

Appendix 2 to NMP policy

Prescribing Governance Framework – Standards for Supplementary and Independent Non-Medical Prescribers at SCH

All prescribers and their managers/professional leads should ensure that they read “Improving patients’ Access to Medicines: A guide to Implementing Nurse and Pharmacist Independent prescribing within the NHS in England” and NMC “Standards of Proficiency for Nurse and Nurse Midwife Prescribers”

Clinical Governance is the system through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care, by creating an environment in which clinical excellence will flourish
Audit Commission 2000

The following standards are divided into three areas of responsibility – organisational, team/service and individual:

- The organisation must demonstrate compliance with its area
- Teams will complete an assessment (appendix 2) and report back to the MMG annually
- Individuals should regularly assess their practice against NMC standards as defined in the Scope of Professional Practice

1. Risk management

Corporate	Service/team	Individual prescribers
<ul style="list-style-type: none">• The organisation has a NMP lead• A clear structure is in place for the process of NMP including the requirement to regularly report to the Medicines Management Group• NMPs have access to clinical supervision• There is a clear policy for the administration on NMP including a	<ul style="list-style-type: none">• JDs reflect prescribing responsibilities• There are clear procedures regarding the administration of NMP• NMPs are prescribing according to their local formulary• Service re-design plans reflect the development of NMP	<p>Each NMP</p> <ul style="list-style-type: none">• is in regular prescribing supervision• regularly self-assesses against the relevant competency framework• agrees the parameters of their prescribing with their manager, and MMG• prescribes from their local

<p>central register of qualified NMPs</p> <ul style="list-style-type: none"> • Organisational policies are in place for record keeping, incident reporting and working with the pharmaceutical industry • Systems are in place to receive and distribute BNFs, formularies and permit access to other information 	<ul style="list-style-type: none"> • Systems are in place to monitor the competence of NMPS • NMPs who cannot demonstrate their competence are suspended from the SCH NMP list • A system for clinical supervision is in place • Local policies are in place to ensure that all records are accurate, contemporaneous and accessible by all members of a prescribing team 	<p>formulary</p> <ul style="list-style-type: none"> • can demonstrate that they are aware of their responsibilities and the processes for ensuring the safety of prescription pads • uses the agreed systems for reporting adverse drug reactions and drug-related incidents • has access to the NMP policy • must record prescription details contemporaneously and at least within 48hrs in a GP record if working in the homecare service • ensures that they set up regular communication with key professionals eg GPs, pharmacists, specialists • has additional professional indemnity • informs their line manager of any change in their individual circumstances ??
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2. Clinical Audit and Effectiveness

Corporate	Service/team	Individual prescribers
<ul style="list-style-type: none"> The clinical audit programme includes NMP 	<ul style="list-style-type: none"> Prescribing practice is regularly audited to demonstrate improvement in patient care and compliance to prescribing policy Drug expenditure is regularly monitored and action is taken where expenditure is outside of normal expectation 	<p>Each NMP</p> <ul style="list-style-type: none"> Undertakes regular self-audit of their prescribing practice Regularly self-assesses using competency framework Uses current BNF, PCF, local guidelines and Drug Tariff Accesses national policies, procedures, guidelines and competencies Assesses evidence-based information regularly Is identified on each FP10 through unique professional registration number

3. Information governance

Corporate	Service/team	Individual prescribers
<ul style="list-style-type: none"> An active register of approved NMPs is kept and maintained NMPs have access to evidence- 	<ul style="list-style-type: none"> NMPs have access to computers, intranet and internet Prescribing status of individual 	<p>Each NMP</p> <ul style="list-style-type: none"> Accesses local and national policies, procedures, guidelines

<p>based information via links, the library and pharmacy newsletters</p> <ul style="list-style-type: none"> • Mechanisms are in place to ensure NMPs are kept informed of relevant clinical information e.g. hazard warnings and drug alerts • Communication systems are in place to keep NMPs updated • Local doctors and pharmacists are regularly updated re NMP and have access to mechanisms to check status of prescribers 	<p>prescribers is reported to NMP leads and Bromley PCT NMP pharmacy lead (e.g. staff left or prescribing status suspended)</p> <ul style="list-style-type: none"> • NMPs have access to and comply with record-keeping policies and incident reporting policy and dealing with the pharmaceutical industry policy • Secure systems are in place to receive, record and destroy unwanted prescriptions 	<p>and competencies</p> <ul style="list-style-type: none"> • Accesses evidence-based information regularly • Ensures that the BNF and other information sources are up to date • Is identified on each written prescription (signature on IPU, unique professional registration number on FP10) • Adheres to local procedures when they terminate their employment • Should inform the healthcare professionals they work with in the community of their prescribing role and how this will impact on patient care as set out in the St Christophers Hospice NMP Policy This includes GPs, District Nurses and community pharmacists
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4. Learning and Development

Corporate	Service/team	Individual prescribers
<ul style="list-style-type: none"> • NMPs have access to CPD 	<ul style="list-style-type: none"> • There are systems in place for appraisal and personal development planning 	<p>Each NMP</p> <ul style="list-style-type: none"> • Has the appropriate qualifications and competencies and is registered

<ul style="list-style-type: none"> • Systems are in place to support the selection of right calibre practitioners for non-medical prescribing training where NMP is going to benefit patients 	<ul style="list-style-type: none"> • Systems are in place so that right calibre practitioners are nominated for non-medical prescribing training where NMP is going to benefit patients • NMPs have access to CPD • The most appropriate NMP course is undertaken suitable to both patients and the service • All NMPs can demonstrate application of the NPC competency framework in their NMP role 	<p>as a prescriber on the professional register</p> <ul style="list-style-type: none"> • Has a personal development plan • Can demonstrate access to CPD • Can demonstrate application of the NPC competency framework in their NMP role • Attends sector local/sector and national CPD events
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5. Patient and Public Involvement

Corporate	Service/team	Individual prescribers
Information on NMP is available to patients in accessible formats within Patient Information Leaflets and homecare folders	<ul style="list-style-type: none"> • Patient surveys e.g. exit surveys include questions on NMP • Service leaflets include information on NMP 	<p>Each NMP</p> <ul style="list-style-type: none"> • Explains their prescribing role to their patients and obtains verbal patient consent to treatment