

CORPORATE AND ACADEMIC SERVICES

MODULE SPECIFICATION

| Part 1: Basic Data | | | | | | |
|--------------------------|--|--|--|--|--|--|
| Module Title | Prescribing Prac | tice V300 | | | | |
| Module Code | UZTRVN-20-M | | Level | Μ | Version 1 | |
| Owning Faculty | Health and Life | Sciences | Field | Continuin | g Care Adult Nursing | |
| Contributes towards | Graduate Diplon | Practice Practice Professional De ploma Integrate na Integrated Pr | velopment d Professional De ofessional Develo nal Development | | | |
| UWE Credit Rating | 20 | ECTS Credit Rating | 10 | Module Type | Professional Practice | |
| Pre-requisites | N/A | | Co- requisites | | harmacology for the ical Prescriber 15-M | |
| Excluded Combinations | Prescribing Practice UZTS7P-20-M/UZTRRX-20-3 Prescribing Practice UZTSPU-30-3 | | Module Entry requirements | Must fulfil current entry requirements set by the student's professional body in relation to prescribing practice. Selection forms must be signed by both individuals and organisations before students are enrolled. | | |
| Valid From | September 2013 | 3 | Valid to | Septembe | er 2018 | |
| CAR Approval Data | 17 April 2012 | _ | | | | |

| CAP Approval Date | 17 April 2013 |
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| | Part 2: Learning and Teaching |
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| Learning Outcomes | Accurately interpret the legislation and critically analyse the impact on prescribing practice (Component A and B) Critically reflect upon the influences on prescribing practice (Component A and B) Demonstrate comprehensive and substantial knowledge and understanding of drug actions and interactions (Component A and B) Demonstrate a critical awareness of own professional boundaries in relation to the unique characteristics of prescribing for neonates, children and young people (Component A and B) Demonstrate appropriate organisation and delivery of prescribing practice incorporating synthesis of safe, appropriate and economic medicines management (Component A and B) Access and critically apply authoritative and contemporary sources of information within prescribing interventions (Component A and B) Reflect upon strategies to optimise concordance in the effective use of medicines (Component A and B) Select and justify structured, valid and rigorous approaches in consultation and assessment in partnership with independent prescribers, patients and carers |

| | (Component A and B) |
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| | Practice dynamically within a framework of professional accountability and responsibility in relation to prescribing within comprehensive patient care (Component A and B) |
| | Practice competently to the highest ethical standards relating to clinical judgement and evidence-based practice (Component A and B) |
| | Engage with and rigorously process within the required standards of interaction with professionals and significant others involved in prescribing, supplying and administering medicines |
| | Operate within the context of prescribing partnerships and develop and maintain accurate documentation including Clinical Management Plan (CMP) (Component A and B) |
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| Syllabus Outline | Consultation, Decision-making and Therapy including Referral |
| | Models of consultation |
| | Accurate assessment, communication and consultation with patients and their |
| | carers |
| | Concepts of working diagnosis or best formulation |
| | Development of a management plan |
| | Confirmation of diagnosis, further examination, investigation, referral for diagnosis Prescribe, not to prescribe, non-drug treatment or referral for treatment |
| | Influences on and Psychology of Prescribing |
| | Patient demand versus patient need External influences, for example companies/colleagues |
| | External influences, for example companies/colleagues Patient partnership in medicine-taking including awareness of cultural and ethnic |
| | needs |
| | Conformance, normalisation of professional prescribing behaviour |
| | Achieving shared understanding and negotiating a plan of action |
| | |
| | Prescribing in a Team Context |
| | National and local guidelines, protocols, policies, decision support systems and formulae: rationale, adherence to and deviation from |
| | Understand the role and functions of other team members |
| | Documentation, with particular reference to communication between team |
| | members including electronic prescribing and developing Clinical Management |
| | Plans for supplementary prescribing |
| | Auditing, monitoring and evaluating prescribing practice |
| | Interface between multiple prescribers and the management of potential conflict |
| | Budget / cost effectiveness |
| | Issues relating to dispensing practices |
| | Evidence-based Practice and Clinical Governance in relation to Non Medical Prescribing |
| | National and local guidelines, protocols, policies, decision support systems and formulae: rationale, adherence to and deviation from |
| | Continuing professional development: role of self and organisation |
| | Management of change |
| | Risk assessment and risk management, including safe storage, handling and disposal |
| | Clinical supervision |
| | Reflective practice |
| | Critical appraisal skills |
| | Auditing and systems monitoring |
| | Identifying and reporting ADRs and near misses |
| | Legal Policy and Ethical Aspects |
| | Legal basis, liability and indemnity |
| | Legal implications of advice to self-medicate including the use of complementary |

| Contact Hours | therapy and over the counter (OTC) medicines The related ethical issues, documentation, legal aspects and the registrants accountability related to the prescribing of botulinum toxin and related products Safe keeping of prescription pads, action if lost, writing prescriptions and record keeping Awareness and reporting of fraud Drug licensing act Yellow card reporting to the Committee of Safety on Medicines (CSM) Prescribing in the policy context Manufacturers guidance relating to literature, licensing and off-label Ethical basis of intervention Informed consent, with particular reference to client groups in learning disability, mental health, children, the critically ill and emergency situations Professional Accountability and Responsibility Nursing and Midwifery Council, Health Care Professions Council code of Professional Conduct and Scope of Professional Practice Accountability and responsibility for assessment, diagnosis and prescribing Maintaining professional knowledge and competence in relation to prescribing Accountability and responsibility to the employer | | | | | |
|-------------------------------------|--|------------------------------|----------------------------|--------------------------|--------------------|--|
| | To comply with professional body requirements for the blended learning prescribing programme at UWE students must attend the university for 15 days, have 5 protected learning days to undertake directed learning and complete 12 days supervised learning in practice. | | | | | |
| Teaching and Learning Methods | The module will include a range of teaching methods to maximise the learning experience for the diverse group of students enrolling on the course. It will include lectures and small group work where patient care and potential prescribing decisions are examined and reflected upon. On line resources will be used to develop and test numeracy skills. In addition a Blackboard community group will be used to support students' undertaking mandatory directed learning activities. Students will be encouraged to share and learn from each other using online using a variety of online discussion mediums. Whilst working in partnership with their prescribing mentor students will critically reflect and apply the principles of prescribing to their own sphere of practice. The use of a portfolio will be an effective means of demonstrating this ability to integrate theory to practice. | | | | | |
| Key Information Sets Information | Key Info | ormation Set - M | odule data | | | |
| | NI: mak - | of anodita for their | modulo | | 20 | |
| | Numbel | of credits for this | rrioaule | | 30 | |
| | Hours to allocate | be Scheduled learning and | Independent study hours | Placement study hours | Allocated Hours | |
| | | teaching study hours | | | | |

| | Т | otal assessment of the | e module: | | | |
|----------------------------|--|--|--|---|--|--|
| | | | | | | |
| | V | Vritten exam assessm | ent percentag | е | 0% | |
| | C | Coursework assessme | ent percentage | | 50% | |
| | F | Practical exam assess | ment percenta | ige | 50% | |
| | | | | | 100% | |
| Reading | Core readings | | | | | |
| Strategy | Any essential r accessing it, e.g. study pack or be Module guides w Further readings Further reading readings. Stude | reading will be ind students may be re referred to texts tha vill also reflect the ran will be required to nts are expected to themselves. They w | quired to pure t are availabl nge of reading supplement o identify all | chase a set e electronic g to be carr the set te other read | text, be given cally or in the L ied out. xt and other p ing relevant to | a print ibrary. printed p their |
| | search, a variety Many resources to ensure studer specific to their in | / of bibliographic and can be accessed rents are familiar with nterests from the aca | d full text dat motely. The p current resea | abases, an ourpose of t arch, classio | d Internet reso this further read | ources. ding is |
| | Access and skills | S | | | | |
| | provided within opportunities wi evaluation skills is available throu on finding books | nt of literature search the first semester thin the curriculum in order to identify s ugh the Library Servi s and journals, eval llso offered by the Lib | . Students to to develop such resource ces web pag uating inform | will be pre their inforr es effectivel es, includin | esented with mation retrieva y. Additional s g interactive tu | further al and upport itorials |
| Indicative Reading List | indication of the consult. As suc | t is offered to provide e type and level of h, its currency may owever, as indicated module guide. | information wane durin | students r ig the life | nay be expec span of the n | ted to nodule |
| | | Lymn, J. Knaggs, R, bach to Medical and i | | | | |
| | | nd Franklin, P. (201 D <i>fessionals</i> : Oxford, | , | | • | Nurse and |
| | | d Smith, A. (2006) <i>N</i> hts & practitioners. Lo | | - | in healthcare | practice: A |
| | | Griffiths, M. (2010 <i>)</i> (2 nd Ed) Cambridge, | | | | scribing an |
| | Humphries, J. a Palgrave Macmi | and Green, J. (2002 Ilan. | 2) Nurse Pre | escribing (2 | 2nd edition) B | asingstoke, |
| | National Prescrit | oing Centre (2012) A | Single Com | petency Fra | mework for Pr | escribing. |

| Nursing and Midwifery Council (2006) Standards for Nurse and Midwife Prescribing. |
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| Nursing and Midwifery Council (2008) The Code: Standards of conduct, performance and ethics for nurses and midwives. |
| Nursing and Midwifery Council (2010) Guidelines for Records and Record Keeping. |
| Nursing and Midwifery Council (2010) Standards for Medicines Management. |
| Nuttal D, and Rutt-Howard J, (2011) <i>The Textbook of Non-Medical Prescribing</i> Chichester, Wiley-Blackwell. |

Part 3: Assessment

| Assessment Strategy | The assessment strategy within this module complies with professional body standards for Non Medical Prescribing. The individual components of the assessment are non-negotiable and are regularly updated to reflect current changes in legislation. An updated list of assessments is available within the current module handbook. To comply with the student's professional bodies standards assessments are non-compensatory. In addition if students by their omission or incorrect answer would cause direct harm to a patient then they must be referred. Students must pass all assessments within one year of starting the course or attend all sessions and undertaken all assessments again. |
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| Identify final assessment component and element Component A | | | |
|--|----------------------------|-----------|------------------------|
| % weighting between components A and B (Star | ndard modules only) | A: P/F | B: 100 |
| First Sit | | | |
| Component A (controlled conditions) Description of each element | | | weighting pmponent) |
| 1. Mentor confirmation of successful completion competencies as identified within practice docu mandatory supervised learning time within the stude | mentation. Evidence of the | Pass | s/Fail |
| 2.OSCE | | Pass | /Fail |
| Component B Description of each element | | | weighting omponent) |
| 1. A portfolio of evidence which reflects the field of is to prescribe and includes successful com assessments set by the student's professional components are given in the module handbook. | pletion of the mandatory | 10 | 0% |

| Resit (further attendance at taught classes may be required) | | | | |
|--|--|--|--|--|
| Component A (controlled conditions) Description of each element | Element weighting (as % of component) | | | |
| 1. At the Discretion of the Award Board | Pass/Fail | | | |
| 2.OSCE | Pass/fail | | | |

| Component B Description of each element | Element weighting (as % of component) |
|--|--|
| 1. A portfolio of evidence which reflects the field of practice in which the student is to prescribe and includes successful completion of the mandatory assessments set by the student's professional body. Details of individual components are given in the module handbook. | 100% |
| If a student is permitted an EXCEPTIONAL RETAKE of the module the assessme by the Module Description at the time that retake commences. | nt will be that indicated |