



REVIEW OF ACCREDITATION ARRANGEMENTS

**SUBMISSION TO THE PHARMACY BOARD OF  
AUSTRALIA**

---

**Australian Pharmacy Council Ltd**

July 2012

Level 2 Ethos House  
28-36 Ainslie Place  
CANBERRA CITY ACT 2601  
PO Box 269  
CIVIC SQUARE ACT 2608  
Telephone: +61 2 6262 9628  
Email: [admin@pharmacycouncil.org.au](mailto:admin@pharmacycouncil.org.au)  
Website: [www.pharmacycouncil.org.au](http://www.pharmacycouncil.org.au)

# CONTENTS

Domain 1 - Governance .....	4
Attachment 1 – Strategic Plan 2012 – 2015	
Domain 2 – Independence .....	8
Attachment 1 - Appeals	
Attachment 2 - Code of Conduct for Councillors	
Attachment 3 - Code of Conduct for Committee Members	
Domain 3 - Operational management.....	13
Attachment 1 – Risk Management Plan	
Attachment 2 – Confidentiality and Disclosure Policy	
Domain 4 – Accreditation standards.....	20
Domain 5 – Processes for accreditation of programs of study and education providers .....	22
Attachment 1 – APC Accreditation Monitoring: Schedule of Activity	
Domain 6 – Assessing authorities in other countries .....	25
Domain 7 – Assessment of internationally qualified practitioners .....	27
Domain 8 – Stakeholder collaboration.....	29
Indicative Work Plan for 2013 – 2018.....	31

## Background

The Australian Pharmacy Council (APC) was established in 2002 by the then State and Territory registering authorities to enable a national approach to pharmacy regulation and accreditation, thus supporting its primary goal of protecting the public.

On 1 July 2010, the *Health Practitioner Regulation National Law Act 2009* (the National Law) came into effect. This law means that for the first time in Australia the health professions are regulated by nationally consistent legislation. There were 10 professions included in the initial tranche. The Council of Australian Governments (COAG) implemented a *National Registration and Accreditation Scheme (NRAS)* and established the Australian Health Practitioner Regulation Agency (AHPRA) that provides support to the national boards responsible for registration and accreditation of each of the 10 professions (in the case of pharmacy this is the Pharmacy Board of Australia (PBA)). Under the NRAS, the APC was assigned the functions of accrediting education providers and programs of study for the pharmacy profession, and for assessing overseas trained pharmacists until 1 July 2013. The PBA also appointed the APC as the responsible body for delivering the written competency examination for interns.

The National Law requires independent accreditation of pharmacy programs and notification to the PBA. The PBA will then decide which accredited programs are approved for graduate entry into an internship and the process leading to registration.

The APC is a not-for-profit company limited by guarantee under the Corporations Act 2001 and registered with the Australian Securities and Investments Commission (ASIC). It is funded by grants and fees from its accreditation, assessment and examination services.

## Domain 1 - Governance

The Australian Pharmacy Council (APC) has robust, credible and sustainable governance processes and policies.

### Attributes:

- The APC is registered with the Australian Securities and Investments Commission as a public company limited by guarantee under the Corporations Act 2001.
- The APC's governance and management structures give priority to the accreditation function relative to other activities. Its governing body is the Council (Board) consisting of 10 people who meet the prescribed governance criteria. As of 1 July 2012 the Councillors (directors) are:
  - Mr John Low (President)
  - Mr John Jackson (Vice President)
  - Emeritus Professor Lloyd Sansom AO - Chair, APC Examining Committee (EC)
  - Ms Debra Rowett - Chair, APC Accreditation Committee (AC)
  - Professor Nick Shaw
  - Dr Ian Coombes
  - Ms Lenette Mullen
  - Mr Mark Bedford - Pharmacy Council of New Zealand Representative
  - Ms Gayle Ginnane - Community Representative and Chair APC Finance Audit and Risk Monitoring Committee (FARM)
  - Ms Patricia Greenway - Community Representative

Councillors have received training from the Australian Institute of Company Directors and are kept abreast of contemporary governance issues.

Members of the APC are currently 9 professional organisations and 19 individuals. The majority of individuals were nominated by the former State and Territory registering authorities and have been joined by some other people who have applied for membership.

The APC has two operational committees (EC and AC) reporting through the CEO to Council and one governance committee (FARM) reporting directly to Council. The operational committees are directly related to the accreditation function. The AC has an Executive Panel that convenes as needed for rapid response to issues arising; and the EC has a subcommittee (the Examinations Review Panel) that provides quality assurance of examination papers and moderation of results.

- The APC is financially viable and stable. A budget for the financial period 2011-2012 was provided in 2011 and another for the period 2012-2013 was provided in February 2012. Both budgets show that the APC has moved towards fair and transparent cost recovery from its stakeholders, i.e. overseas trained pharmacists, universities, accredited organisations (CPD, ITPs) and the PBA.

In accordance with Clause 4 and Schedule 1 of the Service Agreement, the PBA provided funding of \$300,000 (GST exclusive) in 2011-12 towards accreditation activities. The PBA provided additional special purpose funding of \$100,000 (GST exclusive) for the review of the degree program accreditation standards which commenced in January 2012.

The FARM Committee has two Councillors and one external person (non-pharmacist) as members, and all have relevant expertise.

To assist the APC to track and monitor its income and expenditure, risks and audits, the FARM Committee undertakes the following:

- (i) Assisting the APC to discharge its responsibility to exercise due care, diligence and skill in relation to its:
    - finances,
    - risks,
    - business policies and practices,
    - compliance with applicable laws, regulations, standards and best practice guidelines.
  - (ii) Improving the efficiency of Council by delegating tasks to the Committee and thus allowing more time for issues to be discussed in sufficient depth.
  - (iii) Improving the quality of internal and external reporting of financial and non-financial information.
  - (iv) Assisting in fostering an ethical culture throughout the organisation.
- The APC provided financial statements demonstrating that its accounts meet relevant Australian and financial reporting standards.
  - The APC has transparent processes for selection of its governing body and committees. Council and each committee have criteria that must be met by those applying. All vacancies are advertised in the appropriate media and selection panels utilized to make recommendations to the Council for appointment. All appointments are for a fixed term to ensure there is turnover of members.
  - The APC's governance arrangements provide for input from stakeholders including input from the community, education providers and the professions. The constituents of committees comply with the guidelines for accreditation committees laid down by the WHO and include nominees from the professional organisations, academe and the community.

The APC complies with the requirements laid out under the National Law, 'Quality Framework for the Accreditation Function' and other relevant documents when developing or reviewing standards. It has a 'Stakeholder Engagement Strategy' which is applied when undertaking stakeholder communication and inviting feedback.

- The APC's governance complies with the National Law, Corporations Act 2001, national standards and other applicable legislative requirements.

## APC STRATEGIC PLAN 2012 - 2015

### Governance Statements 2012 - 2015

#### The APC's Vision –

The APC protects the public by the performance of accreditation and assessment activities that significantly contribute to the optimisation of health outcomes and to confidence in the delivery of competent pharmacy services in Australia.

#### The APC's Mission –

The APC is recognised as a leading accrediting agency as evidenced by:

- The development and implementation of accreditation standards
- Promoting excellence in education, training, development and performance
- Demonstrating independence and transparency
- Consulting and collaborating with key national and international stakeholders

#### The APC's Values –

In all of its activities the APC maintains:

1. Independence and high ethical standards
2. honesty and transparency in everything that it does
3. accountability to clients and stakeholders
4. evidence-based decision making and benchmarking
5. high quality business processes and outcomes
6. continuous improvement
7. collaborative models of leadership

#### The APC's Key Result Areas -

In fulfilling its mission the APC aims to achieve results in five major areas

1. Services and Responsiveness

Services are contemporary, effective, relevant, accurate and accessible and defensible; while responses are timely and efficient.

2. Internal Processes and Performance

Processes are responsible, sustainable, robust, transparent, reliable, valid, quality assured, stream-lined, consistent, fair and equitable; while performance is consistent, reliable, professional, ordered and timely.

3. Stakeholders and Relationships

Stakeholder engagement is productive, collaborative and consultative, reciprocal and respectful, honest, equitable, proactive and sustainable/timely, informative; while relationships are transparent, defensible, profiled, credible/reputable, and the APC shows leadership.

4. Resources (People and Finances)

People are adequate in numbers, appropriately skilled, reliable, expert, resilient, flexible, fair, respectful, responsive, courteous, professional, engaged, dedicated, discreet, valued and professional development is continuous; while, finances are sustainable, strategically managed, efficiently and effectively managed, and adequate.

# Strategic Priorities 2012– 2015

## 1. Services and Responsiveness

- a) Accreditation activities are conducted independently, fairly, consistently, without undue influence of any party, transparently and to a high quality against standardised processes.
- b) Documented standards and processes are applied to assessing overseas trained professionals and international students graduating from an Australian pharmacy program for eligibility to enter the registration process in Australia.
- c) There is recognized excellence and efficiency in the development, conduct and marking of the knowledge based and competency based examinations.
- d) There is recognized excellence and efficiency in the delivery and conduct of the examination consortium's national and international examination services.

## 2. Internal Processes and Performance

- a) All governance processes are clear, effective and transparent, demonstrating competence and professionalism, management of conflicts of interest and risks, and underpin the selection of the governing body and committee membership.
- b) Accreditation processes are monitored, reviewed, improved and implemented *inter alia* accreditation of CPD, training and evaluation of SET members.
- c) Examination processes are monitored, reviewed, improved and implemented *inter alia* collection of statistics on examination questions, item writing and validation.
- d) Standards developed use the AHPRA *Procedures for development of accreditation standards*, meet relevant benchmarks, are evidence based using available research, and reviewed regularly
- e) The development of standards complies with the National Law *inter alia* involves wide ranging consultation

## 3. Stakeholders and Relationships

- a) APC lobbies/influences; engages with governments; engages with the pharmacy profession, health professions and the community through effective, consistent and ongoing communication leading to increased recognition of the delivery of high quality accreditation and examination services.
- b) Collaboration occurs with stakeholders including national and international accreditation organisations, examining authorities, community and professional organisations; and there is national and international leadership in accreditation, examination delivery and related areas.
- c) There is satisfaction with the quality and value of the APC services.

## 4. Resources (People and Finances)

- a) Staff capability is maintained through ongoing staff development, appropriate recruitment and selection to align with the APC corporate goals and values
- b) Identification of strategic business opportunities will be made that contribute to the financial viability and sustainability of the APC.
- c) There is effective and efficient management of resources (including investments) balanced with the setting of a fee structures appropriate to the principles of the National Law.

## Domain 2 – Independence

The APC holds independence in all its accreditation activities and decision making as one of its highest priorities. Therefore the APC agrees with the views expressed by the PBA that the Council and standing committees do not have nominees or representatives from the PBA, nor does a person connected to the PBA have membership of the APC.

### Attributes:

- There are clear procedures in place for ensuring the independence of the APC's accreditation activities. Through the structure and composition of its operational committees, the APC ensures that no single stakeholder has the power to influence a decision. Each committee operates under a policy and decision making framework approved by Council, with delegated authority to make decisions regarding operational matters for which they have expertise. This excludes budgetary decisions, membership, policies and frameworks.

All APC assessment and examination activity is undertaken independently through:

- Recruitment and employment of highly skilled, full-time assessment staff
  - Extensive training in assessment processes and fraudulent documents for assessment staff by DIAC via DEEWR,
  - Requiring APC assessment staff to undergo a criminal check and sign a confidentiality agreement and a code of conduct,
  - The production of all examinations in-house from secure databases populated with items owned, created, reviewed and maintained by APC
- There are clear procedures for identifying and managing conflicts of interest. A 'Register of Interest' is an ongoing record of Council and committee members' affiliations and relevant interests; each meeting requires attendees to declare any conflict of interest within the agenda and this is minuted; all Councillors and committee members are given the relevant policies regarding independence, conflict of interest and meeting protocols.

Members of Council, the committees, panels and working groups as well as other external experts contributing to the work of the APC are selected based on their competence and expertise and according to objective and transparent criteria. During the selection process, interests declared by the applicants are also reviewed. In addition, independent external evaluators review the assessment of applications for panel membership to ensure that the selection process is coherent. All individuals who undertake work for the APC are required to agree and adhere to a code of conduct. The Code of Conduct for Councillors is at ATTACHMENT 2, and the Code of Conduct for Committee Members is at ATTACHMENT 3 of this domain.

- CPD Accrediting Organisations currently self-accredit CPD activities developed by the organisation. The APC evaluates the organisations' management of conflict of interest and examines how it separates the accreditation and development of CPD activities when the organisation applies for accreditation and at the site audit conducted 6 months into the accreditation period. In the course of its monitoring activities the APC investigates instances where the separation of accreditation and development may be an issue to ensure that measures have been taken by the organisation to maintain that separation.



## **ATTACHMENT 1**

### **Appeals – 1 July 2010 – 30 June 2012:**

#### **Knowledge Assessment of Pharmaceutical Sciences (KAPS) and Competency Assessment of Overseas Pharmacists (CAOP)**

There have been no appeals or reviews lodged regarding either the KAPS or the CAOP examination since 1 July 2010.

#### **Intern Written Examination**

There have been four appeals of Intern Written Examination results since 1 July 2010.

Two appeals were upheld due to issues with the computer delivery of the Written Exam, and two were not upheld due to insufficient cause.

#### **Eligibility Assessments**

There has been one appeal of an eligibility assessment since 1 July 2010. The appeal was upheld based on the evidence provided by the applicant.

# **Code of Conduct for Councillors**

## **Introduction**

The Code of Conduct aims to ensure that high standards of corporate and individual behaviour are observed by all Councillors. Councillors are expected to adhere to the Code of Conduct.

## **Code of Conduct**

Councillors:

- will act honestly, in good faith and in the best interests of APC
- owe a fiduciary duty to the APC as a whole (refer to Councillors Duties Policy)
- have a duty to use due care and diligence in fulfilling the functions of the office and exercising the powers attached to that office
- will undertake diligent analysis of all proposals placed before the Council
- will demonstrate reasonableness in decision making and treat all other Councillors and APC staff with courtesy and respect
- have an obligation to be independent in judgment and actions and will take all reasonable steps to be satisfied as to the soundness of all decisions of the Council
- will sign the APC Confidentiality Agreement prior to attending the first meeting and thereafter will keep confidential, information received in the course of the exercise of their duties. Councillors will recognise that such information remains the property of the Council and it is improper to disclose it, or allow it to be disclosed, unless that disclosure has been authorised by the Council and the person from whom the information is provided, or disclosure is required by law
- will not take improper advantage of the position of Councillor or use the position for personal gain or to compete with the APC and will use the powers of office in the best interests of the APC as a whole
- will not take advantage of the APC property or use such property for personal gain or to compete with the APC
- will disclose any conflicts of interest within the agenda at each Council meeting; and will not allow personal interests, or the interest of any associated person, to conflict with the interests of the APC
- will make reasonable enquiries to ensure that the APC is operating efficiently , effectively and legally, towards achieving its goals
- in respect to business relevant to the Council, not engage in any conduct likely to bring discredit upon themselves and/or the APC whilst being a Councillor or undertaking APC activities
- will encourage fair dealing by all Councillors and employees
- encourage the reporting of potential/alleged unlawful/unethical behaviour relevant to the Council to the President or CEO and actively promote ethical behaviour and protection for those who report violation in good faith
- have an obligation, at all times, to comply with the spirit, as well as the principles of this code

### **Related Documents**

- APC Duties and Responsibilities of Councillors
- APC Privacy Policy
- APC Confidentiality Agreement

### **References**

- Australian Security Exchange, *Code of Conduct and Ethics*, Sydney, 2006
  - Australian Institute of Company Directors, *Code of Conduct*, Sydney, 2009
- 

Approved: Council  
Approval Date: 26 May 2008  
Reviewed: September 2010

## **Code of Conduct for Committee members**

---

The Code of Conduct for standing Committees of the Australian Pharmacy Council aims to ensure that high standards of practice and individual behaviour are observed by all Committee members to promote effective and productive discussions and activities. Committee members are expected to adhere to the Code of Conduct and will:

1. act honestly and in good faith at all times in respect to APC matters
2. undertake diligent analysis of all proposals placed before the Committee
3. demonstrate reasonableness when making decisions and/or recommendations and treat all other Committee members with courtesy and respect
4. have an obligation to be independent in judgment and actions and make decisions on an informed and sound basis including development of recommendations by the Committee
5. sign the APC Confidentiality Agreement prior to attending the first meeting and thereafter will keep confidential, information received in the course of the exercise of membership. Recognise that such information is the property of the APC and it is improper to disclose it, or allow it to be disclosed, unless that disclosure has been authorised by the APC and the person from whom the information is provided, or disclosure is required by law
6. complete a Register of Interests (and update annually): disclose any conflicts of interest within the agenda at each Committee meeting; and not allow personal interests, or the interest of any associated person, to conflict with the interests of the Committee or the APC
7. not take improper advantage of the position of Committee membership or use the position for personal gain or to compete with the APC
8. not take advantage of the APC property or use such property for personal gain or to compete with the APC
9. in respect to business relevant to the Committee not engage in any conduct likely to bring discredit upon themselves and/or the APC whilst being a Committee member or undertaking APC activities
10. encourage fair dealings with all Committee members and APC employees
11. encourage the reporting of potential/alleged unlawful/unethical behaviour relevant to Committee membership to the President or CEO and actively promote ethical behaviour and protection for those who report violation in good faith
12. have an obligation, at all times, to comply with the spirit and with the principles of this code and relevant APC policies

---

Approved by: Council  
Date: 8 September 2010  
For Review: September 2013

## Domain 3 - Operational management

The operational management of the APC comes under the CEO's portfolio. The CEO is performance assessed against the Corporate Action Plan that is derived from the strategic directions and plan set by the Council. The CEO presides over the two operational committees (accreditation and examining) that have delegated authority from the Council for decision making at the operational level.

### Attributes:

- The APC achieves effective management of the human and financial resources to support its accreditation function through regular reviews of staffing levels, workload and resource monitoring. Key performance indicators are used to assess the APC's performance against its strategic priorities using an annually updated Corporate Action Plan that is monitored monthly. A comprehensive Risk Management Plan is reviewed and monitored monthly. This covers all aspects of the APC's operations and contains strategies for management or minimisation of risks. The Risk Management Plan is part of the FARM Committee portfolio and is overseen by the Council.

As part of the risk management process, the APC utilises a 'rolling' appointment structure for Council and operational committees which allows the APC to ensure corporate memory and consistency in key decision-making capability. The tool applied for risk management is at ATTACHMENT 1 of this Domain.

- There are mechanisms in place to ensure operational efficiency and effectiveness. These include:
  - Regular meetings of the Examining Committee and Accreditation Committee with comprehensive review of the delivery of examinations, accreditation activities and quality assurance measures e.g. assessment of overseas trained practitioner turn-around time of three weeks from receipt of completed application
  - Monthly review of staffing needs (skills and experience) required for effective and timely processing of assessments and examinations
  - Timely delivery, moderation and release of examination results
  - Maintenance and monitoring of contracts for venues, invigilators and service providers around the nation
  - Ongoing stakeholder feedback and recording on services provided
- There are robust systems for ensuring confidentiality and managing information and contemporaneous records. This includes the development and maintenance of multiple secure databases to record, organise, collate, develop and deliver examinations and other accreditation activities. The APC Confidentiality and Disclosure Policy is at ATTACHMENT 2.
- The APC fee structures balance the requirements of the principles of the National Law and efficient business processes. Fees structures are based upon the actual cost to the organisation to deliver its services and are benchmarked against like organisations. Fees are fair, defensible and transparent, and meet contemporary practice by being regularly reviewed.

## **APC RISK MANAGEMENT PLAN**

### **Introduction**

The Risk Management Plan has been developed in conjunction with the Business Continuity Plan and Disaster Recovery Plan. Risks have been assessed for both internal risks and external risks (impacting on stakeholders).

### **What is risk?**

Risk refers to the potential that something or someone will impact adversely on the Australian Pharmacy Council objectives. This will require strategies for the management of such an occurrence. It is measured in terms of consequences and likelihood.

### **What is risk management?**

Risk management involves a process or application of a model to assist in the identification, analysis, prioritising and treating of risk. Risk management is as much about identifying opportunities as avoiding or mitigating losses.

### **What is risk analysis?**

The objectives of analysis are to separate the minor acceptable risks from the major risks, and to provide data to assist in the evaluation and treatment of risks. Risk analysis involves consideration of the sources of risk, their consequences and the likelihood that those consequences may occur. Factors which affect consequences and likelihood may be identified. Risk is analysed by combining estimates of consequences and likelihood in the context of existing control measures.

### **Risk management framework**

The objectives of risk management are to:

- Ensure that significant risks are understood and managed;
- Develop an approach to risk management;
- Instil an awareness of risk and ensure that risk is considered in decision making;
- Create an environment where employees will take responsibility for managing risk;
- Ensure that material risks are monitored though formal documentation and review treatment actions are reported to the CEO (Council) on a regular basis;
- Ensure transparency in decision making and ongoing management processes; and
- Ensure resources and operational capabilities are identified and responsibly and efficiently deployed.

### **Risk management overview**

#### Types of risk

Types of risk fall into the following categories:

#### *Pure risk*

Potential for loss without any corresponding benefit e.g. fire, workers compensation.

#### *Business risk*

Uncertainty of outcomes across a full range of operations e.g. financial, technical, management, marketing, policy, political or legal.

#### *Residual risk*

That component of risk that cannot be minimised and therefore must be insured or absorbed.

## Possible risks to Australian Pharmacy Council

Possible identified risks to the Australian Pharmacy Council fall into the following categories:

### Legislation

- Non compliance

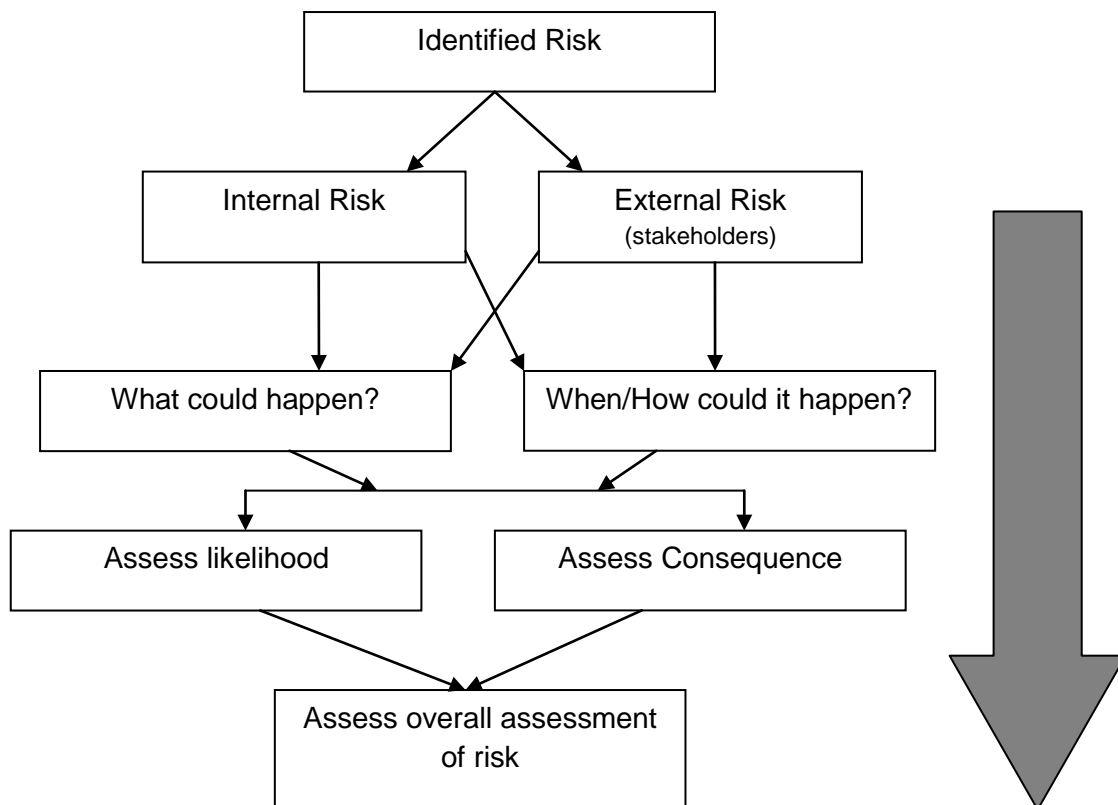
### Business

- Occupational Health and Safety
- IT
- Financial
- Fraud
- Insurance
- Litigation
- Stakeholder demands
- Relationships

### Operational

- Accountability/Responsibility
- Awards
- Contractual & International agreements
- Environment
- Workplace relations

## Qualitative risk assessment



Likelihood	Consequence
Degree of vulnerability (chance that risk will occur)	Degree of impact (resultant damage)
<ul style="list-style-type: none"> <li>▪ Almost certain</li> <li>▪ Likely</li> <li>▪ Possible</li> <li>▪ Unlikely</li> <li>▪ Rare</li> </ul>	<ul style="list-style-type: none"> <li>▪ Catastrophic</li> <li>▪ Major</li> <li>▪ Moderate</li> <li>▪ Minor</li> <li>▪ Insignificant</li> </ul>

## **Overall assessment measures**

Overall assessment measures fall into the following categories:

### *Extreme risk*

Detailed research and management planning required, immediate action required.

### *High risk*

Senior management attention needed.

### *Moderate risk*

Managed by specific monitoring or response procedures, management responsibility must be specified.

### *Low risk*

Managed by routine procedures.

## **Evaluation and quantification**

The risk management matrix enables a snapshot of key risks.

## **Risk reduction**

Reduction strategies fall into a number of categories:

- Direction – including plans, policies and guidelines;
- Education and awareness raising strategies;
- Compliance mechanisms;
- Insurance;
- Risk sharing; and
- Other.

## **Implementing a risk approach**

To ensure that a risk management plan is effective, the following should be implemented:

- Commitment from the Council, CEO and operational staff;
- Communication and promotion;
- Delegation of authority at lowest possible levels; and
- Use of performance indicators.

## **Risk management tables**

The Australian Pharmacy Council has developed its risk management under the following headings:

- Corporate;
- Security/OH&S/Privacy/Legal;
- Information Technology;
- Human Resources;
- Finance;
- Assessments;
- Examinations; and
- Accreditation.

## **Management of risks**

The risks identified will be allocated to a staff member(s) to implement agreed strategies, monitor and report upon at staff meetings.

The CEO will report to the Finance Audit and Risk Monitoring Committee on monitoring and progress of the risk management plan.



## LIKELIHOOD AND CONSEQUENCE SCALE

(Used for identifying and analysing risk)

		Consequence						
		Insignificant	Minor	Moderate	Major	Catastrophic		
		1	2	3	4	5		
Likelihood	Numerical:	Historical:						
	>1 in 10	Is expected to occur in most circumstances	5	6	7	8	9	10
	1 in 10 - 100	Will probably occur	4	5	6	7	8	9
	1 in 100 – 1,000	Might occur at some time in the future	3	4	5	6	7	8
	1 in 1,000 – 10,000	Could occur but doubtful	2	3	4	5	6	7
1 in 10,000 – 100,000	May occur but only in exceptional circumstances	1	2	3	4	5	6	
			Almost Certain					
			Likely					
			Possible					
			Unlikely					
			Rare					

## **Confidentiality and Disclosure Policy**

### **1. Application**

#### 1.1 This policy covers:

- (i) written material provided to the Accreditation Committee by institutions for the purpose of accreditation of their pharmacy education programs, while in the possession of the Australian Pharmacy Council (APC) and external evaluators appointed by Accreditation Committee; and
- (ii) written material relating to the accreditation of individual pharmacy education programs, including reports, minutes, correspondence and notes generated by APC and external evaluators appointed by the Accreditation Committee.

#### 1.2 This policy applies to:

- (i) Accreditation Committee members;
- (ii) employees of and consultants to the APC involved in an Accreditation Committee accreditation process;
- (iii) members of Site Evaluation Teams (SET) appointed by the Accreditation Committee; and
- (iv) any other person evaluating an accreditation application on behalf of the Accreditation Committee.

### **2. Background**

2.1 The Accreditation Committee is a standing committee of the Australian Pharmacy Council. The Accreditation Committee is responsible for the accreditation of pharmacy education programs in Australia and New Zealand leading to registration as a pharmacist. It may appoint Site Evaluation Teams (SETs), Articulation Site Evaluation Teams (ASETs) and other external pharmacy professionals to evaluate programs and make recommendations to the Committee. The Accreditation Committee will work within the policies and guidelines approved by the Council, and will keep Council fully informed of all decisions.

### **3. Policy**

- 3.1 It is recognised that the information which the Accreditation Committee requires to be submitted to it as part of an accreditation application may contain information which should be regarded as confidential for commercial or personal reasons. The APC requires that all material submitted by an applicant institution is regarded as confidential and handled in accordance with this policy.
- 3.2 To minimize the exposure of commercial-in-confidence material, external evaluators who have a real or perceived conflict of interest will not be engaged by the Accreditation Committee (in most cases). All external evaluators will be asked to sign a confidentiality agreement prior to commencing any work for the APC.
- 3.3 The APC reserves the right to publish aggregate or other information extracted from accreditation applications, provided that the information as presented cannot be attributed to a particular institution.
- 3.4 The Accreditation Committee accreditation process is not a rating process and any use of evaluations by APC, its members or institutions to compare the quality of accredited programs, or promote or denigrate the quality of a particular program, on the basis of an Accreditation Committee evaluation is inappropriate and is not permitted.

- 3.5 An institution applying for accreditation of a pharmacy education program will be provided with copies of SET reports and ASET reports (excluding recommendations), and a statement of reasons for the accreditation decision made by APC (via the Accreditation Committee). The institution may request copies of other evaluator reports and such requests will be considered by the Accreditation Committee. In the event of the APC withholding accreditation a statement of reasons will be provided to the institution; and any conditions of accreditation will be fully explained.
- 3.6 The APC will grant an institution applying for accreditation of a pharmacy education program unfettered use **for internal purposes only** of reports and other material provided to it in connection with accreditation of that program. An institution may not use or quote such reports and other materials externally for any purpose, unless permission is granted by APC.
- 3.7 When advertising accreditation status, institutions should state the status accurately; i.e. preliminary accreditation granted, provisionally accredited, or fully accredited.

#### **4. Procedures**

- 4.1 All persons to whom this policy applies will treat as confidential all documents, reports and other material supplied by the institution applying for accreditation and by the APC. Such information may not be copied, distributed to any person or body other than one appointed by Accreditation Committee as an evaluator or provided for in the Accreditation Committee's evaluation procedures. Evaluators for a particular application may discuss information between themselves but may not disclose to other persons any such information or the substance of any preliminary deliberations.
- 4.2 The APC will retain indefinitely a copy of the accreditation application, including all supplementary material supplied with the application and to SETs on-site, and evaluators' reports, including final SET reports. All correspondence and other material relating to the appointment of evaluators, organisation of site visits and other administration will be retained.
- 4.3 Once an evaluation is completed, external evaluators must destroy in a secure fashion or return to the APC all materials associated with the evaluation, including the application and supporting documentation, paper and email correspondence concerning the substance of the evaluation and notes.

---

Approved: Council

Date: May 2007

Revised: 14 May 2011

## Domain 4 – Accreditation standards

The APC currently accredits thirty three programs and four CPD Accrediting Organisations against a range of standards for the accreditation of pharmacy education programs and activities. The APC is responsible for developing, maintaining and applying the following:

- *Degree Program Accreditation Standards 2009* are a single set of standards applied to Bachelor of Pharmacy and Master of Pharmacy programs within Australia and New Zealand. These Standards are currently under review with an expected completion date of November 2012.
- *Intern Training Program Accreditation Standards 2010* are two sets of standards, for use in Australia or New Zealand respectively, and are applied to all pharmacy intern training programs.
- *CPD Accreditation Criteria* are the criteria against which the APC accredits organisations to accredit CPD activities.
- *CPD Accreditation Standards 2012* (subject to approval by the PBA) are the standards against which CPD accrediting organisations are required to assess CPD activities. These Standards were recently finalised in June 2012 and will be applied in the latter half of 2012.
- *Standards for Assessing Authorities in other Countries* are the standards that have recently been developed commencing with the underpinning principles (also applies to Domain 6). The Standards provide for 'recognition' of a country that is substantially equivalent, rather than accreditation of their programs and processes.

In addition to the above Standards, the APC has recently become responsible for applying the *Accreditation Standards for the Prescribed Qualification: Pharmacist Prescriber Scope of Practice* for the Pharmacy Council of New Zealand.

### Attributes:

- The APC Standards meet relevant Australian and international benchmarks. Development of all APC accreditation standards involve an initial benchmarking review against comparable standards within Australia, New Zealand and internationally. The Australian Pharmacy Council benchmarks against the registered health professions in Australia and pharmacy accreditation authorities in the United Kingdom, Ireland, the United States, Canada, Singapore and South Africa.
- APC Standards are based on the available research and evidence base investigated through a process literature review of relevant research during the development of standards and through active monitoring of international standards and ongoing involvement with comparable accreditation bodies in New Zealand and internationally.
- Stakeholders are involved in the development and review of standards and there is wide ranging consultation undertaken through a range of mechanisms. In addition to the stakeholder engagement as outlined in the APC Stakeholder Engagement Strategy, the development of accreditation standards involves multiple points of stakeholder consultation. Stakeholders are identified and invited to comment on current standards, where applicable, participate in working parties to advise on the drafting of new standards and involved in consultation and discussion forums to further develop positions regarding the standards for pharmacy education.

- The APC reviews the standards in three yearly cycles and undertakes active monitoring regarding the application, performance and continuing relevance of all standards.
- In reviewing and developing standards, the APC ensures all standards accord with the *AHPRA Procedures for development of accreditation standards* and the *National Law*. The National Law forms part of the background research for consultants contracted to develop draft standards and underpins the consultation strategy for the development phase. The principles of the National Law are highlighted with stakeholders during consultation to ensure a common understanding of the framework in which a review is being conducted and to ensure that revisions to accreditation standards are made with the principles of protection of the public, provision of high quality services and access to a skilled workforce at the core of any change.

## Domain 5 – Processes for accreditation of programs of study and education providers

The APC has a range of processes and supporting material in place to ensure consistency, transparency and equity in undertaking accreditation decisions. These ensure selection and training of suitable reviewers, fair and robust accreditation decisions and engagement of accredited providers in the ongoing quality improvement of pharmacy education programs. The APC provides decisions on accreditation to the PBA which comply with the National Law, the Service Agreement negotiated with the PBA and the policies of AHPRA. Sufficient information/clarification is given to the PBA by the APC to enable it to make fully informed decisions regarding approval of accredited programs.

### Attributes:

- The APC ensures that documentation on the accreditation standards and the procedures for assessment are publicly available via the APC website [www.pharmacycouncil.org.au](http://www.pharmacycouncil.org.au)
- The APC has policies on the selection, appointment, training and performance review of assessment team members. Through these policies and processes, the APC provides for the use of competent persons who are qualified by their skills, knowledge and experience to assess professional programs of study and providers against the accreditation standards.

All provider audits and site evaluations have qualified APC accreditation officers in attendance, with formal qualification in two units (at a minimum) forming part of the Diploma of Quality Auditing.

Site Evaluation Team (SET) chairs are experienced pharmacy academics selected from a pool of reviewers with experience conducting evaluations against the APC Accreditation Standards. Professional members are selected based on their knowledge of their area of practice and some experience with the training of interns or students. To support the evaluation, SET members are provided with the following:

- SET manual detailing the background of the APC, the function of accreditation under the National Law, the roles of the various team members, sample interview questions based on target of interview, template report, etc.
- Code of Conduct,
- Confidentiality and Non-Disclosure Policy,
- Orientation material outlining the purpose of accreditation, the structure of the accreditation committee and the processes related to APC accreditation.

Training for SET members is currently conducted over three hours by APC accreditation staff on the day prior to a SET visit. To enhance this training, the APC is currently developing a series of five online modules that will be provided to SET members in advance of the site evaluation to provide greater depth of understanding regarding the purpose, processes and techniques underpinning an evaluation.

- The APC has clear procedures for identifying, managing and recording conflicts of interest in the work of accreditation assessment teams and working committees through the application of a Conflict of Interest Policy which applies to all Committee members and evaluators. Committee members and evaluators are required to declare any conflicts of interest prior to a meeting, or a program evaluation. Use of external evaluators to review all accreditation applications ensures the commercial in confidence nature of applications and reduces the risk of any conflict of interest

within the review process. Accredited universities are given the opportunity to notify the APC if they believe a conflict exists with a member of the SET prior to the assessment.

All APC committees use a 'Register of Interest' which is updated at every meeting. In addition to the Register, a standing item is present on all APC agendas to declare any conflicts of interest within the agenda. Any declared conflict is recorded and a determination made as to how best to handle the conflict.

- To ensure consistency in accreditation decisions the APC follows documented processes for decision-making through the use of a Decision Making Framework outlining the principles against which the Accreditation Committee will assess a program or a change in a program. The APC also uses reporting templates for all site evaluations and provider audits to ensure that there is consistency in the way the information is collected and reported to the Accreditation Committee.

In addition to the conflict of interest policies in place to enable decisions to be made free from undue influence by any interested party, Academic Chairs of SET's present the findings in their SET report directly to the Accreditation Committee to ensure accuracy and to answer any questions that arise.

- The APC facilitates continuing quality improvement in programs of study through the application of an Accreditation Monitoring Framework. The Framework outlines the mechanisms employed by the APC to monitor accredited programs. These mechanisms range from conducting site evaluations, monitoring media releases/websites for changes to program information, annual reports and assessment of intern performance at the written examination.
- The APC applies a cyclical accreditation process with regular assessment of accredited education providers and their programs via reporting required as part of the Accreditation Monitoring Framework. Each accredited program will undergo one site evaluation/audit (at a minimum) during their accreditation cycle. Accreditation cycles can last for up to five years for degree programs and three years for Intern Training Programs or CPD Accrediting Organisations.
- The APC has defined *major* and *minor* changes to programs within the Decision Making Framework. When notified by an accredited provider or detected during program monitoring, the APC requests further information regarding the change and retains the right to undertake a site evaluation where a change may affect the accreditation status of the program.
- The APC has a published complaint, review and appeals process available on the APC website. The process ensures that accreditation decisions can be reviewed in a way which is rigorous, fair and responsive. However, accredited providers are consulted throughout an evaluation to ensure a fair process is maintained through the ability of the university to exclude SET participants based on conflict of interest, the ability of the university to correct errors of fact within site evaluation reports and the ability to appeal accreditation decisions. No complaints or appeals regarding accreditation decisions have been lodged in the period from 1 July 2010 to date.
- The APC undertakes frequent monitoring of CPD activities. Publications such as Pharmacy Daily and Pharmacy News are scanned daily for advertisements of CPD activities and activities included within the publication. Monthly publications are also scanned.

Inappropriate advertising or questionable content trigger a further review of the activity including evaluating the assessment component. Where the APC is

concerned that an activity has been assigned a credit value or a CPD Group that is not consistent with the definitions in the Pharmacy Guidelines on Continuing Professional Development, the CPD Accrediting Organisation is asked to submit the original application for validation.

The APC monitors the CPD sections of CPD Accrediting Organisations' websites on a monthly basis and randomly selects scheduled activities to review. The APC also reviews all conference programs.

Organisations are contacted to provide further information regarding activities that the APC identifies as requiring review. In the first instance CPD Accrediting Organisations are asked to justify the accreditation decision. Where an activity has been inappropriately advertised the Organisation is instructed to contact the activity provider and remove all incorrect advertising from circulation where possible.



## Domain 6 – Assessing authorities in other countries

The APC has completed a project to develop standards and procedures that “*assess examining and/or accrediting authorities in other countries consistent with the National Law*” as outlined in the ‘Quality Framework for the Accreditation Function’. The consultant for the project was Dr Anne Martin. The project commenced by developing the underpinning principles for an accelerated process for pharmacists with substantially equivalent training and practice to Australia, then wide consultation was undertaken to develop the standards to be applied to countries. The project has resulted in the identification of three Standards and associated indicators for the identification of countries with comparable learning and practice environments to Australia.

Running parallel to this project was a mapping exercise undertaken by Dr Susanne Owen that took the pharmacy programs in the USA, UK, Ireland, Canada, Singapore and South Africa and compared the following:

- a) The accreditation systems for pharmacy programs in the first instance e.g. whether there is independence from government, exists under an Act or other legal process, and other;
- b) The examination systems for pharmacy programs e.g. come under the university system, other recognised body (like the PBA in Australia), and other;
- c) Mapping of the indicative curriculum
- d) Mapping of the Competency Standards or equivalent
- e) Mapping of the Practice Standards or equivalent
- f) Comparing the nature of practice. The ‘nature of practice’ was described as:
  - Pharmacy is subject to a registration framework
  - Pharmacy practice is conducted under a framework of legislation i.e. poisons and controlled substances legislation
  - Pharmacy practice has a primary focus orientated towards patient care as opposed to something like manufacturing or industry
  - Primary care is a role considered appropriate for pharmacists
  - Pharmacists are encouraged to be part of a health care team
  - Pharmacists and pharmacy practice represent the primary and major source for the activity of dispensing
  - The health system is comparable to Australia

### Attributes:

- These Standards used for assessment determine whether the country’s processes result in practitioners who have the knowledge, clinical skills and professional attributes necessary to practice pharmacy in Australia.
- Stakeholders involved in the development of the Standards included pharmacy professional bodies, other comparable health professions, government, community representatives, and pharmacy accreditation bodies in the USA, UK, Canada, Ireland, South Africa and Singapore. As registered pharmacists from New Zealand are covered under the Trans-Tasman Mutual Recognition arrangement, New Zealand stakeholders were also consulted as part of this process.
- The procedures for initiating consideration of the Standards and procedures are defined and documented and the process overseen by the Examining Committee of professional experts and community representatives.
- The mapping exercise (as outlined above) will take place every three years or more frequently as indicated.

- It is now possible to have independent, clear, transparent and defensible decisions resulting from the application of the Standards regarding the comparability of the learning and practice environments operating in countries other than Australia. This will identify overseas trained pharmacists whose skills and competencies enable them to practise pharmacy safely in Australia after a competency assessment and short period of supervised practice. The Examining Committee and APC assessment officers operate under clear guidelines relating to conflict of interest and independence of decision making.
- Appeals and complaints policies are shown on the APC website.

## Domain 7 – Assessment of internationally qualified practitioners

The APC has conducted 909 assessments of internationally qualified practitioners since 1 July 2010. Due to the changes to skilled migration implemented by the Department of Immigration and Citizenship via its SkillSelect program launched on 1 July 2012, it is difficult for the APC to estimate the potential number of assessments it will undertake in the next five years.

### Attributes:

- The APC Assessment Standards define the required knowledge, clinical skills and professional attributes necessary to practice pharmacy in Australia.
- The key assessment criteria, objectives and standards are available on the APC website and are to be reviewed regarding ease of application in November 2012.
- The APC assesses applicants using established and recognised tools such as the Country Education Profile (CEP) tool supplied by DEEWR and an overall primary assessment of qualifications, registration, work experience and letters of good standing are subject to random audit by senior staff of the APC as well as the APC's Examining Committee. The secondary assessment (Knowledge Assessment of Pharmaceutical Sciences (KAPS) or the Competency Assessment of Overseas Pharmacists (CAOP)) uses multiple choice questions that have been developed by pharmacists, trialled and monitored for performance. The Examining Committee examines the secondary assessment for performance, statistical reliance and as an indicator of the assessment process.

### Processes for assessment and examinations:

The APC applies a number of rigorous, fair and consistent processes in the delivery of assessments and examinations including:

- The APC produces invigilator and venue training manuals specific to each examination and sends observers to a variety of venues to ensure the exams are delivered consistently nationally and internationally,
- The APC maintains substantial procedure manuals and guidelines for the assessment of overseas candidates that are regularly reviewed and amended to ensure relevance and compliance with the relevant legislation
- The APC examination staff create new exam papers for each session which undergo review by the Senior Pharmacist and the Examination Review Panel to ensure paper consistency, relevance and accuracy
- Examination venues used by APC implement rigorous ID checks of candidates before commencement of examinations
- Extensive creation, review, validation and trialing of exam questions by intern pharmacists, retail and hospital pharmacists and university academics (10 KAPS validation workshops, 2 Written Exam validation sessions, 1 item writing workshop and 1 KAPS review in 2011-2012)
- Implementation of robust security measures are in place to ensure exam paper and assessment integrity including:
  - air-gapped computers where exams are created and stored,
  - courier service for all paper and pencil exams with checks in place upon receipt at venue and return to APC,
  - secure destruction of assessment documentation and exams
  - record storage in security locked room accessible to relevant staff

- All assessment activity is undertaken in-house with frequent internal audits with 3 out of 10 assessment files pulled for review and verification from external sources (e.g. certifying officers)
- Benchmarking assessment procedures through participation at assessment conferences
- Regular review of standards around the conduct of examinations including invigilator training, venue management and examination delivery

Assessing overseas qualified practitioners:

- Strict adherence to the APC Standards and Guidelines for the Assessment of Overseas Trained Pharmacists and International Student Graduates in the assessment of all eligibility applications.
  - Regular analysis of examination results by the Examining Committee to ensure relevance and reliability of exams to assess candidates' expertise, professional experience and skill in the practice of pharmacy
- Information regarding the assessment process, fees and requirements is available on the APC website. Assessment section staff respond to candidate enquiries via email and telephone.
  - The APC has conducted 24 pharmacy exam sessions KAPS, CAOP and Written Examination (intern competency examination) involving 4,865 students since 1 July 2010. Candidate guides for each of the examinations delivered by the APC are available on the APC website, including example questions.
  - Within the APC Assessment Standards are the mandated requirements for assessors of overseas trained pharmacist applications and include the selection, appointment, training, performance and security check (criminal history check). There is also a requirement for annual fraud detection training and DEEWR CEP training when available.
  - Complaints and appeals policies are posted on the APC website and individuals are directed to these as necessary.

## Domain 8 – Stakeholder collaboration

The APC has in place a range of mechanisms under a Stakeholder Engagement Strategy to build stakeholder support and collaboration, both within Australia and internationally.

### Attributes:

- The APC has processes for engaging with the following stakeholders:
  - *Governments* through regular meetings with the Department of Immigration and Citizenship, the Department of Education, Employment and Workplace Relations regarding assessment of overseas trained pharmacists, submission of annual statistics, and the further development of resources to continually improve assessment processes. In addition the APC provides input when requested to Skills Australia and maintains communication with the Tertiary Education Quality and Standards Agency (TEQSA) and Department of Industry, Innovation, Science, Research and Tertiary Education regarding changes in regulatory arrangements for education providers within Australia; works with Health Workforce Australia by providing feedback on discussion documents and consultation papers and information on pharmacy workforce.
  - *Education institutions* through the involvement of the Council of Pharmacy Schools, who provide a quarterly report to the APC Council, and through annual (at a minimum) meetings of the Heads of Pharmacy Schools, the Intern Training Providers Forum and a third forum to be convened in October 2012 for the CPD Accrediting Organisations. In addition to these regular meetings the APC has engaged with the Deans of the Health Science Faculties, accredited first aid course providers in the UK, Ireland, Canada and the USA, and education assessment organisations such as the Occupational English Test (OET) and International English Language Testing System (IELTS).
  - *Health professional organisations* through the establishment and secretariat of the Australian Pharmacy Liaison Forum (APLF) which provides for discussion between all the Australian pharmacy professional organisations on topics of relative concern, including accreditation issues. The APLF meets on a regular basis approximately four times per year. The Accreditation Committee is also structured according to World Health Organisations Guidelines regarding representative committees to allow for nominees from the major Australian pharmacy professional organisation and community representatives to act as members of the Committee.
  - *Health providers* through provision of material relating to the purpose and processes of the APC via the website and brochures, through invitation for involvement in the development and review of accreditation standards and involvement in site evaluations. The APC also engages with intern pharmacists through the conduct of examination item validation workshops, providing an opportunity for interns to raise questions or concerns around the processes relating to the national written examination.
  - *National boards* through regular informal meetings with the Chair and the Executive Officer for the Pharmacy Board of Australia, and an annual meeting (at a minimum) with the full membership of the PBA.
  - *NRAS Forum* attended by representatives of AHPRA, Chairs of National Boards and the Australian Health Professions Councils.

- *Consumers/community* through formal appointments of two community representatives on each of the operational committees and the Council of the APC.
- The APC employs a Stakeholder Engagement Strategy to ensure necessary information is communicated in a variety of mediums through use of the APC website, brochures and handbooks, the APC annual report and strategic plan, media releases and presentations at conferences and events. Through these mechanisms the APC is able to communicate its roles, functions and procedures to stakeholders both within Australia and internationally.
- The APC maintains active collaboration with national accreditation organisations through involvement in the Australian Health Professions Councils Forum and Professions Australia. Internationally, the APC collaborates with accreditation organisations through formalized agreements such as the Memorandum of Understanding with the Accrediting Council for Pharmacy Education (ACPE) and Memorandum of Cooperation with the Pharmacy Council of New Zealand (PCNZ). These agreements allow the APC to share information, services and benchmarking for best practice. Further agreements and collaborative arrangements are being investigated with the General Pharmaceutical Council in the United Kingdom and the Canadian Council for Pharmacy Education.
- The APC collaborates with accreditation authorities for the other registered health professions appointed under the National Law through involvement in the Australian Health Professions Councils Forum, as mentioned above. In addition, the APC encourages active engagement through participation in accreditation standard reviews being undertaken in other registered health professions and likewise inviting participation and comment from other registered health professions on reviews being undertaken by the APC. The APC has provided assistance in terms of providing manuals, policies and templates to other accreditation authorities
- The APC works within overarching national and international structures of quality assurance/accreditation through involvement with the International Pharmacy Federation (FIP), adherence to the Council of Australian Governments' principles for best practice regulation, the *AHPRA procedures for the development of accreditation standards* and the National Law.
- The APC meets regularly with recipients of its accreditation services to collect and discuss feedback. In 2011 the APC established an ITP Provider Liaison Group which acts as a quality improvement and feedback mechanism and began meeting regularly with the heads of pharmacy schools. A CPD Accreditors Forum has also been established with the first meeting scheduled for 22 October 2012.
- Wide-ranging consultation is undertaken as part of the development and review of APC's accreditation standards. This consultation provides an opportunity for stakeholders to give feedback on the appropriateness and effectiveness of the APC's processes as well as the standards themselves.

## 9. Indicative Work Plan for 2013 – 2018

The APC has established processes, policies and procedures for undertaking its assigned accreditation functions. It does this in a consultative, transparent, fair and effective manner. Whilst it is not possible to predict all new pieces of work e.g. application for a new pharmacy program or new accreditation process to be introduced, it is possible to determine some of the projects and cyclic accreditation of programs that will be undertaken while maintaining ongoing roles such as the assessment of overseas trained pharmacists.  
NOTE: Some estimates include the period 2012-2013

### Draft Work Plan outlining special projects 2012 - 2015

	DESCRIPTION	DOMAIN
<b>CURRENT</b>		
Degree Standards Review	A review of the Degree Program Accreditation Standards is currently being undertaken as directed by the PBA with wide stakeholder consultations. This work is expected to be completed by November 2012 and draft Standards will be submitted to the PBA for approval.	4
Degree Program Accreditation Process Review	The accreditation processes and procedures for degree programs are under review to ensure alignment with the revised Standards and will be finalised following approval of the revised Standards by the PBA.	5
Site Evaluation Team training	A project to develop online modules for training SET members has commenced to ensure standardised instruction and competency of SETs.	5
Site Evaluation Team survey	A survey of SET members is being developed as a quality assurance mechanism. The survey will be conducted at least every 18 months.	
Web portal for accreditation applications	A secure online web portal for the submission of accreditation applications and related documents is being developed to provide universities, CPD Accreditors and ITP providers a timely and efficient way of providing requested documentation. It is envisaged the portal will be available to users by 2013.	5
Item Bank development	The Item Banks for examination questions are being reviewed and redeveloped to improve their functionality, security and ease of use in line with best practice.	7
<b>2013</b>		
CPD Systems review	The systems for accrediting CPD will be reviewed to ensure that they are producing fair, rigorous and consistent accreditation outcomes. Implementation of the CPD accreditation standards will be monitored and a review working party established to assess the impact.	4
Assessment Standards review	The review cycle for the Assessment Standards is 12 months. The next review will be conducted in February 2013.	7
Survey CAOP and KAPS candidates	The APC surveys candidates who have undertaken the APC's assessment process every 5 years. This is a quality improvement	7

	exercise that was last conducted in 2008. The next survey is scheduled for 2013. Results of the survey will be used as the basis for process improvements where a need is identified.	
<b>2014</b>		
Review of ITP Standards	The review of the ITP Accreditation Standards will be informed by the review of the Degree Program Standards that took place in 2012. A limited review to bring the ITP Standards up to date with current PBA requirements will be completed with a round of public consultation. Expected completion is mid-2014.	4
<b>2015</b>		
Degree Standards Review	The review cycle for the Degree Program Standards is 3 years. A review schedule will be discussed with the PBA closer to this date.	4



## APC EXAM ACTIVITY 2013 – 2017

Month (dates TBC)	KAPS EXAM	CAOP EXAM	INTERN WRITTEN EXAM
<b>2013</b>			
February			1
March	1	1	
April			1
June		1	1
August			1
September	1	1	
October			1
December		1	1
<b>2014</b>			
February			1
March	1	1	
April			1
June		1	1
August			1
September	1	1	
October			1
December		1	1
<b>2015</b>			
February			1
March	1	1	
April			1
June		1	1
August			1
September	1	1	
October			1
December		1	1
<b>2016</b>			
February			1
March	1	1	
April			1
June		1	1
August			1
September	1	1	
October			1
December		1	1
<b>2017</b>			
February			1
March	1	1	
April			1
June		1	1
August			1
September	1	1	
October			1
December		1	1
<b>TOTALS 2013-2017</b>	<b>10</b>	<b>20</b>	<b>30</b>

KAPS examinations are delivered domestically and at a wide-range of international venues.

CAOP examinations are delivered in Australia, NZ and London.

Intern Written Examinations are delivered in Australia via computer.