

Module Title:	Independent/Supplementary Prescribing for Nurses (V300) and Pharmacists at Level 6	Level:	6	Credit Value:	40
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Module code:	NHS645	Is this a new module?	No	Code of module being replaced:	
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Cost Centre(s):	GANG	JACS3 code:	B710
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With effect from:	December 16
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School:	Social & Life Sciences	Module Leader:	Eleri Mills
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Scheduled learning and teaching hours	156 hrs
Guided independent study	166 hrs
Placement	78 hrs
Module duration (total hours)	400 hrs

Programme(s) in which to be offered	Core	Option
BSc (Hons) Primary Healthcare	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Graduate Diploma Primary Healthcare	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

Pre-requisites
Nil

Office use only

Initial approval: October 16

APSC approval of modification: *Enter date of approval*

Version: 2

Have any derogations received SQC approval?

Yes No N/A

If new module, remove previous module spec from directory?

Yes No

Module Aims

The aims of this education programme are to develop a systematic, evidence based and reflective approach to clinical decision making in independent/supplementary prescribing practice to enable nurses, midwives, specialist community public health nurses and pharmacists to develop the competence to practice safely, appropriately and cost-effectively as Independent/Supplementary prescribers in relation to professional standards set by the Nursing and Midwifery Council (2006a) or General Pharmaceutical Council (2010).

Intended Learning Outcomes

Key skills for employability

- KS1 Written, oral and media communication skills
- KS2 Leadership, team working and networking skills
- KS3 Opportunity, creativity and problem solving skills
- KS4 Information technology skills and digital literacy
- KS5 Information management skills
- KS6 Research skills
- KS7 Intercultural and sustainability skills
- KS8 Career management skills
- KS9 Learning to learn (managing personal and professional development, self-management)
- KS10 Numeracy

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

Key Skills

At the end of this module, students will be able to		Key Skills	
1	Deploy effective communication/relationship with patient/clients, carers, other prescribers and members of the health care team.	KS1	KS2
		KS4	KS5
		KS9	
2	Competently undertake a clinical assessment/history, including recognition of signs and symptoms of illness, and medication history to inform a working diagnosis or if necessary, monitor and modify treatment plan including the use of unlicensed medicines or refer/consult/seek guidance from another member of the health care team.	KS3	KS7
		KS9	
3	Use effectively common diagnostic aids eg stethoscope, sphygmomanometer.	KS3	
4	Describe, comment upon and apply the relevant legislation to the practice of nonmedical prescribing within a clinical	KS1	KS2
		KS6	

	governance framework including issues of record keeping, and the use of unlicensed medicines.		
5	Appraise, use sources of contemporary information/advice and decision support systems including evidence based guidelines in prescribing practice.	KS6	KS9
6	Review the influences– patients or carers wishes and values, that can affect prescribing practice, demonstrating a systematic understanding by managing one own prescribing in an ethical way.	KS7	KS6
		KS9	KS10
7	Apply knowledge of drug actions and interactions in prescribing practice.	KS1	KS3
8	Reflect upon own role and the roles of others involved in prescribing, supplying and administering medicines.	KS8	KS9
9	Demonstrate the clinical decision making skills required to prescribe safety, appropriately and cost-effectively.	KS1	KS2
10	Demonstrate the clinical decision making skills required to prescribe safety, appropriately and cost-effectively.	KS3	KS2
11	Practise competently within a framework of professional accountability and responsibility demonstrating the ability to manage own continuing professional development.	KS2	KS8
12	Demonstrate competence to take an appropriate history of a child, undertake a clinical assessment and make an appropriate decision based on the assessment to either diagnose or refer, having considered the legal, cognitive, emotional and physical differences between children and adults.	KS1	KS2
Transferable skills and other attributes			
<p>At the end of this module the students should be able to</p> <p>Exercise initiative and personal responsibility Make decisions in complex situations</p> <p>Demonstrate effective verbal and written communication skills;</p> <p>Exercise initiative and personal responsibility, demonstrating the independent learning ability;</p> <p>Demonstrate competency in word processing and the presentation of data;</p> <p>Demonstrate competency in the use of libraries, databases and the internet as sources of information;</p> <p>Assess and manage risk.</p>			

Derogations

All elements of the assessment must be passed individually in order to pass this module.

If a practitioner fails to correctly answer any questions that may result in direct harm to a patient/client the student will be 'referred' on that part of the assessment task.

There is a maximum of two attempts at any one element.

+ pass mark is 80% ++ pass mark is 100%

Assessment:

The assessment* for this module comprises 2 elements in line with PSRB requirements.
Element 1

- Portfolio consisting of 3 tasks: *
- Assessment 1 Reflective log –pass mark is 40%
- Assessment 2 Portfolio including OSCE
- Assessment 3 Clinical management plan –pass mark is 40% In order to pass, the portfolio must also contain the statement that clinical attendance requirements have been undertaken and the statement of competency, signed by the Designated Supervising Medical Practitioner (DSMP) and the Employer
- Element 2 B) Unseen written examination
- Assessment 4 20 MCQ/short answer questions+.
- Assessment 5 12 Numeracy/drug calculation test++
- * All elements of the assessment must be passed individually in order to pass this module. If a practitioner fails to correctly answer any questions that may result in direct harm to a patient/client the student will be 'referred' on that part of the assessment task. There is a maximum of two attempts at any one element. + pass mark is 80% ++ pass mark is 100%

Assessment number	Learning Outcomes to be met	Type of assessment	Weighting (%)	Duration (if exam)	Word count (or equivalent if appropriate)
1	1-12	Reflective log	50%		4,000 words equivalent
2	1,2,3,5,7,9	Portfolio including OSCE	Pass/Refer		
3	1,2,6,7,8,9	Clinical management Plan with narrative	50%		2,000 words
4	2,7,9,12	Unseen examination consists of: MCQs and short answer questions.(80% pass mark)	Pass/refer	2 hours	
5	2,7,9,12	Unseen examination consists of: numeracy/drug calculation test (100% pass mark)	Pass/refer	1 hour	

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 and problem based / case-based learning supported by internet-based resources and use of the virtual learning environment - 'Moodle' . In clinical practice an experiential strategy, including observation, guided practice and observed independent practice, will be used to meet the module outcomes. It is recognised that the learning needs of pharmacists and nurses are different – the former have an in-depth knowledge of pharmacology and related topics while nurses may have a higher level of clinical assessment skills. Therefore individual, negotiated learning is included in the learning and teaching strategy. Students will agree an individual/group contract at the beginning of the module with a member of the module teaching team, identifying specific learning needs. Students will also undertake a formative OSCE assessment in a simulated environment in order to help identify areas of strengths and weakness. Specific negotiated learning sessions (e.g. clinical assessment skills sessions) will be timetabled in order to support specific practitioner learning in relation to relevant knowledge and skills development. Designated Supervising Medical Practitioners will also support students by offering them a minimum of 12 days (78 hours for nurses and 90 hours for pharmacists) 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. They will also assess that the student is competent to practice and achieved the learning outcomes of the programme of study.

Syllabus outline:

Consultation, decision-making and therapy, including referral/review

Models of consultation, accurate assessment, history taking, values and beliefs in shared decision-making, Clinical assessment/examination skills relevant to the condition(s) for which the nurse/pharmacist intend to prescribe, development of a management plan and /or clinical management plan, monitor effectiveness to treatment. Formulating a working diagnosis or best formulation, Confirmation of diagnosis/differential diagnosis- further examination, investigations, referral for diagnosis. Prescribe, not to prescribe, non-drug treatment or referral, medicines reviews interpretations of investigations and clinical significance, numeracy and drug calculations.

Influences on, and psychology of, prescribing patient/client demand, and preference versus patient/client need

Knowing when to say 'no' External influences at individual local or national levels, eg. companies or colleagues patient/client partnership in medicine-taking, including awareness of cultural and ethnic needs concordance as opposed to compliance.

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 and communicating effectively with them, documentation, with particular reference to communication between team members, including electronic prescribing or health records/clinical notes, 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

Pharmaco-dynamics and pharmacokinetics, anatomy and patho-physiology of defined conditions for which nurses and pharmacists intend to prescribe, basic principles of drugs to be prescribed - 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, eg. in elderly people, neonates, children and young people, pregnant or breast feeding women and ethnicity, selection and optimisation of a drug regime for the patient condition, impact of co-morbidities on prescribing and patient management.

Evidence-based practice and clinical governance in relation to independent prescribing

The rationale for national and local guidelines, protocols, policies, decision support systems and formularies-understanding the implications of adherence to and deviation from such guidance, continuing professional development - role of self and role of the organisation management of change risk assessment and management, including safe storage, handling and disposal aware of the local clinical governance policies and procedures including 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 and learn from mistakes, Prescribing controlled drugs and counselling of patients.

Legal, policy and ethical aspects

Sound understanding of the policy and legislation that impacts on prescribing practice eg PGD, 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 including the use of unlicensed medicines manufacturer's guidance relating to literature, licensing and off-label prescribing and the use of unlicensed medicines, 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 GPhC's Standards of Conduct, Ethics and Performance 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, confidentiality, Caldicott and Data Protection issues.

Prescribing in the public health context

Duty to patient/clients and society in particular context of health priorities public health policies regarding use of antibiotics and vaccines, access to health care provision and medicines, inappropriate use of medication, including misuse, under-use and over-use inappropriate prescribing, over-prescribing and under-prescribing access to health care provisions and medicines.

Bibliography:

Essential reading

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

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Nuttall, D and Rutt-Howard, J (2011) *The textbook of non-medical prescribing*.
Chichester. WileyBlackwell

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Rutter, P (2009) *Community Pharmacy. Symptoms, diagnosis and treatment*. (Second edition) London. Churchill Livingstone.

Other indicative reading

Bickley, L.S. and Szilagy, P.G. (2010) *Bates' guide to physical examination and history taking* (10th Edition) Lippincott William and Wilkins. Philadelphia.

Dimond B (2011) *Legal aspects of medicines*. London. Quay Books

General Pharmaceutical Council (2010) *Pharmacists Independent Prescribing Programmes – Learning outcomes and indicative content*. London. General Pharmaceutical Council

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McKinnon, J (2007) *Towards prescribing practice*. Chichester. John Wiley and Sons.

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Nursing and Midwifery Council (2007). *Prescribing for children and young people*, NMC Circular 22/2007. London: Nursing and Midwifery Council (NMC).

Thorp, C (2008) *Pharmacology for the health care professions*. Chichester. Wiley-Blackwell

Welsh Assembly Government (2011) *Non medical prescribing in Wales: A guide for implementation*. Cardiff. WAG.

Welsh Assembly Government Waite, M and Keenan, J (2010) *CPD for non-medical prescribers*. Chichester. Wiley-Blackwell