

**PRESCRIBING BY
SUBSTANCE MISUSE
NURSES**

Dr. June Crown

EXTENDED PRESCRIBING: THE STORY SO FAR

- **Nurses are in the lead because:**
 - **Cumberledge Report on Community Nursing 1986**
 - **Advisory Group on Nurse Prescribing recommends prescribing powers for District Nurses and Health Visitors 1989**
 - **Legislation to allow prescribing of 'Prescription only Medicines' (POMs) by nurses 1992**
 - **National roll out 1998**

EXTENDED PRESCRIBING: THE STORY SO FAR

- **Review of Prescribing, Supply and Administration of Medicines (1999) recommends:**
 - **extension of prescribing rights to other health professionals in all clinical settings**
 - **independent and supplementary prescribers**
 - **Health and Social Care Act sets scene for prescribing by other health professionals (2001)**

WHERE ARE WE NOW? COMMUNITY PRACTITIONER NURSE PRESCRIBERS

- **29,000 District Nurses and Health Visitors registered as prescribers**
- **Limited formulary, few Prescription only Medicines(POMS)**
- **Many DNs and HVs who are registered do not prescribe**

NURSE INDEPENDENT PRESCRIBERS

- **Formerly Extended Formulary Nurse Prescribers : limited list, limited clinical conditions**
- **7,200 Nurse Independent Prescribers - and rising!**
- **Full formulary including 13 controlled drugs for specified conditions**

SUPPLEMENTARY PRESCRIBERS

- **Nurses, pharmacists, podiatrists, physiotherapists, radiographers, optometrists**
 - **6.800 supplementary nurse prescribers**
 - **580 supplementary pharmacist prescribers**

SUPPLEMENTARY PRESCRIBING

- **Any conditions**
- **All medicines, including unlicensed and ‘off label’ medicines**
- **Requires partnership with independent prescriber (doctor) and patient, with clinical management plan**

ISSUES FOR THE FUTURE

- **For individual practitioners**
- **For Government**
- **For commissioners**
- **For Regulatory bodies**
- **For professional organisations**

INDIVIDUAL PRACTITIONERS

- **Must keep up to date clinically**
- **Must keep up to date with relevant pharmacology**
- **Must maintain links with professional colleagues and teams**
- **Must recognise limits of competence**
- **Must help support and train new prescribers**

GOVERNMENT

- **Must maintain progress with extended prescribing**
- **Must facilitate access to training programmes and continuing education**
- **MUST do something about IT - otherwise no-one can prescribe safely**
- **MUST encourage common practice across UK**

COMMISSIONERS

- **Must plan and support introduction of extended prescribing into community based practice**
- **Must ensure that *'Commissioning a patient-led NHS'* does not destroy professional teamwork**
- **Must give proper priority to the management of chronic conditions and to the improvement of population health**

REGULATORY BODIES

- **Must maintain accurate and up-to-date records of registered prescribers**
- **Must define clear standards of practice required of all prescribers**
- **Must encourage rapid identification of problems and appropriate action to ensure patient safety**

PROFESSIONAL ORGANISATIONS

- **Must encourage members to train as prescribers when it will enhance their clinical practice**
- **Must encourage trained prescribers to keep doing it**
- **Must lobby Government and other agencies to ensure that service changes support excellence in clinical practice**