type: none"> • Assessment policies and procedures • Instructions to assessors (and where relevant, supervisors) regarding assessments, including WBA • Assessment map (including formative, summative, WBA), rubrics, cross referenced to the Performance Outcomes Framework • Examples of assessments, including those that review the ability to perform whole process • Examples of feedback provided to learners (indicating opportunity to practice).



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