



MINISTRY OF HEALTH  
SINGAPORE



# Development Framework for Pharmacists

**Continuum of Competency**

Chief Pharmacist's Office  
Version 2.0: June 2024

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# 1. Foreword

The Development Framework for Pharmacists (DFP) was introduced in 2020 with an aim to create a clear linkage between entry-level and advanced practice by integrating foundation-level competencies with the Advanced Practice Framework (APF).

The DFP envisions a systematic and harmonized progression for pharmacists, detailing milestones for advancement post-licensure. It supports employers and training providers in enhancing foundation training, ultimately fostering a progressive and adaptive pharmacy workforce to improve health outcomes for Singaporeans.

It is important for this framework to remain dynamic, adapting to the evolving roles of pharmacists in alignment with the healthcare system. Regular updates are essential to ensure the framework stays current and clarifies performance criteria needed for career development. The DFP version 2.0 reflects the expanded scope of practice across the domains. It also places emphasis on competencies for developing leaders among pharmacists.

I extend my gratitude to all those involved in achieving this milestone and taking the leadership to foster a culture of continuous professional development within the pharmacy profession.



**Dr Camilla Wong**

Chief Pharmacist,  
Ministry of Health



# 2. Development Framework for Pharmacists

*The DFP creates a clear linkage between foundation-level competencies and advanced practice standards in the APF*



APF Development (2010-2016)

APF Roadshows (2016-2017)

APF Guidebook (2017)

Review of APF Implementation (2019)

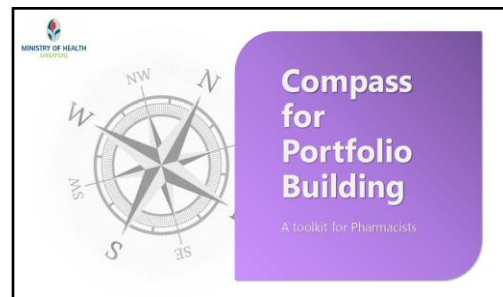
DFP V1.0 (2020)



SPC Competency Standards for Pharmacists (Entry-to-Practice) (2011)



Portfolio Training Workshops (since 2018)



Portfolio Building Toolkit (2019)



Develop pre-registration Training Framework with DFP (since 2021)

DFP V2.0 (2024)



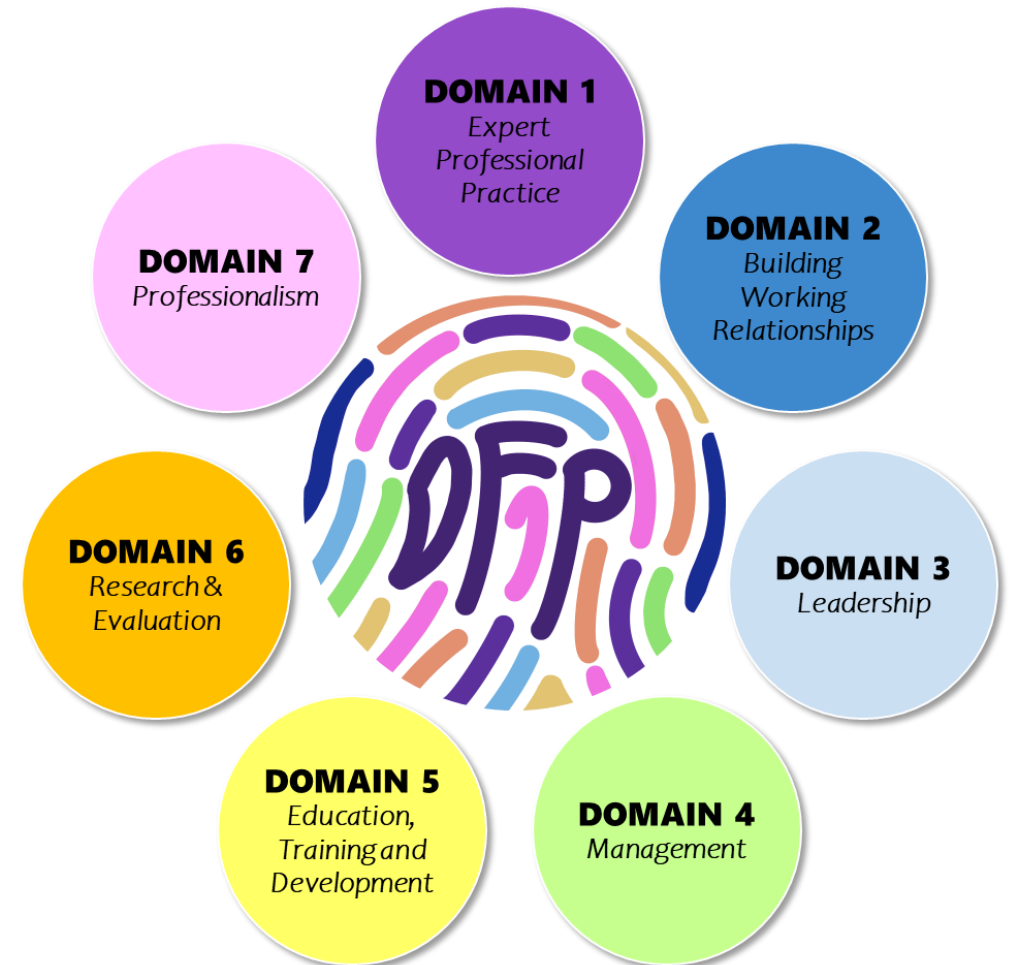


# The DFP establishes a competency continuum across 7 domains

The DFP comprises 26 competency standards across 7 domains. **Domains 1 to 6** are competency standards in the Advanced Practice Framework (APF) extended to include foundation level standards.

**Domain 7 on professionalism** is added for seamless transition from Entry-to-Practice Competency Standards by SPC. Competencies on professionalism are to be attained in foundation years.

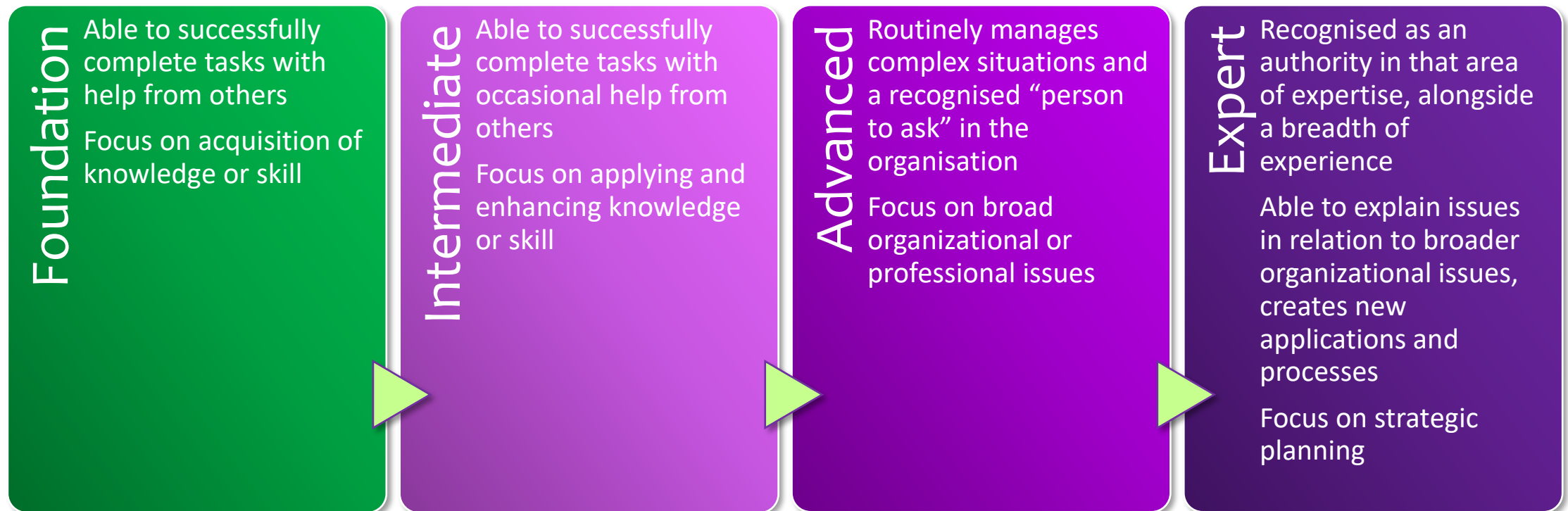
See [Appendix A](#) for the complete list of competency standards for pharmacists





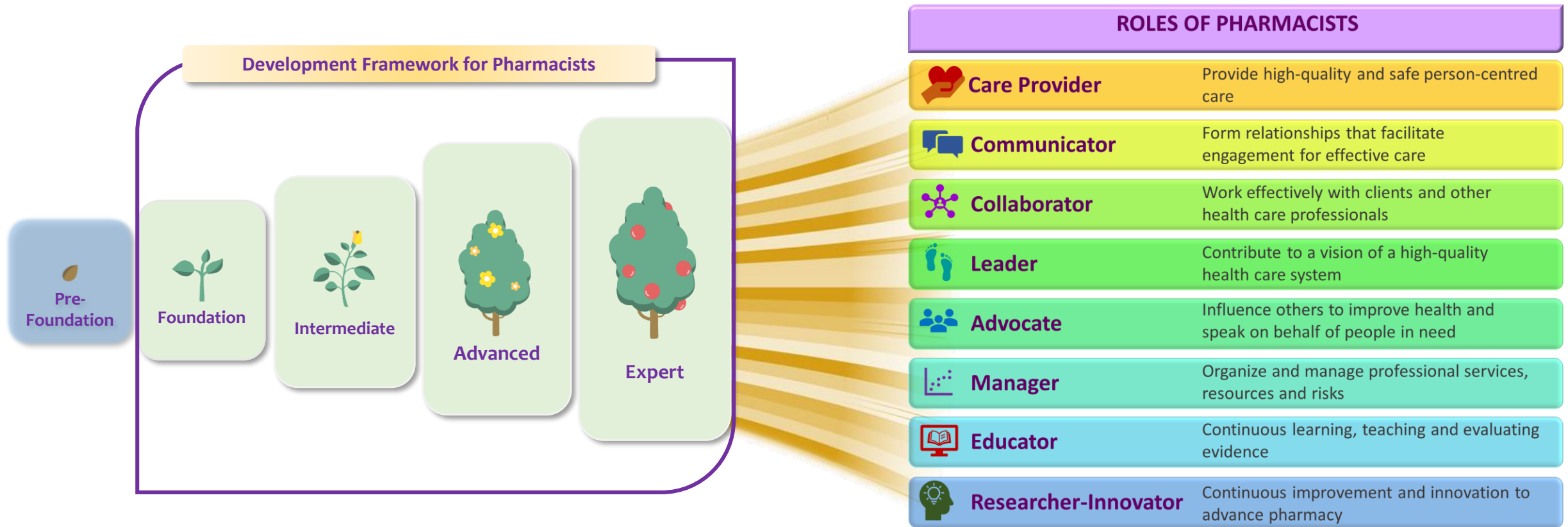
# 4 performance levels associated with learning and career progression

Each of the competency standards for the first 6 domains is presented at four performance levels of Foundation, Intermediate, Advanced and Expert. The four performance levels reflect the performance continuum associated with learning and career progression and are defined as<sup>1</sup>:






# Continuum of Competency for development towards 8 Key Roles







## 2. Development Framework for Pharmacists

The development framework allows pharmacists to design and structure individual development plans to meet competence and to develop their career. The administrative document in **Appendix B** demonstrates the recommended competency level for the different job grades in public healthcare institutions. Standards indicated by the symbol  contain leadership competencies mapped from the MOHH One Healthcare Leadership Framework.

### For Foundation Years

1. Read through the performance criteria and the corresponding evidence to guide the understanding and self-assessment of competence.
2. Gather evidence such as case or intervention logs or workplace-based assessments to show competence at foundation level. Evidence examples listed in the DFP are non-exhaustive.

**After self-assessment, seek second opinion from a peer or coach/mentor who is familiar with your performance at work.**





## 2. Development Framework for Pharmacists

### For Intermediate, Advanced and Expert Levels

1. Read through the performance criteria and the corresponding evidence to guide the understanding and self-assessment of competence.
2. List and gather the evidence from the last three years (last five years for research domain) which may be used to demonstrate a particular competency. The evidence gathered could be patient education materials developed, narratives on patient encounters or quality improvement projects etc. Evidence examples listed in the DFP are non-exhaustive.
3. Identify the competency level which best describes current level of practice based on evidence collected. Seek a second opinion from a peer or coach/mentor who is familiar with your performance at work, if needed. For example, the recommended competency level at each job level in public healthcare institutions is listed in **Appendix B**.
4. Determine whether you are performing below, above or at the competency level expected for your current job level.
5. Identify your aspirational/next job level and determine whether you are performing below, above or at the competency level expected of the aspirational/next job level.



# 3. Glossary of Terms

The following definitions<sup>2</sup> have been adopted in this document.

Term	Definition
<b>Core practice areas</b>	Core practice areas cover the essential areas that any advanced practitioner would be expected to develop and are conversant in at the place of practice. The core areas of pharmacy practice include leadership, management, education, and research.
<b>Competency</b>	A distinct composite of knowledge, skill, attitude and value that is essential to the practice of the profession. <sup>3</sup>
<b>Complexity of medical conditions<sup>4</sup></b>	<u>Low</u> <ul style="list-style-type: none"><li>• A patient with single-system presentation with minimal complications (medical and/or social) and responsive to first-line treatment.</li><li>• A patient with a self-evident diagnosis where management is straightforward.</li><li>• A stable patient, with a common presentation or a clear diagnosis</li></ul>
	<u>Medium</u> <ul style="list-style-type: none"><li>• A patient with multi-system problem and minimal complications (medical and/or social).</li><li>• A patient with a single-system problem, and multiple/significant complication (medical and/or social) or who does not respond to first line treatment.</li><li>• A stable patient with an uncommon presentation or without a clear diagnosis.</li><li>• A critically-ill or injured patient who responds to first line treatment.</li></ul>
	<u>High</u> <ul style="list-style-type: none"><li>• A patient with multi-system problems and multiple/significant complications (medical and/or social).</li><li>• An unstable/deteriorating patient, with an uncommon presentation or without a clear diagnosis.</li><li>• A critically-ill or injured patient who is unresponsive to first line treatment.</li><li>• A patient presenting with a life-threatening condition.</li></ul>



# 3. Glossary of Terms

Term	Definition
<b>Community health needs</b>	The specific health-related requirements and challenges of a particular community or population. <sup>5</sup>
<b>Coaching</b>	A developmental process that involves a trained professional (the coach) working with an individual or a group to help them achieve specific personal or professional goals. The coach provides support, guidance, and feedback to the coachee, helping them to identify their strengths and areas for improvement, set goals, and develop strategies to reach those goals. <sup>6</sup>
<b>Continuing Professional Development (CPD)</b>	An ongoing, cyclical process of continuous reflection and identification of gaps in knowledge and skills that is required for maintenance and enhancement of professional competence to carry out both current duties and anticipated future services. <sup>5</sup>
<b>Defined area of practice</b>	The specific area of responsibility in a role, which may be a specialist or generalist that would be covered in depth beyond that of a core area. A defined area may be an area of clinical practice e.g. critical care or a service area e.g. the inpatient pharmacy.
<b>Evidence</b>	The type of evidence needed to show that you have met the standards specified in the Performance Criteria. E.g., tailor communication style to suit different stakeholders
<b>Evidence examples</b>	The specific document/data/information needed to illustrate the evidence. E.g. written communication articles.
<b>Evidence-based practice</b>	The conscientious, explicit and judicious use of current best evidence in making decisions about the care of the individual patient. It means integrating individual clinical expertise with the best available evidence from systematic research.
<b>External environment</b>	Outside of the pharmacist’s employing institution.
<b>Higher level</b>	A greater level of organisational complexity than that of the pharmacist’s team.



# 3. Glossary of Terms

Term	Definition
<b>Mentorship</b>	A professional relationship in which a more experienced or knowledgeable person (the mentor) provides guidance, support, and advice to a less experienced individual (the mentee) to help them develop skills, knowledge, and achieve their career or personal goals.
<b>Mentoring Process</b>	Mentoring process include creating a mentor mentee agreement on how they work together, setting goals, responsibilities of the mentor and mentee, building rapport, process of review and confidentiality on personal issue.
<b>Organisational priorities</b>	Goals, objectives, or areas of focus that an organisation has identified as crucial for its success and long-term sustainability.
<b>Peer review</b>	Expert opinion is sought to undertake a review of published work(s) in the pharmacist’s area of work.
<b>Performance criteria</b>	The level and quality of how one should carry out activities to evaluate the competence.
<b>Pharmaceutical care</b>	The direct, responsible provision of medication-related care for the purpose of achieving definite outcomes that improve a patient’s quality of life. Pharmaceutical care should underpin the delivery of medicines, ensuring health gain from medicines are maximised and harms minimised. This is achieved through enhanced engagement with patients and the public, understanding their experience and breaking down barriers between professions.
<b>Pharmaceutical care programmes</b>	Structured initiatives aimed at integrating medication-related care into patient treatment plans. These may involve developing standardised protocols, collaborative practices, and ongoing monitoring to optimise patient outcomes.



# 3. Glossary of Terms

Term	Definition
<b>Pharmacy services</b>	The service the pharmacist is directly involved in providing, whether direct to patients or otherwise.
<b>Population health</b>	The health outcomes of a group of individuals, including the distribution of such outcomes within the group. It involves understanding and addressing the health needs of entire populations, considering factors such as social determinants, environmental influences, and healthcare access. <sup>7</sup>
<b>Professional activities</b>	Activities that a pharmacist is educated, competent and authorised to perform and for which they are accountable. <sup>8</sup>
<b>Portfolio</b>	A collection of evidence that learning has taken place. It is cumulative as it contains work collected over a period of time. A portfolio can be used to: a) Guide the development of competencies – includes reflective texts and self-analyses of own learning and performance; b) Monitor progress – includes overview of what has been done or learnt and c) Assess competency development – includes evidential materials to substantiate the competency level that is achieved or how certain competencies are developing. <sup>9</sup>
<b>Research governance</b>	The broad range of regulations, principles and standards of good practice that exists to achieve, and continuously improve, research quality across all aspects of healthcare. <sup>10</sup>



# 3. Glossary of Terms

Term	Definition
<b>Self leadership</b>	Comprehensive self-influence perspective that concerns leading oneself toward performance of naturally motivating tasks as well as managing oneself to do work that must be done but is not naturally motivating. <sup>11</sup>
<b>Standards of practice</b>	Established guidelines, principles, or benchmarks that define the expected level of performance or conduct.
<b>Systems thinking</b>	An approach that considers the interactions and interdependencies of components within a system to understand and solve complex problems.
<b>Determinants of health</b>	The various factors that influence the health and well-being of individuals and populations, including social, economic, environmental, and behavioral elements, as well as access to healthcare services. <sup>12</sup>
<b>Team</b>	A group of professionals working together and mutually accountable for the delivery of a common goal or purpose. Within the context of the framework, “Team” refers to the group (pharmacy or multidisciplinary) with which the pharmacist works most closely and regularly.
<b>Workplace-based assessments (WBA)</b>	Structured evaluations conducted in the actual work environment to assess the pharmacist’s performance, skills, and competencies within their professional role.



# 4. Frequently Asked Questions

## Q1: For pharmacists, what are the desired end-goal of DFP implementation?

The DFP is envisioned to enable understanding of the core competencies and how they are used in managing performance, training and development for pharmacists to progress from foundation towards advanced level competencies across seven domains in a systematic manner.

## Q2: How should a pharmacist utilise the DFP to advance and to achieve the relevant competencies?

To utilise the DFP, the following are recommended:

- a. Identify developmental goals;
- b. Acquire lifelong-learning skills to facilitate self-reflection on developmental needs against the competency standards;
- c. Document a portfolio of achievements and evidences of performance; and
- d. Collaborate with reporting officer/coach/mentor to discuss developmental progress and/or the organisational plans

## Q3: Should I start to build my portfolio from foundation years?

While pharmacists could start to acquire portfolio building skills in foundation years, the assessment of portfolio is not recommended for this stage. As foundation years practice is more activity-based, the Entrustable Professional Activities (EPA) approach could be adopted for demonstration of competencies. This approach dovetails EPAs from pre-registration training but at higher level of complexity. This is to help junior pharmacists with a more structured approach.

## Q4: How should a pharmacist transit from foundation years to advanced practice?

Pharmacists are encouraged to adopt a “work to learn” attitude, build their own portfolio and navigate the advanced level DFP systematically with lifelong learning skills and relevant training programmes.





## 4. Frequently Asked Questions

### **Q5: How should reporting officers use the DFP as a developmental tool for their staff?**

Reporting Officers are required to assess competency attainment through evidence gathered for advanced levels or demonstration of competencies for foundation level. It is essential for them to identify key developmental areas to design training roadmaps for staff under their supervision. Conversations on developmental needs for staff should be carried out separately from performance appraisal, if possible.

### **Q6: Will I be assessed on professionalism at advanced level practice?**

Competencies under Domain 7 on Professionalism would apply across levels. For implementation, a separate portfolio assessment for Domain 7 is not required as professionalism is subsumed under professional practice and should have been attained at foundation level before a pharmacist embarks on higher level competencies.

### **Q7: Do I have to show consistent performance/ evidence in the domain to be qualified for the competency or is one evidence good enough?**

The sufficiency of evidence gathered to demonstrate performance at an identified level is dependent on the quality and adequacy of the evidence to support the demonstration of the competency and not the quantity of the document. Discuss with your reporting officer or education supervisor if you have any doubts on the sufficiency of evidence gathered.



# 5. Appendices

5.1 Competency Standards for Pharmacists

5.2 Administrative Document



# 5.1 Appendix A

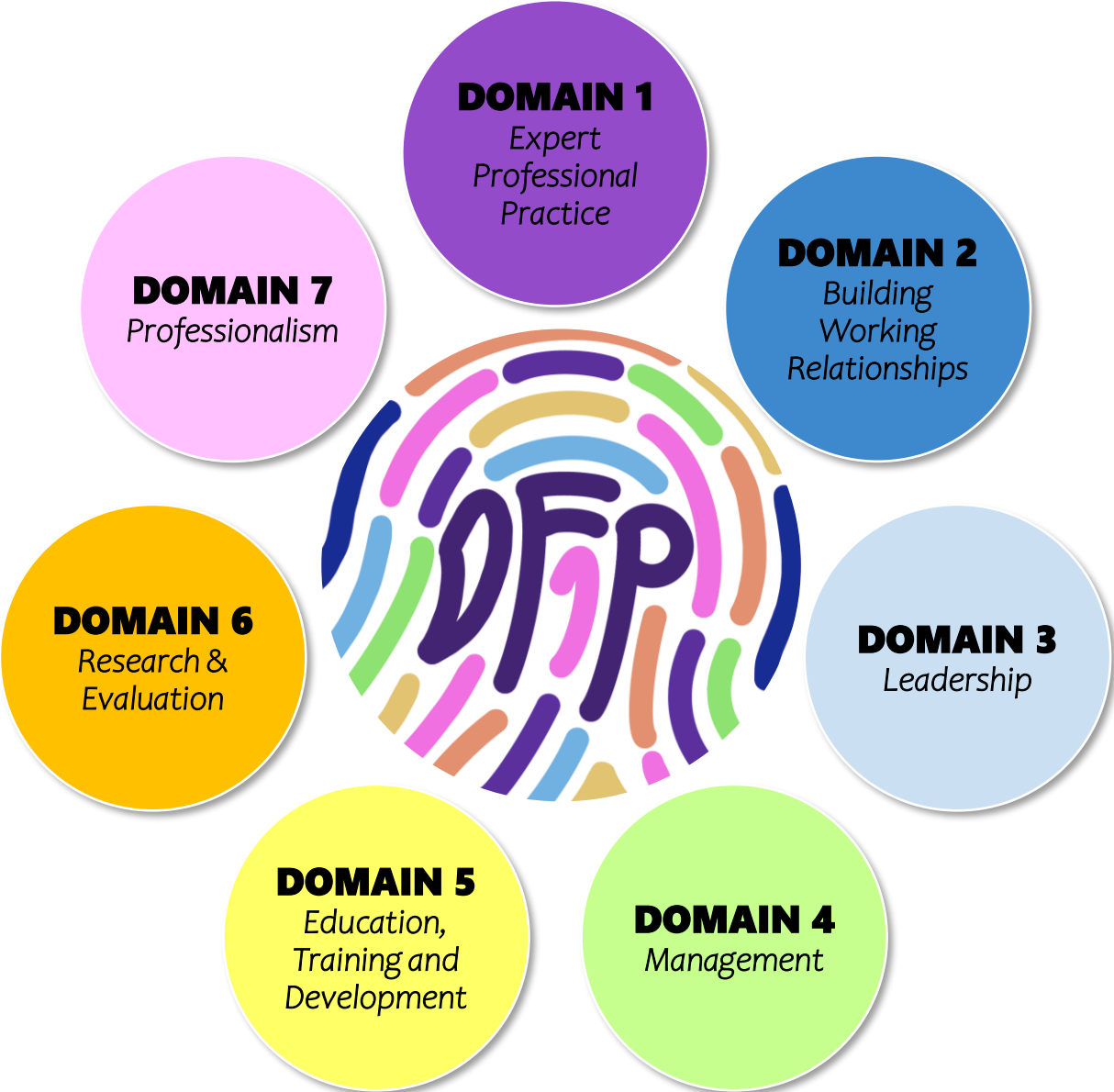
## Competency Standards for Pharmacists

The competency standards in this document describe the knowledge, skills and attributes that a pharmacist should possess in order to perform, a range of professional practice activities to a desired standard.

### For Reviewer, Assessor and Mentor

- The Evidence column can be used to aid assessment of the pharmacists' competencies and portfolio.
- Take the opportunity to gather more information from the pharmacist on the ***depth of practice*** (performance level) for the evidence examples listed.
- Some of the evidence examples may be used to cover different competencies across the other competency domains.


# Competency Standards for Pharmacists



# Competency Standards for Pharmacists



## Domain 1 Expert Professional Practice

Standard 1.1	<u>Demonstrates expert skills and knowledge</u>
Standard 1.2	<u>Manages patient care responsibilities/delivery of professional activities</u>
Standard 1.3 	<u>Exhibits reasoning and judgement</u>
Standard 1.4	<u>Uses professional autonomy</u>

This Domain includes competency standards that address the professional responsibilities of pharmacists in providing oversight for medication usage and management in collaboration with a multidisciplinary team. It also encompasses the profession's commitment to advancing the standards of pharmaceutical care for the individual and the population. At the same time, it addresses their obligations to advocate socially responsible changes to the health system to better meet the needs of the community.

## Standard 1.1 Demonstrates expert skills and knowledge

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Applies general pharmaceutical knowledge in core practice areas</b></p> <p><b>Demonstrates ability to plan, manage, monitor, advise and review pharmaceutical care programmes for patients</b></p>	<ol style="list-style-type: none"> <li>1. Able to apply the legal and safety requirements regarding the supply, storage and disposal of medicines, including controlled drugs</li> <li>2. Able to perform the following professional activities for the general patient population with <b>low to medium</b> complexity medical conditions:               <ol style="list-style-type: none"> <li>a) Develop and implement a care plan</li> <li>b) Accurate supply of health products</li> <li>c) Educate patients on appropriate use of health products</li> <li>d) Responding to drug information or health product enquiry</li> </ol> </li> </ol>	<ol style="list-style-type: none"> <li>1. Workplace-based assessments such as case-based discussions or mini clinical evaluation</li> <li>2. Case logs or records</li> <li>3. Community Pharmacy Health Champion Programme (CPHCP) documentation</li> <li>4. Clinical topic presentation during in-house monthly meeting or pharmacy technician training</li> <li>5. Public talks (e.g. radio, YouTube)</li> </ol>
<p><b>Intermediate</b>  <b>Applies general pharmaceutical knowledge in core practice areas</b></p> <p><b>Demonstrates ability to plan, manage, monitor, advise and review pharmaceutical care programmes for patients</b></p>	<ol style="list-style-type: none"> <li>1. Able to perform the following professional activities for the general patient population with <b>medium to high</b> complexity medical conditions:               <ol style="list-style-type: none"> <li>a) Develop and implement a care plan</li> <li>b) Accurate supply of health products</li> <li>c) Educate patients on appropriate use of health products</li> <li>d) Responding to drug information or health product enquiry</li> </ol> </li> </ol>	<ol style="list-style-type: none"> <li>1. Records of consultation requests from healthcare professionals within the hospital</li> <li>2. Documentation of pharmacy interventions and enquiries e.g. requests from other healthcare professionals or patients</li> </ol>

## Standard 1.1 Demonstrates expert skills and knowledge

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b> Applies advanced pharmaceutical knowledge in a defined practice area(s)</p> <p>Demonstrates ability to plan, manage, monitor, advise and review pharmaceutical care programmes for patients in a defined practice area(s)</p>	<ol style="list-style-type: none"> <li>1. Regarded as a source of expertise for the management of patients with drug related problems related to specific disease states in the defined practice area(s)</li> <li>2. Able to accurately and efficiently identify multiple, complex drug related problems and develop therapeutic plans through evidence-based knowledge and experience in a defined practice area(s)</li> </ol>	<ol style="list-style-type: none"> <li>1. Documented pharmacy interventions and enquiries e.g. requests from other healthcare professionals or patients</li> <li>2. Documented pharmaceutical care plans for complex cases</li> </ol>
<p><b>Expert</b> Advances pharmaceutical knowledge in a defined practice area(s)</p> <p>Demonstrates ability to advance pharmaceutical care programmes for patients in a defined practice area(s)</p>	<ol style="list-style-type: none"> <li>1. Able to look beyond the current level of care in the defined practice area(s) and provide solutions to enhance patient outcomes</li> <li>2. Able to lead practice through research or start service initiatives</li> </ol>	<ol style="list-style-type: none"> <li>1. Title of translational research conducted</li> <li>2. Initiation of new services</li> <li>3. Critical review of updated evidence to modify therapeutic management in defined area of practice</li> </ol>



## Standard 1.2 Manages patient care responsibilities/delivery of professional activities

Performance criteria	Evidence	Evidence Examples
<b>Foundation</b> Accountable for the provision of pharmaceutical care	<ol style="list-style-type: none"><li>1. Able to provide safe, effective and timely pharmaceutical care to each patient</li><li>2. Able to <b>understand</b> the determinants of health that affects patients access to needed health services or resources</li></ol>	<ol style="list-style-type: none"><li>1. Case logs</li><li>2. Workplace-based assessments</li><li>3. Learning logs or self-development plans</li><li>4. Colleagues' review and feedback</li><li>5. Customer/patient compliment letters</li><li>6. Patient education and information provision for lifestyle modifications</li></ol>
<b>Intermediate</b> Accountable for the provision of pharmaceutical care	<ol style="list-style-type: none"><li>1. Able to keep the individual patient at the centre of one's approach to care at all times</li><li>2. Able to advocate for the patient by <b>identifying and addressing</b> the determinants of health that affects patients access to needed health services or resources</li></ol>	<ol style="list-style-type: none"><li>1. Documented pharmacy interventions done</li><li>2. Documented case-based discussions conducted</li><li>3. Feedback from patients, peers/colleagues, clinical heads</li><li>4. Work with other healthcare professionals to tackle the social determinants of health. For example, partnering with community nurses to address care continuity issues of the patients</li></ol>



## Standard 1.2 Manages patient care responsibilities/delivery of professional activities

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b> Accountable for the delivery of a pharmacy service to a defined group of patient</p>	<ol style="list-style-type: none"> <li>1. Able to provide safe, effective and timely pharmaceutical care to a defined group of patients with special needs or in a defined practice area</li> <li>2. Able to facilitate continuity of care</li> <li>3. Able to collate and analyse data for improvement opportunities</li> </ol>	<ol style="list-style-type: none"> <li>1. Achievement of Key Performance Indicators (KPIs) as Manager of a section</li> <li>2. Contribution as leader of a Quality Improvement project for care delivery to a defined group of patients e.g. patients in Anticoagulation clinic, Hypertension-Diabetes-Lipid clinic</li> <li>3. Documentation of how continuous improvement cycle is applied to service delivery</li> </ol>
<p><b>Expert</b> Accountable for the delivery of pharmacy services holistically</p>	<ol style="list-style-type: none"> <li>1. Able to influence and contribute actively to inter-professional teams</li> <li>2. Able to synthesise data for programme monitoring and evaluation and to generate new ideas/solutions/guidelines</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution to the development of a new protocol/guideline</li> <li>2. Contribution as the Pharmacist-In-Charge of pharmacy services e.g. Anticoagulation clinic, Hypertension-Diabetes-Lipids, ambulatory care clinics, Intensive Care Units</li> <li>3. Contribution to the development of a service that transforms the delivery of care e.g. utilise data from Medication Therapy Management (MTM) service to develop a packing service that improves patient compliance</li> </ol>

## Standard 1.3 Exhibits reasoning and judgement

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates ability to analyse situations, appraise options and make appropriate decisions in daily work</b></p> <p><b>Demonstrates ability to recognise importance and/or urgency of resolving a problem</b></p> <p><b>Demonstrates ability to identify deviations from workplace policies and procedures or legal requirements and regulations pertaining to pharmacy practice</b></p>	<ol style="list-style-type: none"> <li>1. Able to access, interpret and adhere to institutional policies and protocols, including ability to retrieve relevant legislations, policies and protocols pertaining to a situation</li> <li>2. Able to use policies, procedures, legislations and guidelines as decision supporting tools to address issues in daily patient care practice</li> <li>3. Able to describe situations clearly, identify problems and propose possible solutions</li> <li>4. Able to act and resolve issues in priority order and seek assistance when required</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from peers/colleagues, team members, supervisors/tutors, learner/trainees</li> <li>2. Workplace-based assessments</li> <li>3. Documentation of a situation handling/incident report</li> </ol>
<p><b>Intermediate</b>  <b>Demonstrates ability to use skills in a range of routine situations requiring analysis or comparison of a range of options</b></p> <p><b>Recognises priorities when problem-solving and identifies deviations from the normal pattern</b></p>	<ol style="list-style-type: none"> <li>1. Able to interpret and adhere to institutional policies and protocols</li> <li>2. Able to identify and fully describe (verbally or in writing) the nature of a problem and probable causes or causative factors</li> <li>3. Able to document the identified problem(s), causative factor(s) and options for resolving the problem</li> <li>4. Able to make practical and effective decisions in a timely fashion, in day-to-day activities, prioritising</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from peers/colleagues, team members, supervisors/tutors, learner/trainees</li> <li>2. Examples of documented interventions done</li> <li>3. Documented evidence of problem/feedback management when handling difficult customers</li> </ol>

## Standard 1.3 Exhibits reasoning and judgement

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b>  <b>Demonstrates ability to use skills to make decisions in complex situations where there are several factors that require analysis, interpretation and comparison</b></p> <p><b>Demonstrates an ability to see situations holistically</b></p>	<ol style="list-style-type: none"> <li>1. Able to make practical and effective decisions in a timely fashion, in complex situations</li> <li>2. Able to ask pertinent questions, list and evaluate options by constructing best and worst scenarios, and assess chances of success and consequences or failures</li> <li>3. Able to discuss and communicate these plans with team members and stakeholders effectively</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution as a member of institutional committee e.g. clinical governance committee</li> <li>2. Feedback from: peers/colleagues, team members, supervisors/tutors, learner/trainees</li> <li>3. Examples of documented interventions made</li> <li>4. Reports of medication errors investigated</li> <li>5. Documented evidence of problem/issue resolution when handling difficult customers with complex needs</li> <li>6. Role in the revision or development of departmental/institutional guidelines/protocols</li> </ol>
<p><b>Expert</b>  <b>Demonstrates ability to use skills to manage difficult and dynamic situations</b></p> <p><b>Demonstrates ability to see situations holistically and make decisions in the absence of evidence or data or when there is conflicting evidence or data</b></p>	<ol style="list-style-type: none"> <li>1. Able to assimilate knowledge and understand situational conditions and goals, in order to develop new standards, guidelines, protocols or governance frameworks</li> </ol>	<ol style="list-style-type: none"> <li>1. Role in development of a new pharmacy guideline</li> <li>2. Contribution as a member of the MOH Clinical Practice Guidelines workgroup</li> <li>3. Contribution as a member of the Medication Safety Committee at institutional/cluster level or the equivalent</li> <li>4. Implementation of measures that improved the quality of service</li> </ol>





## Standard 1.4 Uses professional autonomy

Performance criteria	Evidence	Evidence Examples
<b>Foundation</b> Follows legal, ethical, professional and organisational policies/procedures and codes of conduct	1. Able to understand and apply the codes of ethics and conduct; and the legal framework which governs practice to support decision making in routine practice situations.	1. Feedback on day-to-day work from: Peers/colleagues; Supervisor; Team members 2. Workplace based assessments
<b>Intermediate</b> Draw upon own knowledge and up to date guidance to effectively make decisions appropriately	1. Able to conduct risk-based assessment to exercise professional autonomy for decision making in the direct and indirect patient care settings	1. Feedback on day-to-day work from: Peers/colleagues; Supervisor; Team members 2. Workplace based assessments
<b>Advanced</b> Able to take action based on own interpretation of broad professional policies/procedures where necessary	1. Able to decide on a course of action in an ambiguous situation or in the absence of specific policy/procedure	1. Role in the initiation of a new service which has no precedence e.g. telepharmacy even when the law has no provision for it 2. Documented actions taken in situations requiring ethical considerations
<b>Expert</b> Able to interpret overall health service policy and strategy, in order to establish goals and standards for others within the defined area(s)	1. Able to assimilate knowledge and understand situational conditions and goals, in order to develop new standards/guidelines/protocols or governance frameworks	1. Role in the development of a new practice guideline 2. Contribution as a member of the MOH Clinical Practice Guidelines workgroup 3. Contribution as a member of the Medication Safety Committee at institutional/cluster level or the equivalent 4. Role in the initiation, development or implementation of new services

# Competency Standards for Pharmacists



## Domain 2 Building Working Relationships

Standard 2.1 	<u>Ability to communicate effectively</u>
Standard 2.2 	<u>Collaborates with members of the health care team and offer consultations</u>

This Domain includes competency standards that are required to communicate effectively so as to establish and maintain professionally-driven working relationships within the healthcare team and gain the cooperation of others. This applies to in-person interactions and those that are conducted through digital or electronic platforms. It also encompasses verbal, non-verbal and written information and groups. It includes the consultancy activities undertaken by the pharmacists in advanced practice.

## Standard 2.1 Ability to communicate effectively

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates use of appropriate communication skills to gain the cooperation of the individual patients, caregivers, colleagues and other healthcare professionals</b></p> <p><b>Demonstrates ability to communicate where the content of the discussion is explicitly defined</b></p>	<ol style="list-style-type: none"> <li>1. Able to tailor communication style to suit different stakeholders, and show the ability to seek buy-in within the department</li> <li>2. Able to actively listen, empathise and engage with clients (e.g. patients, caregivers, laypersons, customers) and colleagues to build rapport and understand their positions/needs</li> <li>3. Able to discuss behavioural change (e.g. using shared decision making and motivational strategies) including lifestyle modification such as exercising, dietary modifications with patients</li> <li>4. Able to communicate actively, via written (e.g. emails/articles) and verbal/non-verbal routes with colleagues and professionals, regardless of settings</li> <li>5. Able to effectively obtain relevant information from required personnels, and to effectively raise issues that are bothering self/colleagues</li> <li>6. Able to present in a concise, coherent and timely manner to encourage trust and confidence</li> <li>7. Able to recognise principles of conflict management</li> </ol>	<ol style="list-style-type: none"> <li>1. Observational feedback from colleagues both within and outside department, patients, trainees' evaluation, workplace-based assessments</li> <li>2. Written communication by the individual e.g. correspondences, articles</li> <li>3. Presentation materials and audience feedback</li> <li>4. Evidence of collaboration with colleagues from other departments through projects/workgroups, etc.</li> <li>5. Colleagues' review and feedback</li> <li>6. Customer/patient compliment letters</li> </ol>

## Standard 2.1 Ability to communicate effectively

Performance criteria	Evidence	Evidence Examples
<p><b>Intermediate</b>  <b>Demonstrates use of appropriate communication skills to gain the cooperation of the individual patients, caregivers, colleagues and other healthcare professionals</b></p> <p><b>Demonstrates ability to communicate where the content of the discussion is based on opinion</b></p>	<ol style="list-style-type: none"> <li>1. Able to communicate effectively with patients, caregivers and colleagues within and outside the department through presentation/talk/meeting with minimal guidance</li> <li>2. Apply principles of conflict management.</li> </ol>	<ol style="list-style-type: none"> <li>1. Observational feedback from colleagues both within and outside department, patients, trainees' evaluation, workplace-based assessments</li> <li>2. Written communication by the individual e.g. correspondences, articles</li> <li>3. Presentation materials and audience feedback</li> <li>4. Evidence of collaboration with colleagues from other departments through projects workgroups, etc.</li> </ol>
<p><b>Advanced</b>  <b>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of patients, caregivers, colleagues, senior clinicians and managers within the organisation</b></p> <p><b>Demonstrates ability to communicate where the content of the discussion is based on opinion</b></p>	<ol style="list-style-type: none"> <li>1. Able to communicate with patients, caregivers and colleagues both within and outside of the department and show the ability to persuade, motivate and collaborate</li> <li>2. Able to communicate effectively with small groups both within and outside the department through presentations/talks/meetings</li> <li>3. Able to deal with difficult situations where communication is required e.g. managing difficult situations and diffusing conflicts</li> </ol>	<ol style="list-style-type: none"> <li>1. 360-degree evaluation, observational feedback from colleagues both within and outside department, patients, trainees' evaluation</li> <li>2. Written communication by the individual e.g. correspondences, articles</li> <li>3. Presentation materials and audience feedback</li> <li>4. Evidence of collaboration with colleagues from other departments through projects/workgroups, etc.</li> </ol>

## Standard 2.1 Ability to communicate effectively

Performance criteria	Evidence	Evidence Examples
<p><b>Expert</b>  <b>Demonstrates use of appropriate communication skills to present complex, sensitive or contentious information to large groups of patients, caregivers, clinicians and senior managers</b></p> <p><b>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere</b></p>	<ol style="list-style-type: none"> <li>1. Able to communicate concepts and ideas in a concise, coherent and confident manner at management level/committees e.g. to directors, clinicians and senior managers</li> <li>2. Is sensitive to changes in the working atmosphere due to communication issues (e.g. tension, low morale, uncooperative behaviour) and take the appropriate action</li> <li>3. Able to select the appropriate approach/strategy that is effective for resolving conflict</li> </ol>	<ol style="list-style-type: none"> <li>1. 360-degree evaluation, observational feedback from colleagues both within and outside department, patients, trainees' evaluation</li> <li>2. Written communication by the individual e.g. correspondences, articles, workplan/budget/board papers</li> <li>3. Presentation materials and audience feedback</li> <li>4. Leadership role in collaboration (especially if it's in area of expertise) or in multiple interdepartmental/interdisciplinary collaborations</li> </ol>



## Standard 2.2 Collaborates with members of the health care team and offer consultations

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates ability to engage in teamwork</b></p> <p><b>Recognises personal limitations and is able to refer to more experienced colleagues when needed</b></p>	<ol style="list-style-type: none"> <li>1. Able to show respect for the rights, preferences, values, needs, ethics and cultural beliefs of others</li> <li>2. Able to demonstrate personal and professional integrity and professionalism—in partnerships to promote positive outcomes</li> <li>3. Able to understand one’s role, including strengths and limitations, within the team</li> <li>4. Able to participate in shared-decision making, recognising the value of others, and respecting team decisions</li> <li>5. Able to seek or be open to feedback</li> <li>6. Able to understand the need to seek alignment and support from relevant stakeholders</li> </ol>	<ol style="list-style-type: none"> <li>1. Observational feedback from colleagues both within and outside department and workplace-based assessments</li> <li>2. Achievement of team-based outcomes</li> <li>3. Contribution as a member in the Pharmaceutical Society of Singapore</li> </ol>
<p><b>Intermediate</b>  <b>Demonstrates ability to contribute as a member of the pharmacy team</b></p> <p><b>Recognises personal limitations and is able to refer to more appropriate colleagues</b></p>	<ol style="list-style-type: none"> <li>1. Able to actively contribute to the department's daily operations</li> <li>2. Able to demonstrate a positive attitude to working collaboratively with others</li> <li>3. Able to provide feedback, encouragement and support to team members</li> <li>4. Able to identify the types of circumstances where assistance should be sought</li> <li>5. Able to seek alignment and support from team members</li> </ol>	<ol style="list-style-type: none"> <li>1. Observational feedback from colleagues both within and outside department, workplace-based assessments</li> <li>2. Achievement of team-based outcomes</li> <li>3. Contribution as a member in workgroups/committees/QI initiatives/projects, at departmental level</li> </ol>





## Standard 2.2 Collaborates with members of the health care team and offer consultations

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b>  <b>Demonstrates ability to work as an acknowledged member of a multidisciplinary team</b></p> <p><b>Accepts consultation for specialist advice from within the organisation</b></p>	<ol style="list-style-type: none"> <li>1. Able to respond to the demands and expectations of members of the health care team</li> <li>2. Able to share information and expertise to facilitate a common understanding</li> <li>3. Able to maintain rapport and work in partnership (share information with patient's consent, and work cooperatively on patient's health goals) with other healthcare professionals to achieve therapeutic goals</li> <li>4. Able to actively provide a pharmacist's perspective and make a positive contribution to team-based problem solving and decision making</li> <li>5. Able to harness strengths of everybody/team members</li> </ol>	<ol style="list-style-type: none"> <li>1. 360-degree evaluations, observational feedback from colleagues both within and outside department, workplace-based assessments</li> <li>2. Achievement of team-based outcomes or participation in defining the outcomes to be achieved by the department</li> <li>3. Contribution as a member in workgroups/committees/QI initiatives/projects at organisation level</li> </ol>
<p><b>Expert</b>  <b>Works across boundaries to build relationships and share information, plans and resources</b></p> <p><b>Sought as an opinion leader both within the organisation and in the external environment</b></p>	<ol style="list-style-type: none"> <li>1. Able to be assertive and use supportive and persuasive communication to achieve a desired outcome</li> <li>2. Able to describe or demonstrate an appropriate negotiation strategy for a particular situation</li> <li>3. Able to maintain rapport and work in partnership across boundaries to achieve strategic goals</li> <li>4. Able to proactively identify opportunities for collaboration based on common goals and interest</li> <li>5. Able to contribute to policy development at the cluster or national level</li> </ol>	<ol style="list-style-type: none"> <li>1. 360-degree evaluations, observational feedback from colleagues both within and outside department, workplace-based assessments</li> <li>2. Achievement of team-based outcomes</li> <li>3. Contribution as a leader in workgroups/committees at organisational/cluster/national level or in a professional society such as the Pharmaceutical Society of Singapore</li> <li>4. Invitation as a speaker/judge for conferences</li> <li>5. Invitation as a speaker for public event</li> </ol>

# Competency Standards for Pharmacists



## Domain 3 Leadership

Standard 3.1 	<u>Visioning</u>
Standard 3.2 	<u>Strategic planning</u>
Standard 3.3 	<u>Innovation</u>
Standard 3.4 	<u>Motivates individual (Motivational)</u>

This Domain includes competency standards that encompass the ability of the pharmacists to inspire individuals and teams to achieve high standards of performance and personal development. It also addresses the competencies required to undertake clinical governance as well as the planning of professional services.

## Standard 3.1 Visioning

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates understanding of the professional activities and the organisation's vision</b></p>	<ol style="list-style-type: none"> <li>1. Able to understand the roles of individuals and the department's in relation to the broader organisation's vision</li> <li>2. Able to articulate department's and organisations' vision, goals and strategy</li> <li>3. Able to align objectives of professional activities with the department's vision</li> </ol>	<ol style="list-style-type: none"> <li>1. Shows the relevant documents pertaining to organisational vision, goals and strategy</li> </ol>
<p><b>Intermediate</b>  <b>Contributes to the vision for professional activities</b>   <b>Assists others in the team to understand the strategic context in which professional activities are undertaken</b></p>	<ol style="list-style-type: none"> <li>1. Able to articulate how professional activities fulfil the department's and organisation's visions</li> <li>2. Able to explain and support others in the team to understand the strategic context of professional activities</li> </ol>	<ol style="list-style-type: none"> <li>1. Goals set for self is in alignment with the department's/hospital's vision and in Continual Professional Development Plan</li> <li>2. Observed to embrace core values and shared goals of the department/institution in the way that these are translated into daily activities and practice (multi-source feedbacks)</li> <li>3. Written correspondences on ideas contributed e.g. during internal workplan discussion</li> </ol>

### Standard 3.1 Visioning

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b> Creates the vision for professional activities and translates it into clear goals for the team</p> <p>Assists others in the team to understand the strategic context and commit to the goals for practice activities</p>	<ol style="list-style-type: none"> <li>1. Able to create and communicate vision for professional activities to all staff</li> <li>2. Able to and conceptualise them into action plans for the team</li> </ol>	<ol style="list-style-type: none"> <li>1. Examples of how the vision is translated into strategies and actions for the team</li> <li>2. Workplan and targets developed for team/section is in alignment with the department/hospital's vision</li> </ol>
<p><b>Expert</b> Creates vision for the future and influences others to share the vision for professional activities even within context of uncertainty and complexity</p> <p>Leads the implementation of the professional activities and organisation's vision</p>	<ol style="list-style-type: none"> <li>1. Able to create and influence others to follow vision for the future</li> </ol>	<ol style="list-style-type: none"> <li>1. 360-degree feedback, observational feedback from colleagues both within and outside department</li> <li>2. Vision developed is inspiring and creates purpose which resonates with different stakeholders</li> </ol>

### Standard 3.2 Strategic planning

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates understanding of systems thinking and policies and procedures of the institution, the national health care landscape and the different stakeholders involved</p> <p>Demonstrates ability to plan, manage and complete task in a timely manner</p>	<ol style="list-style-type: none"> <li>1. Able to use relevant policies and procedures effectively for the course of work</li> <li>2. Able to plan, prioritise and manage time and self to complete tasks on time</li> </ol>	<ol style="list-style-type: none"> <li>1. Explanation of policies (e.g., drug classification, subsidy level, retail pharmacy discount policies, promotion mechanics, exchange/return policies of medications, stock holdings) provided to others (e.g., patients, subordinates, staff etc.)</li> <li>2. Documented plan to achieve tasks in a timely manner</li> </ol>
<p><b>Intermediate</b> Demonstrates understanding of the needs of stakeholders</p> <p>Applies systems thinking to a defined practice area(s) and practice reflects institutional, cluster and national health care policy</p> <p>Demonstrates ability to plan 4-12 months ahead within a defined practice area(s)</p>	<ol style="list-style-type: none"> <li>1. Displays situational awareness i.e. able to assess what is happening on the ground, through engaging key stakeholders</li> <li>2. Able to communicate (including describing and interpreting) policies effectively to others</li> <li>3. Able to identify gaps, prioritise and develop short term plans (either for a specific project or department), and show how the plans align to the department's middle and long-term strategy</li> </ol>	<ol style="list-style-type: none"> <li>1. Clear explanation of policies (e.g. drug classification, subsidy level) provided to others (e.g. patients, subordinates, staff etc.)</li> <li>2. Documented plan to achieve departmental/institutional balance score card indicators</li> <li>3. Role in encouraging colleagues to use measures that can ensure or enhance patient's safety during routine practice e.g. encouraging nurses to use pre-mixed solutions for patient safety</li> <li>4. Successful completion of short-term projects (Clinical Practice Improvement Programme, Quality Improvement projects etc.)</li> <li>5. Project presentation at relevant platforms</li> </ol>

### Standard 3.2 Strategic planning

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b></p> <p><b>Demonstrates understanding of culture, climate and needs of stakeholders both internal and external</b></p> <p><b>Demonstrates the ability to incorporate national healthcare policy which influences departmental/institutional strategy</b></p> <p><b>Demonstrates ability to plan over a year ahead within a defined practice area(s)</b></p>	<ol style="list-style-type: none"> <li>1. Able to conceptualise strategies and implement at departmental/institutional/cluster levels, that are in line with national healthcare policies</li> <li>2. Able to display situational awareness i.e. able to assess what is happening on the ground, through engaging key stakeholders and understand the needs of the wider healthcare landscape and values of stakeholders</li> <li>3. Able to persuade and influence key stakeholders, across all levels and organisational boundaries</li> <li>4. Able to identify gaps, prioritise and develop middle-term plans (1-3 years) for the department and shows how the plans align to the sector's/organisation's long-term strategy</li> <li>5. Able to stay abreast of changes in the healthcare scene and identify potential opportunities where information may be useful in the future and inform longer term strategy</li> </ol>	<ol style="list-style-type: none"> <li>1. Role in implementing of new policies within institution</li> <li>2. Identification of competency gaps of staff and role in implementing the necessary education and training programmes to fulfil the criteria of the national specialisation framework</li> <li>3. Role in identifying gaps highlighted through customer satisfaction surveys and recommendations made</li> <li>4. Workplan(s) presented</li> <li>5. Contribution as organiser or participant in departmental retreats</li> </ol>

### Standard 3.2 Strategic planning

Performance criteria	Evidence	Evidence Examples
<p><b>Expert</b>  <b>Demonstrates understanding of culture, climate and needs of stakeholders both internal and external</b></p> <p><b>Demonstrates active participation in creating institutional/cluster/national health care policies</b></p> <p><b>Strategises with goals and actions at organisational and/or professional levels</b></p> <p><b>Plans with long term and sector wide perspective</b></p>	<ol style="list-style-type: none"> <li>1. Able to evaluate, influence and manage situations and stakeholders, with political astuteness by understanding diverse interest groups and power bases within organisations and the wider community and the dynamic between them so as to lead health services more effectively</li> <li>2. Able to recognise and interpret organisational culture to achieve desired results</li> <li>3. Able to anticipate implications of the policies created and plan ahead</li> <li>4. Able to develop long-term plans (over 3 years) for the pharmacy sector and show how the plans will align to the cluster's strategy and direction</li> <li>5. Able to continuously learn and demonstrate understanding of trends in healthcare, economy, technology and foresee future opportunities and challenges</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution as a member of a national workgroup or professional society e.g., Pharmacy Specialist Accreditation Board, Pre-registration Pharmacist Training Implementation Workgroup, Pharmaceutical Society of Singapore etc.</li> <li>2. Contribution as a member of relevant institutional/cluster strategic team/workgroup</li> <li>3. Role in the development of manpower training and service quality (e.g. redefinition of Pharmacy Technician job scope)</li> <li>4. Workplan(s) presented</li> <li>5. Contribution as a member of institution or cluster level committees</li> <li>6. Contribution as facilitator for discussion during strategic retreat or formulating strategic plan</li> </ol>



### Standard 3.3 Innovation

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates ability to identify and propose potential solutions to areas of improvement in the workplace proactively</p>	<ol style="list-style-type: none"> <li>1. Able to identify service or process gaps in the workplace</li> <li>2. Able to describe people, process and environment factors contributing to the gaps</li> <li>3. Able to participates in workplace improvement projects</li> </ol>	<ol style="list-style-type: none"> <li>1. Documentation of feedback or suggestions for improvement</li> <li>2. Participation in workplace improvement projects</li> </ol>
<p><b>Intermediate</b> Demonstrates ability to improve quality with minimal supervision</p>	<ol style="list-style-type: none"> <li>1. Able to think differently (outside the box) in order to improve quality with some supervision and is receptive to new ideas/suggestions from co-workers</li> </ol>	<ol style="list-style-type: none"> <li>1. Quality of the reviews conducted on routine processes and work done on small scale quality improvement projects</li> <li>2. Contribution as a team member of Clinical Practice Improvement Programme (CPIP)/Quality Improvement (QI)/Enhancing Performance, Improving Care (EPIC) projects or quality initiatives within the section or department</li> </ol>
<p><b>Advanced</b> Recognises and implements innovation</p>	<ol style="list-style-type: none"> <li>1. Able to make connections to seemingly unrelated questions, problems, or ideas by questioning, leading to improvement in the respective practice settings</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution as a team member of CPIP/QI/EPIC projects or quality initiatives within the department or institution</li> <li>2. Collaboration projects with other healthcare professionals to improve processes</li> <li>3. Principal Investigator for a research study that significantly improves the way things are done</li> <li>4. Contribution as project participant or lead involving the use of new models or technology</li> </ol>
<p><b>Expert</b> Takes the lead to ensure innovation produces improvement in areas of practice</p>	<ol style="list-style-type: none"> <li>1. Able to anticipate future trends in healthcare and is constantly challenging status quo to experiment with new concepts, leading others into new directions that ultimately result in innovative solutions</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution as a team leader for CPIP/QI/EPIC projects or quality initiatives within the department or institution</li> <li>2. Principal Investigator for a research study that innovatively improves the way things are done</li> <li>3. Contribution as a project leader for large scale or complex projects</li> </ol>

**Standard 3.4 Motivates individual (Motivational)\***



Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates self leadership to manage and motivate self to achieve goals</p>	<ol style="list-style-type: none"> <li>1. Able to be honest with oneself; aware of own strengths/weaknesses, preferred styles of learning and working, career anchors and direction, stressors and coping mechanisms etc.</li> <li>2. Able to be receptive towards feedback</li> <li>3. Able to self-reflect to identify areas of development in a positive manner and to seek assistance from appropriate individuals when needed</li> <li>4. Able to set SMART goals for oneself and practise a growth mindset to achieve desired outcomes</li> </ol>	<ol style="list-style-type: none"> <li>1. Self-reflections</li> <li>2. Documentation of goals setting and achievements</li> <li>3. Peer/supervisor/colleagues' feedback (descriptions of instances where feedback was received openly and constructively applied to personal development or improvement)</li> </ol>
<p><b>Intermediate</b> Demonstrates ability to motivate peers to achieve goals</p>	<ol style="list-style-type: none"> <li>1. Is highly driven in a cause(s), has a positive attitude and is determined to change negative experiences into growing experiences in order to lift his/her morale</li> <li>2. Able to work with and guide peers and provide peer support</li> </ol>	<ol style="list-style-type: none"> <li>1. Achievement of the objectives set for each appraisal period</li> <li>2. Feedback from pharmacy colleagues, workgroup lead and clinical leaders (descriptions of instances where the individual has provided mentorship or support to peers)</li> <li>3. Description of purpose, goals and targets set for oneself</li> </ol>

\*Taken from the AHEAD Leadership Framework by the Allied Health Division, Singapore General Hospital.

**Standard 3.4 Motivates individual (Motivational)\***






Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b> Demonstrates ability to motivate team to achieve goals</p>	<ol style="list-style-type: none"> <li>Has a positive attitude and is determined to change negative experiences of the team into growing experiences in order to lift the team's morale</li> <li>Is highly driven in a cause(s) and can foster that same enthusiasm in his/her staff by providing an environment that encourages motivated members within the team</li> <li>Able to understand their staff's needs, and is able to verbally persuade their staff to gain "buy-in" to their ideas and inspire them to greater heights</li> </ol>	<ol style="list-style-type: none"> <li>Achievement of goals set for the team</li> <li>Quality of constructive feedback to team members</li> <li>Contributions as a Chair/member of a workgroup committee e.g. a Quality Improvement project, pilot study, automation project, research</li> </ol>
<p><b>Expert</b> Demonstrates influential leadership to inspire and motivate individuals and teams</p>	<ol style="list-style-type: none"> <li>Has a positive attitude and is determined to change negative experiences of the group into growing experiences in order to lift the department's (and beyond) morale</li> <li>Is highly driven in a cause(s) and can foster that same enthusiasm in their staff by providing an environment that encourages motivated members in the department and beyond</li> <li>Able to understand other's (both within and outside of the organisation) needs, and is able to verbally persuade others to gain "buy-in" to their ideas and inspire them to greater heights</li> </ol>	<ol style="list-style-type: none"> <li>Achievement of goals set for the department and beyond</li> <li>Contributions as a Chair of a workgroup/committee e.g. Pharmacy Specialists Accreditation Board, Clinical Pharmacy in-charge</li> <li>Function as a mentor in a formal programme</li> <li>Observed morale and energy level, understanding and commitment of the team to achieving the goals set</li> </ol>

\*Taken from the AHEAD Leadership Framework by the Allied Health Division, Singapore General Hospital.



# Competency Standards for Pharmacists

## Domain 4 Management

Standard 4.1 	<u>Implementing organisational priorities</u>
Standard 4.2	<u>Managing resource utilisation</u>
Standard 4.3	<u>Establishing standards of practice</u>
Standard 4.4 	<u>Managing risk</u>
Standard 4.5	<u>Managing performance</u>
Standard 4.6 	<u>Managing change</u>

This Domain includes competency standards that relate to the way in which the pharmacist organises and delivers service objectives in a timely fashion. It also addresses the competency required by the pharmacist to plan and manage professional services and resources.

## Standard 4.1 Implementing organisational priorities

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation &amp; Intermediate</b>  <b>Demonstrates understanding of organisational priorities and its implications for the team</b></p>	<ol style="list-style-type: none"> <li>1. Able to understand and support department's priorities</li> <li>2. Able to explain organisational priorities and the rationale, and how they impact the team and stakeholders</li> </ol>	<ol style="list-style-type: none"> <li>1. Constructive feedback or suggestion that supports department's priorities</li> <li>2. Disseminated information to team on new policies and procedures</li> </ol>
<p><b>Advanced</b>  <b>Shapes the response of the team to achieve organisational priorities</b></p>	<ol style="list-style-type: none"> <li>1. Able to formulate strategies at the departmental level to achieve organisational priorities</li> </ol>	<ol style="list-style-type: none"> <li>1. Developed plans/protocols/guidelines</li> </ol>
<p><b>Expert</b>  <b>Accountable for the direct delivery of organisational priorities</b></p>	<ol style="list-style-type: none"> <li>1. Able to lead the committee in the formulation and implementation of the strategies, as well as the reporting of results directly to the hospital management</li> </ol>	<ol style="list-style-type: none"> <li>1. Results or progress achieved by the team</li> <li>2. Evidence of clear formulation of strategies, action plans and timelines</li> </ol>



## Standard 4.2 Managing resource utilisation

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates ability to identify appropriate resources required for a specified task</p> <p>Demonstrates ability to use identified resources appropriately to deliver task outcomes</p>	<ol style="list-style-type: none"><li>1. Able to apply available resources responsibly and to the extent/limitation needed to complete in accordance with organisational standards within allocated timelines</li><li>2. Able to assist with or contribute to a project's initiation, planning, execution, monitoring, control and closing with guidance</li><li>3. Able to plan, prioritise and manage time and self to complete assigned task(s) on time</li></ol>	<ol style="list-style-type: none"><li>1. Colleagues' feedback</li><li>2. Timely return from the wards to do discharges</li><li>3. Performed dispensing and counselling efficiently and effectively during peak period</li></ol>
<p><b>Intermediate</b> Demonstrates understanding of the process for effective resource utilisation</p>	<ol style="list-style-type: none"><li>1. Able to explain the processes for service delivery and the required resources to meet demands</li><li>2. Able to demonstrate appreciation of service demands through time management</li><li>3. Able to assist with or contribute to a project's initiation, planning, execution, monitoring, control and closing with minimal guidance</li></ol>	<ol style="list-style-type: none"><li>1. Colleagues' feedback</li><li>2. Gantt chart for projects</li><li>3. Rostering or workflow redesign to ensure adequate staffing</li></ol>



## Standard 4.2 Managing resource utilisation

Performance criteria	Evidence	Evidence Examples
<b>Advanced</b> Demonstrates ability to effectively manage resources	<ol style="list-style-type: none"><li>1. Able to negotiate for and manage resources within the section</li><li>2. Able to identify stakeholders for the project, communicate, obtain approvals/buy-in and manage resources required</li></ol>	<ol style="list-style-type: none"><li>1. Prepared roster that is able to meet service demands</li><li>2. Appropriate management of inventory including usage of consumables</li><li>3. Budget work plans that reflect the monitoring and interpretation of financial results e.g. operational budget</li></ol>
<b>Expert</b> Demonstrates ability to reconfigure the use of available resources	<ol style="list-style-type: none"><li>1. Able to lead the team in acquiring and optimising the resources provided; set clear and achievable milestones for the delivery of plans and monitor progress against them</li></ol>	<ol style="list-style-type: none"><li>1. Good allocation of resources to achieve objectives/Key Performance Indicators e.g. conducting relevant quality improvement projects, introduction of automation within the section or department, utilisation of Pharmacy Technicians to support the medication reconciliation process</li><li>2. Budget workplans that reflect the monitoring and interpretation of financial results e.g. capital budget for large scale projects</li><li>3. Good identification of talent for various roles in the team</li></ol>

### Standard 4.3 Establishing standards of practice

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates understanding of and conforms to relevant standards of practice, seeking guidance as needed</p>	<ol style="list-style-type: none"> <li>1. Able to access and use professional guidelines and standards, proactively seeks advice from more experienced colleagues to guide work practices when needed</li> <li>2. Able to ensure that personal conduct and own course of work meets practice standards</li> </ol>	<ol style="list-style-type: none"> <li>1. No feedback or report of regulatory, policy or procedural breaches</li> <li>2. Workplace-based assessments</li> </ol>
<p><b>Intermediate</b> Demonstrates understanding of, conforms to relevant standards of practice and contributes to the improvement of standards of practice</p>	<ol style="list-style-type: none"> <li>1. Able to provide constructive feedback appropriately to improve standards of practice</li> </ol>	<ol style="list-style-type: none"> <li>1. No feedback or report of regulatory, policy or procedural breaches</li> <li>2. Workplace-based assessments</li> <li>3. Provision of recommendation to Standard Operating Procedures (SOP), Work Instructions (WI) or Key Performance Indicators (KPI) etc.</li> </ol>
<p><b>Advanced</b> Accountable for the setting of targets and monitoring of standards of practice</p>	<ol style="list-style-type: none"> <li>1. Able to ensure that the team complies to relevant standards of practice</li> </ol>	<ol style="list-style-type: none"> <li>1. Reviewed and updated existing Standard Operating Procedures (SOP), Work Instructions (WI) or Key Performance Indicators (KPI) etc.</li> </ol>
<p><b>Expert</b> Accountable for the formulation, setting and implementation of standards</p>	<ol style="list-style-type: none"> <li>1. Able to develop, implement, and monitor new standards of practice within the organisation</li> <li>2. Able to benchmark to relevant standards of practice</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution towards establishing new protocol/guidelines or Standard Operating Procedures (SOP) on new processes e.g. Business Continuity Planning (BCP) plan for DORSCON Orange</li> </ol>



## Standard 4.4 Managing risk

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates understanding of the risk management process in one's own area of work and seeks guidance as needed</p>	<ol style="list-style-type: none"> <li>1. Able to understand and communicate the risks in one's own area of work (e.g. medication and patient safety, workplace and occupational health and safety, professional liability) and escalate when needed</li> <li>2. Able to comply with existing workplace policies and procedures which have been designed to reduce risk</li> </ol>	<ol style="list-style-type: none"> <li>1. Efforts towards reducing risk of near misses and errors in medication review and dispensing through compliance to policies and protocols</li> <li>2. Identifying/reporting medication safety issues, workplace/occupational hazards</li> </ol>
<p><b>Intermediate</b> Demonstrates ability to identify and resolve risk management issues according to policy/protocol</p>	<ol style="list-style-type: none"> <li>1. Able to effectively manage risk to reduce the potential for patient harm</li> <li>2. Able to comply with existing workflow protocols to manage operational risks</li> </ol>	<ol style="list-style-type: none"> <li>1. Efforts towards reducing risk of near misses and errors in medication review and dispensing through compliance to policies and protocols</li> </ol>
<p><b>Advanced</b> Accountable for developing risk management policies/protocols for the team, including identifying and resolving new risk management issues</p>	<ol style="list-style-type: none"> <li>1. Able to develop/revise risk management policies including identifying and resolving new risk management issues at the departmental level</li> </ol>	<ol style="list-style-type: none"> <li>1. Reviewed and updated existing work procedures to mitigate risks whenever there are changes to existing factors that impact risks</li> <li>2. Recommendations provided to mitigate/resolve identified risks</li> </ol>
<p><b>Expert</b> Accountable for developing risk management policies/procedures at a higher level, including identifying and resolving new risk management issues</p>	<ol style="list-style-type: none"> <li>1. Able to identify new risks, evaluate its impact on patients and organisation in the strategic plans, develop risk minimisation strategies, address crises and threats and monitor the risks</li> </ol>	<ol style="list-style-type: none"> <li>1. Reviewed and updated existing department/divisional/institutional/cluster/national policies whenever there are changes to existing factors that impacts risks</li> <li>2. Proactively builds systems to monitor performance measures so that problems can be identified early, and risk mitigation measures can be taken e.g. supply-chain risks</li> </ol>

## Standard 4.5 Managing performance

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation and Intermediate</b>  <b>Understands the duties and responsibilities of own job scope and the performance management process</b></p> <p><b>Follows professional code of conduct and organisational policies/procedures relating to performance management</b></p>	<ol style="list-style-type: none"> <li>1. Able to access and describe one's job description/duty requirements and how one's work performance is managed and assessed; proactively seeks clarification from appropriate individuals as required</li> <li>2. Able to review own performance against specified objectives with supervisors and takes personal responsibility for own performance</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from supervisors and peers</li> <li>2. Individual development plan and achievements</li> <li>3. Weekly/monthly report to supervisors, managing performance of Pharmacy Technicians/interns/pre-registration pharmacists</li> <li>4. Objective evidence to support achievements of targets set</li> </ol>
<p><b>Advanced</b>  <b>Accountable for performance management for the team</b></p>	<ol style="list-style-type: none"> <li>1. Able to assess team performance through the appropriate documentation and review process</li> <li>2. Able to work with team members within their area of strength to reach achievable goals and strategies that are consistent with the objectives established for the team</li> <li>3. Able to set clear expectations and targets that are SMART: Specific, Measurable, Achievable, Realistic and Time-bound</li> <li>4. Able to provide constructive feedback*, encouragement and support to team members. This would include identifying and addressing work issues (e.g. excessive workload, conflict. contributing to unsatisfactory performance)</li> </ol> <p><i>*Feedback may include personnel expectations, achievements and contributions</i></p>	<ol style="list-style-type: none"> <li>1. Quality of documented feedback provided to team members</li> <li>2. Achievement of targets for department/team Balance Scorecard (BSC) Key Performance Indicators (KPIs) as reflected in the reports submitted to HOD</li> </ol>



## Standard 4.5 Managing performance

Performance criteria	Evidence	Evidence Examples
<b>Expert</b> <b>Accountable for performance management at a higher level (e.g. organisational or health system)</b>	<ol style="list-style-type: none"><li>1. Able to assess department performance through the appropriate documentation and review process</li><li>2. Able to work with the respective pharmacy sections and/or others outside of the department, to establish achievable goals and strategies that are consistent with the objectives established for the department</li><li>3. Able to set clear expectations and provide constructive feedback, encouragement and support to staff</li></ol>	<ol style="list-style-type: none"><li>1. Achievement of department targets and explanations of failure to meet targets, as reflected in reports or presentations to Senior Management</li><li>2. Achievement of institutional KPIs e.g. budget, outcomes of clinical services, medication safety targets</li><li>3. Achievement of desired results as reflected in the Employee Engagement/Climate Surveys</li></ol>



## Standard 4.6 Managing change

Performance criteria	Evidence	Evidence Examples
<b>Foundation</b> Demonstrates understanding and supports change management efforts	<ol style="list-style-type: none"> <li>1. Able to seek clarification from appropriate individuals for implementation of change or new ideas</li> <li>2. Able to suggest areas which will benefit from change</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from colleagues on the support/participation provided by the individual</li> </ol>
<b>Intermediate</b> Demonstrates ability to implement change management	<ol style="list-style-type: none"> <li>1. Able to show understanding of the need for thoughtful planning and consultation with, and involvement of the stakeholders affected by the changes</li> </ol>	<ol style="list-style-type: none"> <li>1. Activities planned to ensure that subordinates and peers understand the rationale and need for change e.g. to comply to accreditation standards, new work processes, new models of care delivery, introduction of new technology, job redesign</li> </ol>
<b>Advanced</b> Demonstrates ability to manage a process of change for the team	<ol style="list-style-type: none"> <li>1. Able to show thoughtful planning, sensitive implementation, and consultation with, and involvement of, the stakeholders affected by the changes, ultimately identifying the benefits achieved by the change and getting buy-in from the relevant stakeholders</li> <li>2. Able to redirect, renegotiate, reprioritise change management if required</li> </ol>	<ol style="list-style-type: none"> <li>1. Well planned and executed activities to achieve the desired results of a project/programme</li> <li>2. Feedback from relevant stakeholders</li> <li>3. Documentation of how change management framework is applied</li> <li>4. Contribution to change efforts to address community health needs</li> </ol>
<b>Expert</b> Demonstrates ability to manage a process of change at a higher level (within or beyond departmental/divisional boundaries)	<ol style="list-style-type: none"> <li>1. Able to lead others in the thoughtful planning <b>and</b> sensitive implementation, and consult with, and involve the stakeholders affected by the changes, ultimately: Identifying the benefits achieved by the change; Ensuring that the change is sustainable and; Influencing and managing any resistance to change</li> <li>2. Able to use relevant performance indicators to measure achievements, explain variations from the plan and make appropriate adjustments</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from relevant stakeholder</li> <li>2. Achievement of desired results as reflected in the Employee Engagement/Climate Surveys</li> <li>3. Achievement of objectives for the change initiative and the level of engagement from the stakeholders to sustain the change efforts.</li> <li>4. Contribution to system-level change to address population health needs</li> </ol>



# Competency Standards for Pharmacists

## Domain 5 Education, Training and Development

Standard 5.1 	<u>Developing self and others</u>
Standard 5.2 	<u>Conducting education and training</u>

This Domain includes competency standards which supports development of self and others, including coaching and mentoring. It also includes supporting or conducting formal education and training programmes. These standards help to build capability and promote a learning culture within and beyond the pharmacy profession.

## Standard 5.1 Developing self and others

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates commitment for self-development</b></p> <p><b>Demonstrates awareness of coaching or mentoring processes</b></p>	<ol style="list-style-type: none"> <li>1. Able to maintain a positive attitude towards lifelong learning and the willingness to learn, unlearn and relearn</li> <li>2. Able to self-reflect and identify learning needs, to plan one's own personal and professional development (self-direct learning) and seek guidance from appropriate individuals when needed</li> <li>3. Able to understand the benefits that coaching and/or mentoring can bring to one's personal and professional development</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from peers/colleagues/supervisor</li> <li>2. Regular reviews of own Continuing Professional Development (CPD) plan with supervisor/reporting officer</li> <li>3. Mentee in a mentoring programme (formally or informally)</li> </ol>
<p><b>Intermediate</b>  <b>Demonstrates commitment for self-development and ability to support peer-learning</b></p> <p><b>Demonstrates ability to facilitate learning through coaching or mentoring processes</b></p>	<ol style="list-style-type: none"> <li>1. Able to keep own knowledge and skills up to date</li> <li>2. Able to take responsibility for own learning and development including identifying self-learning needs and seeking out learning opportunities to meet those needs</li> <li>3. Able to facilitate a collaborative and inclusive environment for peer-learning</li> <li>4. Able to provide constructive feedback for development of others through coaching or mentoring processes</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from students/peers/colleagues/supervisor e.g., from peer sharing at journal clubs, case study discussions etc.</li> <li>2. Regular reviews of own Continuing Professional Development (CPD) plan with supervisor/reporting officer</li> <li>3. Contribution as a PECT I/pre-registration pharmacist training programme facilitator/preceptor</li> <li>4. Seeks advice from industry leaders or experienced individuals whom they regard as mentors</li> </ol>

## Standard 5.1 Developing self and others

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b>  <b>Demonstrates commitment for developing others within the team</b></p> <p><b>Demonstrates ability to effectively coach or mentor others within the team</b></p>	<ol style="list-style-type: none"> <li>1. Able to identify learning needs and desired outcomes of others</li> <li>2. Able to manage the coaching or mentoring process and relationship with coachee or mentee</li> <li>3. Able to monitor the achievement of goals established together with coachee or mentee</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from peers/colleagues/supervisor/coachees/mentees</li> <li>2. Conducting pharmacist development workshops (e.g., Portfolio Building Workshop)</li> <li>3. Appointed mentor in a formal mentoring programme</li> </ol>
<p><b>Expert</b>  <b>Demonstrates commitment for developing others beyond the team</b></p> <p><b>Demonstrates ability to effectively coach or mentor beyond the team</b></p>	<ol style="list-style-type: none"> <li>1. Able to identify potential in others and provide opportunities for them to meet learning needs</li> <li>2. Able to provide guidance and constructive feedback to mentees and monitor their progress at institutional/cluster/national level</li> <li>3. Able to apply active listening and questioning skills to understand the needs, strengths and weakness of mentees from a different background/profession so as to support mentees in their development</li> </ol>	<ol style="list-style-type: none"> <li>1. Feedback from peers/colleagues/supervisor/coachees/mentees</li> <li>2. Appointed mentor/advisor in a formal mentoring programme</li> <li>3. Contribution as a member in the Pharmacist Training and Development Committee at national level</li> </ol>

## Standard 5.2 Conducting Education and Training

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates ability to assist in the training of others in the workplace</p>	<ol style="list-style-type: none"> <li>1. Able to share knowledge, experience and constructive feedback with others in the workplace for their development</li> <li>2. Able to assist in workplace-based learning</li> </ol>	<ol style="list-style-type: none"> <li>1. Conducting drug or pharmacy-related presentations to pharmacy staff/trainers and other colleagues</li> <li>2. Records of learning plans and/or appointments in teaching roles</li> <li>3. Singapore Pharmacy Council (SPC) Continuing Professional Education (CPE) record</li> <li>4. Portfolio of practice</li> </ol>
<p><b>Intermediate</b> Demonstrates ability to conduct teaching efficiently according to a lesson plan with supervision from a more experienced colleague</p>	<ol style="list-style-type: none"> <li>1. Able to appropriately use a range of educational methods and technologies to achieve intended learning outcomes</li> </ol>	<ol style="list-style-type: none"> <li>1. Conducting educational programmes including talks/conferences/training to staff/students</li> <li>2. A preceptor for students and trainees</li> <li>3. Training log of trainees</li> <li>4. Educational materials developed</li> <li>5. Feedback from trainees/supervisor</li> </ol>





## Standard 5.2 Conducting Education and Training

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b>  <b>Demonstrates ability to assess the performance and learning needs of others</b></p> <p><b>Demonstrates ability to plan a series of effective learning experiences for others</b></p>	<ol style="list-style-type: none"> <li>1. Able to provide constructive feedback to trainees on their performance</li> <li>2. Able to track and monitor trainee’s progress towards achievement of their learning goals and objectives</li> <li>3. Able to define learning objectives, plan learning activities to address them and assess the learning outcomes</li> <li>4. Able to customise the delivery of training to suit the needs of the trainee based upon an assessment of the trainee’s knowledge, skills, attitudes, and abilities and interests</li> </ol>	<ol style="list-style-type: none"> <li>1. Sample of feedback documented in the formative and summative assessment forms; appraisal forms provided to trainees etc.</li> <li>2. Sample of learning activities/programmes planned for healthcare professionals, with defined objectives, course outline, delivery and assessments</li> <li>3. Documentation/feedback that highlights learning plans and achievements of learning goals</li> <li>4. Contribution as an assessor in the formal education and training of undergraduate and postgraduate students that prepare them for practice</li> <li>5. Feedback from learners</li> </ol>
<p><b>Expert</b>  <b>Shapes, contributes to, or is accountable for the creation or development of education and training at institutional/cluster/national level or educational institutions</b></p>	<ol style="list-style-type: none"> <li>1. Able to understand the current and future challenges of healthcare and its implications for the healthcare profession and competencies needed</li> <li>2. Able to identify opportunities to maintain and improve the quality of practice</li> <li>3. Able to devise and implement a plan for assessing and improving the quality of the course of study including quality of preceptors as appropriate</li> <li>4. Able to manage institutional or national resources effectively</li> <li>5. Able to design and manage a course of study at the institution or national level with appropriate use of teaching, assessment and study methodology</li> <li>6. Able to develop effective educational standards or governance frameworks</li> </ol>	<ol style="list-style-type: none"> <li>1. Course/Programme Leader of workshop, seminar, residency programme or the equivalent</li> <li>2. Contribution as a member of the Programme Evaluation Committee</li> <li>3. Sample of feedback/documented evaluations on preceptors/trainers' performance</li> <li>4. Contribution in developing curriculum, training blueprint, and educational progress report</li> <li>5. Feedback on educational/training programmes provided by trainers and/or trainees</li> <li>6. Involvement in strategic workgroup pertaining to Continuing Professional Development</li> </ol>



# Competency Standards for Pharmacists

## Domain 6 Research and Evaluation

Standard 6.1	<u>Evaluating literature/data critically and identifying evidence/practice gaps</u>
Standard 6.2	<u>Developing and evaluating protocols</u>
Standard 6.3	<u>Disseminating evidence</u>
Standard 6.4 	<u>Guiding others undertaking research/project</u>
Standard 6.5 	<u>Establishing partnerships</u>

This Domain includes competency standards that address the capability of pharmacists to undertake **research and evaluation such as systematic reviews or meta-analysis, drugs use evaluations, quality improvement projects**, to inform effective practice. It also covers their ability to analyse and synthesise information from research and evaluation, and to identify and respond to gaps in evidence or practice.

## Standard 6.1 Evaluating literature/data critically and identifying evidence/practice gaps

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates ability to evaluate and review literature/data</b></p>	<ol style="list-style-type: none"> <li>1. Able to identify methodical, statistical or ethical issues impacting the study or project design and consequent validity and applicability of results</li> <li>2. Able to determine the body of evidence in totality and rationalise the conclusions that can be made</li> </ol>	<ol style="list-style-type: none"> <li>1. Presentations made in journal clubs</li> <li>2. Drug information/query from other healthcare professional or patients/public</li> </ol>
<p><b>Intermediate</b>  <b>Demonstrates ability to critically evaluate and review medical literature/data as well as suggest changes to practice</b></p>	<ol style="list-style-type: none"> <li>1. Able to systematically evaluate a research paper and derive an appropriate conclusion based on methodology's strengths and weaknesses</li> <li>2. Able to decide if study results can be applied in a local setting</li> <li>3. Able to suggest solutions/changes to practice or processes</li> </ol>	<ol style="list-style-type: none"> <li>1. Presentations made in journal club</li> <li>2. Continuing education (CE) sessions on topics to fellow healthcare professionals provided</li> <li>3. Contribution as a facilitator for evidence-based medicine workshops</li> <li>4. Publication of journal review article within the institution/department</li> <li>5. Projects to improve practice e.g. projects on near-misses, waiting times or any other Quality Improvement)</li> </ol>

## Standard 6.1 Evaluating literature/data critically and identifying evidence/practice gaps

Performance criteria	Evidence	Evidence Examples
<p><b>Advanced</b>  <b>Demonstrates ability to critically evaluate, review medical literature/data, and identify evidence and practice gaps, applying evidence-based practice at departmental/institutional level</b></p>	<ol style="list-style-type: none"> <li>1. Able to interpret and synthesise research results and apply the findings to influence practice</li> <li>2. Able to identify evidence gaps requiring further research</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution to the formulation or update of practice guidelines for the department or institution</li> <li>2. Contribution to formulary decision-making processes in Pharmacy and Therapeutics Committee</li> <li>3. Publication of systematic reviews or meta-analysis on clinical topics</li> <li>4. Scientific presentations within or outside of department (i.e. hospital conference, doctors' Continuing Education/ departmental meetings)</li> <li>5. Publication of research article(s) in the last 3 years in any journal</li> <li>6. Recently obtained grant funding of any level to conduct research</li> </ol>
<p><b>Expert</b>  <b>Demonstrates application of critical evaluation skills at a national or international level and/or undertakes peer review activities within practice and/or identify gaps</b></p>	<ol style="list-style-type: none"> <li>1. Able to interpret and synthesise research results and apply the findings to influence practice at national or international level</li> <li>2. Able to understand the barriers, constraints and enablers that can result in successful implementation of research outcomes</li> <li>3. Able to identify major evidence/practice gaps requiring further research and drive research directions for the area of interest</li> </ol>	<ol style="list-style-type: none"> <li>1. Reviewer or member of editorial committee for journals and/or part of a conference committee performing abstract review</li> <li>2. Member of an Institutional Review Board (IRB)/Domain Specific Review Board (DSRB)</li> <li>3. Contribution to the formation or update of practice guidelines/policies/protocols at the national or international level</li> <li>4. Publication of 2 or more research articles in the last 3 years in any journal or at least 1 article in a journal with impact factor of 4 and above</li> <li>5. National or international grant funding to conduct research obtained within the last 3 years</li> </ol>

## Standard 6.2 Developing and evaluating research protocols

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b>  <b>Demonstrates understanding of the line(s) of approvals and/or processes required in formulating and implementing a project</b></p>	<ol style="list-style-type: none"> <li>1. Able to access information regarding ethics or governance approval</li> <li>2. Able to describe ethics or governance approval submission requirements including compliance to relevant legislations e.g. HBRA, PDPA</li> <li>3. Able to successfully complete minimum training requirement for research investigators before participating as a member of a research or qualitative improvement projects. E.g. Collaborative Institutional Training Initiative (CITI), Clinical Practice Improvement Programme (CPIP) Toolkit workshop, Root Cause Analysis (RCA) course</li> <li>4. Able to list all the necessary application under guidance, for a research protocol</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution at the various workshops or programmes</li> </ol>
<p><b>Intermediate</b>  <b>Demonstrates ability to describe the core features of research and evaluation protocols</b></p>	<ol style="list-style-type: none"> <li>1. Able to identify and explain the core features of research including ethics</li> <li>2. Able to demonstrate general understanding of the principles of research governance and methodology</li> <li>3. Able to evaluate studies and determine if methodology employed is appropriate</li> </ol>	<ol style="list-style-type: none"> <li>1. Presentations made in a journal club/quality related forums</li> <li>2. Formal sharing/teaching session(s) on evidence-based guidelines to fellow healthcare professionals</li> <li>3. Involvement in Quality Improvement Projects</li> </ol>



## Standard 6.2 Developing and evaluating research protocols

Performance criteria	Evidence	Evidence Examples
<b>Advanced</b> Demonstrates ability to lead in the development and conduct of research and evaluation	<ol style="list-style-type: none"><li>1. Able to apply appropriate research methodologies to develop research protocol</li><li>2. Able to ethically conduct research</li><li>3. Able to assemble the necessary resources to undertake a research project</li></ol>	<ol style="list-style-type: none"><li>1. Recent (in the last 3 years) or current Co-Investigator and/or Principal Investigator (PI) of a study</li><li>2. Research protocols reviewed and authorised for the department</li></ol>
<b>Expert</b> Demonstrates ability to critically review research and evaluation protocols and write grant proposals	<ol style="list-style-type: none"><li>1. Able to <i>constructively</i> and <i>systematically</i> critique research protocols written by fellow healthcare professionals</li><li>2. Able to perform critical appraisal and provide constructive feedback to authors</li><li>3. Able to write a successful research grant proposal</li></ol>	<ol style="list-style-type: none"><li>1. Recent (in the last 3 years) or current PI of a grant-funded study and/or research mentor</li><li>2. Member of a grant approval committee</li><li>3. Member of an Institutional Review Board (IRB)/Domain Specific Review Board (DSRB)</li><li>4. Publication of articles that critique research methodologies</li></ol>

## Standard 6.3 Disseminating evidence

Performance criteria	Evidence	Evidence Examples
<b>Foundation</b> <b>Demonstrates ability to generate evidence for presentation under guidance</b>	<ol style="list-style-type: none"> <li>1. Able to participate under guidance in project data collection and analysis, and communicate findings and recommendations clearly via abstract or poster/oral presentation</li> </ol>	<ol style="list-style-type: none"> <li>1. Poster or abstract or publication as a team member</li> </ol>
<b>Intermediate</b> <b>Demonstrates ability to generate evidence suitable for presentation</b>	<ol style="list-style-type: none"> <li>1. Able to analyse, interpret and translate research result into meaningful data</li> <li>2. Able to communicate scientific facts and ideas in a clear and compelling way</li> </ol>	<ol style="list-style-type: none"> <li>1. Abstract submission to a meeting</li> <li>2. Presentation of data e.g. near-misses, waiting times (QI projects), quality indicators, research results at meetings</li> </ol>
<b>Advanced</b> <b>Demonstrates ability to generate new evidence accepted for presentation at research symposia (e.g. conferences, seminars or forums) or publication</b>	<ol style="list-style-type: none"> <li>1. Able to organise the different elements of a research publication into a coherent document<sup>13</sup></li> <li>2. Able to address reviewers' comments on manuscripts</li> <li>3. Able to influence practice/translate findings from bench side to bedside</li> </ol>	<ol style="list-style-type: none"> <li>1. Accepted abstract with poster or oral presentation at a research symposium</li> <li>2. Publication of a research project in a peer-reviewed medium</li> </ol>
<b>Expert</b> <b>Demonstrates ongoing anchor (i.e. first, corresponding or last) authorship of primary evidence and outcomes in peer-reviewed media</b>  <i>Note: Anchor authorship refers to participation as key author of the study</i>	<ol style="list-style-type: none"> <li>1. Publish a series of studies or guidelines to address significant research questions within a particular area</li> </ol>	<ol style="list-style-type: none"> <li>1. Minimum 10 publications in the last 5 years on research projects in peer-reviewed media</li> <li>2. Anchor author of studies</li> <li>3. Presentation at national or international conferences for past 5 years</li> </ol>

### Standard 6.4 Guiding others undertaking research/project

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Aware of the research activities within the department</p>	<ol style="list-style-type: none"> <li>1. Able to share knowledge of the different research/project activities within the department</li> </ol>	
<p><b>Intermediate</b> Able to provide guidance on research methodology</p>	<ol style="list-style-type: none"> <li>1. Aware of the research activities around a particular subject and be knowledgeable enough about the subject in order to guide the student/junior on how to choose a topic, shape and refine the research question, taking into account the practical considerations about the planning needed and costs</li> </ol>	<ol style="list-style-type: none"> <li>1. Functions as a supervisor or facilitator of research projects (directly or indirectly)</li> </ol>
<p><b>Advanced</b> Able to supervise research in collaboration with research experts</p>	<ol style="list-style-type: none"> <li>1. Able to demonstrate good understanding of the principles of research governance and methodology</li> <li>2. Able to demonstrate ability to instruct and guide supervisee together with the research expert(s)</li> <li>3. Able to advise on effective research planning</li> <li>4. Able to recommend appropriate resources and systems for the research process</li> <li>5. Able to evaluate the information collected and results</li> </ol>	<ol style="list-style-type: none"> <li>1. Research projects performed by healthcare staff (including pre-registration pharmacists, pharmacy technicians, undergraduate students, nurses) which are directly supervised</li> </ol>
<p><b>Expert</b> Is a research project supervisor for postgraduate students e.g. Masters, PharmD, Residents, PhDs and pharmacists</p>	<ol style="list-style-type: none"> <li>1. Able to ensure compliance with ethical and legal requirements and carried out to the institutional research policies and guidelines</li> <li>2. Able to demonstrate ability to instruct and guide post-graduate students independently</li> <li>3. Able to advise on how to navigate the system to find the right collaboration partners</li> <li>4. Able to discuss and recommend solutions to problems encountered and provide relevant feedback for each process</li> </ol>	<ol style="list-style-type: none"> <li>1. Main research project supervisor for postgraduate students e.g. Masters, PharmD, Residents, PhDs</li> <li>2. Mentor for grant applicants</li> <li>3. Functions as a department representative to authorise research protocols within the department</li> </ol>



## Standard 6.5 Establishing partnerships

Performance criteria	Evidence	Evidence Examples
<p><b>Foundation</b> Demonstrates ability to work as a member of a project team with guidance when needed</p>	<ol style="list-style-type: none"> <li>1. Able to possess communication and interpersonal skills at the team level</li> <li>2. Able to contribute to the project success under guidance</li> <li>3. Able to understand how one’s own role contributes to the project team</li> <li>4. Able to accept and deliver own share of work with reasonable quality in a timely manner</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution as a team member of a project</li> <li>2. Notes of meeting/minutes</li> </ol>
<p><b>Intermediate</b> Demonstrates ability to work as a member of a project team</p>	<ol style="list-style-type: none"> <li>1. Able to possess effective communication and interpersonal skills at the team level</li> <li>2. Able to actively contribute as a team member of a project</li> </ol>	<ol style="list-style-type: none"> <li>1. Contribution as a team member of a project</li> <li>2. Notes of meeting/minutes</li> </ol>
<p><b>Advanced</b> Demonstrates ability to establish multidisciplinary links to conduct research projects</p>	<ol style="list-style-type: none"> <li>1. Able to develop a network of research collaborators</li> <li>2. Ability to identify key partners</li> <li>3. Able to effectively communicate and share knowledge with researchers in other health/non-science disciplines</li> </ol>	<ol style="list-style-type: none"> <li>1. Documentation of correspondence (e.g. email between pharmacist and researchers from other disciplines) on collaborative research activities</li> </ol>
<p><b>Expert</b> Demonstrates leadership within multidisciplinary research teams concerning the conduct of research</p>	<ol style="list-style-type: none"> <li>1. Able to steer and coordinate the multi-disciplinary research team in the direction of a research objective</li> </ol>	<ol style="list-style-type: none"> <li>1. Principal Investigator (PI) of multidisciplinary studies, PI of awarded grants with multidisciplinary involvement</li> </ol>

# Competency Standards for Pharmacists



## Domain 7 Professionalism

Standard 7.1	<u>Professionalism and Code of Ethics</u>
Standard 7.2	<u>Compliance to Legal Frameworks and Requirements</u>
Standard 7.3	<u>Ethical Practice</u>

This Domain includes competency standards that address the professional conduct and accountability of pharmacists.

Competencies under Domain 7 on Professionalism apply across levels.

For implementation, a separate portfolio assessment for Domain 7 is *not* required as professionalism is subsumed under professional practice and should have been attained at foundation level before a pharmacist embarks on higher level competencies

## Standard 7.1: Professionalism and Code of Ethics

Performance criteria	Evidence
<p><b>SELF</b> Demonstrates a sense of duty and accountability to patients, society, and the profession</p>	<ol style="list-style-type: none"> <li>1. Understands the role of being a pharmacist and the commitment to be one (professional identity)</li> <li>2. Possesses a sense of duty, ownership and work with commitment, diligence and care</li> <li>3. Accepts responsibilities for professional judgements, decisions, actions and omissions and accountability for the outcomes achieved</li> <li>4. Conducts oneself in a professional matter to uphold public and other healthcare professionals' trust and confidence in pharmacists</li> </ol>
<p><b>PATIENT</b> Demonstrates professional behaviour that regards the health and care of the patient as priority</p>	<ol style="list-style-type: none"> <li>1. Able to apply professional judgement in the supply of any substance, medicinal product or medical appliance which the pharmacist knows, or has reason to believe, is intended to be used in a manner which would be detrimental to health</li> <li>2. Able to advise the member of the public on the appropriate medicinal product to purchase and not to encourage him to obtain more than he may require</li> <li>3. Able to provide professional advice and counselling on medication at every opportunity only to refrain when deemed in the best interest of the patient</li> <li>4. Able to recognise and describe the limits in their professional experience or expertise and to seek consultation with a professional colleague, and with other health professionals when deemed to be in the best interest of the patient</li> </ol>
<p><b>PHARMACY PRACTICE</b> Demonstrates highest standard of professional services in the area of providing pharmaceutical services, providing professional advice and counselling, pharmacy operations, systems and methods used in a pharmacy</p>	<ol style="list-style-type: none"> <li>1. Able to conduct oneself in a professional matter so as to uphold public and other healthcare professionals' trust and confidence in pharmacists</li> <li>2. Able to describe the provision of a reasonably comprehensive range of pharmaceutical services where premises are registered and operate as a pharmacy</li> <li>3. Able to describe the systems and methods in a pharmacy that minimise the risk of error or contamination in the preparation, dispensing and supply of medicinal products</li> </ol>
<p><b>INTERPROFESSIONAL</b> Demonstrates professional behaviour for inter-professional practice</p>	<ol style="list-style-type: none"> <li>1. Able to maintain professional relationships and rapport with colleagues and other healthcare professionals</li> <li>2. Able to engage in professional behaviour or conduct towards colleagues and other healthcare professionals that is consistent with the Codes of Ethics</li> <li>3. Able to respect the trust and confidence placed on fellow colleagues and other healthcare professionals by the patients</li> </ol>

### Standard 7.2: Compliance to Legal Frameworks and Requirements

Performance criteria	Evidence
<b>Demonstrates compliance with statute law, guidelines, standards and code of ethics</b>	1. Able to explain the legislations and applies the requirement of the statute law that directly impact on professional activities

### Standard 7.3: Ethical Practice

Performance criteria	Evidence
<b>Demonstrates personal and professional integrity</b>	1. Able to conduct professional activities according to expected standards articulated in the Code of Ethics 2. Able to recognise and discuss situations whereby conditions of service will compromise his/her professional independence



# 5.2 Appendix B

## Administrative Document

This document indicates the expected demonstration of competency based on job grades in public healthcare institutions.

Intermediate	Advanced	Expert
<i>Scope of practice experience<sup>b</sup></i>		
<ul style="list-style-type: none"> <li>▪ Able to successfully complete tasks independently</li> <li>▪ Assistance from an expert may be required from time to time</li> <li>▪ Focus is on applying and enhancing knowledge or skill</li> </ul>	<ul style="list-style-type: none"> <li>▪ Able to perform the actions associated with this skill without assistance</li> <li>▪ Recognised within the organization as “person to ask” when difficult questions arise</li> <li>▪ Focus is on broad organizational or professional issues</li> </ul>	<ul style="list-style-type: none"> <li>▪ Recognised as an authority in an area of expertise, alongside a breadth of experience</li> <li>▪ Able to explain issues in relation to broader organizational issues</li> <li>▪ Creates new applications and processes</li> <li>▪ Focus is strategic</li> </ul>
<i>Job Grade</i>		
<b>PH03</b>	<b>PH04 – PH05</b>	<b>PH06</b>
<i>Demonstration of competency, relevant to portfolio<sup>c</sup></i>		
<ul style="list-style-type: none"> <li>▪ Meets at least 85% of competency standards at Intermediate Level and above</li> </ul>	<ul style="list-style-type: none"> <li>▪ PH04: Meets at least 70% of competency standards at Advanced Level and above</li> <li>▪ PH05: Meets at least 80% of competency standards at Advanced Level and above, with 20% of competency standards meeting Expert Level</li> </ul>	<ul style="list-style-type: none"> <li>▪ PH06: Meets at least 40% of competency standards at Expert Level</li> </ul>

**References:**

<sup>a</sup> Adapted from An Advanced Pharmacy Practice Framework for Australia 2012. The Advanced Pharmacy Practice Framework Steering Committee on behalf of the pharmacy profession in Australia. Accessed at <http://advancepharmacypractice.com.au/download/framework/advanced-pharmacy-practice-framework.pdf> on 11 May 2020

<sup>b</sup> Adapted from Competencies Proficiency Scale. Office of Human Resources at the National Institute of Health. Accessed at <https://hr.nih.gov/working-nih/competencies/competencies-proficiency-scale> on 11 May 2020

<sup>c</sup> The demonstration of competence is extrapolated from a competence survey (n=136) conducted in November 2014 through April 2015 among pharmacists in the public sector comprising of primary healthcare, specialised centres and tertiary institutions.



## 6. References

1. Adapted from Competencies Proficiency Scale. Office of Human Resources at the National Institute of Health. Accessed at <https://hr.nih.gov/working-nih/competencies/competencies-proficiency-scale> on 11 May 2020.
2. Adapted from The RPS Advanced Pharmacy Framework (APF) 2013. The Royal Pharmaceutical Society. Accessed online at <http://www.rpharms.com/resources/frameworks/advanced-pharmacy-framework-apf> on 11 May 2020.
3. Council on Credentialing in Pharmacy. Scope of contemporary pharmacy practice: roles, responsibilities, and functions of pharmacists and pharmacy technicians. J Am Pharm Assoc 2010;50:e35-e69.
4. Complexity of case in Mini-CEX and case-based discussion. Australasian College for Emergency Medicine (ACEM) Accessed online at [https://acem.org.au/getmedia/60a057ee-4012-43f7-946a-a1272b2d3b36/CbD\\_Form\\_2020](https://acem.org.au/getmedia/60a057ee-4012-43f7-946a-a1272b2d3b36/CbD_Form_2020)
5. Centers for Disease Control and Prevention (CDC). (2013). "Community Health Assessment and Group Evaluation (CHANGE) Action Guide: Building a Foundation of Knowledge to Prioritize Community Needs." Accessed online at <https://stacks.cdc.gov/view/cdc/5720> on 23 April 2024.
6. FIP Statement of Professional Standards Continuing Professional Development. Accessed online at <https://www.fip.org/file/1544> on 11 May 2020.
7. Kindig, D., & Stoddart, G. (2003). "What is population health?" American Journal of Public Health, 93(3), 380-383.
8. National Competency Standards for Pharmacists in Australia (2016). The Pharmaceutical Society of Australia Ltd., 2016.
9. Driessen EE, Heeneman S, Van Der Vleuten C.P.M., 2013. Portfolio assessment. In: Dent JA, Harden RM (Eds), A Practical Guide for Medical Teachers. Fourth Edition. Elsevier Churchill Livingstone (Chapter 39).
10. Definition by the Joint Research Compliance Office. Accessed online at <https://www.imperial.ac.uk/research-and-innovation/research-office/research-governance-and-integrity/what-is-research-governance/> on 11 May 2020.
11. Alves, J. C., Lovelace, K. J., Manz, C. C., Matsypura, D., Toyasaki, F., and Ke, K. (2006). A cross-cultural perspective of self-leadership. J. Manag. Psychol. 21, 338–359.



## 6. References

12. World Health Organization. (2021). "Social determinants of health." Accessed online at [https://www.who.int/health-topics/social-determinants-of-health#tab=tab\\_1](https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1) on 23 April 2024.
13. Gray, C. (2007). Research competencies framework. Faculty of General Dental Practice (UK) The Royal College of Surgeon of England.
14. Competency Standards for Pharmacists in Singapore (Entry-to-Practice). The Singapore Pharmacy Council, 2011.
15. Competency Standards for Pharmacists in Advanced Practice. Ministry of Health Singapore, 2017.
16. An Advanced Pharmacy Practice Framework for Australia. The Advanced Pharmacy Practice Framework Steering Committee. Pharmacy 2015, 3, 13-26.
17. The Advanced to Consultant Level Framework. The Competency Development and Evaluation Group (CoDEG) UK, 2005.
18. Challis M. AMEE Medical Education Guide No 11 (revised): Portfolio-based learning and assessment in medical education. Medical Teacher 1999, 21(4):370-386.
19. Academy of Medical Educators. Professional Standards (3<sup>rd</sup> edition, 2014). Cardiff: Academy of Medical Educators, 2014.



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## **VISIONS OF SUCCESS FOR DFP IMPLEMENTATION**

*“Helps scaffold capabilities and mindsets for pharmacists, regardless of their area of practice or level, highlighting the standards they should uphold and the next steps in their development”*

*“Grounds the purpose, passion, and professionalism in a pharmacist's life-cycle, serving as a hallmark to recognize leaders for their significant contributions to public health and patients”*

*“A go-to guide for pharmacists to plot their own growth or in guiding growth of their juniors”*

*Source: Inputs from participants at the DFP Workshop on 5 April 2024*



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