

## Module specification

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Module Code	NHS7D8
Module Title	Independent Prescribing for Pharmacists
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
PG Cert Clinically Enhanced Non-medical Prescribing	Option
Standalone module aligned to MSc Advanced Clinical Practice for QA and assessment purposes only.	Standalone

### Breakdown of module hours

Learning and teaching hours	132 hrs
Placement tutor support hours	3 hrs
Supervised learning hours e.g. practical classes, workshops	24 hrs
Project supervision hours	0 hrs
<b>Active learning and teaching hours total</b>	<b>159 hrs</b>
Placement hours	90 hrs
Guided independent study hours	151 hrs
<b>Module duration (Total hours)</b>	<b>400 hrs</b>

### Module aims

To facilitate the development of knowledge, application of knowledge, competence and skills 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 prescribing practice

To enable pharmacists to develop the competence to practice safely, appropriately and cost-effectively as Independent prescribers in relation to professional standards set by General Pharmaceutical Council (GPhC).

## Module Learning Outcomes

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

1	<p>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.</p> <p>(RPS Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 1, 2, 3, 5, 27, 30, 31, 32)</p>
2	<p>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.</p> <p>(RPS Competency Framework for all prescribers (2021) 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, 2.3, 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 4, 5, 31)</p>
3	<p>Critically reflect upon the formulation of a treatment plan for the prescribing of one or more medicines if appropriate within their role 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.</p> <p>(RPS Competency Framework for all prescribers (2021) 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) (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 1, 6, 8, 17, 28, 29, 31, 32)</p>
4	<p>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 pharmacist intends to prescribe, including monitoring response to therapy.</p> <p>(RPS Competency Framework for all prescribers (2021) 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) (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 16, 19, 21, 22, 24)</p>
5	<p>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 prescribing.</p> <p>(RPS Competency Framework for all prescribers (2021) 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), (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 9, 14, 20, 22,)</p>



6	<p>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 Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 16, 24, 26)</p>
7	<p>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 Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 1, 2, 3, 4, 5, 6, 8, 9, 10, 16, 28, 30)</p>
8	<p>Systematically research and apply knowledge of pharmacological, non-pharmacological approaches to disease, considering drug actions, adherence, effectiveness, interactions, medication errors in prescribing practice, and how these may be altered, including the misuse of medicines. (RPS Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 12, 18, 24, 25)</p>
9	<p>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, remote prescribing and raising concerns related to inappropriate and unsafe prescribing by other prescribers. (RPS Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 7, 8, 9, 15, 23, 24, 27, 28, 32)</p>
10	<p>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 Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 10, 11, 13, 16)</p>
11	<p>Systematically evaluate the role of independent prescribing for pharmacists 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 Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 8, 11, 12, 32)</p>



12	Demonstrate and synthesize public health issues relating to medicines use into clinical decision-making and practice development. (RPS Competency Framework for all prescribers (2021) 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). (GPhC 2022 Standards for the education and training of pharmacists independent prescribers 16, 26)
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## 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 500 words
- Critical Reflective Log – provide feedback on Plan and 2 pages of work 500 words
- Unseen formative examination, 20 multiple-choice questions and short answer questions
- PAD – OSCE 4 phases

### Summative Assessment

Assessment 1: Reflective log. Students must include reflection on a clinical management/treatment plan as outlined in LO3 and on their own development as outlined in LO9.

Assessment 2: OSCE to be undertaken in the clinical simulation suite

Assessment 3: PAD - Achievement of RPS Competency framework for all Prescribers including service-user/carer feedback.

Assessment 4: PAD - Personal formulary from within the individual practitioner's scope of practice.

Assessment 5: PAD - Designated Prescribing Practitioner to confirm that the pharmacist has satisfactorily completed at least 90 hours of supervised practice including sign-off by the Designated Prescribing Practitioner of competence as an independent prescriber.

Assessment 6: Unseen Prescribing examination consists of 20 MCQs and short answer questions.(25%) Pass Mark is 40% or above

*If a student in any assessment fails to identify a serious problem or an answer which would cause the patient harm, this will result in the overall failure of the programme.*

Assessment number	Learning Outcomes to be met	Type of assessment	Duration/Word Count	Weighting (%)	Alternative assessment, if applicable
1	1-12	Written Assignment	4000	75	N/A
2	1-12	OSCE		Pass/Refer	N/A



3	1-12	Portfolio		Pass/Refer	N/A
4	2, 3, 4, 5, 7, 8, 9,10	Portfolio		Pass/Refer	N/A
5	1-12	Portfolio		Pass/Refer	N/A
6	3, 5, 6, 7, 8, 10, 12	Examination	2 hrs	25%	N/A

## **Derogations**

*All elements of assessment need to be passed with a minimum mark of 40%.*

*No compensation is allowed within programmes or modules – all elements of assessment must be passed. There is a maximum of two attempts at any one element.*

## **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. These include classroom based strategies such as blended learning approach to interactive lectures and discussions, seminars and workshops, tutorial sessions and problem-based / case-based learning, synchronous and asynchronous sessions, panopto supported by internet-based resources and use of the virtual learning environment (VLE) - 'Moodle' and MS Teams. The Active Learning Framework (ALF) is grounded in the University's values of being accessible, supportive, innovative and ambitious, and will support flexible learning that makes best use of spaces on Campus together with digitally-enabled learning opportunities designed to be accessed anytime, anywhere as appropriate. In addition, ALF will embody ways of teaching and learning that create and support a sense of belonging for students. 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, 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 sessions dedicated to clinical assessment skills including formative OSCE assessment in a simulated environment to help identify areas of strength and weakness. Summative OSCE assessment will be conducted on campus and assessed and moderated by WU staff.

Designated Prescribing Practitioners will also 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. Designated Prescribing Practitioners will also assess that the student is competent to practice and achieved the learning outcomes of the programme of study. If more than one person is involved in supervising a pharmacist independent prescriber in training, one independent prescriber must assume primary responsibility for their supervision. That person will be the Designated Prescribing Practitioner for the pharmacist independent prescriber in training. 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:

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.

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

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

General Pharmaceutical Council (2019) Standards for the education and training of pharmacists independent prescribers. <https://www.pharmacyregulation.org/education/pharmacist-independent-prescriber> (Accessed September 1 2021)

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

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

Nuttall, D and Rutt-Howard, J (2020) *The textbook of non-medical prescribing. (Third 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(RPS) (2019) *Designated Prescribing Practitioner Competency Framework* London. RPS <https://www.rpharms.com/resources/frameworks/designated-prescribing-practitioner-competency-framework> (Accessed September 1 2021)

Royal Pharmaceutical Society (RPS) (2021) *A Competency Framework for all Prescribers*. London. RPS <https://www.rpharms.com/resources/frameworks/prescribing-competency-framework/competency-framework> (Accessed September 18 2021)

Rutter, P (2020) *Community Pharmacy* 5<sup>th</sup> Edition. Missouri: Elsevier

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 (12<sup>th</sup> Edition) Lippincott William and Wilkins. Philadelphia*

*Blaber, A. Ingram, H and Gorman, J. (2000) (Ed) Independent prescribing for district nurses. Somerset. Class Professional Publishing*

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

*General Pharmaceutical Council (2017) Standards for pharmacy professionals. [https://www.pharmacyregulation.org/sites/default/files/standards\\_for\\_pharmacy\\_professionals\\_may\\_2017\\_0.pdf](https://www.pharmacyregulation.org/sites/default/files/standards_for_pharmacy_professionals_may_2017_0.pdf) (Accessed September 1st 2021)*

*Golan, D. E., Armstrong, E.J. and Armstrong, A.W. (2017) *Principles of Pharmacology* 4<sup>th</sup> 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* 8<sup>th</sup> edition. Missouri: Elsevier.*

*Lapham, R (2015) *Drug Calculations for Nurses: A Step-by-step Approach* 4<sup>th</sup> 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

<b>For office use only</b>	
Initial approval date	08/11/2021
With effect from date	September 2022
Date and details of revision	March 2025 – updated assessment strategy, Breakdown of hours and Learning and Teaching Strategies for implementation from 2025-26 Aug 2025 – addition of PG Cert Clinically Enhanced Non-Medical Prescribing programme
Version number	3

