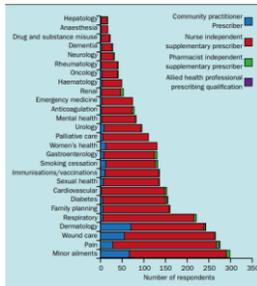
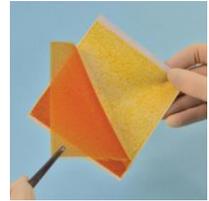


Wessex Prescribing Guidance Documents

Sue Hill
Head of Workforce Transformation
Health Education England Wessex

Catheters and Inadine....



Therapy areas in which non-medical prescribers use their qualification.
Includes all non-medical prescribers but 95 per cent were nurse prescribers and just 5 per cent were pharmacist and other prescribers.
Reproduced from Courtney M.

Numbers

It is estimated that the number of supplementary and independent prescribers in England are currently:-

- 53,572 registered nurses and midwives,
- 3,845 pharmacists
- 689 allied healthcare professionals (e.g. optometrists, physiotherapists, podiatrists and radiographers)

In total, this is approximately 58,000 NMPs.

In 2016

- Wessex survey
- 9 out of 11 Trusts answered
- 1,504 NMP – including independent, supplementary and community prescribers



NMP Forum

- The NMP Forum for Wessex commenced in December 2015 and now has membership across Wessex from acute and community Trusts, CCGs, LMC and general practice.
- The meetings are now held twice a year and have largely been looking at standardising governance across Wessex.
- Using the basics of the model developed by DHUFT the principles of managing and monitoring non-medical prescribers within organisations has been considered.

The Objective



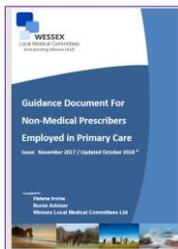
- To standardise 'Best Practice' by all NMPs employed within the hospital, primary care and community settings across Wessex.
- The aim of the document is to provide a common framework to be used by all community and hospital Trusts and their actively practising and registered NMPs.
- The documents set the standard for portfolio development and offers the opportunity for the transfer of skills between organisations within the Wessex region.
- Promote quality and patient safety in relation to prescribing by NMPs

Continued...



- Support professional development & competency in prescribing practice through education and clinical supervision
- Assure good governance
- These documents are aimed at individual practitioners who must also adhere to their specific organisational policies and own professional code of practice.

Primary Care Guidance



Community Guidance



Hospital Guidance



4. Providing Evidence

4.1 Evidence

Provides confirmation that you have undertaken an activity. Examples...

Feedback from patients, carers and colleagues Appraisal	Examples of good judgement to reflect on your prescribing behaviour Examples of a change in prescribing and why you have made that change	Attendance at medical management 30 or prescribing meetings Clinical supervision Case discussion with colleagues
Courses attended Presentations Literature read and reviewed Continuous personal and professional development	Reflection Ongoing documentation Competency framework	

Your prescribing role must be included in your job description to provide indemnity for the role of the prescriber

5.2 Prescribing

With each prescription written NMPs should ensure that -

The name, age and address of the patient is stated	The nature of the prescription is stated and includes the type of prescriber	It is signed in black ink by the prescriber who has clinically assessed the patient	It is legible and written in English without abbreviation
The quantity to be dispensed is clearly stated in units of weight not volume	The number of refills is stated if changes are to be made after issuing a prescription	If a 'device' is prescribed the patient and/or carer understands how to use the device	You check the patient's details, especially age, current medicines, allergies, co-morbidities with other medicines
The patient is provided with additional information if required	You check the patient's name, understanding of dose and frequency	You provide advice on the appropriate storage of medicines and safety	You record in the patient's notes that the patient is aware of the potential medicines safety issues, understands the correct compliance and how and when to take the medication
Each patient who requires a medicine must have their own prescription	For treatments record in the patient's treatment plan and continue discussion with patient and dispenser	Ensure that clear directions are given for each item prescribed (out or in clinic)	The professional registration of the prescriber is required and type of prescriber

HCPC Medicines and Prescribing – Rights of each Profession

This table is taken from the HCPC web page

Profession	Self-render (if relevant)	Supply and administration			Prescribing	
		PHO	PHU	Exemptions	SP	IP
Art therapist	X					
Biomedical scientist		X				
Chiropractor / podiatrist		X	X	X	X	X
Clinical scientist		X				
Dentist		X	X		X	
Hearing aid dispenser		X				
Occupational therapist		X	X			
Optician		X	X	X		
Operating department practitioner		X				
Paramedic		X	X	X	X*	X*
Physiotherapist		X	X		X	X
Psychological psychologist		X				
Psychomotor therapist		X	X			
Radographer	Diagnostic	X	X		X	
	Therapeutic	X	X		X	X
Social worker in England		X				
Speech and language therapist		X	X			

Prescribing Competency Framework THE CONSULTATION (COMPETENCIES 1-10)

Adapted from Royal Pharmaceutical Society: Prescribing Competency Framework



I am prescribing a lot more apps than medications these days.
Eric Topol

Thank you for listening, any questions?

