



**QUEEN'S  
UNIVERSITY  
BELFAST**

# **Pharmacist Independent Prescribing**

Pharmacist information

The following information is provided in order to help a pharmacist decide whether or not the Pharmacist Independent Prescribing Course is suitable for them:

## 1. Who can apply to the course?

The entry requirements for a pharmacist independent prescriber course are that:

1.1 Applicants are registered as a pharmacist with the General Pharmaceutical Council (GPhC) or, in Northern Ireland, with the Pharmaceutical Society of Northern Ireland (PSNI).

1.2 Applicants are in good standing with the GPhC and/or PSNI and any other healthcare regulator with which they are registered.

1.3 Applicants must have at least two years' appropriate patient-orientated experience in a relevant UK practice setting post registration.

**Additional advice if completing the Application Form:** The 2 years does not include pre-registration training or any long term leave (e.g. maternity leave). The experience must involve direct i.e. patient-facing contact. The following are some examples of relevant patient-orientated experience:

- attendance on ward rounds
- medicines reconciliation
- patient counselling
- face-to face medication reviews
- running long term condition clinics.

Examples of experience which would **not be considered appropriate** include working in the pharmaceutical industry, sterile/aseptic manufacturing, head of a retail company or other management role with no patient contact.

1.4 Applicants have an identified area of clinical or therapeutic practice in which to develop independent prescribing practice. They must also have relevant clinical or therapeutic experience in that area, which is suitable to act as the foundation of their prescribing practice while training.

**Additional advice if completing the Application Form:** Please detail your experience on the application form. Some examples of demonstrating relevant clinical or therapeutic experience include:

- Having been a hospital clinical pharmacist on a surgical ward with the intention to prescribe in pain management or having been a hospital clinical pharmacist on a post-MI ward with the intention to prescribe in cardiovascular medicine.
- Having provided a Medicines Use Review service in community pharmacy in your intended area of prescribing e.g. asthma or diabetes.
- Having provided a blood pressure monitoring service in community pharmacy with the intention to prescribe for hypertension.

You will see on the application form that you also need to list some recent (within the past 2 years) CPD activities which are directly relevant to your intended area of clinical/therapeutic practice.

In order to ensure that you demonstrate clinical/therapeutic experience in your intended area of prescribing, your application form **must** be accompanied by a CV detailing your current job description and scope of practice. You **may** wish to send in further supporting evidence such as:

- Applicants' records of activity, such as portfolios, work experience or revalidation records
- Feedback from past employers on performance or references

1.5 Applicants must have a designated prescribing practitioner (DPP) who has agreed to supervise their learning in practice. The applicant's DPP† must be a registered healthcare professional in Great Britain or Northern Ireland with legal independent prescribing rights, who is suitably experienced and qualified to carry out this supervisory role, and who has demonstrated CPD or revalidation relevant to this role. Although an applicant may be supervised by more than one person, only one prescriber must be the DPP. The DPP is the person who will certify that successful pharmacists are competent to practise as independent prescribers.

**† For the 2021-22 intake, the course provider has specified that the designated prescribing practitioner must be medically qualified.**

## **2. Will the course allow me to prescribe as a supplementary prescriber as well as an independent prescriber and what are the differences between the two?**

Successful completion of this course qualifies you as both an independent and supplementary prescriber. After qualification you can choose to practise as either or both an independent and supplementary prescriber.

**Independent prescribers** are responsible for the assessment of patients with undiagnosed or diagnosed conditions, and for decisions about the clinical management required and for drawing up a treatment plan. The independent prescriber also has the authority to prescribe the medicines required as part of the plan.

**Supplementary prescribers** are authorised to prescribe for patients whose condition had been diagnosed or assessed by an independent prescriber, within the parameters of a clinical management plan (CMP). A CMP needs to be completed for each patient and must be signed by the independent prescriber.

## **3. What conditions can be treated by pharmacist prescribers?**

A pharmacist independent prescriber may prescribe autonomously for any condition within their clinical competence. This currently excludes 3 controlled drugs for the treatment of addiction.

Supplementary prescribers can prescribe any medicine (including controlled drugs) within the parameters of an agreed treatment plan.

Pharmacist prescribers should not prescribe any medicine that they do not feel competent to prescribe.

## **4. What does the prescribing training course consist of?**

Training consists of (a) a six modular course and (b) 90 hours in-practice training. The training also involves completion of a practice portfolio where students are

required to demonstrate how they meet all competencies listed within the Royal Pharmaceutical Society’s Competency Framework for all Prescribers. The prescribing competency framework can be found at this [link](#) . The learning outcomes for the course are listed in the appendix.

**(a) Modular course**

The course lasts 9 months (running from the end of September to the end of June) and comprises 60 credits (known as CATS points where 1 CATS point represents 10 hours of learning). A timetable for the modules is shown in Table 1.

**Table 1: Timetable for Modules**

	<b>Module Name</b>	<b>Delivery Month and type of learning</b>
<b>1</b>	<b>Evidence-based medicine and safe prescribing</b>	OCTOBER 2021 e-learning
<b>2</b>	<b>Consultation and communication skills</b>	NOVEMBER 2021 e-learning
<b>3</b>	<b>*Clinical skills, patient monitoring and onward referral</b>	JAN-FEBRUARY 2022 e-learning and live training
<b>4</b>	<b>Disease management</b>	MARCH 2022 e-learning and private study
<b>5</b>	<b>Professionalism</b>	APRIL 2022 e-learning and virtual discussion groups
<b>6</b>	<b>Influences on and psychology of prescribing and patient-centred care</b>	MAY 2022 e-learning
	<b>Submission of practice portfolio</b>	JUNE 2022

**The learning is a blend of e-learning, webinars and live training.** Webinars will be interspersed within the timetable to update students on their next steps and to

answer any questions about the course. The webinars will be timetabled for evenings. Recordings of the webinars will be available to students if they have been unable to attend one or want to update themselves on the information provided in the webinar.

**\* Denotes live training which will be delivered during a 1 week residential in Belfast which will be from Monday 7<sup>th</sup> to Friday 11<sup>th</sup> February 2022.**

Please note that attendance at the live residential week will be compulsory.

### **(b) Learning in-practice**

You will also need to complete 90 hours of learning in practice (approximately 12 days x 7.5 hours) during this period. This can be completed as days or half days or as several hours throughout the 9 months. It is your responsibility to identify a suitable DPP and secure their agreement to supervise you during this period.

Prospective DPPs must have:

- active prescribing competence applicable to the areas in which they will be supervising;
- appropriate patient facing clinical and diagnostic skills;
- supported or supervised other healthcare professionals; and
- the ability to assess patient facing clinical and diagnostic skills.

Traditionally, this mentor has been a medical doctor. Although the GPhC has recently permitted mentors to include non-medical prescribers, for the 2021-22 intake, the providers of the Queen's University Pharmacist Independent Prescribing course have specified that the **mentor must be a medical doctor**. The DPP could be a general practitioner in primary care or consultant physician in secondary care with whom you currently work closely in daily practice or intend to work closely with. Whilst the in-practice training must be under the supervision of a named DPP, you are not required to personally spend all of the time with your DPP. At least half of the 90 hours should be spent directly with your DPP. Following discussions with your

DPP, you may decide to spend some time with other clinicians who may be better placed to provide some of the learning opportunities. For example, depending on the clinical and practice area of the pharmacist:

- an F2 doctor on a respiratory ward round
- a nurse or pharmacist prescriber running a diabetes outpatient clinic
- a practice nurse or practice pharmacist running a hypertension clinic.

Listed below are a few examples of how your DPP could provide learning opportunities:

- Dedicated time and opportunities to observe how the DPP conducts a consultation/interview and the development of a subsequent management plan.
- Opportunities to allow in-depth discussion and analysis of clinical management plans where patient care and prescribing behaviour can be examined further.
- Facilitate learning by encouraging critical thinking and reflection using the practice portfolio.
- Allow opportunities for the pharmacist to carry out consultations and suggest clinical management and prescribing options, which are then discussed with the DPP.

## **5. Intended clinical/therapeutic area of prescribing**

Before coming onto the course you need to have an identified area of clinical or therapeutic practice you intend to prescribe in and specify this on the application forms.

This course does not teach clinical competence but rather allows you to demonstrate it. Irrespective of the clinical area chosen, when you qualify from this course, you will be legally entitled to prescribe in any area. However, as a professional practitioner, you would be required to restrict your prescribing to areas in which you are clinically competent. If you decide to move from one clinical area to another after qualification, you do not need to undertake the course again but we suggest that you

document how you are clinically competent in the new area through the usual CPD or revalidation channels.

**Additional advice if completing the Application Form:** We would recommend that you choose **one** clinical area to specialise in while studying on the IP course. If you wish to choose more than one area, then this will increase the number of clinical skills your DPP must assess you on.

You need to think carefully at the application stage about what area in which you intend to prescribe as your application must demonstrate CPD in this area and relevant clinical/therapeutic experience in this area (see pharmacist application form). Your DPP must also have active prescribing competence in your clinical/therapeutic area in order to be eligible to supervise you (see DPP agreement form).

## **6. How will my performance on the course be assessed?**

There is no final examination for this course. However, each module has an assessment exercise that you must pass. In addition to this, the 90 hours of learning in practice must be completed and a practice portfolio submitted.

Should you fail a module, you will be given a second attempt to pass it (up to a total of 2 failed modules). Should you fail a third module, you will be asked to leave the IP course. Failure due to a patient safety issue, for example making a decision that could cause a patient harm at a level of moderate or above, will result in overall failure of the IP course and you would not be allowed to repeat that module.

## **7. What qualification will I receive?**

Upon successful completion of the course and 90 hours of learning in practice training you will be awarded a Practice Certificate from Queen's University Belfast to allow you to be annotated on the GPhC register as an Independent Prescriber. Please note that it is the responsibility of the individual pharmacist to apply to the GPhC for annotation to their entry on the Register, and that you may not practise as an independent prescriber until your entry on the Register has been annotated accordingly.

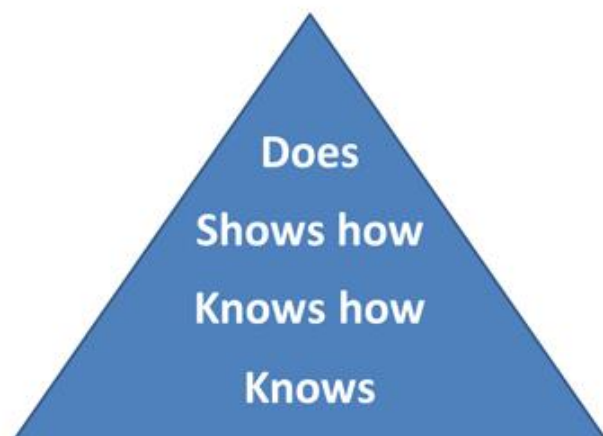


## **8. Further information**

If you would like to discuss your possible application, please contact the programme lead Dr Briegeen Girvin [b.girvin@qub.ac.uk](mailto:b.girvin@qub.ac.uk) .

## APPENDIX GPhC Learning outcomes for the Pharmacist Independent Prescribing course

Miller's Triangle is used to set the outcome level. Miller's triangle is a knowledge and competence hierarchy describing four levels of outcome as shown in Figure 1 below:



**Figure 1: Miller's triangle**

1. 'knows' (knowledge);
2. 'knows how' (application of knowledge);
3. 'shows how' (demonstrate competence in a limited way);
4. 'does' (demonstrates competence repeatedly and safely).

The learning outcomes are:

### *Domain 1: Person-centred care*

<b>Pharmacist independent prescribers at the point of registration will be able to:</b>	<b>Level</b>
1. Recognise the psychological and physical impact of prescribing decisions on people	Knows how
2. Understand and meet their legal responsibilities under equality and human rights legislation and respect diversity and cultural differences	Does
3. Take responsibility for ensuring that person-centred care is not compromised because of personal values and beliefs	Does
4. Demonstrate appropriate history-taking techniques through effective consultation skills	Does
5. Demonstrate an understanding of the role of the prescriber in working in partnership with people who may not be able to make fully informed decisions about their health needs	Shows how
6. Support individuals to make informed choices that respect people's preferences	Does

### *Domain 2: Professionalism*

<b>Pharmacist independent prescribers at the point of registration will be able to:</b>	<b>Level</b>
1. Demonstrate a critical understanding of their own role and the role of others in multi-professional teams	Does
2. Recognise their own role as a responsible and accountable prescriber who understands legal and ethical implications	Does
3. Apply relevant legislation and ethical frameworks related to prescribing, including remote prescribing and the handling and sharing of confidential information	Shows how
4. Recognise and manage factors that may influence prescribing decisions	Does
5. Apply local, regional and national guidelines, policies and legislation related to healthcare	Does
6. Reflect on and develop their own prescribing practice to ensure it represents current best practice	Does
7. Apply an understanding of health economics when making prescribing decisions	Shows how
8. Understand the clinical governance of the prescriber, who may also be in a position to supply medicines to people	Knows how
9. Recognise other professionals' practice and raise concerns related to inappropriate or unsafe prescribing by other prescribers	Shows how

*Domain 3: Professional knowledge and skills*

<b>Pharmacist independent prescribers at the point of registration will be able to:</b>	<b>Level</b>
1. Apply evidence-based decision making in all aspects of prescribing	Does
2. Manage the risks and benefits associated with prescribing decisions	Does
3. Demonstrate the application of pharmacology in relation to their own prescribing practice	Does
4. Demonstrate clinical and diagnostic skills in clinical settings appropriate to their scope of practice	Does
5. Create and maintain appropriate records which ensure safe and effective care and align with relevant legislation	Does
6. Identify relevant investigations and interpret results and data in their prescribing practice	Does
7. Utilise current and emerging systems and technologies in safe prescribing	Does
8. Identify and respond to people's need when prescribing remotely	Shows how
9. Apply the principles of effective monitoring and management to improve patient outcomes	Does
10. Recognise and manage prescribing and medication errors	Shows how
11. Recognise the public health issues in promoting health as part of their prescribing practice	Does

*Domain 4: Collaboration*

<b>Pharmacist independent prescribers at the point of registration will be able to:</b>	<b>Level</b>
1. Work collaboratively with others to optimise individuals' care, understanding their roles in the prescribing process	Does
2. Recognise their own role and responsibilities, and those of others, in safeguarding children and vulnerable adults	Knows how
3. Recognise when and where to refer people appropriately	Shows how
4. Collaborate with people to encourage them to take responsibility for managing care	Does
5. Demonstrate appropriate consultation skills to get information from individuals who are either unaware of or guarded about their health needs, to inform safe prescribing	Does
6. Recognise when to seek guidance from another member of the healthcare team or an appropriate authority	Does