Version number	1
Unit title	Independent and Supplementary Prescribing
Level	M
Credit value	40

## **Pre-Requisites and Co-Requisites**

There are no pre or co requisites

#### **Aims**

To prepare nurses, midwives and specialist community public health nurses to prescribe safely, appropriately and cost effectively from either the community practitioner formulary for nurse prescribers or as an independent/supplementary prescriber. In doing so students will be required to evaluate the evidence underpinning the practice of nurse prescribing, critically reflect upon their level of competency in respect of nurse prescribing and develop an individual programme of learning in practice.

# **Intended Learning Outcomes:**

Having completed this unit, the student is expected to demonstrate the ability to:

- 1. Critically discuss and demonstrate an ability to assess and consult with patients/clients, clients, parents and carers;
- 2. undertake a thorough history, including medication history and current medication (including over the counter, alternative and complementary health therapies)to inform diagnosis;
- 3. critique and apply the relevant legislation to the practice of nurse/midwife prescribing;
- 4. critically appraise sources of information/advice and decision making frameworks in prescribing practice;
- 5. critically debate the influences that effect prescribing practice and demonstrate understanding by managing prescribing practice in an ethical way.
- 6. apply knowledge of pharmacodynamics and pharmacokinetics to their own prescribing practice, including the monitoring of response to therapy and justification to modify treatment
- 7. critically analyse the roles and relationships of others involved in prescribing, supplying and administering medicines;
- 8. prescribe safely, appropriately and cost effectively;
- 9. practise within a framework of professional accountability and responsibility;
- 10. develop clinical management plans within legislative framework;
- 11. demonstrate the recognition of the unique implications and developmental context of the anatomical and physiological differences between neonates, children and young people

12. demonstrate the ability to calculate drug dosages and prescribing regimes within own area of practice.

The Nursing and Midwifery Council (NMC) have stipulated these outcomes

# **Competencies for Prescribing**

The NMC competencies for prescribing are laid out in the appendix.

# Relationship between course outcomes and Prescribing Competencies

The learning outcomes of the programme relate to the prescribing competencies as follows:

Learning outcome 1 – Practice

Learning outcome 2 – Practice

Learning outcome 3 – Principles

Learning outcome 4 - Principles

Learning outcome 5 – Practice

Learning outcome 6 - Responsibility

Learning outcome 7 – Subsumes all the competencies

Learning outcome 8 - Principles and practice

Learning outcome 9 – Principles and Practice

Learning outcome 10 – Principles and Practice

Learning Outcome 11 – principles and practice

Learning outcome 12 – Subsumes all the competencies.

# **Learning & Teaching Methods (Taught Programme)**

The taught indicative content will normally be delivered over 26 days in the University plus 12 days of supervised clinical practice. Attendance for the taught days is mandatory. Learning and teaching will take place in both the classroom and in practice. Lectures of factual material will be followed by question and answer sessions including group discussion and analysis of case examples.

#### **Teaching and Learning Methods (Blended Programme)**

The blended programme will normally consist of 8 taught days and the equivalent of 10 days open learning utilising web based, electronic and printed open learning nurse prescribing programme material. The taught days will focus on key lectures and discussion and feedback from open learning activity. Attendance at the taught days is mandatory.

All students will have a personal tutor from the University and the support of a designated medical practitioner as a supervisor in practice. Supervisor workshops are planned to appraise medical supervisors of the learning outcomes expected from the programme and their responsibilities. Students and their supervisors will be provided with information on when their personal tutor is available to be contacted either by telephone or email.

#### **Assessment**

Total assessment workload will not exceed the equivalent of 10,000 words

The learning outcomes of the programme will be assessed as follows:

- 1. A portfolio that demonstrates application of theory to practice, and provides rationale for prescribing decisions and reflective practice. It will also include evidence of numeracy skills, writing prescriptions and a range of scenarios. Linked to learning outcomes 1-12. The pass mark for the portfolio is 40%.
- 2. An Objective Structured Clinical Examination which takes place in a setting relevant to the students' area/field of practice or a video consultation in a live practice setting. Linked to learning outcomes 1,2 and 8. This is assessed on a pass/fail basis.
- 3. Satisfactory completion of the period of practice experience and the sign off by the designated medical practitioner and the employer that the student is competent to prescribe medicines in their area of practice. Linked to learning outcomes 1-11. This is recorded in the practice profile and is assessed on a pass/fail basis.
- 4. A written examination consisting of 20 short answer/ multi-choice questions. The examination tests pharmacological knowledge and its application to practice. Linked to learning outcomes 6,7 and 8. The pass mark for the examination is 80%.
- 5. A numerical assessment within the context of prescribing practice. Linked to learning outcome 12. The pass mark for the numeracy assessment is 100%.and is recorded as a pass/fail.

#### **Indicative content**

#### Consultation, decision-making and therapy, including referral

- models of consultation
- accurate assessment, history taking, communication and consultation with patients/clients and their parents/carers
- concepts of working diagnosis or best formulation
- development of a management plan and/or clinical management plan
- confirmation of diagnosis/differential diagnosis further examination, investigation, referral for diagnosis
- prescribe, not to prescribe, non-drug treatment or referral for treatment
- numeracy and drug calculations
- stopping medication prescribed by others
- medicines review.

#### Influences on, and psychology of, prescribing

- patient/client demand, and preference vs patient/client need knowing when to say 'no'
- external influences, e.g. companies or colleagues
- patient/client partnership in medicine-taking, including awareness of cultural and ethnic needs
- concordance as opposed to compliance
- achieving shared understanding and negotiating a plan of action

## Prescribing in a team context

- rationale, adherence to, and deviation from national and local guidelines, local formularies, protocols, policies, decision support systems and formulae
- understanding the role and functions of other team members
- documentation, with particular reference to communication between team members, including electronic prescribing
- auditing, monitoring and evaluating prescribing practice
- interface between multiple prescribers and management of potential conflict
- · budgets and cost effectiveness
- dispensing practice issues

## Clinical pharmacology, including the effects of co-morbidity

- pharmacology, including pharmaco-dynamics, pharmaco-kinetics, pharmaco-therapeutics
- anatomy and physiology as applied to prescribing practice and community practitioner formulary
- basic principles of drugs to be prescribed, e.g. absorption, distribution, metabolism and excretion, including adverse drug reactions (ADR)
- interactions and reactions
- patient/client compliance, concordance and drug response
- impact of physiological state on drug responses and safety, for example, in elderly people, neonates, children and young people, pregnant or breast feeding women
- pharmaco-therapeutics related to controlled drugs.

# Evidence-based practice and clinical governance in relation to nurse prescribing

- rationale, adherence to and deviation from national and local guidelines, protocols, policies, decision support systems and formulae
- continuing professional development role of self and role of the organisation
- management of change
- risk assessment and management, including safe storage, handling and disposal
- clinical supervision
- reflective practice/peer review
- critical appraisal skills
- auditing practice and scrutinising data, systems monitoring
- identify and report adverse drug reactions and near misses
- prescribing controlled drugs
- prescribing and administering
- prescribing and dispensing.
- Prescribing off label
- Prescribing unlicensed medication

## Legal, policy and ethical aspects

- sound understanding of legislation that impacts on prescribing practice
- legal basis for practice, liability and indemnity
- legal implications of advice to self-medicate including the use of alternative therapies, complementary therapy and over-the-counter (OTC) medicines
- safe-keeping of prescription pads, action if lost, writing prescriptions and record keeping
- awareness and reporting of fraud (recommendations from the Shipman Inquiry, Fourth Report)
- drug licensing
- Yellow Card reporting to the Committee of Safety on Medicines (CSM) and reporting patient/client safety incidents to the National Patient Safety Agency (NPSA)
- prescribing in the policy context
- manufacturer's guidance relating to literature, licensing and off-label
- ethical basis of intervention
- informed consent, with particular reference to client groups in learning disability, mental health, children, critically ill people and emergency situations
- legal implications and their application to supplementary prescribing.

# Professional accountability and responsibility

- The NMC code of professional conduct; standards for conduct, performance and ethics
- NMC Standards for prescribing practice
- Ethical recommendations from the Shipman Inquiry, Fourth Report
- accountability and responsibility for assessment, diagnosis and prescribing
- · maintaining professional knowledge and competence in relation to prescribing
- accountability and responsibility to the employer

Prescribing in the public health context

- duty to patient/clients and society
- policies regarding the use of antibiotics and vaccines
- inappropriate use of medication, including misuse, under-use and over-use
- inappropriate prescribing, including over-prescribing and under-prescribing
- access to health care provisions and medicines
- prescribing in its broadest sense, e.g. exercise.

#### **Indicative Key Learning Resources**

# **Books**

THE BRITISH NATIONAL FORMULARY (B.N.F.)

Courtney, M. & Griffiths, M., 2004. *Independent and supplementary prescribing; Essential guide.* London: Greenwich Medical Media.

Crouch,S & Chaplelhow C. 2008 *Medicines Management a nursing perspective*. Harlow. Pearson Education

Department of Health, 1999. Review of prescribing, supply and administration of medicines: final report. Crown I. London. HMSO.

Department of Health, 2005. Supplementary prescribing by Nurses, Pharmacists, chiropodists/Podiatrists, Physiotherapists and radiographers within the NHS in England: A Guide for Implementation. London: DOH.

Dimond, B., 2005 Legal aspects of nursing. 4th ed. London: Prentice Hall.

McGavock, H., 2003. How drugs work. Oxford: Radcliffe Medical Press.

McGavock,H.2009. *Pitfalls in prescribing and how to avoid them.* Oxford: Radcliffe Medical Press

Neal, J., 2009 Medical Pharmacology at a Glance. 6th ed. Oxford: Blackwell Science.

Shulman,R;Montgomery,H;Ng,J;Keady,S eds 2007 Surviving Prescribing: A practical guide.London. Remedica

Trounce, J., 2000. *Clinical pharmacology for nurses*. 16<sup>th</sup> ed. Edinburgh: Churchill Livingstone.

#### Web-based sources

## www.npc.co.uk

National Prescribing Centre web site, provides a range of information to support non medical prescribers, including a competency framework and access to Merck updates, patient group directions

## www.dh.gov.uk

The Department of Health website provides information on non medical prescribing <a href="https://www.mhra.gov.uk">www.mhra.gov.uk</a>

The Medicines and Healthcare Products Regulatory Agency website contains information about the legal framework governing prescribing, supply and administration of medicines

#### www.nmc-uk.org

The Nursing and Midwifery Council website, publications on standards of professional practice etc

#### www.nelh.ora

National Electronic Library for Health, latest information on medicines and clinical conditions, as well as useful resource on complementary therapies www.the-shipman-inquiry.org.uk

Information on the recommendations from the Shipman Inquiry www.nelm.nhs.uk

National electronic library for medicines – good links to research, NICE guidance, and latest news page

www.druginfozone.nhs.uk

Information on medicines, licensed usage, possible interactions www.emc.medicines.org.uk

approved information sheets (including details of product licenses) for UK prescription medicines