

ROYAL PHARMACEUTICAL SOCIETY OF GREAT BRITAIN

Curriculum for the Education and Training of Pharmacist Supplementary Prescribers to become Independent Prescribers

Introduction and Background

The curriculum to prepare pharmacist independent prescribers has been developed from the curriculum for supplementary prescribers published by the Society in November 2002. The changes and additions reflect experience with the education and practice of pharmacist supplementary prescribers and also the significant differences associated with practice as an independent prescriber. Individual pharmacist supplementary prescribers will have experienced different degrees of clinical and professional responsibility in their prescribing practice but they will all have shared that responsibility with an independent prescriber. Practice as a pharmacist independent prescriber involves working autonomously to make decisions about patient care and a greater awareness of personal limitations and the scope of professional competence. In particular, an independent prescriber will be responsible for making autonomous prescribing decisions based on the clinical assessment of patients, not only of the clinical needs for which the patient is consulting the pharmacist but also to ascertain if there are any other clinical problems that require attention or referral by the pharmacist.

The increase in professional autonomy, clinical assessment and responsibility and the associated legal and ethical implications form the basis of the curriculum for conversion programmes.

Entry Requirements

All entrants to a conversion programme must meet the following requirements:

- current registration with RPSGB or PSNI as a practising pharmacist with annotation as a supplementary prescriber for not more than five years;
- currently practising as a supplementary prescriber or registered as a supplementary prescriber for not more than five years and able to provide evidence of relevant patient orientated practice;
- able to provide a statement of support from a medical practitioner that confirms competence as a supplementary prescriber.
- demonstrate how they reflect on their own performance and take responsibility for their own CPD;
- demonstrate how they have developed their own networks for support, reflection and learning, including prescribers from other professions

Aim

To enable pharmacist supplementary prescribers to practise and develop as independent prescribers and to meet the standards set by the Royal Pharmaceutical Society of Great Britain.

The learning outcomes in italics are additional to those which will already have been demonstrated by pharmacist supplementary prescribers. They should form the basis for a conversion course.

Following completion of a programme of study, pharmacist independent prescribers will be able to demonstrate all the following learning outcomes:

- *understand the responsibility that the role of independent prescriber entails, be aware of their own limitations and work within the limits of their professional competence – knowing when and how to refer / consult / seek guidance from another member of the health care team*
- develop an effective relationship and communication with patients, carers, other prescribers and members of the health care team
- *Describe the pathophysiology of the condition being treated and recognise the signs and symptoms of illness, take an accurate history and carry out a relevant clinical assessment where necessary.*
- *use common diagnostic aids e.g. stethoscope, sphygmomanometer.*
- *able to use diagnostic aids relevant to the condition(s) for which the pharmacist intends to prescribe, including monitoring response to therapy*
- *Apply clinical assessment skills to:*
 - *inform a working diagnosis*
 - *formulate a treatment plan*
 - *the prescribing of one or more medicines if appropriate*
 - *carry out a checking process to ensure patient safety.*
 - ⊖ *monitor response to therapy, review the working/differential diagnosis and modify treatment or refer / consult / seek guidance as appropriate*
- demonstrate a shared approach to decision making by assessing patients' needs for medicines, taking account of their wishes and values and those of their carers when making prescribing decisions
- identify and assess sources of information, advice and decision support and demonstrate how they will use them in patient care taking into account evidence based practice and national/local guidelines where they exist.
- recognise, evaluate and respond to influences on prescribing practice at individual, local and national levels
- prescribe, safely, appropriately and cost effectively
- work within a prescribing partnership
- maintain accurate, effective and timely records and in addition, ensure that other prescribers and health care staff are appropriately informed
- demonstrate an understanding of the public health issues related to medicines use
- *demonstrate an understanding of the legal, ethical and professional framework for accountability and responsibility in relation to independent prescribing*
- work within clinical governance frameworks that include audit of prescribing practice and personal development

- participate regularly in CPD and maintain a record of their CPD activity

Indicative content

- Autonomous working and decision making within professional competence.
- Understanding own limitations
- Accurate assessment, history taking, and effective communication and consultation with patients and their parents/carers
- Effective communication and team working with other prescribers and members of the health care team
- Formulating a working diagnosis
- Development of a treatment plan, including lifestyle and public health advice
- Confirmation of diagnosis/differential diagnosis – further examination, investigation, referral for diagnosis
- Clinical examination skills relevant to the condition(s) for which the pharmacist intends to prescribe.
- Recognition and responding to common signs and symptoms that are indicative of clinical problems. Use of common diagnostic aids for assessment of the patient's general health status; e.g. stethoscope, sphygmomanometer, tendon hammer, examination of the cranial nerves.
- Professional competence, autonomy and accountability of independent and supplementary prescribing practice
- Application of the law in practice, professional judgment and responsibility, liability and indemnity, associated with independent prescribing
- the law applied to the prescribing, dispensing and administration of controlled drugs and appropriate counselling of patients
- compliance with guidance arising from the Shipman enquiry

Teaching, Learning and Assessment Strategies

Programmes should be taught at least at first degree level (QAA level 3) and reflect the fact that since June 2002, pharmacists have graduated and practise at QAA level 4.

Strategies for teaching and learning will need to recognise that while programmes that train pharmacist supplementary prescribers will have covered the full supplementary prescribing curriculum, there will be variations in student learning and background experience, particularly in physical examination skills and topics that were not in the supplementary prescribing curriculum such as history taking.

Programme delivery may be achieved through a range of strategies selected according to students' prior learning and experience, for example, face to face instruction, distance learning, directed private study or evidence of achievement of learning outcomes confirmed in a portfolio. Teaching and learning strategies must reflect:

- formal confirmation of clinical competence in the specified condition(s) for which the pharmacist intends to prescribe is an essential part of the programme;
- that pharmacists may not learn clinical examination skills in their basic training and that arrangements must be made for them to learn basic skills for the clinical (risk) assessment of patients during the conversion course
- pharmacists must learn the skills required for assessment of patients with the condition(s) for which they will prescribe. The roles of the education provider and the DMP in these respects must be made clear.

All students must complete a period of learning in practice supervised by a designated medical practitioner who may be the independent prescriber who works with the student in a supplementary prescribing partnership.

Assessment should confirm that the student has achieved the additional learning outcomes for independent prescribing listed in this curriculum. Assessment must provide confirmation of the student's clinical competence in the area(s) for which they intend to prescribe; including the clinical assessment of patients and the ability to use basic diagnostic aids and make an assessment of the patient's general health.

Programme Duration

The programme for individual students should be of sufficient length to achieve the learning outcomes. In no case should programme length be less than the equivalent of two days for the taught component, of which at least one day must comprise face to face learning activities, plus at least two 7.5h days learning in practice under the supervision of a designated medical practitioner

Qualification and Award.

Pharmacists who successfully complete an accredited conversion programme must be awarded a *Practice Certificate in Independent Prescribing*. This is the only award that will be recognised by the Society for annotating the pharmacist's entry in the membership register with independent prescribing status. The programme provider may also wish to make an award of academic credits and/or another form of academic award.

August 2006