

ROYAL PHARMACEUTICAL SOCIETY OF GREAT BRITAIN

Indicative Curriculum for the Education and Training of Pharmacist Independent Prescribers

FREQUENTLY ANSWERED QUESTIONS

1. When can we apply for accreditation of an independent prescribing programme?

You will be able to apply for accreditation of a full independent prescribing programme when the accreditation of your current supplementary prescribing programme is about to expire. An application for accreditation of a conversion course can be made at any time. An application to add a conversion course to a supplementary prescribing programme to achieve interim accreditation of an independent prescribing programme can be made with a conversion course application or separately.

2. How long will it take for a conversion course application to be approved?

That will depend on the volume of applications received. We will do our best to give you a time estimate when you apply. We plan to have a rapid procedure for conversion course applications

3. If a pharmacist supplementary prescriber applies for the conversion course, can he use the statement from the DMP from his original training as confirmation of his competence as a prescriber?

No. The statement of support must be from a medical practitioner who can confirm current competence.

4. Will the conversion course have to be accredited?

Yes. The relevant application form and procedures will be made available.

5. Pharmacists who enter a programme that has interim accreditation for independent prescribing will not be able to meet the entry requirement for the conversion course which requires them to have prescribing competence; will this debar these students from undertaking the conversion course element?

No. When the students complete the 14 days learning in practice, their DMP will confirm that they are competent prescribers and can diagnose and monitor the condition(s) for which they will prescribe.

6. What type of evidence of relevant patient orientated practice should applicants for the conversion course produce?

This is an entry requirement that enables a pharmacist supplementary prescriber who is not currently practising as a prescriber to apply for independent prescribing training. As a general guide, evidence of recent practice in the clinical field in which the applicant intends to prescribe would be relevant to the application. The university will have to make a judgement based on the evidence e.g. applicant's CV and appropriate references. It may be appropriate to make an assessment of the applicant's clinical skills or to examine recent academic achievements

7. Will students on the conversion course have to be assessed and to what standard?

The conversion course will have to achieve at least QAA level 3 and be assessed at that level, including the period of learning in practice.

8. Will it be possible for students to study to become supplementary prescribers once independent prescribing has been approved?

It will be possible for a limited time while interim accreditation of independent prescribing is effective. Students will be able to complete the supplementary prescribing programme without completing the conversion course. However, universities will not be obliged to provide the supplementary prescribing exit qualification once interim accreditation of the independent prescribing qualification is approved. Students will need to be aware that they will only be eligible to take a conversion course for five years after qualification as a supplementary prescriber. In practice conversion courses may be phased out as the full independent prescribing programme is approved.

9. Will pharmacists who qualify as independent prescribers be able to register and practise as supplementary prescribers when independent prescribing programmes are introduced?

They will have to register with the Society as independent prescribers. This will enable them to work as either independent or supplementary prescribers according to their preferences or work situation. The independent prescribing curriculum contains all the content necessary for training supplementary prescribers.

10. What degree of competence in diagnosis will the Society expect pharmacists to achieve?

This will depend on the condition(s) for which the pharmacist intends to prescribe.

The pharmacist should be competent in the diagnostic skills needed for the clinical condition(s) for which they intend to prescribe and the treatments prescribed in order to monitor therapeutic outcomes and adverse effects. This includes the use of relevant diagnostic aids.

The pharmacist should also be able to recognise the common signs and symptoms of illness and when the patient has another clinical problem. They do not necessarily have to be able to diagnose the problem. They should be able to decide, within their professional competence, whether they should, treat the patient or refer. In support of this, they need to learn the purpose of common diagnostic techniques and equipment and to understand that while some are simple, competence in their use can take extended practice.

Teaching needs to emphasize the referral role, include common signs of clinical problems and how these may be assessed with common diagnostic aids.

11. Would it be possible for a pharmacist to identify a competence that they do not use as a prescriber and not offer evidence of competence in this area?

No. All pharmacists must demonstrate all learning outcomes/competencies.

12. Would it be possible for a pharmacist who believes that they are competent in a given area to be exempted from attendance at the relevant classes?

Yes, providing that there is reliable evidence to confirm the student's claim. In addition, the student must complete all assessments. If the claim is dealt with under APEL arrangements, standard university procedures must be followed.