



Non-Medical Prescribing Policy (General Practice)

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1.0 Purpose:

The NHS Business Services Authority (BSA) can only charge the cost of a prescription back to the correct prescriber and prescribing budget if it has been notified of the link between that prescriber and prescribing budget. The CCG is responsible for notifying the BSA of non-medical prescriber (NMP) changes.

This policy describes the processes the CCG will follow in order to

- add an NMP to a prescribing budget;
- remove an NMP from a prescribing budget;
- make changes to an NMP's details.

The CCG has a role to support NHS providers to improve and maintain the quality of NHS healthcare provided to the population. Therefore the policy outlines the support the CCG will provide to new NMPs and includes a Good Practice Guide for Practices Employing Non-Medical Prescribers (appendix 7).

2.0 Scope:

At the time of preparing this policy, the CCG is only responsible for informing the BSA about Nurse Prescribers and Pharmacist Prescribers employed by or working within GP Practices in Stoke-on-Trent and North Staffordshire CCGs.

3.0 Background:

3.1 What is a Non-Medical Prescriber?

A non-medical prescriber is a healthcare professional, other than a doctor or dentist, who is appropriately qualified to prescribe medication to humans in the UK. This may be split into independent prescribers and supplementary prescribers.

3.1.1 Independent prescribers are practitioners responsible and accountable for the assessment of patients with previously undiagnosed or diagnosed conditions and for decisions about the clinical management required, including prescribing. As well as doctors and dentists this includes pharmacists, physiotherapists, podiatrists, nurses, optometrists and therapeutic radiographers. A pharmacist or nurse independent prescriber may prescribe autonomously for any condition within their clinical competence. This currently excludes three controlled drugs for the treatment of addiction (diamorphine, cocaine and dipipanone).

3.1.2 Supplementary prescribing is a partnership between an independent prescriber (doctor or dentist) and a supplementary prescriber to implement an agreed Clinical Management Plan for an individual patient with that patient's agreement. Nurses, midwives, pharmacists, chiropodists, podiatrists, physiotherapists, radiographers, optometrists and dieticians may be supplementary prescribers. Prescribed items are subject to clinical competence and inclusion within a clinical

management agreed. Again diamorphine, cocaine and dipipanone for the treatment of addiction are excluded.

3.2 The Aims of Non-Medical Prescribing within the NHS:

- Improve patient care without compromising patient safety.
- Quicker, easier more efficient access to medicines for patients.
- Meet the needs of patients who find it hard to access services.
- Fill geographical or skills gaps in services.
- Increase patient choice in accessing medicines.
- Make better use of healthcare professionals' skills.
- Contribute to more flexible team working across the NHS.
- Reduce the workload of doctors by undertaking long term condition management and freeing up general practitioner time for complex case management.

3.3 Pharmacist Prescribers:

Supplementary prescribing was introduced in the UK in 2003 for pharmacists, but was superseded by independent prescribing in 2006. The General Pharmaceutical Council (GPhC) is responsible for accrediting independent prescribing courses for pharmacists and courses to convert supplementary prescribers to independent prescribers.

On successful completion of a GPhC-accredited course, pharmacists will receive a practice certificate in independent prescribing, making them eligible to apply for annotation on the register.

Pharmacist prescribers working in a Stoke-on-Trent or North Staffordshire GP Practice may only prescribe once the CCG and the BSA authorisation processes below have been completed.

3.4 Nurse Prescribers:

There are two types of nurse prescriber:

- Community Practitioner Nurse Prescriber- specialist practitioner can prescribe from the Nurse Prescribers' Formulary for Community Practitioners (recorded as V100 or V150 with the Nursing and Midwifery Council (NMC)).
- Independent and Supplementary Nurse Prescriber (V200/300).

Extended formulary nurse prescribing and supplementary nurse prescribing (V200) has been superseded by the nurse independent/supplementary prescriber qualification (V300).

In order to prescribe medicinal products, nurses must have recorded their prescriber qualification on the NMC register.

Nurse prescribers working in a Stoke-on-Trent or North Staffordshire GP Practice may only prescribe once the CCG and the BSA authorisation processes below have been completed.

4.0 Process:

4.1 Newly Qualified NMPs:

Once the NMP has successfully completed the prescribing course, received notification from their regulatory body and the information has been updated on their national register, the individual should contact the CCG Medicines Optimisation Team on 01782 298084 to request a meeting with a CCG pharmacist and in the case of a nurse prescriber, the CCG Primary Care Nurse Lead too.

Before the meeting:

The CCG will send the NMP the NMP Policy with appendices 1, 5, 6 and 7.

The NMP's employer should complete the Joining Form (appendix 1) and e-mail it to the pharmacist attending the meeting, including a statement that the employer has completed a DBS check on the NMP. The CCG will save a copy of this e-mail in the appropriate file.

The CCG will verify the NMP's qualification by accessing the relevant regulatory body register online and save this to the appropriate file: Pharmacist (full name and GPhC number required):

www.pharmacyregulation.org/registers; Nurse (full name and NMC PIN required): www.nmc-uk.org/search-the-register/

The NMP should complete the Intention to Prescribe Form (appendix 5) and bring it to the meeting, along with:

An original letter from the University confirming they have successfully completed an accredited Non-Medical Prescriber course, or certificate of completion.

Photo identification, such as valid driving licence or passport.

A recent (within last 3 months) utility bill, but not a mobile phone bill, as proof of home address.

At the meeting:

The CCG will check the NMP's qualification document, photo ID and utility bill. A copy of the qualification document will be taken to place on the appropriate file and details of the ID and utility bill will be recorded as evidence they have been checked.

The NMP's intended scope of prescribing practice will be discussed using the completed Intention to Prescribe form to aid discussion. Practical, relevant local NHS prescribing information will be shared and access to local NMP training events will be discussed.

The CCG pharmacist will complete the Checklist and Review Form (appendix 3), to ensure all points are covered.

Following the meeting:

The Checklist and Review Form will be sent to the NMP and their Practice Manager and will contain feedback and points to reflect on if necessary.

A CCG authorised signatory will e-mail the completed Joining Form to the BSA at Nhsbsa.prescriptioninformation@nhs.net, copying in the NMP. A copy of this e-mail should be saved on file as proof of sending.

The BSA takes 3 to 5 working days to process the form. After this time has elapsed, if the NMP has heard nothing further from the CCG, they may start to issue prescriptions. Handheld prescription pads may also be ordered for the NMP by the practice in the usual way.

The CCG NMP register held by the Medicines Optimisation Department will be updated.

4.2 Existing NMP Moving into the CCG Catchment Area or between CCG Practices:

The NMP should contact the CCG Medicines Optimisation Team, telephone 01782 298084.

The CCG will send the NMP a Non-Medical Prescriber Joining Form (appendix 1).

The NMP's employer should complete the joining form and e-mail it to jill.bennett@northstaffs.nhs.uk, including a statement that the employer has checked the NMP's ID, NMP qualification and completed a DBS check on the NMP. The CCG will save a copy of this e-mail in the appropriate file.

The CCG will verify the NMP's qualification by accessing the relevant regulatory body register online and save this to the appropriate file: Pharmacist (full name and GPhC number required): www.pharmacyregulation.org/registers; Nurse (full name and NMC PIN required): www.nmc-uk.org/search-the-register/

A CCG authorised signatory will e-mail the completed Joining Form to the BSA at Nhsbsa.prescriptioninformation@nhs.net, copying in the NMP. A copy of this e-mail should be saved on file as proof of sending.

The BSA takes 3 to 5 working days to process the form. After this time has elapsed, if the NMP has heard nothing further from the CCG, they may start to issue prescriptions. Handheld prescription pads may also be ordered for the NMP by the practice in the usual way.

The CCG NMP register held by the Medicines Optimisation Department will be updated.

A NMP must be registered at each practice they prescribe within.

4.3 NMP Leaving a CCG Practice:

The NMP should contact the CCG Medicines Optimisation Team, telephone 01782 298084.

The CCG will send the NMP a Non-Medical Prescriber Leaving Form (appendix 2).

The NMP's employer should complete the leaving form and e-mail it to jill.bennett@northstaffs.nhs.uk

A CCG authorised signatory will e-mail the completed Leaving Form to the BSA at Nhsbsa.prescriptioninformation@nhs.net, copying in the NMP. A copy of this e-mail should be saved on file as proof of sending.

The CCG NMP register held by the Medicines Optimisation Department will be updated.

On termination of employment, any prescription pads must be returned to the employer when the prescriber ceases their prescribing duties.

4.4 Change to NMP's Details (NMP code, name, qualification)

The NMP should contact the CCG Medicines Optimisation Team, telephone 01782 298084.

The CCG will send the NMP a Non-Medical Prescriber Change Form (appendix 3).

The NMP's employer should complete the change form and e-mail it to jill.bennett@northstaffs.nhs.uk

A CCG authorised signatory will e-mail the completed Change Form to the BSA at Nhsbsa.prescriptioninformation@nhs.net, copying in the NMP. A copy of this e-mail should be saved on file as proof of sending.

The BSA takes 3 to 5 working days to process the form. After this time has elapsed, if the NMP has heard nothing further from the CCG, they may start to issue prescriptions with their new details. Handheld prescription pads may also be ordered for the NMP by the practice in the usual way. Obsolete prescription pads should be returned to the employer.

The CCG NMP register held by the Medicines Optimisation Department will be updated.

5.0 Acknowledgements:

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Nikki Henson (no longer in post)

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Version 2 Review 2015:

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Surinder Kumar

Jane Rosam

6.0 References:

1. North Staffordshire CCG Non-Medical Prescribing Policy, Version 13. 3/9/14
2. Stoke-on-Trent CCG Non-Medical Prescribing Policy, Version 2. 4/2/15
3. NHS Prescription Services website, accessed 15/1/16
4. BNF Online, accessed 15/1/16
5. General Pharmaceutical Society website, accessed 15/1/16
6. Nursing & Midwifery Council website, accessed 15/1/16
7. NICE website, accessed 15/1/16
8. Medicine, Ethics and Practice, edition 39

A Good Practice Guide for General Practices Employing Non-Medical Prescribers

The CCG has a role to support NHS providers to improve and maintain the quality of NHS healthcare provided to their population. This is a good practice guide to help support the employment of a non-medical prescriber within a General Practice. We strongly recommend the following national and /or local good practice principles are followed.

For help and advice, please contact:

- The CCG Medicines Optimisation Team- telephone 01782 298084 for general advice and prescription queries.
- or
- The CCG Primary Care Nurse Lead, telephone 01782 401040, if registered with the NMC and requiring professional support.

General Standards of Prescribing Practice:

The following section includes general advice with regard to good standards of practice for nurse and pharmacist NMPs in relation to NMC and GPhC standards.

- The individual must only prescribe once they have successfully completed a NMC/ GPhC approved programme and this has been annotated on the appropriate professional register.
- The qualifications and register entry must be checked and verified by the employer.
- The individual is professionally accountable for their prescribing decisions, including actions and omissions and cannot delegate this accountability to any other person.
- The individual must only prescribe within their level of experience and competence.
- If the individual is asked to move to a new role, the individual must first be satisfied they have the correct level of experience and competence in that area.
- The CCG, NMC and GPhC recommend that every Independent/Supplementary Prescriber and Community Practitioner Nurse Prescriber should ensure they have professional indemnity insurance by means of a professional organisation or trade union body.
- Information on standards expected of nurses and pharmacists is available on the NMC and GPhC websites.

Ongoing Professional Development/Competence:

Individual NMPs and their employers are responsible for ensuring and demonstrating ongoing professional competency (including CPD) in their chosen fields of expertise as per guidance from the relevant regulatory body. From April 2016 nurses will have to revalidate every 3 years to maintain their registration with the NMC.

General Practices may wish to adopt. A Single Competency Framework for all Prescribers produced by the National Prescribing Centre (appendix 6).

Reporting Adverse Reactions:

If a patient experiences an adverse reaction to a medication the NMP has prescribed, the NMP should record this in the patient's notes and notify MHRA via the Yellow Card Scheme immediately. Yellow cards can be found in the back of the BNF or online at www.yellowcard.gov.uk. In addition the NMP has a duty to inform the patient they may also report adverse reactions independently to the Yellow Card Scheme.

Safe Handling and Security of Prescription Pads

The NMP is responsible for the safety of their prescription pad. The NMP should take all reasonable precautions to prevent loss or inappropriate use. The NMP or their employer (as per Practice Standard Operating Procedure) should keep a record of the first and last serial number of prescription pads issued to them.

1. Prescription pads are controlled stationery and are the property of the employing organisation.
2. Blank prescriptions must not be pre-signed before use.
3. Prescription pads should not be left unattended or accessible to others.
4. When travelling, the prescription pad should not be visible and should be locked in a secured container provided by the employer.
5. The prescription pad should be removed when the car is unattended.
6. On termination of employment, the prescription pad must be returned to the employer when the prescriber ceases their prescribing duties.
7. For lost or stolen prescriptions, refer to in-house policy and procedures in place with the NHS Regional Team.

CAS Alerts:

To access safety alerts via email, contact:

Central Alerting System (CAS) Team:

CAS Helpdesk Tel: 020 7972 1500 / Email: safetyalerts@dh.gsi.gov.uk

CAS Website: <https://www.cas.dh.gov.uk>

BNF and NPFs:

For all advice and queries regarding access to a BNF, the General Practice should contact:

BNF@Binleys.com

The online version of the BNF is more up to date (and accurate) than the current paper version:

<https://www.medicinescomplete.com/mc/bnf/current/>

Ordering Prescriptions

The current process is for practices to order from PCSS Walsall via www.pcss.bsbc.nhs.uk.

Prescribing Data

Practices can access the formerly known 'Prescribing Analysis Report' (PAR) from NHS BSA. The PAR reports practices used to access were decommissioned in 2014. However, the data has been transferred to the 'Information Service Portal' on the NHS BSA website, appearing in 7 different reports, instead of one. To access these reports, practices need to register as follows:

Click on this link <https://apps.nhsbsa.nhs.uk/infosystems/welcome>, then click on 'Register as a new user'. Fill in the form with personal details, select 'Practice' as organisation type and enter the practice code. Click on 'look up' to bring up the practice details and then click on 'register as practice user'. At this point, you can determine if the Senior Partner or the Practice Manager is an authoriser as his/her name will appear in the 'Authoriser' box. By selecting the authoriser's name, you can then submit the form. An email will be sent to the authoriser by NHS BSA asking to approve the request. When the authoriser approves the request, an email is sent to the individual with a link to create password and set security questions. The link will be valid for 30 days.

If the Senior Partner or Practice Manager is not registered as authoriser (you will ascertain this because the name will not appear in the 'authoriser' box), follow the same steps as above described, then add the authoriser's email address in the 'add authoriser' box. NHS BSA will use due diligence to check the authoriser's credentials and add to the list of 'authorisers'.

Useful Resources:

Standards of Proficiency for Nurse and Midwife Prescribers www.nmc-uk.org.

GPhC Standards of Practice www.pharmacyregulation.org/standards

A Single Competency Framework for all Prescribers. National Prescribing Centre. May 2012.

Security of Prescription Forms Guidance. NHS Protect. August 2015