The Newcastle Upon Tyne Hospitals NHS Foundation Trust

Non-Medical Prescribing Policy

<table>
<thead>
<tr>
<th>Version No:</th>
<th>3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective From:</td>
<td>04 February 2020</td>
</tr>
<tr>
<td>Expiry Date:</td>
<td>04 February 2023</td>
</tr>
<tr>
<td>Date Ratified:</td>
<td>28 January 2020</td>
</tr>
<tr>
<td>Ratified By:</td>
<td>Clinical Policy Group</td>
</tr>
</tbody>
</table>

1. Introduction

The Trust is committed to improving patients’ access to medicines and is using non-medical prescribing (NMP) to facilitate service redesign.

The Trust’s published aims, together with the strategic development of medicines management, form the basis for the development of NMP within the organisation with priority being afforded to:

- Enhancing the patient experience
- Optimising the skills and experience of non-medical healthcare professionals
- Improving efficiency and effectiveness
- Improving access to treatment

When Directorate Teams are considering development opportunities for NMP the following issues should be considered:

- Structure of the existing multi-professional team
- The potential benefits and challenges from the perspective of the patient, professional team and directorate (quality, economic, resources, prescribing budget, training, support and supervision of the individual, team and service).
- Knowledge and skills and education of the professional
- Patient safety and best practice

2. Scope

The aim of NMP is to give patients more streamlined access to medicines, improve access to services and make better use of nurses’, pharmacists’ and other non-medical health professionals’ skills. The Department of Health has issued clear guidance about the individual staff groups permitted to prescribe and the legal boundaries within which they must practice (Appendix 1).

It is essential that all aspects of NMP are supported by a robust and consistent governance framework. This will be steered by the NMP Group and the Trust NMP Lead.
3. **Aims**

This document aims to:
- Identify a clear framework for the ongoing development of non-medical prescribing (NMP) within the Trust, in line with national recommendations and good practice.
- Define the process for the implementation of NMP within Directorates and for individual healthcare professionals throughout the Trust.
- Define the clinical governance framework required to support NMP and ensure measures such as audit and evaluation are carried out effectively.
- Assist managers and potential NMP in the application to study process.

4. **Duties and responsibilities**

4.1 Organisation

The implementation of NMP is supported by the Trust’s Clinical Governance and Medicines Management systems.

4.2 The Non-Medical Prescribing Group

The Non-Medical Prescribing Group (NMP Group), supported by the Trust’s Medicines Management and Governance Committee (MMGC), maintains overall responsibility for the strategic development, integration, implementation and monitoring of NMP within the organisation.

The remit of the NMP Group is to:
- Review, maintain and update the NMP Strategy for the Trust
- Ensure all NMP developments within the Trust are evidence-based and in line with national direction and policy
- Discuss and approve all appropriate applications by NMPs to prescribe within the Trust.
- Ensure all NMPs adhere to professional guidance from the relevant regulatory body
- Review and approve Patient Group Directions then refer on to the Chair of the MMGC for ratification
- Promote best practice and share experience in the application of NMP within the Trust
- Act as a professional forum for discussion of NMP issues within the Trust
- Consider opportunities and professional development for both new and existing NMPs
- Form links with the local universities providing NMP courses and be part of any course review process
- Ensure arrangements are in place to audit and evaluate practice, measure competence and monitor performance of NMPs.
4.3 Line Manager
The healthcare professional’s line manager is responsible for:

- Identifying areas and individuals that would benefit from NMP and supporting individuals from the application process through to completion of the course and in their new role
- Ensuring that NMPs have a personal development plan and have access to appropriate continuing professional development opportunities to enable them to maintain their prescribing competencies.
- Assessing knowledge and clinical / prescribing competences and checking prescribers’ activity is audited at least on an annual basis.
- Ensuring NMP is included in the healthcare professional’s job description e.g. included within extended practice or in the person specification.

5. Application and registration process

5.1 Application by healthcare professionals to study
In advance of an application to university healthcare professionals are required to meet all the requirements listed in Appendix 2. These vary between professional groups.

The individual must submit a proposal form, complete with signatures, to the NMP Group for approval. The Proposal for Non-Medical Prescribing can be found in Appendix 4. If successful the individual will be informed in writing by the chair of the NMP Group. They can then apply to the university for a place on the next available course. Accredited training of NMPs will be undertaken at a higher education institute. Details pertaining to recommended local training programmes can be found in Appendix 3.

Note: The healthcare professional must obtain a letter of Trust support from the chair of the NMP Group before applying to the university.

5.2 Post Qualification or non-medical prescribers joining the Trust
Healthcare professionals who have successfully completed an accredited NMP training programme and existing NMPs who join the Trust must complete the following to enable them to prescribe within the Trust:

- Register their qualification with their professional body and maintain their professional registration
- Confirm arrangements for ongoing support and supervision from their mentor and NMP buddy
- Agree the parameters of their prescribing with their directorate and the Chair of the NMP Group then submit the final completed proposal to the Chair of the NMP Group for discussion at the next meeting. NMPs will be given authority to prescribe and informed by letter. NMPs must not begin prescribing until they receive written authorisation. Prescribers may often be required to use their individual professional registration number to confirm their identity, particularly in community settings.
• Outpatient prescription pads can be obtained from the Pharmacy Department at RVI and Freeman Hospital for hospital NMPs.
• Prescription pads will be ordered for community healthcare professionals on an individual basis by the pharmacy administrator for NMP. A request must be made and the appropriate paperwork for Business Services Authority registration completed once Trust approval for NMP has been granted. These pads can be collected from the Pharmacy Department at the Freeman Hospital.

5.3 The Trust NMP Register
The Trust NMP Register, which is maintained by the administrator for NMP and accessible via the Trust NMP Lead, contains the following information:
• The name of the non-medical prescriber, clinical role, specialist area of practice Scanned signature
• Prescribing status (Independent and / or Supplementary or Community Practitioner Nurse Prescriber)

6 Guidance and procedures
Approved NMPs must:
• Ensure that patients are (wherever possible) made aware that they are being managed by a NMP.
• Prescribe from the local formulary within their level of competence / clinical experience and in accordance with local, national and professional guidelines
• Maintain accurate, legible, unambiguous records that ensure patient safety
• Report any medication incidents or near misses in accordance with Trust procedures
• Report any suspected adverse drug reactions to the clinician responsible for the patient’s ongoing care and complete a yellow card where appropriate.
• Maintain evidence of their continuous professional development and prescribing competencies
• Review and evaluate their practice on an annual basis using methods such as audit and prescribing assessment
• Immediately inform the organisation of any change in their personal details / role within the organisation or any circumstances that might adversely influence their ability to practice
• Undertake a period of supervised practice following a break in NMP practice determined by the NMP in consultation with their line manager.
• Inform HR and the chair of the NMP Group that they are a NMP if they leave the Trust

Approved NMPs must never:
• Prescribe outside of their area of competence or clinical experience
• Prescribe any medication for themselves or for anyone with whom they have a close personal or emotional relationship
• Leave prescription pads unattended. When not in use prescription pads must be stored in a designated locked area. The NMP Lead must be notified if a prescription pad is lost or stolen.

7. Governance

NMPs must always prescribe within their area of expertise and competence and feel comfortable with the prescribing decisions they have made. It is essential that they have medical support either from a named mentor or from within the team in which they work. A NMP should never be pressured to prescribe something they are not familiar with and a referral system should be in place for when such a situation arises.

8. Liability

The Trust has a duty of care to patients and is vicariously liable for the actions or omissions of its employees. The Trust will support NMPs who:
• Complete an accredited period of study pertaining to NMP and have acquired authorisation from the organisation
• Prescribe within their level of clinical experience and competence and in accordance with local, national and professional guidelines
• Maintain their underlying knowledge and clinical / prescribing competences together with their professional registration.

9. Training

Accredited prescribing courses are available from Northumbria, Teesside and Sunderland Universities. See Appendix 3 for further details

10. Equality and Diversity

The Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds.
11. Monitoring Compliance

<table>
<thead>
<tr>
<th>Standard / process / issue</th>
<th>Monitoring and audit</th>
<th>Method</th>
<th>By</th>
<th>Committee</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintain an up to date register of all Trust NMPs.</td>
<td>10% of all records reviewed to ensure nurses remain employed by Nuth</td>
<td>Chair of NMP group</td>
<td>MMGC</td>
<td>Annual</td>
<td></td>
</tr>
<tr>
<td>Ensure all NMPs prescribe within their area of competence.</td>
<td>Prescribing data reviewed for 5% of registered NMPs</td>
<td>Chair of NMP group</td>
<td>MMGC</td>
<td>Annual</td>
<td></td>
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</tbody>
</table>

12. Consultation and Review

This strategy was developed in consultation with the Trust Non-Medical Prescribing Group Compliance with the strategy will be monitored by the NMP Group who will acquire feedback from those parties identified within the strategy together with local educational providers. An annual review of progress against the strategy will be undertaken by the NMP Group and presented to the Trust’s Medicines Management and Governance Committee as required.

13. Implementation

This document will be available on the Trust intranet for all staff to view. Individuals who express an interest in developing as NMPs will be signposted accordingly.

14. References / Bibliography

Royal Pharmaceutical Society of Great Britain (July 2016), A Competency Framework for Prescribers


NICE (2019) Non-Medical Prescribing

https://bnf.nice.org.uk/guidance/non-medical-prescribing.html
Appendix 1

Categories of Non-Medical Prescribers

**Nurse Independent Prescribers** are able to prescribe any licensed or unlicensed medicine for any medical condition within their competence. This also applies to all schedule 2 to 5 controlled drugs with the exception of prescribing of cocaine, diamorphine or dipipanone for the treatment of addiction (restricted to Home Office licensed doctors).

**Pharmacist Independent Prescribers** are able to prescribe any licensed medicine for any medical condition within their competence including schedule 2-5 controlled drugs, with the exception of prescribing of cocaine, diamorphine and dipipanone for the treatment of addiction (restricted to Home Office licensed doctors).

**Optometrist Independent Prescribers** can prescribe any licensed medicine for ocular conditions affecting the eye and the tissues surrounding the eye, within their recognised area of expertise and competence, excluding controlled drugs.

**Physiotherapist independent prescribers** are able to prescribe a range of drugs that are appropriate to their area and scope of practice. They are permitted to prescribe certain controlled drugs.

**Therapeutic radiographer independent prescribers** can prescribe any medicine for any medical condition (within their own level of competence and expertise). This includes off-label medicines subject to accepted clinical good practice.

**Supplementary prescribers e.g. dietitians** are able to prescribe all drugs agreed within a clinical management plan as part of a tripartite agreement with the consultant and patient.

**Podiatrist Independent Prescribers** can prescribe any medicine for any medical condition within their own area of professional competence and expertise. This includes certain controlled drugs for oral administration.

**Community Practitioner Nurse Prescribers** can only prescribe dressings, appliances and licensed medicines listed in the Nurse Prescribers' Formulary for Community Practitioners.
Appendix 2

Prerequisites for Healthcare Professionals applying to undertake an accredited NMP training programme

All applicants must

- Have a valid registration with their professional body
- Be appointed to a substantive post where they will have the need and opportunity to act as an independent / supplementary prescriber upon qualification.
- Demonstrate the ability to study at degree level (level 6) or above
- Have completed a CRB check within the last 3 years (NMC requirement)
- Be able to provide evidence of numeracy skills e.g. GCSE Maths, feedback from on-line tutorials e.g. Authentic World or Kings College London (www.kcl.ac.uk)
- Identify a Designated Prescribing Practitioner who will be willing / able to contribute to and supervise the ‘learning in practice’ element of their training and provide post qualification clinical supervision. This may be a doctor, nurse or pharmacist depending on the course undertaken (see university course guidance for further information)

Additional requirements

- **First level Registered Nurses / Midwives:** Have at least three years post-registration experience of which at least one year immediately preceding their application must be in the clinical area in which they intend to prescribe.
- Provide evidence of competence in history taking, undertaking a clinical assessment and making a diagnosis i.e. comprehensively assess a patient’s physiological and/or psychological condition, understand the underlying pathology and identify the appropriate medicines regime.

Registered Pharmacists:

- Have at least two years’ experience practicing as a registered pharmacist in a clinical environment (hospital or community), and at least one year immediately preceding their application must be in the clinical area in which they intend to prescribe.
- Be able to demonstrate competence to prescribe in the area in which they will prescribe following training.

Registered Optometrist:

- Have at least two years’ post registration experience.
- Be able to demonstrate competence to prescribe in the area in which they will prescribe following training.
Registered Physiotherapists, Chiropodists / Podiatrists, Dietitians and Radiographers
• Be a senior healthcare professional with at least three years post-registration experience of which at least one year immediately preceding their application must be in the clinical area in which they intend to prescribe. It is highly likely that individuals will be healthcare professionals in senior clinical / specialist posts.
• Be able to demonstrate competence to prescribe in the clinical area in which they will prescribe following training.
Appendix 3

Northumbria University delivers a Community Practitioner Nurse Prescriber course (V150) for community staff nurses who wish to prescribe from the Community Nurse Formulary.

Northumbria, Teesside and Sunderland Universities, offer a part-time Independent Prescribing course (V300) for nurses. These courses may also be accessed by AHPs. Further information is available on the individual universities’ websites.

The University of Sunderland offers a part-time prescribing course for pharmacists.
Appendix 4 Trust Application Form

Proposal for Non Medical Prescribing

Please complete the form as indicated below:
- To apply for independent prescribing complete sections 1, 2a-d, 3, 4, 5, 6 & 7
- To apply for supplementary prescribing complete sections 1, 2a-e, 3, 4, 5, 6 & 7
- To apply as an existing prescriber joining the Trust complete sections 1, 2a-d, 2f, 3, 5c, 5e, 6, 7a-b & 8a-b

<table>
<thead>
<tr>
<th>Section 1: Personal Details</th>
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</thead>
<tbody>
<tr>
<td><strong>Name</strong></td>
<td><strong>Directorate</strong></td>
</tr>
<tr>
<td><strong>Job Title</strong></td>
<td><strong>Base Site full address and telephone number</strong></td>
</tr>
<tr>
<td><strong>Email</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Professional Body</strong></td>
<td><strong>Profession Registration Number</strong></td>
</tr>
<tr>
<td><strong>Date of Registration</strong></td>
<td><strong>Date of Birth</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 2: Scope of Practice</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2a</strong> In what capacity do you intend to use your prescribing?</td>
<td></td>
</tr>
<tr>
<td><strong>2b</strong> How long have you been working in your specialist area</td>
<td></td>
</tr>
<tr>
<td><strong>2c</strong> Which patient group(s) will you prescribe for:</td>
<td></td>
</tr>
<tr>
<td>Inpatients</td>
<td>Community</td>
</tr>
<tr>
<td>Outpatients</td>
<td>Paediatrics</td>
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<tr>
<td><strong>2d</strong> For supplementary prescribers</td>
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</tr>
<tr>
<td>Please give details of the independent prescribers with whom you will agree clinical management plans, and provide details as to how these will be agreed.</td>
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</tr>
<tr>
<td><strong>2f</strong> If you are an existing prescriber joining the Trust</td>
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</tr>
<tr>
<td>Please give details of your prescribing experience</td>
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</tbody>
</table>
Section 3: Prescribing as part of your role

3a  Please give your rationale for, and the benefits of becoming a prescriber

3b Is non medical prescribing defined within your job description?
Yes ☐
No ☐

If no, please give details of how you propose to incorporate this into your existing job description.

Section 4: Academic Experience

4a Please give evidence of your ability to study at degree level.
(Qualification and date achieved)

4b What clinical skills / physical assessment / history taking experience do you have?
(Include formal qualifications and work experience)

Section 5: Clinical Support & Maintaining Knowledge & Competence

5a  Please provide details pertaining to your designated prescribing practitioner / mentor

Name:

Job title / grade:

Prescribing Practitioner’s experience in NMP’s specialist area:

Prescribing Practitioner’s teaching and supervisory experience/qualifications:

5b Describe how you propose to meet the minimum hours with your Prescribing Practitioner during your period of study
5c Outline the arrangements within your specialist area for ongoing clinical support/supervision once your period of study is complete, including a named medical mentor/supervisor

Named medical mentor/supervisor:

Arrangements for support:

5d Have you identified an experience NMP ‘buddy’ within the Trust who is willing and able to provide you with support during and after your period of study?

<table>
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<tr>
<th>Yes</th>
<th>No</th>
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If yes, please provide details:

5e Describe how you propose to maintain and review your underlying knowledge and clinical competence?

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**Section 6: Evaluation**

6a Describe how you intend to evaluate your practice, e.g. peer review, audit etc.

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**Section 7: Approval**

7a Proposal review

<table>
<thead>
<tr>
<th>Signature of Proposed Prescriber</th>
<th>____________________________</th>
<th>Date</th>
<th><em><strong>/</strong></em>/___</th>
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<tbody>
<tr>
<td>Name __________________________</td>
<td>Date</td>
<td><em><strong>/</strong></em>/___</td>
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</table>

| Signature of Prescribing Practitioner / Mentor | ____________________________ | Name & Designation | Date | ___/___/___ |
|                                               | ____________________________ |                     |      |             |
| Name __________________________ | Date | ___/___/___ |

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<thead>
<tr>
<th>Signature of Directorate Manager</th>
<th>____________________________</th>
<th>Date</th>
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<tbody>
<tr>
<td>Name __________________________</td>
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<tr>
<th>Signature of Clinical Director</th>
<th>____________________________</th>
<th>Date</th>
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<tbody>
<tr>
<td>Name __________________________</td>
<td>Date</td>
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</table>
### 7b Application to Study Approval by Non-Medical Prescribing Group

<table>
<thead>
<tr>
<th>Signature of Chair</th>
<th>Date</th>
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<table>
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<tr>
<th>Name</th>
<th>Date</th>
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### Section 8: Post-Qualification Approval

#### 8a Professional Body Approval & Registration

<table>
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<tr>
<th>Professional Body</th>
<th>Date registered as NMP</th>
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</table>

<table>
<thead>
<tr>
<th>NMP Professional Registration Number</th>
<th>Date</th>
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#### 8b Sample NMP Signature (your signature should not touch the edges of the box)

#### 8c Proposal to Practice Approval by Non-Medical Prescribing Group

<table>
<thead>
<tr>
<th>Signature of Chair</th>
<th>Date</th>
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<tr>
<th>Name</th>
<th>Date</th>
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<table>
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<tr>
<th>Signature of Vice-Chair</th>
<th>Date</th>
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<tr>
<th>Name</th>
<th>Date</th>
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Please return your completed form to the Assistant Director of Pharmacy / NMP Lead, FH

- Qualified NMPs must not begin prescribing in practice until they have had their qualification registered with the appropriate professional body and have received written notification from the NMP Lead that their proposal has been authorised by the NMP Group.
The Newcastle upon Tyne Hospitals NHS Foundation Trust

Equality Analysis Form A

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

PART 1

1. Assessment Date: 20/11/19

2. Name of policy / strategy / service:
   Non-Medical Prescribing Policy

3. Name and designation of Author:
   Lorna Clark, Assistant Director of Pharmacy

4. Names & designations of those involved in the impact analysis screening process:
   Lorna Clark, Assistant Director of Pharmacy

5. Is this a: Policy [X] Strategy [ ] Service [ ]
   Is this: New [ ] Revised [X]  
   Who is affected Employees [X] Service Users [ ] Wider Community [ ]

6. What are the main aims, objectives of the policy, strategy, or service and the intended outcomes? (These can be cut and pasted from your policy)
   This document aims to:
   • Identify a clear framework for the ongoing development of non-medical prescribing (NMP) within the Trust, in line with national recommendations and good practice.
   • Define the process for the implementation of NMP within Directorates and for individual practitioners throughout the Trust.
   • Define the clinical governance framework required to support NMP and ensure measures such as audit and evaluation are carried out effectively.

7. Does this policy, strategy, or service have any equality implications? Yes [ ] No [X]
If No, state reasons and the information used to make this decision, please refer to paragraph 2.3 of the Equality Analysis Guidance before providing reasons:

As per previous strategy. Refers to all non-medical staff who are legally entitled to act as prescribers. No exclusions related to any of the categories below.
8. **Summary of evidence related to protected characteristics**

<table>
<thead>
<tr>
<th>Protected Characteristic</th>
<th>Evidence, i.e. What evidence do you have that the Trust is meeting the needs of people in various protected Groups</th>
<th>Does evidence/engagement highlight areas of direct or indirect discrimination? If yes describe steps to be taken to address <em>(by whom, completion date and review date)</em></th>
<th>Does the evidence highlight any areas to advance opportunities or foster good relations. If yes what steps will be taken? <em>(by whom, completion date and review date)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Race / Ethnic origin (including gypsies and travellers)</td>
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<td>Sex (male/ female)</td>
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<td>Religion and Belief</td>
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<tr>
<td>Sexual orientation including lesbian, gay and bisexual people</td>
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<tr>
<td>Age</td>
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<tr>
<td>Disability – learning difficulties, physical disability, sensory impairment and mental health. Consider the needs of carers in this section</td>
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<td>Gender Re-assignment</td>
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<tr>
<td>Marriage and Civil Partnership</td>
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<tr>
<td>Maternity / Pregnancy</td>
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9. **Are there any gaps in the evidence outlined above? If ‘yes’ how will these be rectified?**


10. **Engagement has taken place with people who have protected characteristics and will continue through the Equality Delivery System and the Equality Diversity and Human Rights Group. Please note you may require further engagement in respect of any significant changes to policies, new developments and or changes to service delivery. In such circumstances please contact the Equality and Diversity Lead or the Involvement and Equalities Officer.**

Do you require further engagement?   Yes [ ]   No [X]

11. **Could the policy, strategy or service have a negative impact on human rights? (E.g. the right to respect for private and family life, the right to a fair hearing and the right to education?)**

No
PART 2

Name: Lorna Clark

Date of completion: 20/11/19

(If any reader of this procedural document identifies a potential discriminatory impact that has not been identified, please refer to the Policy Author identified above, together with any suggestions for action required to avoid/reduce the impact.)