



Programme Accreditation Guidelines and Criteria for Education Providers

The Pharmacy Council of NZ wishes to acknowledge the Canadian Council on Continuing Education in Pharmacy (CCCEP), COPRA, Pharmacy Education Accreditation Committee (PEAC) and the New Zealand Qualifications Authority (NZQA). Documents published by these organisations were referred to and considered when preparing these Guidelines and Criteria.

ACCREDITATION GUIDELINES

for Pharmacy Council of New Zealand

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Application to Pharmacy Council of NZ for accreditation of: (Name of Programme)

ACCREDITATION INFORMATION

1 Introduction

The purpose of the Accreditation Information is to indicate the nature of involvement of the Pharmacy Council of New Zealand (the Council) in the accreditation process, and to set out the specific requirements for a provider's quality systems in relation to the criteria for accreditation.

Regulatory Issues

The Council wishes to draw providers' attention to the need to comply with the Medicines Act 1981, Medicines Regulations 1984, the Health Practitioners Competence Assurance Act 2003 and any other current legislation which clearly defines the requirements under which pharmacists and non-ancillary pharmacy staff must work.

2 Council involvement in accreditation process

- 2.1 The Council offers a mechanism for providers of continuing education to apply for accreditation for a programme that assesses the competence of pharmacists against the Council set Competence Standards. The programme will be developed, promoted, assessed and delivered by the provider.
- 2.2 The Council endeavours to assure an accurate, contemporary, quality learning experience through the accreditation process. However, the Council assumes no responsibility for any errors or consequences arising from the use of information in a Council accredited programme. It is the responsibility of the provider/sponsor to assure compliance with any other Criteria or Code to which they are subject and it is the responsibility of all programme participants as professionals to interpret and apply information to their own practice as is appropriate.
- 2.3 All criteria must be completed prior to accreditation of a programme.
- 2.4 The accreditation process must be finalised before a programme is presented, published, or distributed.
- 2.5 Should the need arise, it is at Council discretion that programmes submitted after presentation, publication, or distribution be accepted for accreditation by the Council.

- 2.6 Applications should be submitted in sufficient time to allow for any revisions or rewrites required to be completed prior to final approval.
- 2.6.1 A preliminary report will be forwarded to the provider within six weeks of receipt of a complete and accurate application submission.
- 2.7 The Council will not disclose information about a programme submission prior to its accreditation.
- 2.8 Once accreditation is finalised, information that a programme has been accredited by the Pharmacy Council of NZ will become public knowledge.
- 2.9 Subject to section 2.9.1, programme accreditation expires after 5 years from the month of submission for accreditation.
- 2.9.1 Accreditation remains valid to the expiry date providing the content, format and length of the programme are unchanged and the content and method of assessment remains current and relevant. It is the provider's responsibility to ensure a programme is not distributed or presented if the content is no longer accurate and current.
- 2.9.2 Substantive changes (i.e. changes other than that listed in 2.9.3 for an Administrative Review) to the content, format and length of the programme and to the content and method of assessment will require submission for a full re-accreditation.
- 2.9.3 An accredited programme may be submitted for Administrative Review if:
- The provider and or/sponsor changes
 - The programme is shortened by removing section(s) of previously approved content
 - Programme content is not otherwise revised or updated
 - The learning objectives are amended as required.
- 2.9.4 In an application for an administrative review the programme provider must clearly indicate the changes to the programme. The expiry date will remain the same as that of the originally accredited programme.

3 Non-compliance with accreditation requirements

- 3.1 Where there is evidence of non-compliance with the requirements for accreditation the Council will in the first instance seek remedial action. In cases where this action is ineffective and non-compliance continues, or in cases of repeated non-compliance, the Council will take action that can ultimately lead to the withdrawal of accreditation.

4 Fees schedule for Council involvement in accreditation process

- 4.1 The applicable fee including GST must accompany the application for accreditation (see Fee Section of the Pharmacy Council's website, <http://www.pharmacycouncil.org.nz/pharmacists>).

REQUIREMENTS FOR ACCREDITATION

These are the general requirements for accreditation of a provider programme and assessment:

Criterion 1

Programme Development and Evaluation

To ensure that effective links are maintained with the pharmacy sector, the provider must have policies and procedures to ensure the involvement of the pharmacy sector in the development, delivery and evaluation of programmes and resources.

1.1 Prerequisite

- a. The provider will have policies and procedures in place to ensure that relevant representatives from the pharmacy sector are involved in the development of the programme
- b. Providers should ensure that appropriate mechanisms are available for recognition of prior learning where applicable.
- c. Providers should determine and specify prerequisite requirements for the programme.

1.2 Learning Outcomes

- a. All programmes must include written learning objectives that specify the learning outcomes participants can expect to achieve as a result of the course.
- b. Participant assessment and programme evaluation should be related to the learning outcome objectives specified for the programme.
- c. Learning outcome objectives must be stated as a measurable action or behaviour.
- d. Programme providers, authors, and/or presenters should collaborate to identify the learning outcome objectives prior to development of the programme content.
- e. Learning outcome objectives must reflect the relationship of the programme topic and content to contemporary enhanced pharmacy practice

1.3 Programme Evaluation

- a. The provider must develop and implement a programme evaluation component
- b. All participants must be offered an opportunity to evaluate the quality of the programme
- c. The Council may request a provider/sponsor to submit copies of the completed programme evaluation forms
- d. Key components of programme quality to be monitored and evaluated include but are not limited to:
 - i. *The participants*: achievement of the learning outcome objectives, the learning activities, the relevance of the learning experience to practice, and overall programme satisfaction
 - ii. *The programme/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
 - iii. *The topic*: appropriate level of difficulty, currency of information and materials, overall balance.

- e. The participant's evaluation may also assess the facilities, the administration of the programme, and convenience of the location.

Criterion 2

Delivery and Learning Methods

This criterion determines the adequacy and appropriateness of delivery methods for all modes of delivery given the stated learning outcomes.

- 2.1 Programme/Course Topic, Content and Activities
 - a. Providers should ensure that topics and content are pertinent to contemporary pharmacy practice. Examples include:
 - i. The properties and actions of drugs and dosage forms
 - ii. The aetiology, characteristics, therapeutics, and prevention of disease states
 - iii. The pharmaceutical monitoring and management of patient therapy
 - iv. Information that is unique to specialised types of pharmacy practice
 - v. The social, ethical, behavioural, legal, pharmaco-economic, administrative, and managerial aspects of pharmacy practice and health care
 - b. Instances where the topic or content are not exclusively specific to pharmacy (e.g. personal management, computer applications, communication), the provider should take appropriate steps to assure that the core content is related to contemporary pharmacy practice.
- 2.2 Methods of Delivery
 - a. The methods employed in the delivery of continuing pharmacy education play an important role in the effectiveness of the educational experience. Innovation and experimentation with delivery methods that incorporate the principles of adult education and promote application/transfer of knowledge to practice are encouraged.
 - b. The preferred learning format of the intended audience should be considered as well as the most effective methods to achieve the learning outcome objectives
 - c. The method of delivery should allow for and encourage active participation.
- 2.3 Presentation and Style
 - a. Independent Study Programmes may include but are not limited to:
 - i. Print based home study;
 - ii. CD- ROMS
 - iii. DVD
 - iv. Journal articles
 - v. Web based
 - vi. Other media- based formats
 - b. Live Programmes may include but are not limited to:
 - vii. Lectures
 - viii. Workshops
 - ix. Audio conference
 - x. Online discussion groups

- c. Programmes must be objectively presented and must provide in-depth information with fair full disclosure and balance
- 2.4 Instructional Materials
- a. All instructional materials must be of satisfactory technical quality, current in content, and designed to enhance the participant's understanding of the topic.
- 2.5 References
- a. References must be included or available in the instructional material for all programmes
 - b. Providers are responsible for verifying sources
 - c. References must be current and relevant
- 2.6 Promotion and Advertising
- a. Programmes must not be used for the purpose of promoting products or companies
 - b. Promotional and programme materials for all programmes must include but are not limited to the following:
 - i. Learning outcome objectives for the programme
 - ii. The identified target audience
 - iii. Presenters or authors and their credentials
 - iv. Registration fees for the programme and a clear statement of the items covered by those fees
 - v. Registration deadline and any applicable deadline for pre-programme cancellations and fee refunds
 - vi. Schedule and description of the programme
 - vii. Full description of all requirements established by the provider for successful completion of the programme and subsequent awarding of title/qualification/credit on the basis of successful completion of the programme
 - c. All promotional and programme material published or distributed after accreditation must include:
 - i. The Council Accreditation Reference
 - ii. Programme expiry date
- 2.7 Programme Sponsors
- a. A programme sponsor may recommend the programme topic but must not influence the content
 - b. . The sponsoring company and its products may only be referenced where it is necessary to do so e.g. an ECP training programme may include reference to Levonelle® for the purpose of the ECP training programme only and not in any other context..
- 2.8 Expert Review (ER)
- a. All programmes are subject to expert review prior to submission of the programme for accreditation.
 - b. All programmes are subject to expert review by preferably two experts (but minimum of 1) in the topic area. Where applicable and relevant at least one Expert Reviewer must be a NZ registered practising pharmacist.
 - c. The provider is responsible to ensure the Expert Reviews are undertaken prior to submission of the programme

- d. Expert reviewers critique the therapeutic and subject content of the entire programme for clinical relevance, unbiased presentation, completeness, accuracy, and appropriateness of references.
- e. An author or presenter of a program must not act as an Expert Reviewer of the programme.
- f. An employee of the programme provider or sponsor must not act as an Expert Reviewer of that programme.
- g. Subject to 2.8b, prior approval must be obtained from the Council when a colleague who works closely with the author or presenter or who works at the same facility/institution is to be consulted as an Expert Reviewer
- h. The provider must submit
 - i. A signed Conflict of Interest declaration form from each of the two Expert Reviewers (where 2 Expert Reviewers are consulted)
 - ii. A signed Expert Reviewer Release Form from each of the two Expert Reviewers (where 2 Expert Reviewers are consulted) that states that the programme is approved as reviewed, approved with noted revision or not approved
 - iii. a collated and typed copy of all comments made by each of the Expert Reviewer (where 2 Expert Reviewers are consulted)
 - iv. The author's written response to all suggested revisions from the Expert Reviewer(s) to confirm that all revisions are incorporated in the submitted version or to briefly explain where a suggested revision is not incorporated.

Criterion 3

Financial, administrative and physical resources

Adequate and appropriate financial and administrative resources will be maintained to enable all necessary activities to be carried out.

- 3.1 This includes policies and procedures to ensure that training and assessment against a particular set of competencies will take place only if the provider and candidate have access to appropriate and adequate resources for e.g.
 - Adequate Administrative Support to cope with the numbers of participants and the volume of instructional material to be sent out
 - Adequate systems for recording and reporting internally and externally
 - Appropriate venues to accommodate for the number of participants as well as the methods of delivery

Criterion 4

Assessor /Tutor selection, appraisal and development

- 4.1 The provider must ensure that assessors/tutors (includes authors and presenters) maintain the necessary knowledge and skills for the role.
- 4.2 An author is the person responsible for writing the content of a programme.
- 4.3 A presenter is the speaker or facilitator at a Live programme.
- 4.4 The provider must have policies and procedures to ensure that tutors where applicable, are registered pharmacists with a current Annual Practising Certificates (APC), or are recognised experts in their respective specialist fields.
- 4.5 The provider must have policies and procedures to ensure that assessors are registered pharmacists with a current APC; and are credited with NZQA Unit 4098, *Use standards to assess candidate performance* or equivalent skill and knowledge.

Criterion 5

Entry to Programmes

- 5.1 Providers must ensure that there is a system for establishing and clearly publicising participant entry requirements that include no unreasonable barriers. Unreasonable barriers include factors that may significantly affect the participants ability to access the programme e.g. course length, location, venue, method of delivery and how often the programme is offered.

Criterion 6

Participant guidance and support systems

- 6.1 Providers must ensure that participants have adequate access to appropriate guidance and support.
- 6.2 Providers must ensure they have a mechanism for responding to general inquiries from the participants in a timely and responsive manner.
- 6.3 If teaching is provided other than by direct contact, e.g. distance teaching or on job training, the provider must have procedures to ensure that all participants have easy access to and regular contact with, a tutor.
- 6.4 Providers must offer the opportunity for the participants to interact with each other during the course of the programme and after, if appropriate. This could be done by (but not limited to):
 - Discussion at audio conferences
 - E-mail chat groups

Criterion 7 (if applicable)

Off-site practical or work-based components

- 7.1 In the case where this is a component of the programme the provider should make arrangements for ensuring that any off-site practical or work-based components are fully integrated into the relevant programmes.
- 7.2 The provider must have policies and procedures to ensure there will be arrangements made for participants' to work in an appropriate pharmacy setting to obtain the necessary practical work experience. This is to enable participants to demonstrate competency in work place procedures.
- 7.3 A memorandum of agreement between the provider and the pharmacy workplace must be in place. This memorandum must address issues such as liability and quality assurance of training and work experience. It must include protocols detailing responsibilities for monitoring, assessment and reporting.

Criterion 8

Assessment Tools

- 8.1 The provider must ensure there is a system for ensuring that assessment is fair, valid, and consistent.
- 8.2 There must be procedures to enable assessment to be carried out in the workplace where this is specified in the programme.
- 8.3 A variety of assessment tools may be used including but not limited to:
 - Pre and post testing
 - Post-testing alone or with group discussion and critique of answers
 - Patient case study discussions
 - Problem solving exercises
 - Participant assessment form submitted by the provider
 - Portfolio assessment
 - Oral presentations
 - OSCEs
 - Interview
 - Peer review assessment
 - Self assessment
 - Audio/Visual Assessment
- 8.4 Participant assessment activities should be designed to move beyond the simple recall of facts and seek to demonstrate learning with an emphasis on integration and transfer of knowledge to professional practice.
- 8.5 Providers must provide feedback to the participant on their performance.

Criterion 9 Reporting

9.1 Reporting to the participants

There is a system for providing participants with fair and regular feedback on progress and fair reporting on final achievements, with an associated appeals procedure.

- 9.1.1 Registration lists must comply with the applicable privacy codes and legislation.
 - 9.1.2 Programme participants must be advised how registration information will be used.
 - 9.1.3 For all programmes the provider must issue individual documentation of successful completion to each participant in a timely manner to be retained by the participant.
- a) All documentation must include the following:
 - i. Programme Name
 - ii. Council Accreditation Reference
 - iii. Date of completion of all assessments for the programme
 - iv. Provider and / or sponsor company, name of contact person and contact details
 - v. Participant name and Council registration Number.
 - b) Ideally programmes should be run and participants should achieve documentation of successful completion before the programme expiry date. Should the need arise, documentation of successful completion may be issued after the programme expiry date at Council's discretion.
 - c) Any replacement or duplicate of documentation of successful completion issued must include the original completion date.
 - d) A documented appeals process should be in place.

Criterion 9.2 Reporting to the Council

There is a reliable system for archiving information on final participant achievements.

- 9.2.1 Providers must have a sound method to confirm evidence of participation in and successful completion of a programme.
- 9.2.2 Providers must ensure that they have a reliable mechanism to inform Council of the above information.

Criterion 10

Moderation of Assessment

This applies to all areas of assessment which assess against the specific Pharmacy Council of NZ competencies for authorisation **against the Scope of Practice** in the Register of Pharmacists.

10.1 Pre-moderation of Assessment Material

The purpose of this is to ensure that the assessment tools being used are assessing against the specified Pharmacy Council of NZ competence standards.

- 10.1.1 Providers may request a copy of the relevant competence standards blueprint from the Council at anytime prior to the application being submitted.
- 10.1.2 Providers will be required to send the following information to the Council either with the application or at least six (6) weeks prior to their planned use:
 - i. The completed blueprint assessment document;
 - ii. A copy of all assessment material for pre-assessment moderation and approval and
 - iii. estimated timeframes for the completion of assessment against the relevant competencies.
- 10.1.3 Upon receipt of assessment material for pre-assessment moderation, the Council may initiate communication to clarify issues relating to the assessment material. Where issues are unable to be clarified by telephone calls, emails, or other form of written communication, the moderator may request a meeting or visit with the provider (or vice versa) to achieve clarification. The Council will send a moderation report to the provider. If further action is required this will be detailed in the report.
- 10.1.4 Providers must make all required changes to assessment material and resubmit it for compliance checking before it is used to assess candidates. The Council will notify the provider that the assessment material has been approved.

10.2 Post-moderation of Assessment Material

The purpose of this is to ensure that the assessment carried out by the provider using the approved tools against the specified Council competence standards have been assessed in a fair, reliable and consistent manner.

- 10.2.1 Programme providers are required to submit a list of the results to Council. After the first assessment run the Council will select a random sample of not more than 10% of participant results to conduct post moderation. All assessed material for the selected participants will be required. *(Note that the Council may request for greater than 10% of participant assessments if the participant numbers are insufficient to conduct post moderation).*
- 10.2.2 The Council will ask providers to submit copies of assessment material (relating to selected competence standards) for moderation. Assessment material requested could include:
- candidate work
 - assessment decisions
 - assessment activities
 - assessment schedules, including judgement statements.
- 10.2.3 Assessment material will be moderated for the consistency and validity of assessment decisions made.
- 10.2.4 Upon receipt of assessment material for post-assessment moderation, the Council may initiate communication to clarify issues relating to the assessment and/or re-assessment of the candidate(s). Where issues are unable to be clarified by telephone calls, emails, or other form of written communication, the Council may request a meeting or visit with the provider (or vice versa) to achieve clarification. The Council will send a moderation report to the provider. If further action is required this will be detailed in the report.
- 10.2.5 All providers will be bound by the recommendations contained in each moderation report. Any action required should be taken prior to further assessment being conducted.
- 10.2.6 No assessment results will be available to participants until post moderation results are confirmed by the Council.
- 10.2.7 Further moderation of assessment after subsequent runs of the programme may be required by Council.

10.3 Non-compliance with moderation requirements

- 10.3.1 Non-compliance in meeting the requirements of this moderation system will result in further action by Council. Ongoing non-compliance with the moderation requirements may ultimately lead the Council to withdraw accreditation.
- 10.3.2 Where non-compliance is identified, the Council will provide details in writing to the organisation. Necessary corrective action will be explained and the time frame given for compliance. If non-compliance continues and is unable to be resolved by telephone calls, emails, or other form of written communication, Council may request a meeting with the provider or vice versa.

10.4 Appeals

- 10.4.1 The Council has set an appeals procedure in place for situations where differences concerning moderation decisions cannot be resolved in the first instance.
- 10.4.2 The appeal must be received in writing at the Council within 10 working days of the Council moderation decision.
- 10.4.3 The fee for the appeal is to be set by the Council.
- 10.4.4 Late appeal applications will not be accepted and the decision of the Council is final and binding.