

Module specification

When printed this becomes an uncontrolled document. Please access the Module Directory for the most up to date version by clicking on the following link: [Module directory](#)

| | |
|----------------------|--|
| Module Code | HLT704 |
| Module Title | Independent and Supplementary Prescribing for Allied Health Professionals at Level 7 |
| Level | 7 |
| Credit value | 40 |
| Faculty | Faculty of Social and Life Sciences |
| HECoS Code | 100290 |
| Cost Code | GANP |
| Pre-requisite module | N/A |

Programmes in which module to be offered

| Programme title | Core/Optional/Standalone |
|---|--------------------------|
| MSC Advanced Clinical Practice | Option |
| MSC Primary Healthcare | Option |
| PG Cert Clinically Enhanced Non-Medical Prescribing | Option |

Breakdown of module hours

| | |
|---|----------------|
| Learning and teaching hours | 156 hrs |
| Placement tutor support hours | 50 hrs |
| Supervised learning hours e.g. practical classes, workshops | 0 hrs |
| Project supervision hours | 0 hrs |
| Active learning and teaching hours total | 206 hrs |
| Placement hours | 90 hrs |
| Guided independent study hours | 104 hrs |
| Module duration (Total hours) | 400 hrs |

Module aims

To develop a systematic, evidence based, critically evaluative and critically reflective approach to clinical decision making skills, advancing own scholarship in relation to the development of independent/supplementary prescribing practice

To enable allied health professionals (physiotherapists, podiatrist, therapeutic radiographer and paramedic) to develop the competence to practice safely, appropriately and cost-effectively as independent / supplementary prescribers in relation to professional standards set

by Health and Care Professions Council (2019) meeting the expectations of professional behaviour, and standards of conduct, performance and ethics in all assessments

Module Learning Outcomes

At the end of this module, students will be able to:

| | |
|---|---|
| 1 | Deploy and systematically critique the effectiveness of the relationship and communication with patient/clients, carers, other prescribers and members of the health care team within a prescribing scenario, articulating problem solutions and improvements where relevant. (RPS 2021 Competency Framework for all Prescribers. 1.1; 1.4; 3.1, 3.3, 3.4, 3.5; 3.6; 4.13; 4.14; 5.1, 5.2, 5.3, 5.4, 5.5; 7.4, 7.6; 8.1, 8.4, 8.5; 10.1.10.2, 10.3, 10.4). |
| 2 | Within the limits of professional competence, demonstrate the ability to undertake an accurate history and clinical assessment which includes an understanding of relevant patho-physiology, recognition of signs and symptoms of illness, and medication history including the use of unlicensed medication in order to inform a working diagnosis, within their intended scope of practice as an allied health professional to meet the Royal Pharmaceutical Society Competency Framework. (RPS 2021 Competency Framework for all Prescribers. 1.1. 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12; ; 2.1, 2.3, 2.4, 2.5, 2.6, 2.10; 3.1, 3.3, 3.5, 3.6; 4.1, 4.7, 4.8, 4.10, 4.11, 4.12, 4.13; 5.2, 5.3, 5.4, 5.5; 6.1, 6.2, 6.3, 6.4; 7.1, 7.4, 7.5, 7.6; 8.1, 8.4). |
| 3 | Critically reflect upon the formulation of a treatment plan for the prescribing of one or more medicines if appropriate within their role as an allied health professional having considered the legal, cognitive, emotional and physical differences, detailing the working differential diagnosis; how patient safety was ensured; how responses to therapy were monitored; any modifications to treatment and any consultation or referrals if made. (RPS 2021 Competency Framework for all Prescribers. 1.1,1.2, 1.3, 1.4, 1.5,1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13, 1.14; 2.1, 2.2, 2.5, 2.10; 4.6, 4.10; ; 5.1, 5.2, 5.3, 5.4, 5.5, 6.1, 6.2, 6.3, 6.4; 7.4, 7.5. 7.6; 8.1, 8.4). |
| 4 | Competently requests and interprets relevant investigations necessary to inform treatment options such as effective use of common diagnostic aids e.g. stethoscope, sphygmomanometer, which are relevant to the condition(s) for which the allied health professional intends to prescribe, including monitoring response to therapy which are relevant to the condition(s) intends to prescribe, including monitoring response to therapy. (RPS 2021 Competency Framework for all Prescribers. 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.10, 1.11, 1.13 ; 4.9, 4.10, 4.11; 6.1; 7.4, 7.5, 7.6; 8.1, 8.4). |
| 5 | Systematically evaluate and apply the relevant legislation to the practice of non-medical prescribing within a clinical governance framework including information, communication and record keeping and the use of unlicensed medicines and suggest improvements to quality which are drawn from contemporary, cutting edge evidence to the practice of allied health professional prescribing. (RPS 2021 Competency Framework for all Prescribers 1.3, 1.6, 1.8; 2.7; 4.3, 4.5, 4.8, 4.11, 4.12; 5.3, 5.4, 5.5; 7.4, 7.5, 7.6; 8.1, 8.3, 8.4, 8.5, 8.6; 10.1, 10.2, 10.3, 10.4), |
| 6 | Systematically research and critique the level and sources of information/evidence provided by current information systems for effective decision making in prescribing practice, identifying and proposing further areas of enquiry or practice development. (RPS 2021 Competency Framework for all Prescribers. 2.2, 2.6, 2.7, 2.8; 3.1, 3.2, 3.3, 3.4, 3.5, 3.6; 4.7, 5.3, 5.4, 5.5; 7.4, 7.5, 7.6; 8.1, 8.2, 8.3, 8.4, 8.5; 10.3). |



| | |
|----|--|
| 7 | Integrate and evaluate multiple perspectives in a shared evidence based model of decision making by assessing patients' needs for medicines and the integration of the patients and carers wishes, values, influences and ethical management of one's own prescribing, (RPS 2021 Competency Framework for all Prescribers 1.7; 2.1, 2.2, 2.3, 2.4, 2.6, 2.7; 3.1, 3.2, 3.3, 3.6; 4.1, 4.2, 4.3, 4.4, 4.7; 5.1, 5.2, 5.3, 5.4; 7.5, 7.6; 8.1, 8.2, 8.3, 8.4, 8.5; 9.7; 10.1, 10.2, 10.3, 10.4). |
| 8 | Systematically research and apply knowledge of pharmacological, non-pharmacological approaches to disease, considering drug actions, adherence, effectiveness, interactions in prescribing practice, and how these may be altered, including the misuse of medicines. (RPS 2021 Competency Framework for all Prescribers 1.6, 1.8; 2.1, 2.2, 2.3, 2.4; 4.1, 4.8, 4.9, 4.13; 6.1, 6.2, 6.3, 6.4; 7.2, 7.3, 7.4, 7.5, 7.6; 8.1, 8.2, 8.3, 8.4, 8.5, 9.7) |
| 9 | Critically reflect upon own role and the roles of others involved in prescribing, supplying and administering medicines and synthesizing key issues into personal prescribing development meeting the expectations of professional behaviour, including the standards of conduct, performance and ethics. (RPS 2021 Competency Framework for all Prescribers 1.14; 2.8; 4.2, 4.3, 4.4, 4.5, 4.9, 4.14; 7.3, 7.5, 7.6; 8.1, 8.2, 8.4, 8.5; 9.1, 9.2, 9.3, 9.7; 10.1, 10.2, 10.3, 10.4). |
| 10 | Demonstrate the critical thinking and clinical decision-making skills required to prescribe safety, appropriately and cost-effectively, including numeracy calculations; contributing an original, coherently argued response to managing influences on prescribing practice at individual, local and national levels. (RPS 2021 Competency Framework for all Prescribers 1.1, 1.2, 1.3, 1.5, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 1.13, 1.14; 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.8; 3.1, 3.5, 3.6; 4.1, 4.2, 4.3, 4.5, 4.6, 4.8, 4.9, 4.10; 6.1, 6.2, 6.3, 6.4; 7.1, 7.2, 7.3, 7.4, 7.5, 7.6; 8.1, 8.2, 8.4, 8.5; 9.1, 9.2, 9.3; 10.1, 10.2, 10.3, 10.4). |
| 11 | Systematically evaluate the role of independent and supplementary prescribing for allied health professionals and practice competently within a framework of professional accountability and responsibility that includes audit of prescribing practice and the management and recording of own regular continuing personal and professional development activity. (RPS 2021 Competency Framework for all Prescribers 1.7, 1.14; 2.8, 2.9, 2.10; 3.5; 4.5; 7.1, 7.2, 7.3, 7.4, 7.6; 8.1, 8.2, 8.3, 8.4, 8.5, 8.6; 9.1, 9.2, 9.3, 9.4, 9.5, 9.6; 10.1, 10.2, 10.3, 10.4) |
| 12 | Demonstrate and synthesize public health issues relating to medicines use into clinical decision-making and practice development as a supplementary prescriber. (RPS 2021 Competency Framework for all Prescribers 1.1, 1.2; 2.1, 2.3, 2.8, 2.10; 3.5; 4.1, 4.7, 4.10; 7.1, 7.2, 7.3, 7.4, 7.6; 8.4, 8.6; 9.2, 9.3; 10.1, 10.2, 10.3, 10.4). |

Assessment

Indicative Assessment Tasks:

This section outlines the type of assessment task the student will be expected to complete as part of the module. More details will be made available in the relevant academic year module handbook.

Formative Assessment

- Situational analysis
- Numeracy assessment related to prescribing and calculation of medicines
- Clinical Management Plan (CMP) – provide feedback on CMP template
- Critical Reflective Log – provide feedback on Plan and 2 pages of work
- Pharmacology – Unseen examination, 20 multiple-choice questions and short answer questions
- Practice Assessment Document (PAD) – Objective Structured Clinical Examination (OSCE) 4 phases

Summative Assessment

Assessment 1: PAD - Reflective log.

Assessment 2: PAD - Clinical Management Plan Assessment

Assessment 3: PAD - OSCE – 4 phases.

Assessment 4: PAD - Achievement of RPS Competency framework including service-user/carer feedback.

Assessment 5: PAD - Personal formulary from within the individual practitioner's scope of practice

Assessment 6: PAD - Practice Educator to confirm that the Allied Health Professional has satisfactorily completed at least 90 hours of supervised practice including sign-off by the Practice Educator of competence as an independent / supplementary prescriber.

Assessment 7: Unseen numeracy assessment related to prescribing and calculation of medicines examination consists of 12 numeracy assessment questions (**pass mark 100%**).

Assessment 8: Pharmacology unseen examination consists of 20 MCQs and short answer questions (**80% pass mark**).

If a practitioner fails to correctly answer any questions that may result in direct harm to a patient/client or which omits or includes information which would indicate unsafe practice by the student or in any way breaches confidentiality will be deemed a 'refer' on that part of the assessment task.



| Assessment number | Learning Outcomes to be met | Type of assessment | Duration/Word Count | Weighting (%) | Alternative assessment, if applicable |
|-------------------|-----------------------------|--------------------|---------------------|---------------|---------------------------------------|
| 1 | 1-12 | Written Assignment | 4000 | 100 | N/A |
| 2 | 1-12 | Written Assignment | 1000 | Pass/Refer | N/A |
| 3 | 1-12 | OSCE | | Pass/Refer | N/A |
| 4 | 1-12 | Portfolio | | Pass/Refer | N/A |
| 5 | 2, 3, 4, 5, 7, 8, 9, 10 | Portfolio | | Pass/Refer | N/A |
| 6 | 1-12 | Portfolio | | Pass/Refer | N/A |
| 7 | 10 | Examination | 1 hr | Pass/Refer | N/A |
| 8 | 1-12 | Examination | 2 hr | Pass/Refer | N/A |

Derogations

All elements of the assessment must be passed individually in order to pass this module. There is a maximum of two attempts at any one element.

Assessment 7 pass mark is 100% and Assessment 8 pass mark is 80%

Learning and Teaching Strategies

A variety of learning and teaching methods will be used and are designed to stimulate student enquiry and self-directed learning around the curriculum content. This includes class room based strategies such as interactive lectures and discussions, seminars and workshops, tutorial sessions, virtual sessions and problem-based / case-based simulation learning supported by internet-based resources and use of the virtual learning environment - '*Moodle*'. In clinical practice an experiential strategy, including observation, simulation, guided practice and observed independent practice, will be used to meet the module outcomes. Service user and carer form is available in Welsh. Programme Handbook and PAD document and session content can be translated to support the use of the Welsh language. Guidelines are provided in the Programme Handbook.

Students will undertake two OSCE formative assessments in a simulated/practice environment in order to help identify areas of strengths and weakness. Formative feedback is also by the Practice Educator on an on-going basis in practice; All students will be visited/ contacted via SKYPE/Microsoft Teams in practice. 20% of the summative OSCE's undertaken in practice by allied health professionals are moderated by the programme team to ensure consistency of decisions on competence.



Practice Educator will further support students by offering them a minimum of 90 hours supervised practice and the opportunities to allow them to observe and have 'hands-on' experiences in the clinical area where they will prescribe on qualification. Practice Educator will also assess that the student is competent to practice and achieved the learning outcomes of the programme of study. Students will also be allocated a personal tutor.

Welsh Elements

Students are entitled to submit assessments in the medium of Welsh

Indicative Syllabus Outline

The indicative content will include the general and professional content and prescribing specific content reflecting the RPS (2021) Competency Framework for all Prescribers and its application to the independent and supplementary prescribers practice .

Indicative Bibliography

Please note the essential reads and other indicative reading are subject to annual review and update.

Essential Reads:

AHPF (2018) *Outline Curriculum Framework for Education Programmes to Prepare: Physiotherapists, podiatrists, Therapeutic Radiographers as Independent/Supplementary Prescribers and to Prepare: Diagnostic Radiographers, Dietitians as Supplementary Prescribers*. Available at: <http://www.ahpf.org.uk/files/Online%20Curriculum%20Framework.pdf> [Accessed 10 January 2020]

Ashelford, S., Raynsford, J. and Taylor, V. (2019) *Pathophysiology and Pharmacology in Nursing*. 2nd edition. London: SAGE publications Ltd.

Barber, P and Roberston, D. (2020) *Essentials of Pharmacology for Nurses*. 4th edn. Maidenhead: Open University Press.

Beckwith, S. and Franklin, P. (2011) *Oxford Handbook of Prescribing for Nurses and Allied Health Professionals*, London. Oxford University Press.

Blaber, A., Morris, H., and Collen, A. (Eds) (2018) *Independent prescribing for paramedics*. Somerset. Class Professional Publishing

British Medical Association, Royal Pharmaceutical Society of Great Britain (Current edition) *British National Formulary*. London BMA/RPSGB

British Medical Association, Royal Pharmaceutical Society of Great Britain (Current edition) *British National Formulary for Children*. London BMA/RPSGB



Chartered Society of Physiotherapy (2011) *Code of Professional Values of Members' and Behaviour* Available at:

https://www.csp.org.uk/system/files/csp_code_of_professional_values_behaviour_full.pdf
[accessed 10 January 2020]

Chartered Society of Physiotherapy (2018) *Practice Guidance for Physiotherapist Supplementary and/or Independent Prescribers* (4th edition). Available at:
https://www.csp.org.uk/system/files/publication_files/PD026_PracticeGuidancePrescribing_4thEd_2018.pdf [Accessed 10 January 2020]

College of Paramedics (2018) *Improving patients' access to medicines: A guide to implementing paramedic prescribing within the NHS in the UK*. Available at: https://www.collegeofparamedics.co.uk/COP/Professional_development/Medicines_and_Independent_Prescribing/COP/ProfessionalDevelopment/Medicines_and_Independent_Prescribing.aspx?hkey=04486919-f7b8-47bd-8d84-47bfc11d821a [Accessed 10 January 2020]

College of Podiatry (2018) *Good Practice in Prescribing and Medicines Management for Podiatrists*. <http://www.scopod.org/practice-and-standards/independent-prescribing-insight/> [Accessed 10 January 2020]

Courtney, M and Griffiths, M (2010) *Independent and supplementary prescribing – an essential guide* (2ND Edition). Cambridge. Cambridge University Press

Franklin, P. (2017) (Ed) *Non-medical prescribing in the United Kingdom*. Switzerland. Springer

Health and Care Professions (2017) *Guidance on health and character*. London. HCPC
<https://www.hcpc-uk.org/globalassets/resources/guidance/guidance-on-health-and-character.pdf?v=63710644307000000> [Accessed 10 January 2020]

Health and Care Professions Council (2019) *Standards for Prescribing*. Available at: <https://www.hcpc-uk.org/standards/standards-relevant-to-education-and-training/standards-for-prescribing/> [Accessed 10 January 2020]

HCPC (2016) *Standards of conduct, performance and ethics*. Available at: standards code <https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/> [Accessed 10 January 2020]

Institute of Chiropodists and Podiatrists (2011) *Code of ethics*. Available at: <https://iocp.org.uk/about/code-of-ethics/> [Accessed 10 January 2020]

McFadden, R. (2019) *Introducing Pharmacology for Nursing and Healthcare* 3rd edition. London: Routledge.

Neil, M.J. (2020) *Medical pharmacology - at a glance*. (9th edition). Chichester. Wiley-Blackwell

Nuttall, D and Rutt-Howard, J (2020) *The textbook of non-medical prescribing*. (Second edition). Chichester. Wiley-Blackwell

Ritter, J.M., Flower, R.J., Henderson, G., Loke, Y.K., MacEwan, D. and Rang, H.P. (2019) *Rang & Dale's Pharmacology* 9th edition. Missouri: Elsevier.



Royal Pharmaceutical Society (2021) *A Competency Framework for all Prescribers*. London.
RPS <https://www.rpharms.com/resources/frameworks/prescribing-competency-framework/competency-framework> (Accessed 28/05/2022).

Royal Pharmaceutical Society (2019) Designated prescribing practitioner. Available at: <https://www.rpharms.com/resources/frameworks/designated-prescribing-practitioner-competency-framework> [Accessed 10 January 2020]

Society of Radiographers (2016) Practice guidance for radiographer independent and / or supplementary prescriber. Available at: <https://www.sor.org/learning/document-library/practice-guidance-radiographer-independent-and-or-supplementary-prescribers> [Accessed 10 January 2020]

Other indicative reading:

Baker, E. Burrage, D. Lonsdale, D. Hitchings, A. (2014) Prescribing scenarios at a glance. Chichester. Wiley-Blackwell

Barker, C. Turner, M. Sharland, M (2019) Prescribing medicines for children. London. Pharmpress.

Bickley, L.S. (2016) Bates' guide to physical examination and history taking (12th Edition) Lippincott William and Wilkins. Philadelphia

Golan, D. E., Armstrong, E.J. and Armstrong, A.W. (2017) Principles of Pharmacology.4th edition. Philadelphia: Wolters Kluwer.

Harris, N Shearer, D. (2020) Nurses! Test yourself in non-medical prescribing. Maidenhead. Open University Press

Hopcroft, K., Forte, V (2014) Symptom Sorter, Fifth Edition. London. Radcliffe Publishing Limited

Jarvis, C. (2019) Pocket Companion for Physical Examination and Health Assessment. 8th edition. Missouri: Elsevier.

Lapham, R (2015) Drug Calculations for Nurses: A Step-by-step Approach. 4th edition. London: Arnold Publishers.

Lynn, J., Bowskill, D., Bath-Hextall, F., Knaggs, R. (2010) The new prescriber – an integrated approach to medical and non-medical prescribing. Chichester. Wiley- Blackwell

Marshall, P., Gallacher, B., Jolly, J. and Rinomhota, S. (2017) Anatomy and Physiology in Healthcare Banbury: Scion Publishing Ltd.

McCance, K.L., and Huether M. (2018) Pathophysiology: The Biologic Basis for Disease in Adults and Children. 8th edition. Missouri: Mosby.

Ross, S (2014) Prescribing at a glance. Chichester. Wiley-Blackwell

Strickland-Hodge, B and Kennedy, M. (2019) The prescribing pharmacist. Cumbria. M and K Publishing.

Welsh Government (2017) Non-medical prescribing in Wales: A guide for implementation. Cardiff. Welsh Government



Administrative Information

| For office use only | |
|------------------------------|---|
| Initial approval date | Mar 2015 |
| With effect from date | Mar 2015 |
| Date and details of revision | Jun 2022 – LOs and syllabus outline amended to reflect the latest version of the Royal Pharmaceutical Society (2021) competency framework Aug 2025 – addition of PG Cert Clinically Enhanced Non-Medical Prescribing programme |
| Version number | 3 |

