Under the auspices of the Australian Pharmacy Council (APC) the Pharmaceutical Society of Australia (PSA) may accredit continuing professional development (CPD) for pharmacists that is eligible to be used as supporting evidence of continuing competence.

To complete this application, CPD providers will need to have read, and referred to, the following documents:

* **PSA CPD accreditation application guide**   
  At: [www.psa.org.au/cpd/cpd-accreditation/](http://www.psa.org.au/cpd/cpd-accreditation/)
* Australian Pharmacy Council Ltd Accreditation Standards for Continuing Professional Development 2013 [www.pharmacycouncil.org.au/resources/accreditation-standards-for-cpd/](http://www.pharmacycouncil.org.au/resources/accreditation-standards-for-cpd/)
* **Australian Pharmacy Council Ltd *Accreditation Standards for Continuing Professional Development Activities Guidelines 2015*** [*www.pharmacycouncil.org.au/resources/accreditation-standards-for-cpd/*](http://www.pharmacycouncil.org.au/resources/accreditation-standards-for-cpd/)
* ***PSA National Competency Standards Framework for Pharmacists in Australia 2016***   
  At: [www.psa.org.au/practice-support-and-tools/psa-information-framework#national-competency-standards-framework](http://www.psa.org.au/practice-support-and-tools/psa-information-framework#national-competency-standards-framework)
* **Australian Privacy Principles**  
  At: [www.oaic.gov.au/privacy-law/privacy-act/australian-privacy-principles](http://www.oaic.gov.au/privacy-law/privacy-act/australian-privacy-principles)

**Accreditation time frame:** It can take up to 20 business days (or 10 business days with fast track) to process an application, provided all documentation is complete and the activity meets the APC *Accreditation Standards for Continuing Professional Development Activities* (1 July 2013).

**PSA cannot guarantee the timely outcome of an accreditation application if applications are lodged with missing documents.**

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| --- | --- |
| PSA Continuing Professional Development Accreditation Application for External Providers | |
| Section 1: Activity provider | |
| Company/organisation |  |
| Contact name |  |
| Postal address |  |
| Name on invoice |  |
| ABN (if applicable) |  |
| Email address |  |
| Phone number |  |

|  |  |
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| Section 2: Activity sponsorship (if applicable) | |
| Company/organisation |  |
| Explain what level of support your organisation is providing presenters/authors.  (If activity is sponsored provide full details of support) |  |

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| --- | --- |
| Section 3: Activity summary | |
| Activity title |  |
| Date/s  Please note: PSA cannot accept applications ≤14 days before the CPD activity is due to be delivered. |  |
| Location/s |  |

**Please note:** For conference applications, attach a separate document with details of each session including names of the presenter/s, learning objectives, 2016 Competency Standards and timing of each session. A *Conference accreditation form* is available from the PSA website at: [www.psa.org.au/cpd/cpd-accreditation/](http://www.psa.org.au/cpd/cpd-accreditation/)

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| Section 4: Activity content | | |
| **Information required** | **Relevant APC Accreditation Standard** | **Details** |
| 4.1 What are the learning objectives?  Learning objectives **must** be:   * specific * measurable * actionable   **Vague verbs** (i.e., understand, know, learn about, grasp, be aware of, appreciate) are **best avoided**. | 1.1, 3.1 |  |
| 4.2 How will participants be able to access the learning objectives prior to enrolling in the activity? | 1.1 |  |
| 4.3 What 2016 Competency Standards link to the learning objectives and the proposed content?  *It is mandatory that learning objectives (in their entirety or individually) be at least mapped to the standard level. It is not a requirement that each of the learning objectives must have a specific link to the 2016 Competency Standards.* | 1.1, 2.2 |  |
| 4.4 List the topics that will be covered in this activity. | 4.1, 4.2 |  |
| 4.5 What is the justification (e.g., needs analysis) for developing this activity? | 2.1 |  |
| 4.6 Describe the procedures in place to ensure the proposed content of the activity is based on critical evaluation of relevant literature and/or practice-based professional evidence. | 2.3 |  |
| 4.7 Disclose the limitations on information included in this activity e.g., instances where presenters use their own experiences to discuss a topic where there may be potential limitations of the evidence needing to be disclosed to the audience. | 2.3 |  |
| 4.8 List, if applicable, any instructional materials. These materials must enhance understanding of content, be of satisfactory technical quality, include references and be dated. | 4.2 |  |
| 4.9 If the proposed content is not exclusive to pharmacy practice, what steps have been taken to relate it to pharmacy practice? | 2.1 |  |

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| Section 5: Provider details | | |
| **Information required** | **Relevant Accreditation Standard** | **Details** |
| 5.1 List all parties significantly involved in the development and presentation of the activity materials (e.g., presenter/author/content developer/sponsor/expert reviewer). | 2.1 |  |
| 5.2 If a pharmacist was not significantly involved in the development or presentation of the activity, describe what role if any, a pharmacist has played in this CPD activity. | 2.1 |  |
| 5.3 Have conflicts of interest (actual or perceived) and involvement of an entity with a commercial interest (i.e. sponsor) been disclosed and the Conflict of Interest form has been signed by developers/presenters/reviewers? | 2.1, 2.4, 2.5, 3.2 |  |
| 5.4 Describe how you will disclose any conflicts of interest (actual or perceived) to participants. | 3.2 |  |
| **Note:** All presenters must be briefed on the activity, fully understand their responsibilities against the APC *Accreditation Standards for Continuing Professional Development Activities*(1 July 2013) and declare any conflict of interest (actual or perceived). If the activity is sponsored, author must declare what input the sponsor had in the development, or delivery of the activity. Presenter/author conflict of interest declaration can be downloaded at: [www.psa.org.au/cpd/cpd-accreditation/](http://www.psa.org.au/cpd/cpd-accreditation/) | | |

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| Section 6: Activity format | | | | | |
| □ Lecture | □ Small group learning | □ Online learning | | □ Distance learning | □ Other, please specify: ..................... |
| **Information required** | | **Relevant APC Accreditation Standard** | **Details** | | |
| 6.1 Describe the learning environment in which the activity will be offered, and how this relates to the principles of adult learning.  (Note: For workshop sessions, APC requires that two-thirds of the time allocated must be interactive, and that individuals must actively participate and/or individually contribute) | | 4.1, 4.2 |  | | |
| 6.2 What are the expected participant numbers?  (Note: For interactive workshop sessions, APC requires 1 facilitator to no more than 20 participants) | | 4.1, 4.2 |  | | |
| 6.3 What is the total time engaged in learning? (Note: Exclude time to complete distinct assessments at the conclusion of the activity e.g., Multiple-choice questions. Exclude time for social/promotional activities.  Assessments that are incorporated into the activity such as interactive case studies, role playing and practical demonstration of skills are included into the activity’s total learning time) | | 4.3, 4.4 |  | | |
| 6.4 Is there an assessment component?  If yes, please describe:   * What is required of participants? * How is it marked (pass mark must be ≥75%) * How is feedback provided to participants?   (Note: Group 2 CPD requires a minimum of 5 MCQs per 1 hour of learning OR two-thirds interactive workshop sessions) | | 4.3, 4.4 |  | | |
| 6.5 How will you confirm successful completion of relevant assessment activities (or that individuals actively participated and/or individually contributed to interactive workshop sessions)? | | 4.1, 4.2, 4.3, 4.4 |  | | |

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| Section 7: Activity evaluation | | |
| **Information required** | **Relevant Accreditation Standard** | **Details** |
| 7.1 Describe how you will provide participants with the opportunity to evaluate the quality of the activity. | 6.1 |  |
| 7.2 Describe how your organisation complies with the Australian Privacy Principles as defined under the Privacy Act 1988 to ensure the privacy of participant data including how it will be used and stored. | 6.2 |  |
| 7.3 Describe how your organisation will review content for activities that are ongoing. | 6.3 |  |
| **Note:** Please include a copy of your evaluation form with your accreditation application. A template evaluation form can be downloaded at: [www.psa.org.au/education/about-cpd/accreditation](http://www.psa.org.au/education/about-cpd/accreditation)  Note: Do you have an overdue evaluation summary for any previous CPD activity accredited by PSA?  If so, you may not be eligible to apply for accreditation unless this is submitted to PSA prior to this application.  Please contact PSA to discuss. | | |

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| Section 8: Activity promotion | | |
| **Information required** | **Relevant Accreditation Standard** | **Details** |
| 8.1 Describe how this activity will be promoted?  Please note APC stipulates that:  ‘CPD activity providers must ensure that advertising comprises no more than 20% of total space allocated in and around the printed content of any material relating to the activity (e.g., *PowerPoint* slides).’ | 5.1 | □ General invitation  □ Personal invitation  □ Trade or professional journal  □ Company representative |
|  |
| **Note:** Please include a copy of all promotional material with your application.  **Note:** You are not able to advertise this activity as accredited until you receive your accreditation notification letter from PSA however, as per APC *Accreditation Marketing Policy* you may use a statement such as ‘currently applying for accreditation’ or ‘seeking accreditation’. Please also note that you must not give a likely outcome of your application, i.e., you should not advertise the amount of PBA CPD credits awarded until accreditation is granted. | | |

**Accreditation application checklist**

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| Section 9: Checklist for documents required to support CPD Accreditation assessment  (PLEASE TICK) | |
| □ | **1. Completed and signed CPD Accreditation application** |
| □ | **2. FINAL proposed content with:**   * **Learning objectives** * **Competency Standards** * **References (i.e., critical evaluation of relevant literature and/or practice-based professional evidence)** |
| □ | **3. Conflict-of-Interest declaration (signed by developer/presenter/expert reviewer)** |
| □ | **4. Assessment mechanisms (if included) (e.g., multiple choice questions)** |
| □ | **5. Example of the participant’s evaluation** |
| □ | **6. Promotional materials** |
| Additional materials required for 2- or 3-day activities: | |
| □ | **7. Copy of final program** |

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| Section 10: Declaration |
| I hereby acknowledge and declare, to the best of my knowledge and on behalf of the company/organisation that:   * I have read and understood the APC *Accreditation Standards for Continuing Professional Development Activities* (2013). * All information provided in this application is complete, correct and up-to-date in every particular. * I will ensure the activity is delivered according to the information submitted in the application and in line with the APC *Accreditation Standards for Continuing Professional Development Activities* (2013). * I understand the responsibilities accreditation places on us as the CPD activity provider. * I will advise PSA of any changes to the details in this application and submit a ‘Deviation from accreditation’ form for approval if required. * **I will provide PSA with a summary of the evaluations within 1 month of completion of the activity or on a 6-monthly basis for ongoing activities.** * I understand that the PSA may audit this activity at any time.   Signature: Date:  I have completed this application with the full understanding of the responsibilities in relation to delivering an accredited CPD activity and my typed name acts as my signature.  Name: .......................................................................  Role: .....................................................................  Organisation: .....................................................................  **Note: CPD providers are reminded that if CPD activities are not delivered as per this application it will be a breach of APC Accreditation Standard 3.4. The activity must be delivered in accordance with the application as approved. By signing this form, CPD providers agree to these terms.** |

Please send completed form to [PSAEducation@psa.org.au](mailto:PSAEducation@psa.org.au?subject=CPD%20accreditation)