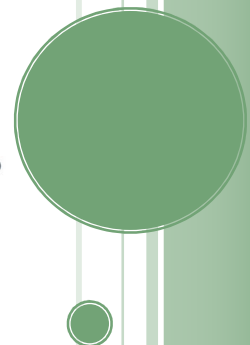


ACCREDITATION STANDARDS

FOR AUSTRALIA AND NEW ZEALAND
PHARMACY INTERN TRAINING PROGRAMS





The Accreditation *Standards* for Intern Training Program Providers contained within this framework should be read in conjunction with the Intern Training Program Providers Accreditation User's Guide and the ITP Application Pro-forma when making an application for accreditation.

Overseas qualified pharmacists seeking to register in Australia or New Zealand require a period of supervised practice. This cohort will be included under the term 'intern' for reasons of convenience unless otherwise noted.

Version 1 December 2009

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ACRONYMS

APC	Australian Pharmacy Council
APCAT	Australian Pharmacy Competency Assessment Tool
COAG	Council of Australian Governments
CPD	Continuing Professional Development
HPCA	Health Practitioners Competence Assurance Act 2003
ITP	Intern Training Program
NRAS	National Registration and Accreditation Scheme
NZ	New Zealand
Non-REQR	Non-Recognised Equivalence Route
OSCE	Objective Structured Clinical Examination
PBA	Pharmacy Board of Australia
PCNZ	Pharmacy Council of New Zealand
PBS	Pharmaceutical Benefits Scheme
PRAB	Pre-Registration Assessment Board
PSA	Pharmaceutical Society of Australia
QCCP	Quality Care Pharmacy Program
TTMR	Trans Tasman Mutual Recognition



GLOSSARY

Note: It is acknowledged that the definition and/or application of the terms listed below may vary from country to country. The text following each term is, therefore, intended primarily as a description of the general context in which the term has been used in this document by the authors and is not intended as a recommended definition for global adoption.

Accreditation	<p>As a Status: Acknowledgement (usually public) that the quality of an educational program (or particular parts thereof) meets the standards required by a responsible authority.</p> <p>As a Process: The steps taken by an accrediting authority to verify that the quality of an educational program meets the standards required for accreditation. (This may include review of submissions from providers, site visits, reviews, monitoring of educational processes and outcomes, audits and similar activities, whether alone or in combination).</p>
Assessment	A test or measure of knowledge, skills, performance, achievement or learning. Formative assessment being ongoing assessment conducted as part of a learning program and summative assessment being that assessment conducted upon conclusion of a learning program.
Boards	State and Territory Pharmacy Registering Boards of Australia
Competence	A construct encompassing all of the personal characteristics (e.g. knowledge, skills, attitudes and values) that together enable performance at a required professional standard.
Competency	The ability to consistently perform the roles and activities of the profession to the standard expected in the workplace.
Continuing Professional Development (CPD)	The responsibility of individual pharmacists for systematic maintenance, development and broadening of knowledge, skills and attitudes, to ensure continuing competence as a professional, throughout their careers. (<i>International Pharmaceutical Federation</i>)
Continuing Education (CE)	<p>CPD is more than participation in Continuing Education (CE) which, on its own, does not necessarily lead to positive changes in professional practice nor does it necessarily improve health care outcomes.</p> <p>CE is, however, an important part of a structured CPD program, personalized for each pharmacist. The process should be visible to ensure credibility with the public. (<i>International Pharmaceutical Federation</i>)</p>
Credential	Documented evidence of professional or educational qualifications and achievements (examples include: degree, diploma, and certificate).



Criteria:	Measurement, indicators or key attributes to be used in judging whether a standard is met. (See: Standards)
Educational Outcomes	The intended quantifiable and measurable results (such as knowledge, skills, competency) that should be achieved on completion of a course or program of study.
Evaluation	The forming of a judgment based on the collection, analysis and interpretation of data from process and outcome measures with a view to determining the quality of one or more activities and the achievement of desired outcomes.
Faculty	An identifiable unit within a university with academic responsibility for specific educational programs e.g. pharmacy degree. Sometimes (especially in the US) used as a collective term for the staff of a university school.
Internship	A period of work integrated training that includes a mix of formal training and learning opportunities provided as part of a supervised practice.
ITP Employed Personnel	All employees of the ITP involved in the training and assessment of the intern. In New Zealand this also includes assessors and standardised patients that are selected for assignment marking and the summative assessment. This does not include preceptors.
ITP Provider	An organisation accredited by the Australian Pharmacy Council for the purpose of delivering Intern Training Programs to Australian or New Zealand interns.
Lifelong Learning	All learning that occurs during the career of a practitioner, (including structured educational programs or activities, training, informal or unstructured learning, and work-based learning).
Practice Experience	A structured or semi-structured teaching and learning activity that takes place in a practice setting and involves real-life situations and inter-personal interactions. (Similar terms: Practice-based Learning, Experiential Education, Clinical Experience, Workplace-Based Training, Workplace Integrated Learning)
Practice Site	A healthcare delivery setting (such as a community pharmacy or hospital) in which interns undertake practice experiences. (Similar terms: Experiential Learning Site, (Clinical) Training Site)
Preceptor	A practitioner who teaches (in a structured or semi-structured fashion) and assesses interns in his or her professional practice site (Similar terms: Practitioner-educator, Clinical Instructor)
Professionalism	The demonstration of ethics, attitudes, values, qualities, conduct, and behaviours that characterize a profession and are expected of its practitioners.
Quality Assurance	A process to assure interested parties that acceptable standards of education, scholarship and infrastructure are being maintained.
Registered	Adjective used to describe a pharmacist or intern who has met requirements for registration and whose name has been entered on a register of practitioners who are licensed or registered to practice in that jurisdiction.
Registration	Entry of the name of a practitioner into a register of practitioners who are legally



allowed to practice in the jurisdiction concerned.

Scope of Practice	The range of professional tasks and functions that a practitioner can perform as specified by legislation, rules, or regulations; the boundaries within which a practitioner may practice.
Stage I	The Stage I Examination consists of two papers of multiple choice questions and is designed to test the candidates knowledge of the basic sciences related to the present day practice of pharmacy in Australia and New Zealand.
Stakeholder	Any individual, group, or organisation that has an interest or involvement in a particular activity, set of activities or outcome.
Standard	A description of a level of quality that is expected to be met and against which judgements about quality will be made.
Stream A	The APC Process which enables eligible overseas trained pharmacists to undertake the Stage I exam in order to gain entry into the ITP.
Substantive Change	A major or substantial change in an ITP or ITP provider. Examples include: any change in the established mission or goals of an ITP Provider; the addition or deletion of courses, pathway or programs that represent a significant departure in either content or method of delivery; a substantial change in enrolment; a substantial change in the number of clock or credit hours required for successful completion of the program; a significant change in the length of the program; and the establishment of an additional geographic location at which the program is offered.
Non-REQR	The PCNZ process which enables eligible overseas trained pharmacists to gain entry into the ITP



Accreditation Framework

PHARMACY INTERN TRAINING PROGRAM

A feature of the education and training of pharmacists in Australia and New Zealand is the requirement that, following graduation from an accredited undergraduate or graduate program, the graduate must complete a period of workplace integrated learning (supervised practice) with an approved pharmacist preceptor in an approved practice site. The additional clinical experience and professional insight furthers the graduate's journey towards competency as outlined in the *'Competency Standards for Pharmacists in Australia, 2003'* or the *New Zealand Competence Standards for the Pharmacist scope of practice* required for full registration.

The progression towards competency through the acquisition of knowledge, skills and attitudes, commences in the undergraduate or graduate program and is applied throughout the intern program. The effect of this is to create a continuum of learning leading towards demonstrable competence and subsequent registration as a pharmacist. Pharmacists graduating from an off-shore program and registered off-shore but seeking to work in Australia and New Zealand (as a registered pharmacist) are also required to undertake a period of supervised practice¹. For expediency, these pharmacists will also be referred to as 'interns' throughout the document.

Supervised practice must be undertaken while concurrently completing an Intern Training Program (ITP). The ITP is conducted by a provider independent of the intern's workplace and preceptor, and entails assessments throughout the program. Only upon successful completion of these two aspects i.e. supervised practice and the ITP, will the intern be considered eligible to apply for full registration as a pharmacist. This is a requirement of legislation operating across the various jurisdictions of Australia and in New Zealand.

Under the terms of the Council of Australian Government's (COAG) initiative for a National Registration and Accreditation Scheme (NRAS) for health professions, national profession specific boards will have responsibility for determining the requirements for general registration. The COAG initiative clearly states that in certain health disciplines the protection of the public is best served by the inclusion of a discipline-specific period of workplace supervised practice as a requirement for registration.

The Pharmacy Board of Australia is the NRAS body which will be responsible for the oversight of a national program for competency acquisition by interns on 1 July 2010. This program currently includes extended on-site workplace assessments (formative) of competence demonstrated through appropriate performance and overseen by approved preceptors, and a final written and oral assessments (summative) that provides assurance to the community and to relevant authorities of the pharmacist's competence to practise unsupervised.

¹ Pharmacist qualified and registered in the United Kingdom, Ireland, Canada, USA or New Zealand (or Australia if in NZ) are required to undertake a period of supervised practice but are not required to undertake the ITP.



In New Zealand the Health Practitioners Competence Assurance (HPCA) Act 2003 provides the legislative framework for the registration and fitness to practise requirements for interns and pharmacists. “*The principal purpose of this Act is to protect the health and safety of members of the public by providing for mechanisms to ensure that health practitioners are competent and fit to practise their professions.*” In accordance with the requirements of this Act the Pharmacy Council of New Zealand (PCNZ) requires the intern to be registered in the *Gazetted* Intern scope of practice before they can commence the ITP. The ITP is a prescribed qualification for registration into the Pharmacist scope of practice.

The Preregistration Assessment Board (PRAB) is a subcommittee of the PCNZ with delegated authority to monitor the assessment methodology and tools of the Intern Training Programme (ITP); to review the evidence gathered during the ITP on individual interns to determine whether they have successfully completed the ITP; to make a summative decision (based on the evidence gathered above) on individual intern’s competence to register in the pharmacist scope of practice; and to recommend to Council on accreditation of ITP providers.

Framework

The need for national consistency in the training of interns has been well understood and recognised. As a result the Australian Pharmacy Council (APC) has developed a model for the ITP.

The delivery of ITPs is currently handled in a variety of ways. In Australia, many state registering authorities run their own programs, while other states such as Queensland, delegate the ITP and summative assessment to an external provider.

In New Zealand there is a single nationally accredited ITP and provider. The Clinical Training Agency (CTA) provides funding towards the ITP in New Zealand and its funding arrangements supports a national, accredited training programme provided by one accredited ITP provider.

The variation in the programs currently on offer and the developments surrounding the National Registration and Accreditation Scheme have prompted the development of a single system that encompasses both Australian and New Zealand requirements for an intern training program.

Elements

Accreditation of Intern Training Program Providers

The Accreditation Framework ensures the quality and consistency of ITP providers and is necessary for maintaining the integrity of intern training nationwide.

International benchmarking of ITP accreditation has shown that New Zealand has a robust process in place. Work undertaken by pharmacy registering authorities in Australia, with the cooperation and support of the pharmacy registering authority in New Zealand, has resulted in the development of the draft ‘*Accreditation Standards for Australia and New Zealand Pharmacy Intern Training Programs*’.



ITP providers and Competency Based Assessments

Authority for determining the eligibility of interns for full registration will rest with the Pharmacy Board of Australia or the Pharmacy Council of New Zealand.

The body of work undertaken and intern performance during the period of supervised practice will contribute to informing the decision for full registration of an intern i.e. the successful completion of a summative assessment does not, of itself, represent an immediate trigger for the granting of full registration.

The delivery of consistent competency based assessments at both the formative and summative levels will be critical to the quality of practice of new registrants. APC has been assigned the accreditation functions for pharmacy in Australia i.e. it will continue to perform the functions related to assessment of overseas applicants, examinations, and now accreditation of ITPs. In addition to these roles the APC will continue to provide accreditation services to New Zealand programs under agreement with the PCNZ.

APC has extensive experience and success in administering a competency based written examination for interns and overseas trained pharmacists for registration purposes. APC acknowledges competency as a complex combination of knowledge, attitudes, skills, and personal values and takes a holistic approach to assessing competence which takes into account the cultural and social context.

Formative Assessment of Interns

Workplace assessments monitor the progressive acquisition of competence achieved while undertaking supervised practice. Examples of competencies suitable for formative assessment during supervised practice include, *inter alia*, dispensing practice, primary health care, collaboration with other health professionals and staff, and the ability to work effectively in team directed environments.

The formative assessment process will be managed and supervised by the accredited ITP providers and in collaboration with preceptors as indicated within the Standards.

Summative Assessment of Interns

Australia: Prior to July 2010 each state and territory registering authority will determine the process of summative assessment for interns. Summative assessments include components such the written Australian Pharmacy Competency Assessment Tool (APCAT) and oral assessments (made up of Objective Structured Clinical Examinations (OSCEs) and/or panel interviews).

Conditional on the PBA's approval, APC will undertake;

- development of all material required for summative assessment of interns (APCAT plus the oral questions and scenarios, written questions or whatever form is determined)



- development and administration of appropriate guidelines for the assessors responsible for the conduct of oral summative assessments of interns
- provision of certificates for successful completion of ITP summative assessments for overseas trained pharmacists.

State and territory registering authorities (Boards) will undertake;

- organisation of timetables, examination site selection and booking, engagement of approved assessors and notifications to interns regarding the summative assessment i.e. APCAT, OSCEs and panel interviews
- advising interns of their successful completion of the ITP
- approval of assessors for the purpose of oral summative assessments
- establishment of a group of senior assessors to act as supervisors in each location during oral assessment activities
- pre and post moderation of summative assessments
- development of measures to deal with the security and confidentiality of assessment materials and undertake the necessary reporting to the Pharmacy Board of Australia

New Zealand: The PCNZ is the regulatory authority for interns (and pharmacists) and it determines the processes for summative assessment of interns. The PRAB is a delegated subcommittee of the Council that sets, oversees and monitors these processes for summative assessments.

Interns eligible to take the summative assessment have to be assessed as being ready to undertake the summative assessment by their approved preceptor. Only eligible interns can take the summative assessment which comprise of a set number of OSCEs and a panel interview. The summative assessments are run twice a year (usually May and November). The May summative assessment runs over one day while the November summative assessment runs over two days and simultaneously across two major cities in New Zealand.

PCNZ undertakes;

- the appointment of members of the PRAB
- the appointment of members of the moderation committee
- the development and setting of the blueprint for all summative assessments (against competence standards)
- the development and setting of summative assessment marking criteria
- the development of pre moderation guidelines and the actual pre moderation of the summative assessment material (this takes place before the summative assessment)



- the development of post moderation guidelines and the approval of post moderation decisions that must be applied to summative assessment results (this takes place after the summative assessment)
- final determination of an intern's competence to register in the Pharmacist scope of practice which includes advising interns of their successful completion of the ITP

The ITP provider undertakes:

- development of the summative assessment material against the PCNZ pre moderation guidelines and blueprint for summative assessment application of pre moderation decisions to the summative assessment material
- development and administration of appropriate guidelines and training of the assessors and standardised patients responsible for the summative assessments of interns
- organisation of timetables, summative assessment site selection and booking, engagement of approved assessors and notifications to interns regarding the summative assessment
- development of measures to deal with the security and confidentiality of assessment materials and undertake the necessary reporting to the PCNZ
- development of measures to deal with conflict of interest; impaired performance due to health or personal reasons; and any other factor affecting the performance of the intern on the day of the summative assessment; and undertake the necessary reporting to the PCNZ
- delivery of the summative assessment and assessment of interns against the PCNZ approved summative assessment marking criteria
- the post moderation process in accordance with the PCNZ post moderation guidelines and the identification of issues for consideration by the moderation committee
- the application of the post moderation decisions to the results
- the reporting of individual intern summative assessment results in accordance with the specified PCNZ requirements
- the preparation of written reports on individual interns in accordance with the specified PCNZ requirements (i.e. interns requiring further evaluation by PRAB before a determination for registration can be made)



INTRODUCTION TO THE STANDARDS

The Accreditation Standards for ITPs and providers are those Standards used by the Australian Pharmacy Council and Pharmacy Council of New Zealand to assess whether an ITP offered by an ITP provider will produce interns with the requisite competence to become registered pharmacists in Australia and New Zealand.

An ITP provider seeking accreditation must demonstrate that they satisfy all of the Accreditation Standards within this document.

The goal of these standards is to ensure that all interns are prepared to demonstrate competence at assessment to be considered eligible for registration as a pharmacist and that each intern has been assessed within the framework of two inter-related measures that include:

- The generic attributes and profession-specific knowledge and skills as defined in these Accreditation Standards
- The competencies as described in the *Competency Standards for Pharmacists in Australia 2003* or the *New Zealand Competence Standards for the Pharmacist scope of practice*

In the interests of consistency, transparency and valid decision making, evidence required to meet the Accreditation Standards shall include aspects which cover both the ITP and the ITP provider.

Accreditation of ITP providers is based on meeting the requirements of the 10 Accreditation Standards that follow.



STANDARD 1: ITP DEVELOPMENT AND LEARNING OUTCOMES

<p><i>An accredited ITP provider must deliver a program to produce pharmacists with the knowledge, skills and attributes which meet the eight functional areas described in the Competency Standards for Pharmacists in Australia 2003 or New Zealand Competence Standards for the Pharmacist scope of practice necessary to commence unsupervised practice as a competent registered pharmacist</i></p>	<p>ITP Development</p> <ol style="list-style-type: none">1.1. An ITP provider must ensure that effective links are maintained with the pharmacy stakeholders in the development of the ITP.1.2. An ITP provider must have a curriculum framework which clearly explains the education and training program, including the learning objectives, and how the different components of the program interrelate to meet the overall learning outcomes1.3. The ITP must foster the following generic attributes:<ul style="list-style-type: none">• Communication: the ability to analyse information and effectively and appropriately communicate with the public and other healthcare professionals in written and spoken English, this includes the ability to engage and elicit information from the patient• Critical thinking: the ability to analyse issues logically, consider different options and viewpoints and make informed decisions• Cultural understanding: an understanding of cultural diversity, including indigenous issues (in the case of New Zealand interns, within the framework of the Treaty of Waitangi) , the impact of health disparities and multiculturalism; an ability to put aside assumptions and personal paradigms in their professional dealings with patients from culturally diverse backgrounds; an understanding of different approaches and attitudes to healthcare• Lifelong learning: a commitment to lifelong learning with the ability to apply knowledge, reflect upon and develop existing skills, adapt to a changing environment and acquire new skills which will contribute to a pharmacist's continuing professional development• Professional and ethical conduct: the ability to exhibit professionalism and ethical approach to decision making and situation handling, to have working knowledge of ethics, ethical standards and social responsibility• Recognition of limitations: the ability to recognise the need to work within personal and legal limitations• Information literacy: an understanding of information literacy and specific skills in researching or acquiring, reviewing, organizing and presenting/utilising information effectively• Inter-professional perspective: intellectual openness and the awareness of the limits of current knowledge (in a broad sense) and of the links between disciplines• Work-place related skills: enterprise, self-confidence and a sense of personal responsibility
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- **Problem solving:** demonstration of strong problem solving skills and ability to apply professional judgement in a range of areas including prescription, therapeutic and legal and ethical problems
- **Research:** the ability to research when information is needed and locating, retrieving, evaluating and using it effectively
- **Scholarship:** a commitment to the fundamental importance of the acquisition and development of knowledge and understanding
- **Self-motivation:** the capacity for self-directed activity and the ability to work independently
- **Teamwork:** the ability to work effectively as both a team leader and a team member

Learning Outcomes

1.4. The ITP must provide learning opportunities that enable interns to integrate and apply the defined functional areas of the competence standards with a particular emphasis in the following profession specific knowledge and skills:

- **Clinical pharmacy:** The intern is able to integrate and apply clinical pharmacotherapeutic knowledge and understanding to meet the therapeutic needs of patients
- **Medicines Management:** the intern is able to understand and describe the processes involved in the medicines management pathway; the intern understands the value and recognition given to the various aspects of the medicines management pathway as an emerging pharmacy practice tool internationally
- **Patient safety:** the intern is able to describe and implement the principles of safe and effective medication compounding, dispensing and distribution, recognise and describe the causes of medication errors (including human and systems factors involved in errors) and is able to develop strategies for reducing medication errors (e.g. undertaking a simple root cause analysis in the workplace in response to errors)
- **Pharmacy Practice Standards;** the intern is aware, familiar and abides by the intention of related practice standards and guidelines and where standards and guidelines relate to a particular health service the intern is aware of the service provided, understands the ethics of such services and is able to refer patients to providers of such services:
Australian examples - the Drug, Poisons and Controlled Substances legislation, the Professional Practice Standards, the federal Privacy Act and PSA's guidelines for the Provision of Pharmacy Services to Residential Care Facilities
New Zealand examples – Emergency Contraceptive Pill standards and supply, Protocol for sale and supply of Pharmacist Only Medicine for Chronic Conditions (POMCC), Promotion and supply of medicine over the internet
- **Legal and ethical aspects of pharmacy practice:** the intern is



able to demonstrate a sound understanding and application of legal, professional and ethical framework in the context of the Australian or New Zealand pharmacy practice environment and is able to raise concerns with prescribers, patients and colleagues

- **Inter-professionalism:** the intern understands the concept and importance of effective collaboration in the context of optimising health outcomes for patients, is able to understand and describe the roles and responsibilities of other healthcare professionals in relation to one's own and has acquired the basic necessary skills related to negotiation, conflict resolution, group problem solving and group accountability
- **Calculations:** the intern is able to demonstrate the process involved in calculations, calculate medicine doses and dosage regimes accurately, carry out dosage calculations and adjustments in special-population patients and accurately complete worksheets for the preparation for pharmaceutical products
- **Cultural competence:** the intern is able to interact respectfully and effectively with persons from a background different to one's own and recognises that one's own cultural identity will influence their professional practice. The intern must also be aware that culture includes but is not restricted to age, gender, sexual orientation, race, socioeconomic status (including occupation), religion, disability, and ethnicity and be able to recognise that cultural competence is fundamental to achieving best health outcomes
- **Supervision of pharmacy technician and assistant personnel:** the intern is able to describe the roles and responsibilities of pharmacy technicians and assistants and understands and recognises his/her responsibility for the supervision of pharmacy technicians and assistants
- **Teaching and Learning skills:** the intern is able to apply generic educational needs assessment skills to enable effective participation in a wide variety of educational interventions ranging from patient education to teaching of groups and other health care professionals within their scope of practice. The intern should also be able to evaluate the effectiveness of their educational interventions



STANDARD 2: ENTRY AND EXIT REQUIREMENTS

An ITP provider must have a system for establishing and clearly publicising entry requirements into an ITP that does not impose any unreasonable conditions and provision for exit of the program that is fair and timely

2.1. An ITP provider must have policies and procedures in place to ensure that prospective interns are appropriately informed of entry requirements into an ITP and clearly indicates the prescribed qualifications for registration as an intern including:

- a bachelor of pharmacy degree or graduate entry level master of pharmacy from a University that has provisional or full APC accreditation in Australia and New Zealand
- For Australia: successful completion of the APC Stream B or Stage I examination where required
- For New Zealand: successful completion of the non-REQR process for New Zealand interns where required

2.2. An ITP provider must ensure that there are no unreasonable barriers imposed that could adversely affect entry and/or progress through the ITP.

2.3. The ITP provider must have policies and procedures in place regarding conditions for intern removal/withdrawal from the program and mechanisms to support notification to APC or PCNZ should an internship cease. Such policies must take into consideration:

For New Zealand :

Under the Health Practitioners Competence Assurance (HPCA) Act 2003 the PCNZ must receive:

- Notification of practice below the required standard of competence as per Part 3 section 34 (1 - 4)
- Notification of inability to perform required functions due to mental or physical conditions as per Part 3 section 45
- Notification of any criminal convictions, charges laid with police and complaints and notifications about conduct as per Part 4 sections 64, 67 and 68



STANDARD 3: WORKPLACE BASED TRAINING REQUIREMENTS

ITP providers must have in place adequate and appropriate policies and procedures that enable the intern to complete training requirements and to carry out workplace based components of the program

3.1. ITP provider and training site:

- 3.1.1. For Australia: An ITP provider must have policies and procedures to ensure that all training sites are approved by the relevant Board in their state or territory.
- 3.1.2. For New Zealand: An ITP provider must have policies and procedures to ensure that all training sites are approved in accordance with the relevant PCNZ policies for this purpose. Including:
- Split-site non-traditional site arrangements may be approved, providing that a minimum of 35 hours per fortnight is practised in a traditional direct patient care site (community pharmacy/hospital pharmacy) and a maximum of 35 hours per fortnight is worked in a non-traditional non-direct patient care site
 - Interns undertaking split-site internships with Schools of Pharmacy who are teaching, supervising or demonstrating to undergraduate pharmacy students will have no more than three hours per 35 hour week of these activities recognised as part of their intern training.
 - Interns in split-site internships with Schools of Pharmacy, undertaking pharmacy practice research, are limited to research that influences clinical practice and public safety, and the research must be supervised by an approved registered pharmacist preceptor.
- 3.1.3. The Boards or PCNZ reserves the right to review sites at their discretion

3.2. The Preceptor:

- 3.2.1. For Australia: An ITP Provider must have policies and procedures to ensure that all preceptors are approved by the relevant Board in their state or territory.
- 3.2.2. For New Zealand: An ITP provider must have policies and procedures to ensure that all preceptors are approved in accordance with the relevant PCNZ policies for this purpose. Including:
- That the intern practises under supervision and within the scope of practice of the supervising registered pharmacist
 - That the preceptor agrees to teach/mentor and provide regular and formal feedback to interns at least two hours per week or eight hours a month.
 - An approved preceptor may supervise and assess a



maximum of two interns in the workplace

3.3. Employment Contract: The ITP provider must ensure that there is a valid employment contract between the intern and the training site.

3.4. The ITP Agreement:

3.4.1. In addition to a valid employment contract, an ITP agreement is required between an ITP provider, the intern, the preceptor and the employer and must:

- Provide a clear outline of the objectives of the ITP and the expectations, roles and responsibilities of the ITP provider, preceptor and the intern
- Provide a clear outline of the opportunities for the intern to perform services and roles described in the ITP, as well as allowing interns time release to attend compulsory training events and reasonable access for interns to attend optional relevant training opportunities
- Identify pathways for resolution of issues related to the ITP between intern and preceptor and that both parties discuss openly and honestly (without fear of retribution) issues as soon as they become evident
- Outline personal and privacy information requirements and obligations to ensure sufficient scope is available to report intern progress between the preceptor, ITP provider and the Boards or PCNZ.
- Include a training plan to be reviewed on a regular basis.

3.4 Supervised Practice

3.4.1 An ITP provider must have policies and procedures to ensure that the period of supervised practice complies with the relevant Board and PCNZ policies for this purpose.



STANDARD 4: PROGRAM DELIVERY AND LEARNING METHODS

The ITP must be delivered in a manner conducive to the content and learning outcomes prescribed and be able to provide both short and long-term programs that facilitate training for periods between six and twelve months

4.1. Program content and activities

- 4.1.1. The content and learning activities of the ITP must be objectively presented and must provide in-depth information with fair, full disclosure and balance
- 4.1.2. Topics and contents of the face-to-face and self-directed study components of the ITP must be pertinent to contemporary pharmacy practice as outlined in the *Competency Standards for Pharmacists in Australia 2003* or the *NZ Competence Standards for the Pharmacist scope of practice*
- 4.1.3. Where topics or content of the ITP are not exclusively specific to pharmacy (eg. personnel management, IT applications etc), the ITP provider must take appropriate steps to ensure that the core content is related to contemporary pharmacy practice. This may be addressed in such educational components as:
 - The definition of specific learning outcome objectives
 - Selection of authors/presenters and the provision of guidance to them
 - Development and/or modification of supplemental instructional materials
 - Development of learner assessment activities and testing instruments
- 4.1.4. An ITP provider must ensure that the self-directed study and face-to-face components of the ITP include active and/or interactive learning activities which use adult education principles to help interns transfer knowledge to their practice. Design of the learning activity will depend on the delivery method. These activities may include but not be limited to:
 - Pre-testing
 - Self-assessment activities
 - Case studies or case-based exercises
 - Data manipulation exercises
 - Problem solving activities
 - Question and answer sessions
 - Issues based discussions

4.2. Methods of delivery

- 4.2.1. An ITP provider must have in place a 'Learning and Assessment Strategy' which considers the preferred learning format of the intended audience as well as the most effective methods to achieve competency against the required learning outcomes



	<p>4.2.2. Delivery and learning methods must be varied and must include (but not be limited to):</p> <ul style="list-style-type: none">• Interactive small group face-to-face sessions. <i>Australia: a minimum of 25 hours must be undertaken.</i> <i>New Zealand: 42 hours must be undertaken.</i>• Self-directed learning• Problem based learning <p>4.2.3. Instructional materials including handouts, audiovisual aids and IT equipment must be of sufficient quality to enhance intern understanding of topic(s)</p> <p>4.2.4. References, bibliographies, websites and other sources of information must be made available to support and/or encourage additional reading</p>
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STANDARD 5: INTERN ASSESSMENT

An ITP provider must employ effective and validated assessment methods within both the supervised practice and training components of the ITP.

5.1. The ITP provider must ensure the intern has:

- 5.1.1. Access to all policy and procedural matters regarding assessment and progression through the program that would include matters such as minimum achievements, missed work, disciplinary matters, confidentiality, complaints and appeals processes etc
- 5.1.2. Exposure to a variety of assessment methods throughout the intern year and mechanisms which measure cognitive learning, mastery of essential practice skills, ability to communicate, numeracy and use of data in problem solving
- 5.1.3. Access to counselling regarding poor progress, communication difficulties, learning difficulties, impairment and disability issues, health and social problems etc.
- 5.1.4. Clear guidance which maps assessments to learning outcomes.
- 5.1.5. Access to timely feedback on performance on a regular basis.
- 5.1.6. Access to a summative assessment upon completion of their ITP as approved by the Boards or PCNZ.

5.2. An ITP provider must have:

- 5.2.1. Systems in place providing interns with fair, objective reporting on assessments with an associated robust, transparent and independent appeals process
- 5.2.2. Assessments that are integrated across the specified learning outcomes to encourage interns to develop an integrated approach to learning
- 5.2.3. Systems in place that can identify inconsistencies in formative assessment, and have procedures in place to manage these
- 5.2.4. Policies and procedures to manage impairment of performance notifications at assessment due to: health reasons, personal circumstances and/or conflict of interest.



STANDARD 6: INTERN AND PRECEPTOR SUPPORT SYSTEMS

An ITP provider must ensure that appropriate support mechanisms are in place to respond to and manage professional and personal difficulties of interns and preceptors relating to the ITP

- 6.1. An ITP provider must have mechanisms in place that are able to identify candidates with English language and communication difficulties and identify appropriate remedial support provisions for them.
- 6.2. An ITP provider must have in place processes and mechanisms to identify interns who have additional educational, cultural and professional support needs – and must have in place processes and mechanisms to provide the appropriate support.
- 6.3. An ITP provider must have procedures in place to respond to enquiries from the interns and the preceptors in a timely and responsive manner
- 6.4. An ITP provider must have mechanisms in place to ensure that preceptors are given timely feedback and adequate guidance and support with regards to the training needs of the intern
- 6.5. An ITP provider must offer the opportunity for the interns to interact with each other during the course of the intern year
- 6.6. An ITP provider must offer the opportunity for the preceptors to interact with each other during the course of the intern year



STANDARD 7: QUALITY ASSURANCE AND PROGRAM EVALUATION

An ITP provider must demonstrate the ongoing use of evaluation and quality improvement processes which incorporate data from relevant stakeholders.

- 7.1. The ITP provider must develop and implement an ITP evaluation component that is responsive to the current and ongoing learning needs of the profession
- 7.2. The quality assurance and continuous improvement process must have effective input from relevant staff, interns, preceptors, practising pharmacists, the profession and the APC or PCNZ.
- 7.3. Key components of the ITP quality that must be monitored and evaluated include (but not be limited to):
 - **Participants:** achievement of the learning outcome objectives, the learning activities, the relevance of the learning experience to practice and overall program satisfaction
 - **Program/presenters:** suitability of instructional materials, presentation of material, knowledge of subject matter, clarity of presentation, actual or perceived content/speaker bias and responsiveness to participant questions.
 - **Assessments and Assessors:** all assessments should provide appropriate levels of difficulty, currency of information, knowledge and materials, and achieve overall balance. Assessment staff should have a provision to allow for review of assessment outcomes, techniques and performance. All assessments should be reviewed annually and adapted as necessary to reflect changes in practice and developments in assessment
 - **Preceptors:** suitability, knowledge, skills and training, support and guidance provided.
 - **Satisfaction:** does the program meet the needs of preceptors, interns and employers.
 - **Resources:** facilities, IT requirements, other resources and administration aspects of program
- 7.4. All interns must be offered an opportunity to evaluate the quality of the ITP during the course of their internship.



STANDARD 8: RESOURCES

An ITP provider must be supported by sufficient accommodation, human resources, computer systems support, equipment, financial and administrative resources and other infrastructure to enable effective delivery and provision of the program.

8.1. Financial resources:

- 8.1.1. An ITP provider must allocate adequate levels of funding to ensure delivery of the ITP is not adversely impacted. Adverse impacts on the effective delivery and provision of the program include but are not limited to:
- Inadequate levels of appropriately trained staff and personnel to effectively deliver the program in a timely manner
 - Lack of up-to-date references, equipment, props, poor quality printed matter
 - Lack of contingency plans for funding/income shortfalls

8.2. Administrative resources:

- 8.2.1. An ITP provider must have and maintain adequate levels of administrative resources, support and systems
- 8.2.2. Adequate systems for recording and reporting on activities (internally and externally) must be in place. Such systems must be:
- Secure
 - Comply with confidentiality policies
 - Comply with Privacy Acts

8.3. Teaching and assessment facilities:

- 8.3.1. All factors that may adversely affect the teaching or assessment activity must be considered with action taken where necessary to minimize the effect on the interns
- 8.3.2. Factors such as location, size of room, noise transference, comfort, access, ease of transfer between rooms and layout must be taken into consideration by the provider for all face-to-face teaching and assessment activities



STANDARD 9: REPORTING REQUIREMENTS

An ITP provider must have a reliable, accurate and workable system for holding, transferring and archiving information that is required by the Boards or PCNZ.

- 9.1. An ITP provider must have a sound method to confirm evidence of an intern's participation in and successful completion of an ITP
- 9.2. An ITP provider must ensure that they have a reliable process in place to inform the Boards or PCNZ, where relevant, of required information concerning the intern
- 9.3. An ITP provider must have a reliable system for archiving information on all intern assessments and achievements
- 9.4. An ITP provider must have mechanisms in place that report, as early as possible, interns making unsatisfactory progress to the Boards or PCNZ where relevant and these must be open and transparent to all parties
- 9.5. An ITP provider must submit to the PCNZ or Boards all reports as required by the authority in their state, territory or country.



STANDARD 10: ITP EMPLOYED PERSONNEL

<p><i>An ITP provider must have a robust quality assurance process in place for the selection, appraisal, training and development of personnel involved in developing and delivering programs and assessing interns throughout the duration of the training period.</i></p>	<p>10.1 The provider must ensure that all pharmacy specific roles within the ITP include personnel appropriately experienced and qualified in contemporary pharmacy practice.</p> <p>10.2 The provider must ensure that all ITP employed personnel involved in the training and assessment of participants are appropriately trained and possess the relevant qualifications and current experience necessary to their roles.</p> <p>Australia: e.g. as a minimum Certificate IV in Training and Assessment or relevant professional experience.</p> <p>New Zealand: NZQA Unit 4098, Use standards to assess candidate performance or have proven demonstrated expertise in the relevant area</p> <p>New Zealand Specific Requirements:</p> <p>10.3 In addition where the personnel are pharmacists the provider must ensure that they are currently registered as practising pharmacists without conditions and are not the subject of any disciplinary proceedings.</p> <p>10.4 The provider must have adequate policies and procedures in place to manage conflict of interest and confidentiality issues in situations where the intern may be known to any of the training and assessment personnel involved in the duration of the training period.</p>
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