

Education and Training Committee, 10 March 2011

Ownership of the outline curriculum framework for independent and supplementary prescribing

Executive summary and recommendations

Introduction

Chiropodists/podiatrists, physiotherapists and radiographers can all currently complete post-registration training to become supplementary prescribers. The Department of Health is currently undertaking a project to extend independent prescribing rights to chiropodists/podiatrists and physiotherapists.

Part of the project group's remit is to develop the necessary governance arrangements to support safe and effective independent prescribing. The work includes revising the existing outline curriculum framework for supplementary prescribers to include independent prescribing. The Department of Health has asked whether we would own the outline curriculum framework which the project board is developing.

Any change to prescribing rights would also require public consultation by the Medicines and Healthcare products Regulatory Agency and a change in legislation. As a result, the proposals may be subject to amendment.

Decision

The Committee is invited to:

- discuss the attached paper;
- make a recommendation to Council about whether to take ownership of the outline curriculum framework; and
- give reasons for their recommendation.

Background information

The Committee has previously considered several papers on this topic. The most recent was at the Committee meeting on 18 November 2010:

<http://www.hpc-uk.org/assets/documents/100031D120101118ETC10-independentprescribing.pdf>

Resource implications

At this stage, there are no resource implications associated with the recommendation. However, there would be resource implications in the future if the decision was taken to own the curriculum framework. This would include

resources to manage the curriculum framework and review it on a regular basis (for example, every five years).

Financial implications

At this stage, there are no financial implications associated with the decision as the Committee. However, there would be financial implications in the future if the decision was taken to own the curriculum framework. This would be the costs associated with owning the framework, such as the costs of undertaking a public consultation on any changes to the framework.

Appendices

- Letter from the Department of Health 20 January 2011

Date of paper

28 February 2011

Ownership of the outline curriculum framework for independent and supplementary prescribing

1. Introduction

- 1.1 The Department of Health is currently undertaking a project to extend independent prescribing rights to chiropodists/podiatrists and physiotherapists. The Department has recently completed an engagement exercise on this topic and is preparing to seek ministerial approval for a consultation document.
- 1.2 Part of the project to extend independent prescribing rights includes updating and revising the existing outline curriculum framework for supplementary prescribing, which is currently owned by the Department of Health. The Department has written to ask whether we would be willing to own the outline curriculum for independent and supplementary prescribing by allied health professionals.
- 1.3 This paper is divided into three sections:
 - Section one provides an introduction to the paper.
 - Section two explores how other regulators approach ownership of the curriculum framework for supplementary and independent prescribing.
 - Section three identifies points for the Committee to consider in making its recommendation to Council about whether to agree to own the curriculum framework.

Supplementary prescribing and independent prescribing

- 1.4 At present, chiropodists/podiatrists, physiotherapists and radiographers can become supplementary prescribers, if they complete the appropriate training and have their entry on the Register annotated.
- 1.5 Supplementary prescribing is a voluntary prescribing partnership between the independent prescriber (doctor or dentist) and supplementary prescriber, to implement an agreed patient-specific clinical management plan (CMP), with the patient's agreement.¹
- 1.6 Following agreement of the CMP, the supplementary prescriber may prescribe any medicine for the patient that is referred to in the plan, until the next review by the independent prescriber. There is no formulary for supplementary prescribing, and no restrictions on the medical conditions that can be managed under these arrangements. However, the supplementary prescriber cannot prescribe a medicine which is not referred to in the plan.
- 1.7 Independent prescribing is prescribing by a practitioner (such as a doctor, dentist, or nurse) responsible and accountable for the assessment of

¹ Department of Health, 'Medicines Matters' July 2006

patients with undiagnosed or diagnosed conditions and for decisions about the clinical management, including prescribing.²

- 1.8 Independent prescribers can prescribe any medicine for any medical condition within their competence, including some controlled drugs for specified medical conditions. They must also comply with any relevant medicines legislation.
- 1.9 Supplementary prescribers can only prescribe a medicine where it is referred to in the CMP. By contrast, independent prescribers have autonomy and can prescribe any medicine within their competence and knowledge.

AHP medicines project board

- 1.10 The Department of Health has established a project board to introduce independent prescribing rights for physiotherapists and chiropodists/podiatrists, in line with the recommendations from the allied health professions (AHP) prescribing and medicines supply mechanisms scoping project.³ A member of the Executive is on the project board.
- 1.11 The project board has recently closed an informal engagement exercise seeking views on proposals to introduce independent prescribing. They have now received ministerial agreement to prepare a formal consultation document, but will need ministerial approval before undertaking that consultation.
- 1.12 Any decision to implement a change in prescribing rights would be subject to government agreement and would require an amendment to legislation. An amendment to legislation requires time and resources to implement and as such may be subject to delay or alteration.
- 1.13 Two working groups, one in education and one in governance, have been set up to support the work of the project board. The work streams are designed to allow joint working across the key stakeholders on important issues around ensuring safe and effective prescribing.
- 1.14 The role of the Education workgroup is to develop the necessary information to support the delivery of effective training in independent prescribing. This includes revising the outline curriculum framework for supplementary prescribing to include a curriculum framework for independent prescribing as well.

² Department of Health website

<http://www.dh.gov.uk/en/Healthcare/Medicinespharmacyandindustry/TheNon-MedicalPrescribingProgramme/Background/index.htm>

³ Allied health professions prescribing and medicines supply mechanisms scoping project report
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_103949.pdf

- 1.15 The project board has contacted us to see whether we would agree to own the outline curriculum framework for education programmes to prepare allied health professionals as independent and supplementary prescribers.

Standards for supplementary and independent prescribing

- 1.16 As outlined in paragraph 1.4, three of the professions we regulate can currently act as supplementary prescribers, subject to completing the appropriate training and annotation of their entry on the Register.
- 1.17 We currently set a standard of proficiency for our registrants who undertake supplementary prescribing. The standard is incorporated within the standards of proficiency for the relevant profession and says:
- ‘know and be able to apply the key concepts which are relevant to safe and effective practice as a supplementary prescriber’
- 1.18 In addition to meeting this standard, supplementary prescribers would also have to meet the other standards of proficiency relevant for their scope of practice, as well as the standards of conduct, performance and ethics and standards for continuing professional development.
- 1.19 The standard of proficiency related to supplementary prescribing currently sits within the pre-registration standards for the particular profession. This is anomalous as the standard for supplementary prescribers can only be met by individuals who have completed their pre-registration training and are now registered with us. This standard is not therefore a pre-registration standard.
- 1.20 The Committee agreed in principle to set new and more detailed standards for independent and supplementary prescribing at its meeting in September 2010. It was agreed that these standards would incorporate both the standards of education and training relevant to the programme and the equivalents of standards of proficiency for prescribing. These standards would be published separately from the pre-registration standards of proficiency.
- 1.21 Setting standards in this way will help to ensure safe and effective prescribing practice. We will approve programmes against these standards. Part of the process of approval will include making sure that the programme’s learning outcomes meet the standards we have set.
- 1.22 This means that even if we do not decide to own the curriculum framework for independent and supplementary prescribing, we can still ensure that individuals completing the programme can demonstrate that they meet the standards that we have set.

Curriculum frameworks

- 1.23 We do not currently own curriculum frameworks for any of the professions that we regulate, nor do we set detailed curricula. This means that we are not currently involved in setting detailed requirements or expectations for

the number of hours of theory or practice, or the number or length of placements.

- 1.24 In the professions currently regulated by the HPC, many of the professional bodies are actively involved in developing and publishing curriculum guidance or frameworks for their professions. These documents often include detailed expectations around the structure of programmes, including the matters referred to above. In this way, the curriculum is owned by the profession rather than by the regulator. As the HPC does not directly set a curriculum, this also provides some flexibility for education and training providers in designing their programmes.
- 1.25 Although we do not set a curriculum, education providers must meet several standards that we set in relation to the curriculum on a particular programme that we are approving. These are set out in the standards of education and training, SET 4.⁴
- 1.26 SET 4 contains broad standards which allow an education provider to design their programme in a way that takes account of all relevant curriculum frameworks. Standard 4.2 says that the programme must ‘...reflect the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance’.
- 1.27 Education providers must show how the programme that they have designed reflects the relevant curriculum guidance. If the provider does not reflect relevant curriculum guidance, then they must show how they make sure that those who complete the programme are safe and effective practitioners.

The outline curriculum framework and approval of supplementary prescribing programmes

- 1.28 Registrants can only act as supplementary prescribers if they are from the relevant profession, have successfully completed an approved programme and have had their entry on the Register annotated as a supplementary prescriber.
- 1.29 The outline curriculum framework for supplementary prescribing is currently available on the Department of Health website although no organisation is identified for taking ownership of the framework.⁵ The framework has not been updated or amended since 2004, when it was published.
- 1.30 We approve post-registration qualifications in supplementary prescribing against the standards that we set. Programmes are assessed against all the standards of education and training (apart from SET 1: level of

⁴ Standards of education and training, <http://www.hpc-uk.org/aboutregistration/standards/sets/>

⁵ Outline curriculum for training programmes to prepare Allied Health Professionals as Supplementary Prescribers
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4089002

qualification for entry to the Register), including standard 4.2 (see paragraph 1.26).

- 1.31 As with other programmes we approve, supplementary prescribing programmes must show how they reflect the curriculum guidance, in this case, the outline curriculum framework for supplementary prescribing. If they do not reflect this curriculum then they would need to present evidence about how the education provider ensured that those completing the programme were safe and effective supplementary prescribers.

Legal advice

- 1.32 The Executive has sought legal advice in response to the request from the Department of Health.
- 1.33 The legal advice indicates that we would have powers under the Health Professions Order to take ownership of the curriculum framework.
- 1.34 If a decision was made to take ownership of the curriculum framework, the Executive would consider how to implement that decision whilst seeking appropriate legal advice and keeping the Committee updated.

2. Approaches to regulating independent prescribing

- 2.1 Several non-medical professions currently have independent prescribing rights. These are:
- Nurses and midwives
 - Optometrists
 - Pharmacists
- 2.2 The approach that each regulator takes to ownership of a curriculum framework for independent prescribing is outlined below.

Nursing and Midwifery Council

- 2.3 The Nursing and Midwifery Council (NMC) regulates nurses and midwives. Nurses and midwives can prescribe as a community practitioner prescriber, or a supplementary/independent prescriber, depending upon their role and training.
- 2.4 The NMC sets standards of proficiency for nurse and midwife prescribers.⁶ The booklet combines the standards which education providers must meet (for example admission standards) with competency and conduct standards for the registrant (for example standards around prescribing within competency). It also identifies learning outcomes which should be included within a detailed curriculum. The standards are written at a higher level of specificity and are more detailed than the standards of proficiency that we set.
- 2.5 Neither the NMC nor the Department of Health set the curriculum framework for nurse independent prescribing as it is up to the education provider to develop their detailed curriculum based on the NMC's standards.

General Optical Council

- 2.6 The General Optical Council (GOC) registers optometrists, dispensing opticians, student opticians and optical businesses. Optometrists can prescribe as either supplementary or independent prescribers if they meet the necessary training requirements.

Handbook for optometry specialist registration in therapeutic practice

- 2.7 The handbook defines the content and standards of education and training necessary to achieve the competencies required for entry to the specialist registers in optometric independent prescribing.⁷

⁶ Standards of proficiency for nurse and midwife prescribers
<http://www.nmc-uk.org/Educators/Standards-for-education/Standards-of-proficiency-for-nurse-and-midwife-prescribers/>

⁷ Handbook for optometry specialist registration in therapeutic practice
http://www.optical.org/goc/filemanager/root/site_assets/education_handbooks/ip_handbook_july_08.pdf

- 2.8 The handbook brings together useful resources on prescribing from a number of topics. It covers how education providers should establish their programmes, the competency framework, the outline curriculum for prescribing and information on practice based learning.

Outline curriculum for a training programme to prepare optometrists to practise as independent/supplementary prescribers

- 2.9 The GOC sets an outline curriculum for training programmes which prepare optometrists to practise as independent or supplementary prescribers.⁸
- 2.10 The curriculum framework sets out the learning outcomes and indicative content for the training programmes. The GOC's requirements for how the programme is constructed, such as the entry requirements and assessment processes are set out separately within the handbook discussed in paragraphs 2.7 – 2.8 above.
- 2.11 Education providers must assess optometrists to check that they meet the learning outcomes set out within the outline curriculum.

General Pharmaceutical Council

- 2.12 Pharmacists can act as supplementary or independent prescribers. Pharmacist independent prescribers can prescribe for any clinical condition but they must only prescribe within their professional and clinical competence.

Pharmacist independent prescribing programme – learning outcomes and indicative content

- 2.13 The General Pharmaceutical Council (GPhC) sets the learning outcomes and indicative content for independent prescribing programmes.⁹ Education providers must demonstrate that their assessment processes check that the students meet all the learning outcomes for independent prescribing.

⁸ Outline curriculum for training programmes which prepare optometrists to practise as independent or supplementary prescribers
http://www.optical.org/goc/filemanager/root/site_assets/educational_curricula/independent_prescribing_curriculum.pdf

⁹ Pharmacist independent prescribing programme – learning outcomes and indicative content
<http://www.pharmacyregulation.org/pdfs/education/pharmacistindependentprescribinglearningoutcomesandindicativesyllabus.pdf>

3. Discussion

Request from the Department of Health to own the curriculum framework

- 3.1 The project board has asked us to consider whether we would agree to own the outline curriculum framework for education programmes to prepare Allied Health Professionals as independent and supplementary prescribers. The project board have identified two key reasons for the request:
1. As outlined in section 2, some regulators currently own the curriculum framework for education providers offering training to their registrants in independent prescribing.
 2. As the framework relates to several allied health professions (with the potential for more professions in the future) it would not be appropriate for the curriculum framework to be owned by a single professional body.
- 3.2 The Committee is being asked to consider this request and make a recommendation to Council on how to respond.
- 3.3 This decision is being made solely in response to the request from the project board to own the curriculum framework for independent and supplementary prescribing. The decision does not relate to any broader policy decisions that we may make in the future in relation to curriculum frameworks. This means that even if the Committee was to recommend to Council that we should own this curriculum framework, this would not fetter any decision it might make on ownership of other curriculum frameworks in the future.
- 3.4 It is important to note that even if we did agree to own the curriculum framework, we could not compel education providers to use the framework. As currently, we would expect providers to demonstrate that their programme reflects the philosophy, core values, skills and knowledge base as articulated in any relevant curriculum guidance. However, they would not need to follow the curriculum framework if they could demonstrate that their programme still produced safe and effective prescribers.
- 3.5 The request to consider ownership of the curriculum framework has come from the Department of Health in England. Although the legislation that allows the extension of prescribing responsibilities applies across the UK, the devolved administrations decide whether and how it is implemented in their countries.

Summary of discussion points

- 3.6 The Executive has summarised the points for discussion below. This is not intended to be exhaustive and the Committee is invited to discuss any other points of relevance.

3.7 The Committee may want to consider the following points:

- Whether ownership by an established, multi-professional regulator would improve public protection by ensuring that the framework is updated in a timely fashion where necessary.
- That HPC is well placed as an established statutory body with secure funding to own the framework, rather than other bodies which may not be financially secure.
- As a multi-professional regulator, we have experience of managing the different needs or requirements of the professions that we regulate, which would help us to manage the framework.
- Other professions that we regulate may gain prescribing rights in the future. Our decision to own the curriculum framework would not act as a barrier to decisions to extend prescribing rights to those professions.
- The Committee has already agreed in principle to create more detailed standards for supplementary and independent prescribing and ownership of the curriculum framework would support this approach.
- Several other regulators also own the curriculum framework or similar document and the advantages of adopting that approach.
- Currently, education providers must reflect the curriculum guidance but do not have to follow it (see paragraph 1.28 – 1.31). A decision to own the curriculum framework for independent and supplementary prescribing might potentially cause confusion for education providers as they might be unclear about whether or not they have to follow the curriculum framework.
- This decision is a one-off decision about a specific curriculum framework and would not fetter our decision making in relation to other frameworks.
- There are resource implications associated with owning the curriculum. This would potentially include public consultation, as well as establishing the necessary review group. However, it is important to note that the curriculum is designed to be written in a flexible way so the number of changes can be minimised.

3.8 The Committee is invited to discuss and make a recommendation to Council about whether to agree in principle to own the outline curriculum framework for education programmes to prepare Allied Health Professionals as independent and supplementary prescribers. The Committee is asked to give reasons for its decision so that a detailed response can be made to the Department of Health.

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20 January 2011

Michael Guthrie
Director of Policy and Standards
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SE11 4BU

Dear Michael

HOSTING OF OUTLINE CURRICULUM FRAMEWORK FOR EDUCATION PROGRAMMES TO PREPARE AHPs AS INDEPENDENT AND SUPPLEMENTARY PRESCRIBERS

As you are aware, the current focus of work is on taking forward independent prescribing for podiatrists and physiotherapists. One of the working groups established by the AHP Medicines Project Board is an Education Working Group with a remit to develop outline curricula framework, including a conversion programme for podiatrists and physiotherapists currently annotated on the HPC register as supplementary prescribers

We are grateful for the participation on the project board from HPC and the contribution that Charlotte Urwin and Osama Ammar have made, not just at the Board but also to the Education and Governance working groups. It was evident in the early stages of this work that a number of the workstreams are interlinked and the work has continued with this as a framework so that there is consistency across competences, standards, practice guidance and education programmes.

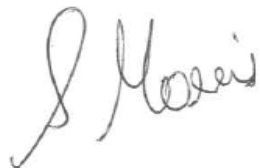
One of the issues that has been raised at the project board is where the outline curriculum is best hosted. Since development of the current outline curriculum for AHP supplementary prescribers (currently podiatrists, physiotherapist and radiographers) it has simply been placed on the Department of Health website with no host identified to receive any comments, requests for clarity, suggestions for amendments and periodic review.

Our understanding is that the nurse and pharmacist independent/supplementary

prescribing outline curricula reside with the NMC and RPSGB respectively. In addition the outline curriculum for AHP independent supplementary prescribing currently covers three of the professions (podiatrists, physiotherapists and radiographers). The Project Board therefore considered it appropriate to approach HPC on this issue.

I would be grateful for a formal view on whether HPC could own the outline curriculum.

Yours sincerely

A handwritten signature in cursive script, appearing to read 'S Morris'.

Shelagh Morris
Allied Health Professions Officer

cc Karen Middleton
Charlotte Urwin
Osama Ammar