

Schedule 3 – Work Plan

Accreditation of programs of study and education providers

The Work Plan in the period 1 July 2020 to 30 June 2021 includes:

- a. accreditation of 45 pharmacy degree programs from 20 universities
- b. implementation of the transition to the new Accreditation Standards 2020 and Evidence Guide *Accreditation Standards for Pharmacy Programs in Australia and New Zealand*
- c. five planned Site Evaluation Team (SET) visits for degree programs to be assessed against the new Accreditation Standards 2020
- d. the Accreditation Committee will meet five times across the year to consider reports from education providers for notifications of change, re-accreditation activities, conditions on current programs and monitoring of current programs.
- e. continue to provide advice to the Board on accreditation of pharmacy degree programs, and
- f. initial and refresher training for SET members.

Assessment of overseas assessing authorities

The Work Plan in the period 1 July 2020 to 30 June 2021 includes:

- a. ensuring the following countries and regulators that have been assessed for the Board as equivalent assessing authorities for limited registration in Australia maintain their standards of education and accreditation to meet equivalency:
 - i. United Kingdom (General Pharmaceutical Council)
 - ii. Ireland (PSI – the Pharmacy Regulator)
 - iii. Canada (Provincial registering authorities and the Pharmacy Examining Board of Canada), and
 - iv. USA (State Pharmacy Boards through the National Association of Boards of Pharmacy).
- b. Review of Standards and Procedures to Assess Examining and Accrediting Authorities in other Countries

Assessment of overseas qualified pharmacist

The Work Plan in the period 1 July 2020 to 30 June 2021 includes continuous improvement and updating of the processes for assessment of overseas qualified pharmacists, including content, systems and assessment methodologies for eligibility assessment and examinations of overseas qualified pharmacists.

The Examination Committee will meet twice a year.

Specific projects within agreed funding

The Work Plan in the period 1 July 2020 to 30 June 2021 includes:

- a. continued review and improvement of the Intern Written Examination
- b. accreditation / reaccreditation of Intern Training Program (ITP) providers to the new Standards
- c. adaption of the Aboriginal and Torres Strait Islander Health Curriculum Framework for accredited pharmacy programs in Australia to better prepare pharmacy graduates to provide culturally safe care to Aboriginal and Torres Strait Islander Australians

- d. continue to work with the Health Professions Accreditation Collaborative Forum on joints projects including:
 - i. Safe Use of Medicines (Joint-lead)
 - ii. Interprofessional Education (Lead)
 - iii. Improving Aboriginal and Torres Strait Islander Health through accreditation.

Special Projects

Activities to be undertaken by the Accreditation Authority to support the Development of Workplace Based Assessment Tools to Assess Pharmacist Interns Project

The Accreditation Authority will undertake the activities specified in the attached project plan for the Development of Workplace Based Assessment Tools to Assess Pharmacist Interns Project.

Schedule 4 – Funding arrangements

Item 1 – Funding Principles

These Funding Principles are to be applied by accreditation authorities, National Boards and Ahpra when they are considering and agreeing on the funding to be provided to the accreditation authority by the National Board/Ahpra for performance of the accreditation functions.

The principles aim to promote consistency, transparency and accountability for use of registrant fees to fund the accreditation function.

Ahpra, in consultation with the National Board, will provide funding through registrant fees to enable the accreditation authority to manage its business and risks by covering some of the indirect costs of activities related to program accreditation including monitoring.

The following principles will apply, in addition to the guiding principles and objectives of the National Law, and the Quality Framework for the Accreditation Functions, when an accreditation authority is requesting funding from a National Board/Ahpra (funding request) and when a National Board/Ahpra decide to provide funding to an accreditation authority (funding decision):

1. Requests for funding should be reasonable and proportionate to the activities being funded.
2. The funding provided by the National Board/Ahpra should cover a proportion of the governance costs related to the accreditation functions.
3. The funding provided by the National Board/Ahpra for the development and review of accreditation standards should be requested and considered separately to the funding of other accreditation functions.
4. Requests for increases in funding from the previous year should not usually exceed the indexation range applicable to National Board fee increases (up to 3% per annum).
5. Where an accreditation authority considers an increase in funding above the indexation range is required, it should put the funding request and a business case supporting the increase above the indexation range to Ahpra and the National Board for their consideration.
6. Such a request and business case should be forwarded to Ahpra and the National Board by mid-February or earlier each year to enable them to have sufficient time to properly consider the funding request.
7. Ahpra and the National Board may agree to the requested increase in funding or propose to agree to a lesser amount. Such a proposal and reasons for that proposal should be forwarded to the accreditation authority to enable it to have sufficient time to properly consider the proposed funding amount and reasons.
8. Ahpra and the National Board should agree to provide sufficient funding to enable the accreditation authority to effectively deliver the accreditation functions through a combination of funding provided by the National Board/Ahpra and funding from other sources that is provided as a direct result of the Accreditation Authority being assigned and exercising statutory functions under the National Law.

Item 2 – Funds

Funding for performance of Accreditation Functions

Total funding for 2020/2021 financial year is: \$610,059 (ex GST).

The funding is payable in four instalments on the following dates and in accordance with clause 5.2 of the Head Agreement.

Date	GST exclusive
1 July 2020	\$152,514
1 October 2020	\$152,515
1 January 2021	\$152,515
1 April 2021	\$152,515

Special Project Funding

Total funding for the *Development of Workplace Based Assessment Tools to Assess Pharmacist Interns Project*. is \$100,000 (excluding GST) (**Special Project funding**).

The Special Project funding is payable in two equal instalments and in accordance with clause 5.2 of the Head Agreement. The first instalment is payable in the 2020/21 financial year in accordance with the attached Project Plan, the second instalment is payable in the 2021/22 financial year in accordance with the attached Project Plan.



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DRAFT

Development of workplace based
assessment tools (WPBA) to assess
pharmacist interns

Project plan

Revised June 2020 | Version 1.2

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List of Abbreviations

Abbreviation	Term
Ahpra	Australian Health Practitioner Regulation Agency
APC	Australian Pharmacy Council
AMC	Australian Medical Council
CbD	Case-based Discussion
CPS	Council of Pharmacy Schools
EDPS	Executive Director Professional Services, APC
EOI	Expression of Interest
EPA	Entrustable Professional Activities
ITA	Intern Training Assessments
ITPs	Intern Training Programs
IYB	Intern Year Assessment Blueprint
IYB-WG	Intern Year Assessment Blueprint Working Group
MCNZ	Medical Council of New Zealand
Mini-CEX	Mini Clinical Evaluation Exercise
MSF	Multisource Feedback
NAPE	National Alliance of Pharmacy Education
NAPSA	National Australian Pharmacy Students' Association
PGA	The Pharmacy Guild of Australia
PharmBA	Pharmacy Board of Australia

Abbreviation	Term
PSA	Pharmaceutical Society of Australia
PSNZ	Pharmaceutical Society of New Zealand
SHPA	The Society of Hospital Pharmacists of Australia
SME	Subject Matter Expert
WPBA	Workplace Based Assessment

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Development of workplace based (WPBA) assessment tools for pharmacist interns

1. Executive summary

The goal of this project is to produce a set of consensus workplace based assessment (WPBA) tools and guidelines on the use of the tools for assessing pharmacist interns during the period of supervised practice (internship).

The project supports the implementation of the revised Intern Year Assessment Blueprint (IYB) which is underpinned by the 2020 Pharmacy Program Accreditation Standards¹ and the Performance Outcomes Framework². It enables the Pharmacy Board of Australia (PharmBA) to bring the Performance Outcomes Framework into full realisation by providing responsible stakeholders with a set of validated assessment tools for collecting evidence that demonstrates readiness for practise.

This project will be delivered using a consultative process with input from a technical working group (TWG) and oversight by the Intern Year Assessment Blueprint Working (IYB-WG). The purpose of the technical working group will be to draft the WPBA tools and incorporate stakeholder feedback including from pilot testing of the tools. Their recommendations will be reviewed by the IYB-WG. The technical working group will be selected through an Expression of Interest (EOI) published on the Australian Pharmacy Council (APC) website and will aim to include experienced preceptors and, supervising pharmacists, pharmacy students, academics and Intern Training Programs (ITPs). Additionally, the Pharmaceutical Society of New Zealand (PSNZ) Intern Training Program, EVOLVE, will be invited to nominate a representative.

The APC will seek stakeholder feedback from pharmacy professional organisations and major internship sites through consultation papers, face to face consultation, and other means available. We will also seek input from the Australian Medical Council (AMC) who is currently reviewing the National Framework for Medical Internships³. The National Framework includes a number of documents such as intern outcome statements, assessment forms, performance action plans and standards and guidelines, and there are lessons that may be applicable to this project. Experiences from the Medical Council of New Zealand (MCNZ) will also be sought to inform project deliverables.

This project has been revised in June 2020 to reflect changes to the project timeline due to the impact of the COVID-19 pandemic and to align the project to an implementation plan for changes to assessment of pharmacist interns⁴.

The project is anticipated to begin in July 2020 and will be completed in December 2021. Project activities will occur in the financial year (FY) 2021 and the first half of FY 2022. The APC is fully committed to supporting the PharmBA in streamlining the pharmacist internship year and will contribute towards this project by covering the project overhead costs, APC project staff and consultant expenses estimated at \$50,000.

The APC seeks funding of \$100,000 from the PharmBA for the entire project, with \$50,000 available for the financial year 2021 to cover project activities that will be conducted between 1 July 2020 and 30 June 2021, and the balance in the next financial year to complete the project.

¹ Accreditation Standards for Pharmacy Programs in Australia and New Zealand 2020. Australian Pharmacy Council. Accessed 22 January 2020 at <https://www.pharmacycouncil.org.au/standards/>.

² Accreditation Standards for Pharmacy Programs in Australia and New Zealand 2020. Performance Outcomes Framework. Australian Pharmacy Council. Accessed 22 January 2020 at <https://www.pharmacycouncil.org.au/standards/>.

³ National Framework for Medical Internships. Australian Medical Council Limited. Accessed on 22 January 2020 at <https://www.amc.org.au/accreditation-and-recognition/assessment-accreditation-prevocational-phase-medical-education/national-internship-framework/>.

⁴ Implementation plan for assessment of pharmacist interns. June 2020. Intern Year Assessment Blueprint Working Group. Available on request.

2. Project justification

Australian pharmacy graduates and pharmacists trained in other countries, with the exception of New Zealand, must complete a period of supervised practice (internship) as part of the requirements for registration as a pharmacist in Australia.

The purpose of the internship is to allow students to apply the knowledge gained during academic studies while under the supervision of a pharmacist⁵. For overseas trained pharmacists, the internship is an opportunity to learn how to apply their knowledge in the context of the Australian practice environment. During this period, the supervising pharmacist or preceptor is expected to *'assess and provide feedback on the knowledge, skills and performance of the intern so that experiences can be built upon and difficulties identified and remediated'*. The responsibility for intern assessment also extends to ITPs who gather evidence on intern competency through a number of avenues.

To facilitate effective and appropriate assessment of pharmacy interns during the supervised practice period, in June 2018 the PharmBA and the APC jointly released an assessment blueprint⁶. The IYB provided a choice of assessment methods for each of the enabling competencies described in the National Competency Standards Framework for Pharmacist in Australia (2016)⁷ and were informed by an extensive literature review⁸. This allowed those with responsibility for assessing interns to select which method was most appropriate based on the purpose and context of the assessment.

A year after publication of the IYB, the APC collated information from various stakeholders to assess progress on implementation of the IYB. The review found that portfolios, structured summative assessments in a written multiple-choice format and In Training Assessments (ITAs), to a lesser extent, were the methods most frequently used. It appeared that none of the IYB WPBA methods, that is the Mini Clinical Evaluation Exercise (mini-CEX), Case-based Discussions (CBD) and Multisource Feedback (MSF) were in use. Information gathered from selected major community based and hospital pharmacy internship sites confirmed the absence of WPBA tools in community settings and pointed to a preference for Entrustable Professional Activities (EPAs) in hospital settings. Although EPAs were not included in the 2018 IYB, this was not surprising as the published literature suggests more recent increased utilisation of EPAs in pharmacy⁹.

The findings of the PharmBA survey of interns and preceptors provided additional insights into the pharmacist internship year¹⁰. Although the survey did not interrogate knowledge of, or use of, the IYB WPBA methods, problems with feedback mechanisms between pharmacist and interns were reported. These findings are indicative of a lack of structured tools for assessing interns and providing feedback.

WPBA assesses at the 'does' level of Miller's Pyramid¹¹ and thus collects information about how interns perform during normal work activities. Observing and providing feedback on intern performance on day to day practice provides evidence about their readiness for entry to practice. Therefore, the poor uptake of WPBA methods raises concerns particularly in view of the 2020 Pharmacy Program Accreditation Standards which reference the Performance Outcomes Framework as the basis for assessing student and intern performance.

While the 2018 IYB provided a choice of a variety assessment methods, it fell short in not providing ready to use tools that could be disseminated to preceptors and supervising pharmacists. This may have contributed to the

⁵ Intern pharmacist and preceptor guide. Pharmacy Board of Australia. Accessed 17 January 2020 at <https://www.pharmacyboard.gov.au/Registration/Internships.aspx#internships>.

⁶ Intern Year Assessment Blueprint 2018. Pharmacy Board of Australia and Australian Pharmacy Council. Accessed 17 January 2020 at https://www.pharmacycouncil.org.au/news-publications/intern_year_assessment_blueprint.

⁷ National Competency Standards Framework for Pharmacists in Australia 2016. Accessed 17 January 2020 at <https://www.psa.org.au/practice-support-industry/national-competency-standards/>

⁸ Intern Year Blueprint Literature Review. September 2017. Accessed 17 January 2020 at <https://www.pharmacycouncil.org.au/standards/internyearblueprint-lit-review.pdf>

⁹ Jarret JB, Berenbrok LA, Goliak KL, Meyer SM, Shaughnessy AF. Entrustable Professional Activities as a Novel Framework for Pharmacy Education. *Am J Pharm Educ.* 2018 Jun;82(5):6256.

¹⁰ Pharmacy Board of Australia. The Intern training experience from perspective of the intern and preceptor – a large-scale study. Final report. January 2019.

¹¹ Miller Ge. The assessment of clinical skills/competence/performance. *Academic Medicine* 1990;65:S63-7.

poor uptake of the WPBA methods. The IYB-WG consulted on a revised IYB that placed emphasis on assessment of interns in the workplace and submitted recommendations to the PharmBA. The revised IYB reduces duplication in the assessment of interns across the internship period and selects a single WPBA method for a number of performance outcomes which allows a single tool to be used to assessment related performance outcomes.

This project will support implementation of the revised IYB by producing validated WPBA tools in accordance with the IYB specification. In providing guidance on how interns will be assessed in the future, the PharmBA will also need to address preceptor ability to use the tools and provide constructive feedback. Therefore, this project will also develop guidelines that describe each of the tools, scoring procedures, feedback techniques and other relevant information to assist supervising pharmacists and preceptors better understand the WPBA processes and linkages to the Performance Outcomes Framework.

3. Project goals and objectives

The goal of this project is to produce a WPBA toolkit for use by preceptors and supervising pharmacists in community and hospital-based settings to assess pharmacist interns during supervised practice by 30 June 2021.

Specifically, to:

1. Produce draft WPBA tools based on the revised IYB in collaboration with stakeholders
2. Develop guidelines to assist preceptors and supervising pharmacists understand the role of WPBA and use of the agreed WPBA tools. This will also include Portfolio guidance document as per the recommendations to the revised IYB¹²
3. Pilot test the draft WPBA tools in diverse geographical and practices settings where feasible including diversity amongst the experience of preceptors and seek feedback on the accompanying guidance material.

4. Project outcomes and deliverables

This project aims to achieve greater consistency in assessment of pharmacist interns and will assist the PharmBA to phase in other initiatives that will reduce regulatory burden and costs associated with assessment of interns.

The key project deliverables are:

- WPBA tools approved by the PharmBA in the revised IYB and accompanying guidance material for each of tools
- A pilot testing protocol
- Report(s) on stakeholder consultation including from pilot testing of the tools.

The intellectual property of the WPBA tools and guidance material will be jointly owned by the PharmBA and the APC as co-sponsors of the project.

¹² Mapping Intern Year Blueprint to Performance Outcomes. October 2019.

5. Project approach

The project will be delivered using a bottom-up consultative process to seek input from preceptors and supervising pharmacists who have hands on experience in the day to day supervision of pharmacy students and ITPs who deliver the pharmacy internship programs. Development of WPBA tools will be informed by an update to the 2017 Intern Year Blueprint Literature Review¹³, tools gathered from selected hospital pharmacy departments within Australia and lessons learned from the National Framework for Medical Internships which is currently under review. The IYB-WG group will review and assess progress and project deliverables at each stage including endorsing the draft project deliverables for submission to the PharmBA. A Subject Matter Expert (SME) with experience in pharmacy internship programs and teaching and assessment of pharmacy students will be engaged to provide technical expertise. The consultative process will be divided into three major stages as follows:

Stage 1: Drafting WPBA tools and accompanying guidelines

Due to the impact of the COVID-19 pandemic, it may not be possible to hold face to face workshops to draft WPBA tools as initially proposed. Drafting of the WPBA tools should still be done by a technical working group or reference group comprising of preceptors, supervising pharmacists, interns, ITPs, project and other relevant individuals who have hands on experience in supervising pharmacy interns. The need for greater flexibility and use of videoconference facilities to convene meetings will draw out project timelines over those originally proposed. This may also impact upon availability of individuals who have the requisite experience.

The outputs of the working group will require consultation and feedback from a wider group of stakeholders to ensure effective engagement. As initially proposed, consultation on the draft WPBA should include both open consultation paper and face to face consultation sessions, when this becomes possible, similar to the approach used for the review of the accreditation standards. One face to face consultation session was budgeted for in this project. Participants invited to the face to face consultation will include professional organisations, student and pharmacy academics (if not in the technical working group), the AMC, MCNZ and additional pharmacist preceptors and supervising pharmacists. We note that the AMC has provided stakeholders with multiple opportunities to be engaged in review of the medical internship framework and has revised mechanisms for consultation in view of the COVID-19 pandemic¹⁴. It is critical that we invest in obtaining broad stakeholder support and input early in the process to ensure greater success in implementation of the proposed pharmacy internship assessment tools. Opportunity for increased stakeholder engagement via webinars has been included in this revised project approach.

Stage 2: Pilot testing

Following drafting and stakeholder input on the draft tools, pilot testing will be conducted in approximately ten community and hospital internship sites from rural and metropolitan areas. The sites will be selected based on additional criteria such as experience of preceptors and supervising pharmacists, volume of patients, types of services offered and accessibility. The working group will contribute to the design and structure of the pilot testing supported by the project SME. Pilot testing will be conducted by APC Senior Pharmacists and/or selected members of the working group.

¹³ Intern Year Blueprint Literature Review 2017. Australian Pharmacy Council. Accessed 23 June 2020 at <https://www.pharmacycouncil.org.au/standards/internyearblueprint-lit-review.pdf>

¹⁴ Update – AMC Review of National Framework for Medical Internship. April 2020. Accessed 23 June 2020 at <https://www.amc.org.au/accreditation-and-recognition/assessment-accreditation-prevocational-phase-medical-education/latest-news-in-the-framework-review/>

Stage 3: Finalisation of WPBA tools and accompanying guidelines

It was previously proposed that the entire working group would reconvene to review the outcomes of the pilot testing and to submit recommendations to the IYB-WG. It is suggested that this stage incorporate an open consultation paper to provide additional opportunity for stakeholder input. This may draw out the project timeline by approximately 8-12 weeks. The recommendations from this final stage will be submitted to the IYB-WG for endorsement prior to submission to the PharmBA.

6. Out of scope

1. New Zealand pharmacy interns

The project will develop WPBA tools and guidance material specific for the Australian context. Therefore, pilot testing will be limited to Australian sites. We will however invite the PSNZ and the MCNZ to participate in all consultations and in the working group.

2. Training program for preceptors and supervising interns

This project will not develop a training program or training materials for preceptors and supervising pharmacists. However, guidelines will be developed as part of this project to accompany the assessment tools so that preceptors and supervising interns know how to use them and understand the assessment process.

7. Constraints

- a. Competing priorities for the PharmBA and the APC
- b. Competing interests among different stakeholders resulting in delays in building consensus
- c. Budget constraints
- d. Impact of the COVID-19 pandemic.

8. Assumptions

- a. The PharmBA will approve the recommendations of the IYB-WG on a revised IYB
- b. Stakeholders will participate and respond in a timely manner
- c. Implementation of workplace-based assessment as a key component of the pharmacy internship period will be accepted and supported by stakeholders.

9. Governance

The IYB-WG which includes representatives of the PharmBA, and the APC will provide oversight over the project. The project will be managed by the APC, Executive Director Professional Services (EDPS), supported by the Professional Services Pharmacist. The IYB-WG will be updated on progress during scheduled meeting or via email as required.

10. Timeline

Table 1. Indicative project timeline and milestones

Key activities & milestones	Month
Literature review and collation of WPBA tools (SME)	July - October 2020
Identification and onboarding of Working/Reference Group	July - September 2020
Working Group meetings (drafting WPBA tools and guidelines)	September 2020 – March 2021
Milestone 1: Consultation on WPBA tools and guidelines (Consultation paper, 3 x webinars and 1 x face to face workshop*)	April – June 2021
Report on outcomes of consultation for IYB-WG and PharmBA Approval of Pilot testing protocol	June – July 2021
Milestone 2: Pilot testing	August – October 2021
Working/Reference Group incorporate feedback from pilot testing	November – December 2021
Milestone 3: Draft WPBA tools and guidelines submitted to IYB-WG	December 2021

*subject to COVID-19 restrictions

11. Budget

The total estimated project cost of this project is \$150,299.

The APC seeks funding of \$100,000 from the PharmBA for the entire project with \$50,000 in the financial year 2021 to cover project activities that will be conducted between 1 July 2020 and 30 June 2021, and the balance in the next financial year to complete the project.

The APC will contribute \$50,299 towards this project.

The project budget is provided in Table 2.

Table 2: Project budget

Item/Activity	Requirement	Cost (AU\$)
Consultant	SME at 40% full time equivalent for project period	33,488
APC staff	20% full time equivalent for project period	21,380
Technical working group meetings	15 individuals. Sitting allowance and review of documents out of session.	16,702
Stakeholder consultation	Consultation paper, 3 x webinars. 1 x Face to face consultation (if possible) meeting. 25 individuals majority self-funded	6,762
Pilot testing	5 rural sites, 5 metropolitan sites. Travel expenses x 1 APC staff	27,150
Technical working group meeting 2	15 individuals. Sitting allowance and review of documents out of session. Face to face workshops (in financial year 2022)	36,702
Project overhead	Administrative support	8,115
Estimated total project budget		150,299

12. Project team

Table 3: Project team

Project role	Responsible
Project Sponsor	PharmBA and APC
Project Owner	Chief Executive Officer, APC
Project Manager	Executive Director Professional Services, APC
Project Officer	Professional Services Pharmacist, APC
Project Oversight	IYB-WG (which includes representatives from the PharmBA, Ahpra and APC)

13. Risk management

Table 4: Major project risks

Risk	Possible outcomes should risk eventuate	Mitigation	Likelihood before mitigation	Consequences before mitigation	Risk rating after mitigation
COVID-19 pandemic prolonged	Possible delays in project timelines	Flexibility in meeting options Post-phone pilot testing	High	Status quo	High
Stakeholder buy-in	Project will be delayed if not obtained	Communication with key stakeholders as outlined in Section 13	Medium	Status quo	Low
Readiness/availability of internship sites	Delays in pilot testing and overall project delivery	Careful consideration in selection of pilot sites Early communication to pilot sites	Medium	Status quo	Low

14. Communication

Early communication on the revised IYB and the proposed project will be critical for engaging stakeholder engagement and obtaining buy-in. The introduction of WPBA is a significant change for the training of pharmacists and its success is dependent on support by stakeholders especially by preceptors and supervising pharmacists who will do most of the work and their employers who will need to provide more time and resources to facilitate WPBA.

The IYB-WG will be responsible for identifying and coordinating communication with targeted stakeholders to include face to face meetings and on teleconference. Professional pharmacy organisations will be essential for disseminating information through their member networks.

The objectives of communication to stakeholders will be to:

1. Create awareness on the IYB and the purpose of introducing WPBA in the pharmacist internship
2. Identify stakeholder concerns and responses early. This will facilitate active dialogue throughout the project in order to obtain buy-in
3. Identify factors that contribute to success so as to include them in implementation planning and costing.

The key stakeholders for this include:

- Intern training programs (ITPs)
- Council of Pharmacy Schools (CPS)
- National Alliance of Pharmacy Education (NAPE)
- National Association of Pharmacy Students Association (NAPSA)
- The Pharmacy Guild of Australia (PGA)
- Pharmaceutical Society of Australia (PSA)
- The Society of Hospital Pharmacists of Australia (SHPA)
- Internship sites (community and hospital pharmacies)

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