

# Accreditation Standards 2020

for Pharmacy Programs

## Performance Outcomes Framework

Updated October 2022

Inactive - Do not use

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# Preamble

In Australia, the pharmacy profession is regulated by the Pharmacy Board of Australia (PharmBA) under the National Registration and Accreditation Scheme (NRAS), which came into effect on 1 July 2010 through the passage of nationally consistent legislation by the governments of the six Australian states, the Northern Territory and the Australian Capital Territory.

Under NRAS, the Australian Pharmacy Council (APC) has been appointed as the independent accreditation authority for pharmacy in Australia. The accreditation functions of the APC are undertaken by the APC Accreditation Committee (AC) under delegation from the APC Board and include accreditation of pharmacy degree and intern training programs, and continuing professional development (CPD) accrediting organisations.

To be eligible for initial general registration as a pharmacist in Australia, an individual must successfully complete:

- an approved degree program
- a period of supervised practice which must include

satisfactory completion of an accredited intern training program (ITP), and

- mandatory external assessments.

In 2019, the APC undertook a review of the Pharmacy Program Accreditation Standards, and the revised Standards were approved by the PharmBA in September 2019 for implementation in 2020. These Standards are underpinned by the principle of social accountability, and represent an integrated approach to the accreditation of pharmacy degree and intern training programs which specifically recognises and acknowledges the continuum of education leading to initial general registration as a pharmacist.

# Introduction

## Why Performance Outcomes?

Throughout the *Accreditation Standards for Pharmacy Programs 2020* (Updated October 2022), reference is made to the achievement and demonstration of performance outcomes to the appropriate level necessary for safe and socially accountable practice. This document sets out the performance outcomes to be achieved and demonstrated by pharmacy degree program graduates and applicants for initial general registration and forms a companion to the Accreditation Standards.

The desirability of a Performance Outcomes Framework emerged during stakeholder consultations for the Accreditation Standards, and the Performance Outcomes themselves were developed following additional targeted feedback from stakeholders. The Performance Outcomes Framework was approved by the APC Board in November 2019.

## Purpose

A key principle underpinning the review of the Accreditation Standards was that the Standards should be future-focused and provide significant flexibility to enable education providers to adapt their programs in response to new and emerging scopes of practice. This principle is consistent with and forms part of a commitment to social accountability in the education and training of pharmacists in Australia. Social accountability in pharmacy, as defined in the Glossary to the Accreditation Standards encompasses:

- **a willingness and ability on the part of pharmacists to:**
  - deliver culturally safe and responsive person-centred care
  - address the health care needs of individuals and the wider society
  - assume responsibility for the sustainable use of health care resources
  - contribute to the ongoing improvement of individual and societal health outcomes.

- **the obligation of education providers to:**
  - provide education and training programs leading to provisional and/or general registration which promote the development of socially accountable pharmacists
  - undertake research and service activities targeted towards addressing the current and future priority health concerns of society
  - advocate for, contribute to, and lead practice change for the ongoing improvement of individual and societal health outcomes.

The Performance Outcomes complement the Accreditation Standards and provide a more detailed framework of the means by which pharmacists and pharmacy education providers articulate and enact social accountability at the milestone completion points of degree programs and initial general registration.

## Rationale

Education providers must have a framework which allows them to collect and present evidence that their graduates meet the requirements of the profession at a standard commensurate with particular milestones along the path to registration. Specifically, the Performance Outcomes outline what an individual is able to do on successful completion of a relevant degree program and at the point of initial general registration (that is, on completion of all required elements of the intern year). Their purpose is to signal curriculum priorities to guide education providers; to highlight critical outcomes for patients, society and the profession; and to provide a framework for initial pharmacy education which supports and promotes the ongoing development of pharmacists who are equipped to serve society into an unknown future.

A Performance Outcomes Framework offers advantages in comparison to alternative frameworks such as learning outcomes and competency standards in that while considerable overlap exists between them:

- performance is visible, demonstrable and observable whereas the learning which underpins performance is implied

- performance of discrete professional activities and behaviours is frequently dependent on the coordinated selection and application of multiple appropriate enabling competencies
- a Performance Outcomes Framework allows specific tailoring to the needs of education providers and accreditation authorities while maintaining the integrity of the profession's consensus standards and expectations regarding competency and professional practice.

## Intent

The intent of publishing a Performance Outcomes Framework as a complement to the Accreditation Standards is to streamline the alignment of curriculum and assessment for providers of pharmacy education programs, and to provide transparency regarding the demonstrable performance to be expected by graduates of degree programs and initial general registrants. This transparency is intended to assist ITP providers (and intern preceptors) in particular, by clarifying the expected entry performance of individuals commencing the intern year irrespective of the degree program from which they have graduated. It is also intended to assist providers to design and implement appropriate and authentic assessments which provide evidence of the achievement of relevant practice capabilities. An equivalent document, *A customised tool of entry-level competencies incorporating guidance on Pharmacy School and Intern Training Provider contributions* (2011)<sup>1</sup>, was published as a complement to the previous *National Competency Standards Framework for Pharmacists in Australia* (2010) and assigned responsibilities to pharmacy schools and intern training providers in the preparation and assessment of pharmacy graduates and candidates for initial registration as a pharmacist in Australia. The Performance Outcomes Framework represents the development and evolution of this approach.

The Performance Outcomes Framework does not replace any of the consensus documents endorsed by the pharmacy profession. Specifically, the Performance Outcomes do not represent a revision

1. Advanced Pharmacy Practice Framework Steering Committee (2011). An Analysis of the Source of Learning and Development for Initial Registration as a Pharmacist in Australia. Accessed 15-Nov-2022 at <https://ahha.asn.au/sites/default/files/docs/page/customised-entry-level-competency-tool.pdf>

of the *National Competency Standards Framework for Pharmacists in Australia* (2016). The Performance Outcomes Framework is intended to be a means of:

- facilitating the assessment of competent performance within pharmacy programs
- assuring the profession that degree program graduates and initial general registrants have demonstrated the capability to undertake practice to the expected level.

The National Competency Standards Framework remains the definitive standards endorsed by the profession of pharmacy in Australia, and the Performance Outcomes are most appropriately regarded as a re-packaging in a manner that is tailored to serve the needs of education providers in teaching and assessing the achievement of those Competency Standards. Further, the articulation of “performance” highlights the need, in many circumstances, for the appropriate expression of multiple competencies in a coordinated and context-dependent manner to achieve a defined outcome, including outcomes for a patient. Where an individual is able to demonstrate all performance outcomes, that individual will have demonstrated achievement of all of the required competency standards.

## Development of the Performance Outcomes Framework

Feedback from stakeholders supported the development of a Performance Outcomes Framework which was consistent with the *National Competency Standards Framework for Pharmacists in Australia* (2016) as the definitive standard for the practice of pharmacy in Australia, and which therefore incorporated all the competencies required for entry into the profession at the point of initial general registration.

This requirement has been met through ensuring that all the enabling competencies of the National Competency Standards Framework are encompassed by the Performance Outcomes Framework. A map of the performance outcomes against these enabling competencies is included as Appendix A.

The Performance Outcomes Framework has also been informed by a range of additional sources in order to provide additional guidance about the scope and nature of the activities or tasks to be performed and assessed. These include the:

- Pharmacy Learning Outcomes and Exemplar Standards (PhLOS)<sup>2</sup> derived from the Threshold Learning Outcomes for Health, Medicine and Veterinary Science<sup>3</sup>
- Professional Practice Standards – Version 5, June 2017, PSA
- Codes and Guidelines (PharmBA, professional codes)
- General Pharmaceutical Council Accreditation Standards draft 2018 (Learning outcomes)
- Accreditation Council for Pharmacy Education Standards 2016 (Educational outcomes)
- Association of Faculties of Pharmacy of Canada Educational Outcomes 2017
- Graduate/Generic Qualities/Attributes/Capabilities – various universities;

together with feedback from participants in face-to-face consultations and members of the Governance and Reference Groups.

In recognition of the dynamic and evolving nature of the profession, regular review of the Performance Outcomes Framework will facilitate the incorporation in a timely manner of new and/or expanded scopes of practice as they develop and emerge.

2. Stupans et al (2013). Australian Pharmacy Network: Learning outcomes for pharmacy curriculum. Accessed 15-Nov-2022 at [https://tr.edu.au/resources/SI11-2117\\_Australian\\_Pharmacy\\_Network.pdf](https://tr.edu.au/resources/SI11-2117_Australian_Pharmacy_Network.pdf)

3. Henderson et al (2011). Learning and teaching academic standards project health, medicine and veterinary science: Learning and teaching academic standards statement. Accessed 15-Nov-2022 at [http://disciplinestandards.pbworks.com/w/file/attach/52723773/altc\\_standards\\_HMVS\\_210611.pdf](http://disciplinestandards.pbworks.com/w/file/attach/52723773/altc_standards_HMVS_210611.pdf)



## Structure

The Performance Outcomes Framework comprises five domains which are aligned with the five domains of the *National Competency Standards Framework for Pharmacists in Australia* (2016) as illustrated in the table below.

Competency Standards Domain	Performance Outcomes Domain
1. Professionalism and ethics	1. Professionalism in practice
2. Communication and collaboration	2. Communication and collaboration
3. Medicines management and patient care	3. Professional expertise
4. Leadership and management	4. Leadership and management
5. Research and education	5. Research, inquiry and education

Each domain includes a domain descriptor which is a summary statement of the scope of the domain, followed by a list of outcomes which describe the scope in more detail. In order to foreground the continuum of learning and development throughout the five years of the education pathway, two parallel streams have been articulated. The wording of each parallel outcome in the two streams is consistent but not always identical in order to account for the differential level of performance expected of:

- graduates of approved pharmacy degree programs, and
- applicants for initial general registration as a pharmacist.

Where the wording of parallel outcomes is very similar or identical, the stems for the domain differentiate between the nature or level of performance expected for the two milestones. In general, performance outcomes to be demonstrated by degree program graduates can be demonstrated in educational, simulated and/or work-integrated learning (WIL) environments, and/or under appropriate supervision and with appropriate support. Applicants for initial general registration are expected to be able to demonstrate independent or autonomous performance without the need for supervision. In addition, applicants for general registration are in many cases expected to have

demonstrated performance over an extended period of time, and/or to have performed at a qualitatively different level from that which is feasible within the university context. The use of **bolding** in the text is intended to clarify the differences in performance which are expected in relation to the two milestones.

A number of performance outcomes have been expressed in holistic terms while others have been broken down into a number of constituent components. In relation to the latter, the purpose is to:

- clarify the components which are expected to be included in the overall assessment schema
- allow providers the flexibility to decide whether to assess one or more components individually, or to create integrated assessments of the performance outcome as a whole
- allow assessment of the performance outcome progressively through the program where some components can be demonstrated at an earlier stage, and others (or the whole performance outcome) at a later stage
- facilitate the use of a spiral curriculum and progressive assessment at more advanced levels during the program.

It is likely that the majority of performance outcomes assessments during the intern year will involve integrated or holistic assessments.

## Milestones and assessment

The two milestones articulated in the Performance Outcomes Framework are:

1. completion of an approved pharmacy degree program capable of leading to general registration
2. the point at which consideration can be applied to general registration as a pharmacist, following completion of all elements of the intern year.

It is important to note that the achievement of Milestone One clearly correlates with the responsibilities of degree program providers and thus the provider is expected to show evidence that graduates of its programs have met the performance outcomes for that milestone.

The achievement of Milestone Two, on the other hand, does not correlate with the responsibilities of ITP providers, since they comprise one of a number of relevant stakeholders in the intern year, and are not able to dictate or monitor all aspects of interns' participation or performance. This represents a point of difference from the philosophy underpinning *A customised tool of entry-level competencies incorporating guidance on Pharmacy School and Intern Training Provider contributions* (2011)<sup>1</sup>, which focused only on education providers. Assessment of the demonstrated achievement of the performance outcomes required at the point of general registration is shared between regulatory

authorities (APC, PharmBA), preceptors/supervising pharmacists, ITP providers and interns themselves.

Individual performance in relation to each performance outcome must be assessed using appropriate methodologies and by appropriate assessors. Responsibility for assessment of achievement of the performance outcomes required at the point of general registration is shared between a number of stakeholders, and close collaboration is critical to ensure the assessments are appropriate and comprehensive, particularly as they involve work-integrated learning. The APC has developed an iteration of the [Intern Year Blueprint](#) to provide guidance about the nature and mix of assessments that are appropriate for assessment of each of the performance outcomes in the Performance Outcomes Framework. Specifically, this work delineates the roles and responsibilities of the stakeholders involved in the breadth of assessments undertaken in the intern year, including interns themselves, preceptors and supervising pharmacists, ITP providers, providers of external assessments (currently APC and PharmBA) and any other relevant stakeholders. It is noted that the role of ITP providers in the direct assessment of intern performance is currently limited and is not expected to increase substantially. The role of ITP providers in relation to the assessment of performance outcomes is explained in more detail in the [Intern Year Blueprint](#).

# Underpinning knowledge, skills and behaviours

While the Performance Outcomes Framework describes observable performance, it is essential that the underpinning knowledge, skills and behaviours which comprise the necessary foundation for performance are clearly articulated and appropriate. In the 2014 Accreditation Standards for Pharmacy Programs these were articulated in six learning domains included in Appendix 1; these have been revised and are included in the 2020 Accreditation Standards Supporting Documents.

# Performance Outcomes Framework

## Domain 1 Professionalism in practice

Pharmacists are responsible and socially accountable for achieving and maintaining high standards of behaviour in order to earn and uphold the trust of the public and meet the expectations of the profession.

On successful completion of an approved pharmacy degree program capable of leading to general registration, pharmacy graduates have demonstrated evidence of competency in educational, simulated and/or work-integrated learning environments, in	At the point of general registration as a pharmacist, pharmacists are competent in and committed to
<b>1.1 promoting</b> both the best interests and safety of patients and the public	<b>1.1 promoting</b> and <b>ensuring</b> both the best interests and safety of patients and the public
<b>1.2 promoting</b> and <b>advocating</b> for cultural safety, respect and responsiveness, particularly in relation to Aboriginal and Torres Strait Islander peoples	<b>1.2 promoting, maintaining</b> and <b>advocating</b> for cultural safety, respect and responsiveness, particularly in relation to Aboriginal and Torres Strait Islander peoples
<b>1.3 recognising</b> the presence and causes of health inequities and disparities, including the impact of social determinants of health	<b>1.3 recognising</b> the presence and causes of health inequities and disparities, including the impact of social determinants of health, and <b>seeking</b> to address them

<p><b>1.4 practising</b> legally by</p> <ul style="list-style-type: none"> <li>a. demonstrating contemporary knowledge and application of legal requirements relating to community and hospital pharmacy practice within their jurisdiction</li> <li>b. demonstrating awareness of the processes for maintaining contemporary familiarity with key legislative instruments</li> </ul>	<p><b>1.4 practising</b> legally by</p> <ul style="list-style-type: none"> <li>a. complying with all legal obligations in their practice</li> <li>b. maintaining contemporary familiarity with key legislative instruments</li> </ul>
<p><b>1.5 practising</b> ethically and with integrity by</p> <ul style="list-style-type: none"> <li>a. identifying potential ethical issues and dilemmas, including conflicts of interest, relating to practice</li> <li>b. considering alternative strategies and choosing an appropriate course of action in response to ethical issues and dilemmas</li> <li>c. demonstrating awareness of relevant professional codes, guidelines and standards and their content</li> <li>d. recognising and formulating strategies to respond appropriately to situations which fall outside their expected scope of practice or competence</li> </ul>	<p><b>1.5 practising</b> ethically and with integrity by</p> <ul style="list-style-type: none"> <li>a. recognising ethical issues and dilemmas, including conflicts of interest, in practice as they arise</li> <li>b. considering alternative strategies and adopting an appropriate course of action in response to ethical issues and dilemmas</li> <li>c. maintaining current familiarity and compliance with professional codes, guidelines and standards</li> <li>d. recognising and responding appropriately to situations which fall outside their current scope of practice or competence</li> </ul>
<p><b>1.6 demonstrating</b> a proactive and reflective approach to <b>developing</b> their own professional competence and expertise</p>	<p><b>1.6 adopting</b> a proactive and reflective approach to <b>maintaining</b> and <b>developing</b> their own professional competence and expertise in order to <b>remain</b> fit-to-practise</p>
<p><b>1.7 demonstrating</b> awareness of appropriate change management principles and strategies</p>	<p><b>1.7 responding</b> to change in a flexible and adaptable manner</p>
<p><b>1.8 accepting</b> personal responsibility and accountability for decisions and actions</p>	<p><b>1.8 accepting</b> personal responsibility and accountability for decisions and actions in professional practice</p>
<p><b>1.9 upholding</b> and <b>maintaining</b> the reputation and value of the profession</p>	<p><b>1.9 upholding</b> and <b>advancing</b> the reputation and value of the profession</p>

## Domain 2 Communication and collaboration

Pharmacists communicate appropriately and effectively with others, both within the profession and outside it, and work collaboratively with patients and within interprofessional health care teams in order to optimise patient and societal outcomes.

<p>On successful completion of an approved pharmacy degree program capable of leading to general registration, pharmacy graduates have demonstrated evidence of competency, in educational, simulated and/or work-integrated learning environments, in</p>	<p>At the point of general registration as a pharmacist, pharmacists are competent in and committed to</p>
<p><b>2.1 communicating</b> appropriately and effectively with a socially and culturally diverse range of people in a manner which inspires confidence and trust by</p> <ul style="list-style-type: none"> <li>a. demonstrating appropriately tailored verbal, written and non-verbal communication</li> <li>b. engaging with all persons in a respectful, culturally appropriate, compassionate, responsive and empathetic manner</li> <li>c. demonstrating awareness of and sensitivity to Aboriginal and Torres Strait Islander history, communication styles and community protocols</li> <li>d. demonstrating appropriate communication and interpersonal behaviours</li> </ul>	<p><b>2.1 communicating</b> appropriately and effectively with a socially and culturally diverse range of people in a manner which inspires confidence and trust by</p> <ul style="list-style-type: none"> <li>a. using verbal, written and non-verbal communication which is appropriately tailored to the professional practice context and the capabilities and health literacy of the other person(s)</li> <li>b. engaging with all persons in a respectful, culturally appropriate, compassionate, responsive and empathetic manner in professional practice</li> <li>c. engaging in culturally appropriate and sensitive communication with Aboriginal and Torres Strait Islander peoples in professional practice which respects their history, culture and protocols</li> <li>d. using appropriate communication and interpersonal behaviours in professional practice interactions</li> </ul>
<p><b>2.2 documenting</b>, communicating and recording relevant information, findings, decisions, recommendations and other information accurately and concisely, taking due account of privacy and confidentiality</p>	<p><b>2.2 documenting</b>, communicating and recording relevant information, findings, decisions, recommendations and other information accurately, concisely and in a timely manner, taking due account of privacy and confidentiality</p>

<p><b>2.3 contributing</b> to the interprofessional collaborative health care team in order to optimise patient outcomes by</p> <ul style="list-style-type: none"> <li>a. demonstrating an understanding and appreciation of the roles of pharmacists and other members of the interprofessional collaborative care team</li> <li>b. creating and maintaining effective intra- and interprofessional relationships, and working in partnership to achieve negotiated, agreed-upon objectives</li> <li>c. demonstrating appropriate teamwork behaviours</li> <li>d. demonstrating appropriate communication at transition points in patient care to reduce risks to patients and ensure safe and effective continuity of patient care</li> </ul>	<p><b>2.3 contributing to, and taking</b> prominent roles where appropriate in the interprofessional collaborative health care team, in order to optimise patient outcomes, by</p> <ul style="list-style-type: none"> <li>a. respecting and appreciating the complementary roles of pharmacists and other members of the interprofessional collaborative care team</li> <li>b. creating and maintaining effective intra- and interprofessional relationships, and working in partnership to achieve negotiated, agreed-upon objectives</li> <li>c. consistently engaging in appropriate teamwork behaviours</li> <li>d. using appropriate communication at transition points to reduce risks to patients and ensure safe and effective continuity of patient care</li> </ul>
<p><b>2.4 collaborating</b> with patients, carers and other clients in shared decision-making by</p> <ul style="list-style-type: none"> <li>a. supporting the rights of patients, carers and other clients to access relevant information and participate in decisions relating to their care</li> <li>b. respecting their choices</li> </ul>	<p><b>2.4 collaborating</b> with patients, carers and other clients in shared decision-making by</p> <ul style="list-style-type: none"> <li>a. supporting and advocating for the rights of patients, carers and other clients to access relevant information and participate in decisions relating to their care</li> <li>b. respecting their choices</li> </ul>

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## Domain 3 Professional expertise

Pharmacists are trusted professionals who use their specialist expertise proactively to make clinically, ethically and scientifically sound decisions commensurate with their role and experience, in collaboration where appropriate, in order to deliver socially accountable person-centred care.

For Domain 3, the performance outcomes have been clustered under four broad sub-domains.

On successful completion of an approved pharmacy degree program capable of leading to general registration, pharmacy graduates have demonstrated evidence of competency, in educational, simulated and/or work-integrated learning environments, under appropriate supervision and/or with appropriate support, in

At the point of general registration as a pharmacist, pharmacists are independently competent and confident in, and committed to

### Sub-domain A: Quality use of medicines, encompassing

**3.1 formulating** appropriate and effective actions and recommendations which support safe, rational and cost-effective use of medicines and other healthcare options and optimise socially accountable person-centred care by

- applying relevant underpinning knowledge
- using a systematic approach to access, critically evaluate and apply relevant evidence
- applying effective critical thinking, reasoning and problem-solving strategies to conceptualise problems, formulate a range of potential solutions, and support decision-making
- making decisions which are tailored to the person's individual circumstances, and reflect a balanced consideration of both the potential benefits and potential harms

**3.1 implementing** appropriate and effective actions and recommendations which support safe, rational and cost-effective use of medicines and other healthcare options and optimise socially accountable person-centred care by

- applying relevant underpinning knowledge
- using a systematic approach to access, critically evaluate and apply relevant evidence
- applying effective critical thinking, reasoning and problem-solving strategies to conceptualise problems, formulate a range of potential solutions, and support decision-making
- making decisions which are tailored to the person's individual circumstances, and reflect a balanced consideration of both the potential benefits and potential harms

**3.2 making and prioritising** recommendations to manage health, medical and medication needs of patients, including both pharmacological and non-pharmacological strategies, based on the Quality Use of Medicines Framework and the best available evidence

**3.2 making and prioritising** recommendations to manage health, medical and medication needs of patients, including both pharmacological and non-pharmacological strategies, based on the Quality Use of Medicines Framework and the best available evidence



<p><b>3.3 prescribing</b> medications in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines</p>	<p><b>3.3 prescribing</b> medications in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines</p>
<p><b>3.4 carrying</b> out systematic medication reviews, informed by the Quality Use of Medicines Framework, in order to identify and resolve potential medication-related issues and optimise the impact of medications on health outcomes in collaboration with patients, carers and other members of the health care team</p>	<p><b>3.4 carrying</b> out systematic medication reviews, informed by the Quality Use of Medicines Framework, in order to identify and resolve potential medication-related issues and optimise the impact of medications on health outcomes in collaboration with patients, carers and other members of the health care team</p>
<p><b>Sub-domain B: Person-centred care, encompassing</b></p>	
<p><b>3.5 demonstrating</b> the delivery of person-centred care including</p> <ul style="list-style-type: none"> <li>a. respecting the personal characteristics, rights, preferences, values, beliefs, needs and diversity of patients, carers and other persons</li> <li>b. maintaining privacy and confidentiality in interactions with patients, carers and other persons</li> <li>c. optimising as far as is practicable the physical environment in which care takes place</li> <li>d. ensuring that the best interests of patients, carers and other persons are foremost in the provision of care</li> <li>e. ensuring that patients, carers and other persons are provided with sufficient information and advice to enable them to consider options and give informed consent where appropriate</li> <li>f. ensuring that informed consent is obtained, respected and appropriately recorded when appropriate</li> </ul>	<p><b>3.5 implementing and delivering</b> person-centred care by</p> <ul style="list-style-type: none"> <li>a. respecting the personal characteristics, rights, preferences, values, beliefs, needs and diversity of patients, carers and other persons</li> <li>b. maintaining privacy and confidentiality in interactions with patients, carers and other persons</li> <li>c. optimising as far as is practicable the physical environment in which care takes place</li> <li>d. ensuring that the best interests of patients, carers and other persons are foremost in the provision of care</li> <li>e. ensuring that patients, carers and other persons are provided with sufficient information and advice to enable them to consider options and give informed consent where appropriate</li> <li>f. ensuring that informed consent is obtained, respected and appropriately recorded when appropriate</li> </ul>
<p><b>3.6 obtaining</b> relevant health, medical and medication information from patients, carers and other clients</p>	<p><b>3.6 obtaining</b> relevant health, medical and medication information from patients, carers and other clients</p>
<p><b>3.7 assessing</b> current health, medical and medication histories and profiles of patients</p>	<p><b>3.7 assessing</b> current health, medical and medication histories and profiles of patients</p>
<p><b>3.8 formulating</b> health, medical and medication management plans in collaboration with patients, carers and other health team members</p>	<p><b>3.8 formulating and implementing</b> health, medical and medication management plans in collaboration with patients, carers and other health team members</p>

<p><b>3.9 recommending</b> appropriate monitoring of the outcomes of health, medical and medication management plans and <b>recommending</b> adjustments to them where appropriate in collaboration with patients, carers and other health team members</p>	<p><b>3.9 formulating and implementing</b> appropriate monitoring of the outcomes of health, medical and medication management plans and <b>adjusting</b> them where appropriate in collaboration with patients, carers and other health team members</p>
<p><b>3.10 facilitating</b> patient self-management of health through education, intervention, monitoring and health promotion services in order to optimise patient health outcomes and wellbeing, and reduce the risk of complications</p>	<p><b>3.10 facilitating</b> patient self-management of health through education, intervention, monitoring and health promotion services in order to optimise patient health outcomes and wellbeing, and reduce the risk of complications</p>
<p><b>3.11 responding</b> to the needs of individuals and communities by advocating with and for them to optimise health and societal outcomes</p>	<p><b>3.11 responding</b> to the needs of individuals and communities by advocating with and for them to optimise health and societal outcomes</p>
<p><b>Sub-domain C: Provision of medications and other management options, encompassing</b></p>	
<p><b>3.12 consistently</b> making accurate arithmetic calculations relating to health care</p>	<p><b>3.12 consistently</b> making accurate arithmetic calculations relating to health care</p>
<p><b>3.13 administering</b> injectable formulations in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines</p>	<p><b>3.13 administering</b> injectable formulations in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines</p>
<p><b>3.14 dispensing</b> medicines safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements to optimise patient outcomes</p>	<p><b>3.14 dispensing</b> medicines safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements to optimise patient outcomes</p>
<p><b>3.15 preparing and supplying</b> extemporaneously compounded medications safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements</p>	<p><b>3.15 preparing and supplying</b> extemporaneously compounded medications safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements</p>
<p><b>3.16 demonstrating</b> awareness of the appropriate conditions for secure and safe storage and distribution of medications to ensure stability and efficacy</p>	<p><b>3.16 storing and distributing</b> medications appropriately, securely, safely and in accordance with the available evidence to ensure stability and efficacy</p>
<p><b>3.17 providing</b> appropriate tailored counselling, information and education to enable safe and effective medication, disease state and lifestyle management</p>	<p><b>3.17 providing</b> appropriate tailored counselling, information and education to enable safe and effective medication, disease state and lifestyle management</p>

<p><b>3.18 assessing</b> ambulatory conditions and <b>recommending</b> appropriate management approaches, including pharmacological, non-pharmacological and referral options where appropriate</p>	<p><b>3.18 assessing</b> ambulatory conditions and <b>providing</b> appropriate management approaches, including pharmacological, non-pharmacological and referral options where appropriate</p>
<p><b>3.19 demonstrating</b> the delivery of measures designed to enhance adherence with dosage regimens and support safe and effective administration of medications</p>	<p><b>3.19 delivering</b> measures designed to enhance adherence with dosage regimens and support safe and effective administration of medications</p>
<p><b>Sub-domain D: Health promotion and harm minimisation, encompassing</b></p>	
<p><b>3.20 providing</b> evidence-based screening, assessment, prevention and referral services to detect and manage potential risk of adverse medical conditions and outcomes</p>	<p><b>3.20 providing</b> evidence-based screening, assessment, prevention and referral services to detect and manage potential risk of adverse medical conditions and outcomes</p>
<p><b>3.21 demonstrating</b> the delivery of harm minimisation approaches and strategies to reduce harm to patients and the community from misuse of legal and illegal drugs</p>	<p><b>3.21 delivering</b> harm minimisation approaches and strategies to reduce harm to patients and the community from misuse of legal and illegal drugs</p>
<p><b>3.22 participating</b> in health promotion activities, health services and public health initiatives intended to maintain and improve health</p>	<p><b>3.22 endorsing</b> and <b>participating</b> in health promotion activities, health services and public health initiatives intended to maintain and improve health</p>

## Domain 4 Leadership and management

Pharmacists engage in self-management and management of others actively, responsibly and accountably, and undertake leadership roles commensurate with their context, professional role and experience in order to optimise the quality of health care.

On successful completion of an approved pharmacy degree program capable of leading to general registration, pharmacy graduates have demonstrated evidence of competency, in educational, simulated and/or work-integrated learning environments, in	At the point of general registration as a pharmacist, pharmacists are competent in and committed to
<p><b>4.1 undertaking</b> structured reflection as a means of enhancing learning and practice</p>	<p><b>4.1 engaging</b> in regular and systematic reflection to enhance professional learning and practice</p>
<p><b>4.2 demonstrating</b> awareness of <b>professional</b> limitations and <b>adopting</b> appropriate strategies where necessary, including additional professional education and/or referral of patients to other health care professionals</p>	<p><b>4.2 identifying</b> and <b>acknowledging professional</b> limitations and <b>seeking</b> appropriate support where necessary, including additional professional education and/or referral of patients to other health care professionals</p>
<p><b>4.3 demonstrating</b> self-awareness and self-regulation of <b>personal</b> attributes, strengths and weaknesses which may affect professional performance and/or personal development</p>	<p><b>4.3 identifying</b> situations where <b>personal</b> attributes, strengths and weaknesses may affect professional performance and/or personal development and <b>taking</b> appropriate actions (including self-regulation and seeking support where necessary) to minimise risks to public safety</p>
<p><b>4.4 demonstrating</b> awareness of the signs which indicate that a potential risk to public safety may exist if observed in another practitioner, and <b>formulating</b> appropriate responses including support, advice, assistance, referral or reporting where necessary</p>	<p><b>4.4 recognising</b> the signs in others where personal attributes and/or professional limitations pose a risk to public safety, and <b>adopting</b> appropriate strategies including support, advice, assistance, referral or reporting where necessary</p>
<p><b>4.5 recognising</b> situations likely to compromise performance and <b>developing</b> effective strategies to minimise their impact</p>	<p><b>4.5 recognising</b> situations in professional practice likely to compromise performance and <b>implementing</b> effective strategies to minimise their impact</p>

<p><b>4.6 evaluating</b> personal health and wellbeing status, identifying situations where health or wellbeing may be challenged, and <b>developing</b> appropriate strategies and mechanisms to minimise their impact on personal and professional life</p>	<p><b>4.6 evaluating</b> personal health and wellbeing status, identifying situations where health or wellbeing may be challenged, and <b>adopting</b> appropriate strategies and mechanisms to minimise their impact on personal and professional life</p>
<p><b>4.7 demonstrating</b> effective leadership skills, including taking the initiative when appropriate, managing own roles, and understanding and accepting appropriate responsibility and accountability for organising, planning, prioritising, influencing and negotiating within a team context</p>	<p><b>4.7 providing</b> effective leadership by taking the initiative when appropriate, managing own roles, and understanding and accepting appropriate responsibility and accountability for organising, planning, prioritising, influencing and negotiating within a professional team context</p>
<p><b>4.8 demonstrating</b> awareness of the importance of, and strategies for, promoting responsible and socially accountable stewardship of health care resources</p>	<p><b>4.8 contributing</b> to the responsible and socially accountable stewardship of resources to promote equitable, viable and sustainable access to health care</p>
<p><b>4.9 promoting</b> quality assurance and continuous quality improvement strategies through <b>utilising</b> skills in collaboration, critical thinking, curiosity and creativity</p>	<p><b>4.9 contributing</b> to assurance of quality and continuous quality improvement processes through collaboration, critical thinking, curiosity and creativity</p>
<p><b>4.10 demonstrating</b> awareness of, and <b>complying</b> with appropriate policies, processes and protocols</p>	<p><b>4.10 contributing to, maintaining, complying</b> with and regularly <b>reviewing</b> appropriate policies, processes and protocols to ensure safe and socially accountable provision of health care</p>
<p><b>4.11 demonstrating</b> skills in the identification, assessment, monitoring, mitigation and management of risk</p>	<p><b>4.11 engaging</b> proactively in the identification, assessment, monitoring, mitigation and management of risk to minimise harm and maximise patient and public safety</p>

## Domain 5 Research, inquiry and education

Pharmacists contribute their expertise to the education and development of others, and engage in research and inquiry in response to identified gaps or uncertainties in practice.

On successful completion of an approved pharmacy degree program capable of leading to general registration, pharmacy graduates have demonstrated evidence of competency, in educational, simulated and/or work-integrated learning environments, in	At the point of general registration as a pharmacist, pharmacists are competent in and committed to
<p><b>5.1 demonstrating</b> skills as a role model, facilitator and/or mentor which are appropriate to their context</p>	<p><b>5.1 acting</b> as a role model, facilitator and/or mentor to students, colleagues, other pharmacy team members and other health care professionals</p>
<p><b>5.2 demonstrating</b> awareness of effective processes for facilitating learning, including aims, learning outcomes, learning activities, assessment and feedback</p>	<p><b>5.2 educating</b> others and evaluating the effectiveness of the education</p>
<p><b>5.3 demonstrating</b> awareness of the inherent complexity, ambiguity and uncertainty of contemporary and future professional practice</p>	<p><b>5.3 recognising and responding</b> to the inherent complexity, ambiguity and uncertainty of contemporary and future professional practice</p>
<p><b>5.4 demonstrating</b> knowledge and skills in research and inquiry, including</p> <ol style="list-style-type: none"> <li>formulating questions</li> <li>identifying and critically appraising relevant source materials</li> <li>undertaking relevant investigations, where appropriate</li> <li>drawing conclusions by synthesising the results of research and inquiry activities</li> <li>reporting and disseminating the outcomes appropriately</li> <li>identifying ways in which the outcomes can be applied to practice</li> </ol>	<p><b>5.4 contributing</b> to the evidence base through <b>engaging</b> in research and inquiry, including</p> <ol style="list-style-type: none"> <li>formulating questions relating to gaps and uncertainties in practice</li> <li>identifying and critically appraising relevant source materials</li> <li>undertaking relevant investigations, where appropriate</li> <li>drawing conclusions by synthesising the results of research and inquiry activities</li> <li>reporting and disseminating the outcomes appropriately</li> <li>implementing practice change in response to the outcomes</li> </ol>
<p><b>5.5 accessing,</b> using, adapting and sharing information and/or other technologies to meet the needs of current and emerging professional practice</p>	<p><b>5.5 accessing,</b> using, adapting and sharing information and/or other technologies to meet the needs of current and emerging professional practice</p>

# Appendix A

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# Performance outcomes mapped to enabling competencies

Enabling

		DOMAIN 1						DOMAIN 2															
		1		2		3		4		5		6		1		2							
		1	2	3	4	5	6	1	2	3	4	1	2	3	4	1	2	3	4	5	6		
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DOMAIN 5	1																						
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	5																						





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# Accreditation Standards 2020

for Pharmacy Programs

## Performance Outcomes Framework

(Updated October 2022)

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