Nurse/Non Medical Prescribing for Pain: National Update

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Presentation outline

- To inform and update on:
  - National developments in nurse/non-medical prescribing
  - Developing confidence and competence in your ability to prescribe
  - Demonstrating compliance with the NMC code for re-validation
  - The benefits of nurse prescribing/non-medical prescribing for pain.
Current related issues.

- Multi-professional working
- Safety
- Competence/confidence
- Standards and competence Frameworks
- Care pathways
- Patient led pain and symptom management
- Continuing Professional Development
- Workforce planning
- Professional body re-validation
Non Medical Prescribers who and how many?

- Over 70,000 in UK across four countries.
- Community Practitioner Nurse and Midwife Prescribers over 30,000
- Independent and Supplementary Prescribers- growing numbers- across all sectors
- Supplementary Prescribers-still there
Professions

- Nurses and Midwives- Independent and Supplementary Prescribers
- Nurses and Midwives- Community Practitioner Nurse and Midwife Prescribers
- Pharmacists- Independent and Supplementary Prescribers
- Optometrists- Independent Prescribers
- Physiotherapists- Independent and Supplementary Prescribers
- Podiatrists- Independent and Supplementary Prescribers
- Radiographers- Supplementary Prescribers
Recent consultations:

- Independent Prescribing by Paramedics
- Independent Prescribing by Radiographers
- Supplementary Prescribing by Dieticians
Continuing Professional Development - The Code, Prescribing and Re-validation.

- Revalidation benchmarked by Revised Code-2015

18. Advise on, prescribe, supply, dispense or administer medicines within the limits of your training and competence, the law, our guidance and other relevant policies, guidance and regulations.

How to prepare

Key Points

- 450 hours over 3 years
- CPD – 35 hours over three years
- Reflective writing- five pieces over three years
- Reflective discussion- with an NMC registrant
- Must provide practice related feedback- five pieces over three years
- Must prove good health and good character
- Must prove indemnity insurance
- Must prove fitness to practice
- The above must be confirmed
Competence and confidence
Prescribing and pain management


- Standards, Guidelines, Care Pathways and Competencies for pain management
Pain management – complex picture

- Around 14 Million in UK with chronic and persistent pain.
- 30% of people in primary care had attended for help with pain.
- National Pain Audit 2013

http://www.nationalpainaudit.org/methodology
Integrated Prescribing for pain

- Acute and long term conditions/ end of life care
- Direct management of pain and adjuvant management
- Patient led assessment/care pathways/patient led prescribing/Patient Participation Groups
- Advancing practice- Diverse field
- Changing professional profile/ interdisciplinary/ multi-specialty/
Call for competency framework and minimum standards


NHS England

- Practitioners with Specialist Interest (pain management)- currently pharmacists and GP’s

National pain Audit (2012/13)
  - http://www.nationalpainaudit.org/methodology
Royal College of Nursing (2015) Knowledge and skills framework for registered nurses

- Framework summary for Registered Nurses
- Sets out Domains of competence- one of which is pharmacological strategies. –one element of nursing care at level 6 and above to be an Independent Non-medical Prescriber.

https://www2.rcn.org.uk/__data/assets/pdf_file/0007/638881/004984-.pdf
Pain management.
National Guidelines

- NICE- Low back pain, palliative cancer care (pain), chest pain, neuropathic pain (drug treatment)
  https://www.evidence.nhs.uk/Search?q=nice+guidelines+pain+management

- SIGN (2013 ) Management of Chronic Pain
  http://sign.ac.uk/guidelines/fulltext/136/index.html

- Royal College of Anesthetists (2015)- Core Standards for Pain Management Services in the UK

- Patient Pathways- Map of Medicine
In Summary

- Non-medical Prescribing growing and developing across disciplines
- Need to demonstrate and maintain competence and confidence
- Prescribing for the management of pain is complex
- Needs to be based on best evidence
- Need for integrated working- work force planning
- All working to best evidence and National Standards
- Care pathways and patient/carer involvement
Thank you
References and Bibliography