Non-Medical Prescriber Registration Policy

With you.
For you.

REFERENCE NUMBER
VERSION V1a
APPROVING COMMITTEE Clinical Executive Committee
& DATE 11.08.2015
REVIEW DUE DATE August 2018
V1a – change of CSU email address April 2016
1. **Introduction**

Non-medical prescribing is prescribing by specially trained nurses, optometrists, pharmacists, physiotherapists, podiatrists and radiographers working within their clinical competence as either independent or supplementary prescribers.

Under current legislation nurses, pharmacists and optometrists can all undertake a qualification to allow them to become independent and/or supplementary prescribers. Nurses can also train to become community practitioner nurse prescribers.

Podiatrists, physiotherapists and radiographers can train to become supplementary prescribers.

**Purpose**

This policy outlines the CCG authorisation process required to add and maintain a non-medical prescriber employed by a General Practice to the NHS Business Services Authority (BSA) General Practice cost centre.

2. **Scope**

This policy includes nurse and pharmacist independent and supplementary prescribers and community practitioner nurse prescribers only. At the time of drafting this policy no other staff groups who are eligible to become non-medical prescribers (NMPs) are employed within general practice.

3. **Definitions**

3.1 **Independent prescribing**

Independent prescribing is prescribing by a practitioner (e.g. doctor, dentist, nurse, pharmacist or optometrist) responsible and accountable for the assessment of patients with undiagnosed or diagnosed conditions and for decisions about the clinical management required, including prescribing.

There are two distinct forms of independent non-medical prescribing:

An **independent prescriber** may currently be a specially trained nurse, pharmacist or optometrist who can prescribe any licensed medicine within their clinical competence. Nurse and pharmacist independent prescribers can also prescribe unlicensed medicines. There are however some restrictions on the prescribing of controlled drugs.

A **community practitioner nurse prescriber** (previously known as district nurse / health visitor prescribers), for example a specially trained district nurse, health visitor or school nurse, can independently prescribe from a limited formulary called the Nurse Prescribers’ Formulary for Community Practitioners which can be found in the British National Formulary (BNF).

3.2 **Supplementary prescribing**

Supplementary prescribing is a voluntary partnership between a doctor or dentist and a supplementary prescriber to implement an agreed patient-specific clinical management plan with the patient’s agreement.

A supplementary prescriber may currently be a specially trained nurse, optometrist, pharmacist, physiotherapist, podiatrist or radiographer who can prescribe any medicines within their clinical competence, according to a patient specific clinical
management plan (CMP) agreed with a doctor or dentist and the patient.

It is a legal requirement for a CMP to be in place before supplementary prescribing can begin.

4. **Regulatory Bodies**
   - The Nursing and Midwifery Council (NMC) regulate nurses and midwives
   - The General Pharmaceutical Council (GPhC) regulates pharmacists and pharmaceutical technicians

5. **Business Service Authority Registration Process**

5.1 **Newly Qualified NMP**

Following successful completion of a NMP course, receipt of notification from the relevant regulatory body and once the information has been updated on the professional register, the following must occur before the individual undertakes prescribing.

5.1.1 Practice manager must inform the CCG Head of Medicines Optimisation that the individual has successfully completed the course. Contact details:

Nicola Baxter  Nicola.baxter@westlancashireccg.nhs.uk

5.1.2 In order to become registered with the Business Service Authority and have prescribing data assigned to a particular practice / cost centre, the following process must occur:

a. The practice manager must complete and send a Lancashire Commissioning Support Unit (LCSU) Non-medical Prescribing Register Application Form (Appendix 1) to MLCSU.nmpregister@nhs.net
b. The LCSU will forward a completed Non-Medical Prescriber Joining a GP Practice or Cost Centre form to NHS BSA. The BSA takes 3 to 4 working days to process requests.
c. LCSU will inform the practice manager via email that the NHS BSA form has been submitted.

5.2 **Qualified NMP Newly Employed by a General Practice**

The following process is required to ensure that newly appointed NMPs are registered with the NHS Business Service Authority (NHS BSA) and have prescribing data assigned to a particular practice / cost centre.

a. The practice manager must complete and send a Lancashire Commissioning Support Unit (LCSU) Non-medical Prescribing Register Application Form (Appendix 1) to MLCSU.nmpregister@nhs.net
b. The LCSU will forward a completed Non-Medical Prescriber Joining a GP Practice or Cost Centre form to NHS BSA. The BSA takes 3 to 4 working days to process requests.
c. LCSU will inform the practice manager via email that the NHS BSA form has been submitted.
5.3 **NMP Leaving Employment with a General Practice**

The following process is required to ensure that the NHS Business Service Authority is notified when a NMP leaves employment with a General Practice.

a. The practice manager must complete and send a Lancashire Commissioning Support Unit (LCSU) Non-medical Prescribing Register Application Form (Appendix 1) to MLCSU.nmpregister@nhs.net

b. The LCSU will forward a completed Non-Medical Prescriber Leaving a GP Practice or Cost Centre form to NHS BSA. The BSA takes 3 to 4 working days to process requests.

c. LCSU will inform the practice manager via email that the NHS BSA form has been submitted.

5.4 **Qualified NMP Change of Details**

The following process is required when a NMP employed in General Practice changes their details including:

- NMP Code e.g. NMC PIN / Regulatory Body Code
- Surname
- Title e.g. Mrs / Ms
- Qualification (nurse prescribers only)

a. The practice manager must complete and send a Lancashire Commissioning Support Unit (LCSU) Non-medical Prescribing Register Application Form (Appendix 1) to MLCSU.nmpregister@nhs.net

b. The LCSU will forward a completed Change of Non-Medical Prescriber Details form to NHS BSA. The BSA takes 3 to 4 working days to process requests.

c. LCSU will inform the practice manager via email that the NHS BSA form has been submitted.

5.5 **Annual Declaration**

When requested, the practice manager must complete and return an Annual Declaration form for each of the non-medical prescribers employed by the practice. This request will come from LCSU.
# NON-MEDICAL PRESCRIBING REGISTER APPLICATION FORM

## NOTIFICATION OF NEWLY QUALIFIED NON-MEDICAL PRESCRIBER/CHANGE IN CIRCUMSTANCES

<table>
<thead>
<tr>
<th>Type of Change</th>
<th>Please tick</th>
<th>Notes on Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newly qualified non-medical prescriber (NMP)</td>
<td></td>
<td>Sections A, B, C1, C2 &amp; C3</td>
</tr>
<tr>
<td>NMP working for an additional practice</td>
<td></td>
<td>Sections A, B, C1, C2 &amp; C3</td>
</tr>
<tr>
<td>NMP’s employment ends/or function changes at specified practice</td>
<td></td>
<td>Sections A, B, C1, C3, C2 or C4</td>
</tr>
<tr>
<td>NMP’s change of employer</td>
<td></td>
<td>Sections A, B &amp; C3</td>
</tr>
<tr>
<td>NMP’s details to be removed from all current organisations</td>
<td></td>
<td>Section A, B &amp; C3 &amp; C4</td>
</tr>
</tbody>
</table>

### Section A: Non-Medical Prescriber Details

1. Full name
2. Title (e.g. Mr/Mrs/Miss/Ms)
3. Date of Birth
4. Contact email address
5. Professional Registration Number
6. Current Professional Role (e.g. District Nurse or Health Visitor)
7. Intended Professional Role (V100.V150/V300/Supplementary/Independent Prescriber)
8. Date non-medical prescribing examination passed
9. Qualified to prescribe from/Change to prescribing role from

### Section B: Organisational details

1. Practice/Organisation Name
2. Address
3. Post Code
4. Telephone number
5. Practice code
6. Name of Lead Clinician

### Section C: Details of non-medical prescriber in the GP practice

1. Original start date at the practice
2. Date of commencement/Change of qualifications
3. Agreed areas of Prescribing
   - Please tick all of the BNF chapters in this table you intend to prescribe from.
   - Gastroenterology
   - Cardiovascular
   - Respiratory
   - Central Nervous System
   - Infections
   - Endocrine
   - Obs., Gynae., Urinary
4. End date as a non-medical Prescriber in the practice
Section D (if leaving a place of employment where you were NMP registered):

1. Practice/Organisation Name
2. Date of leaving the practice
3. Address
4. Post Code
5. Telephone number
6. Practice code
7. Name of Lead Clinician

DECLARATIONS

Non-Medical Prescriber
My intended scope of prescribing practice has been discussed and agreed with the lead clinician. I confirm I will only prescribe for areas within my competency and will undertake Continuing Professional Development. I enclose a copy of my Prescriber Qualification Certificate and NMC statement of entry (if applicable).

Non-medical Prescriber’s Signature ..........................................................................................................................

Name (please print) ..........................................................................................................................................................

Date: ...........................................................................................................................................................................

Lead Clinician
I confirm that the applicant is employed in their role as specified above and that they are required to prescribe in this role. I also confirm that the applicant is competent to prescribe in the agreed area and prescribing will be regularly reviewed.

Lead Clinician’s Signature ...........................................................................................................................................

Please Print Name ..........................................................................................................................................................

Date: ...........................................................................................................................................................................

Lead Clinician contact details: ..........................................................................................................................................

Checklist

Check you have completed all the sections that apply to you. ☐

Check that both you and the lead Clinician have signed the form. ☐

Check that you have enclosed your Prescriber Qualification Certificate (and NMC Statement of Entry if appropriate). ☐

Completed forms and certificates should be scanned and emailed to: MLCSU.nmpregister@nhs.net

NHS Midlands and Lancashire CSU administer the non-medical prescribing register on behalf of the NHS England area team for Lancashire.