

# Guidance on online program delivery

## Introduction

The COVID-19 pandemic has had both an immediate and a long-lasting impact on the delivery of pharmacy programs by Australian universities. Due to social distancing requirements, travel restrictions and border closures, programs needed to move some or all of the delivery of their programs online in 2020 and 2021. APC is aware that many programs have continued to deliver some aspects of their programs online for a number of reasons including changed university approaches to teaching, student preference, overseas students unable to return to Australia and financial limitations.

This statement has been prepared as a guide to education providers who need to address the challenges associated with responding to COVID-19 and the sudden and unexpected requirement to pivot to online learning. Circumstances have changed as the pandemic resolves, but significant uncertainty still surrounds the return of students, particularly internationally-based students, to on-campus activities. It is likely that developments will occur with different timeframes across different jurisdictions, and this advice will need to be updated accordingly.

The APC [Accreditation Standards for Pharmacy Programs in Australia and New Zealand 2020](#) ('Standards') are outcome focused and allow education providers to be flexible in the way they deliver their program. The Standards do not mandate that entire program delivery must take place face to face, however there are some aspects of pharmacy education that are not well suited to online/remote delivery.

The APC [Accreditation Standards 2020: Performance Outcomes Framework](#) ('Performance Outcomes') underpins the Standards and provides milestones for graduate outcomes.

The APC [Accreditation Standards 2020: Supporting Documents](#) includes the Pharmacy Learning Domains ('Learning Domains') for degree programs which describe a number of elements relating to knowledge, skills and behaviours which are generally recognised as critical for developing the capacity for safe and socially accountable pharmacy practice.

Assessment of education provider compliance with the Standards is undertaken by:

- the APC Accreditation Committee (AC) who make accreditation decisions; and
- members of Site Evaluation Teams (SETs) who undertake periodic program reviews and provide reports to the AC.

This document provides guidance to accredited degree program providers on the expectations of how the requirements of the Standards, Performance Outcomes and Learning Domains might be met in circumstances where face to face delivery is not possible, and students are located remotely. We may request information from providers in relation to their capacity to remain compliant with one or more criteria while students are unable to attend their usual campus in Australia.

## Accreditation Standards

As the completion of an APC accredited and Pharmacy Board of Australia (PharmBA) approved program is one of the requirements to be eligible for registration with PharmBA, an accredited program must prepare graduates for professional practice in the Australian context. This requirement is not negotiable, and providers will need to be able to provide evidence to satisfy APC that all graduates of their programs have been prepared for Australian practice.

The key criterion expected to be significantly affected by the restrictions imposed as a consequence of the COVID-19 pandemic is Criterion 1.6.

**Criterion 1.6** *The program includes sufficient length and variety of high-quality WIL and practical experience, in a range of practice settings and with exposure to a diverse range of patients, to ensure students/interns are able to demonstrate achievement of the required performance outcomes to the appropriate level.*

Work integrated learning (WIL) in Australian practice settings is a key means by which pharmacy students gain the experience and exposure necessary to prepare them for professional practice. WIL in a practice setting outside Australia is not able to replicate the professional or legal context of pharmacy practice in Australia. Students who are unable to complete sufficient WIL in an Australian setting will be unable to meet a number of performance outcomes to the appropriate level. We acknowledge that use of simulation, technology and other modes of learning and assessment are able to contribute to student preparation for practice, however they are a complement to, rather than a replacement for, authentic WIL experience.

In any circumstances where students have not undertaken WIL in an Australian context within the final year of their enrolment, the Accreditation Committee will seek a detailed response from the provider as to their compliance with Criterion 1.6 for those students.

Other criteria which are likely to be affected, albeit to a somewhat lesser extent include 1.4, 2.8, 3.8, 4.3, 5.1, 5.2 and 5.4.

**Criterion 1.4** *All staff and students/interns are held accountable to endorsed standards of professional and ethical practice and conduct.*

This criterion is underpinned by the assumption that student behaviours are able to be observed and demonstrated in a range of contexts including WIL and other educational environments. Any significant impact on the ability of students to engage in appropriate WIL will therefore potentially affect the capacity of the provider to oversee and evaluate their conduct. However, the potential exists for modifications to standard processes and approaches to ameliorate concerns in relation to this criterion. The Accreditation Committee may seek assurances from a provider relating to compliance with this criterion for students who are not able to attend campus for significant periods of time, particularly during their final year of enrolment.

**Criterion 2.8** *Risks to the sustainable delivery of the program are regularly monitored and evaluated, and appropriate mitigation strategies are clearly documented.*

Clearly, the occurrence of a global pandemic was a largely unforeseeable risk to the sustainable delivery of pharmacy programs in Australia. However, as part of their overall response to the pandemic, the Accreditation Committee anticipates that providers have modified their risk assessments, monitoring, evaluation and mitigation strategies. The Accreditation Committee may seek a response from a provider outlining any modifications to these elements, and evidence of consideration of risks associated with future global events which significantly hinder the ability of students to undertake on-campus learning, and/or the capacity to maintain adequate resources.

**Criterion 3.8** *The program provides sufficient opportunities for all students/interns to engage in interprofessional learning and practice (in real and/or simulated environments) to enable graduates to provide person-centred care as a collaborative member of an interprofessional team.*

Any significant impact on the ability of students to engage in appropriate WIL will reduce opportunities for participation in “real” interprofessional environments. However, the Accreditation Standards do not mandate engagement in such environments as an absolute requirement for compliance; rather “providers should describe how the simulated environments they use prepare students/interns for real experience”. The Accreditation Committee may seek confirmation from a provider that continued compliance with this criterion is not adversely affected.

**Criterion 4.3** *The unit delivering the program ensures that students/interns are able to access relevant resources and support systems in a timely manner to facilitate achievement of the required performance outcomes.*

The inability to attend campus in person is very likely to have a significant effect on the nature of support that students require. The types of support may include “academic, general welfare and wellbeing support; learning resources (such as physical spaces, online learning management system, information and library resources, self-directed learning resources); and effective supervision and mentoring”. The Accreditation Committee may seek a response from a provider outlining changes in the ways that they facilitate access to relevant support and resources for off-campus students.

**Criterion 5.1** *The scope of assessment covers all learning and performance outcomes required to ensure graduates are competent to practice safely, legally, professionally, and ethically as a member of an interprofessional health care team.*

A list of performance outcomes against which student performance may be more difficult to assess is included in the following section; this list is not exhaustive. The Accreditation Committee may seek a response from a provider outlining modifications to the assessment processes and protocols that have been made to ensure ongoing compliance with this criterion.

**Criterion 5.2** *A range of relevant, contemporary and evidence-informed assessment tools (including direct observation) are used in academic, practice and WIL environments to ensure that the overall assessment system is valid and reliable and provides evidence of student/intern competency and safety.*

The integrity of assessments must be maintained regardless of the method of administering the assessment. Face to face assessments are able to be directly observed in controlled environments to minimise opportunities for students to engage in academic misconduct. For online assessments, the education provider must ensure the integrity of the assessment is maintained by attention to processes and tools to minimise or prevent academic misconduct. The Accreditation Committee may seek a response from a provider outlining the means by which they ensure the integrity of assessments which are offered through potentially less secure approaches.

**Criterion 5.4** *All assessments carried out in academic, practice and WIL environments are fair and undertaken against clear criteria. The standard of performance expected of students/interns in each area to be assessed is explicit and clearly communicated to students/interns and staff involved in the assessment.*

Where assessment approaches have changed as a result of the pandemic restrictions, it is expected that adequate steps will be taken by the provider to minimise any potential disadvantage to students. The Accreditation Committee may seek assurances from a provider that these steps have been taken and clearly communicated to all relevant students and staff.

## Performance Outcomes

A number of performance outcomes specifically relate to pharmacy practice in the Australian setting. In addition, a number of activities designed to teach and assess performance skills are not well suited to online delivery, particularly practical skills and those requiring specialist facilities such as laboratories. The Accreditation Committee may seek a response from a provider outlining the means by which they ensure students demonstrate the following performance outcomes to the level required.

### Performance outcomes

**1.2 promoting and advocating** for cultural safety, respect and responsiveness, particularly in relation to Aboriginal and Torres Strait Islander and/or Māori peoples

**1.4 practising** legally by

**a. demonstrating** contemporary knowledge and application of legal requirements relating to community and hospital pharmacy practice within their jurisdiction

**1.5 practising** ethically and with integrity by

**c. demonstrating** awareness of relevant professional codes, guidelines and standards and their context

## Performance outcomes

**2.1 communicating** appropriately and effectively with a socially and culturally diverse range of people in a manner which inspires confidence and trust by

**c. demonstrating** awareness of and sensitivity to Aboriginal and Torres Strait Islander and/or Māori history, communication styles and community protocols

**2.3 contributing** to the interprofessional collaborative health care team in order to optimise patient outcomes by

**b.** creating and maintaining effective intra-and interprofessional relationships, and working in partnership to achieve negotiated, agreed-upon objectives

**d. demonstrating** appropriate communication at transition points in patient care to reduce risks to patients and ensure safe and effective continuity of patient care

**3.3 prescribing** medications in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines

**3.4 carrying** out systematic medication reviews, informed by the Quality Use of Medicines Framework, in order to identify and resolve potential medication-related issues and optimise the impact of medications on health outcomes in collaboration with patients, carers and other members of the health care team

**3.5 demonstrating** the delivery of person-centred care

**3.13 administering** injectable formulations in accordance with current jurisdiction-specific legislation, scope of practice and PharmBA Guidelines

**3.14 dispensing** medicines safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements to optimise patient outcomes

**3.15 preparing** and **supplying** extemporaneously compounded medications safely and accurately in accordance with current legislation, scope of practice, PharmBA Guidelines and other relevant jurisdictional requirements

**3.22 participating** in health promotion activities, health services and public health initiatives intended to maintain and improve health