

# **MODULE SPECIFICATION FORM**

Module Title;	Independent/Supplementary Prescribing fo Nurses (V300) at Level 6				Level:	6	Credit Valu	e: 40	С
Module code: NHS675 Cost		Centre:	G	ANG	JACS	2 code:	B700		
Semester(s) in which to be offered:				With effec	t from:	Septe	mber 2012		
Office use only:Date approvideTo be completed by AQSU:Date revised				Dec	otember 2 cember 2 loved)		ference to F	harmac	ists
	n no:	2	loved)						
Existing/New: Existing Title of module being Independent/Supplementary Prescribing Nurses (V300) and Pharmacists at Level									
Originating Academic Department: Health Sciences Module Leader: Eleri Mills									
Module duration (contact hours/directed/ directed private study:				: core/option fy programm priate):					

400 Hours <b>Nurses:</b> (156 hours theory; 78 hrs Practice, 166 directed/private study)	Core : <b>Nurses</b> : Glyndwr University Professional Certificate (Independent/Supplementary Prescribing for Nurses (V300)
	Option: BSc Health Studies

Percentage taught by Departments other than None originating Department (please name other Departments):

Programme(s) in which to be offered:	Pre-requisites per programme (between levels):	Co-requisites per programme (within a level):
BSc Health Studies	None	None
<b>Nurses</b> : Glyndŵr University Professional certificate (Practice		

Certificate in Independent/Supplementary Prescribing)	

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 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)

Expected Learning Outcomes						
At the end of this module, students should be able to:						
Knowledge and	d Understanding:					
	Deploy effective communication/relationship with patient/clients, carers, other prescribers and members of the health care team. 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.					
	Use effectively common diagnostic aids eg stethoscope, sphygmomanometer. Describe, comment upon and apply the relevant legislation to the practice of non- medical prescribing within a clinical 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.					
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.					
	Apply knowledge of drug actions and interactions in prescribing practice.					
8.	Reflect upon own role and the roles of others involved in prescribing, supplying and administering medicines.					
9.	Demonstrate the clinical decision making skills required to prescribe safety,					
10	<ul> <li>appropriately and cost-effectively.</li> <li>Practise competently within a framework of professional accountability and responsibility demonstrating the ability to manage own continuing professional development</li> </ul>					
	<ul> <li>Demonstrate an understanding of the public health issues relating to medicines use.</li> <li>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;</li> </ul>					
Transferable/K	ey Skills and other attributes:					
	his module the students should be able to se initiative and personal responsibility					

- Make decisions in complex situations
- Demonstrate effective verbal and written communication skills;

- Exercise initiative and personal responsibility, demonstrating the independent learning ability;
- Demonstrate competency in word processing and the presentation of data;
- Demonstrate competency in the use of libraries, databases and the internet as sources of information;
- Assess and manage risk

Assessment: please indicate the type(s) of assessment (eg examination, oral, coursework, project) and the weighting of each (%). **Details of <u>indicative</u> assessment tasks must be included**.

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

### A) 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
One	All (1,2.3.4,5,6, 7,8,9,10,11, 12)	Reflective log	50%		4000 words equivalent
Two	1,2,3,4,5,6,7, 8,9,10	Portfolio including OSCE	Pass/Refer		
Three	1,2,5,6,7,8,9, 10,11,12	Clinical management Plan with narrative	50%		2000 words
Four	2,7,9,10,12	Unseen examination consists of: MCQs and short answer questions.(80%pass mark)	Pass/refer	2 hours	

Five	7,9,10,12	Unseen examination	Pass/refer	1 hours	
		consists of:			
		Numeracy/drug			
		calculation test (100%			
		pass mark)			

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 problembased / 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 nurses are different –some have knowledge of pharmacology and related topics while others 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) 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 intends 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 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
- 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:**

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

Courtney, M and Griffiths, M (2010) Independent and supplementary prescribing – an essential guide  $(2^{ND} Edition)$ . Cambridge. Cambridge University Press

Neil, M.J. (2012) *Medical pharmacology - at a glance. (7<sup>th</sup> edition).* Chichester. Wiley-Blackwell

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

Rang, H.P. Dale, M.N. (2007) *Pharmacology (6<sup>th</sup> edition)* London. Churchill Livingstone.

#### Other indicative reading:

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

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

Lymn, J., Bowskill, D., Bath-Hextall, F., Knaggs, R. (2010) *The new prescriber – an integrated approach to medical and non-medical prescribing*. Chichester. Wiley- Blackwell

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

National Prescribing Centre (2003) *Maintaining competence in prescribing: An outline framework to help nurse prescribers*. (2<sup>nd</sup> edition) Liverpool. National Prescribing Centre

National Prescribing Centre (2006) A competency framework for shared decision making with patients – Achieving concordance for taking medicines. Liverpool. National Prescribing Centre

Nursing and Midwifery Council (2006) *Standards of proficiency for nurse and midwife prescribers.* London: Nursing and Midwifery Council (NMC).

Nursing and Midwifery Council (2007). Additional requirement to include within the indicative content of nurse independent prescribing education and training programmes, NMC Circular 30/2007. London: Nursing and Midwifery Council (NMC).

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

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Nursing and Midwifery Council (2008). *Remote assessment and prescribing, NMC Circular 16/2008.* London: Nursing and Midwifery Council (NMC).

Nursing and Midwifery Council (2010). *Nurse and midwife independent prescribing of unlicensed medicines NMC Circular 04/2010*. 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. Welsh Assembly Government

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