



20 December 2018

## **Consultation on Revised Standards for Prescribing**

Response from the Institute of Biomedical Science, the professional body that represents biomedical scientists

### **Consultation questions**

**Q1:** Do you agree that the draft revised standards for education providers are set at the level necessary to ensure that all learners are able to prescribe safely and effectively by completion of a HCPC-approved programme?

Don't know

Strongly disagree

Partially disagree

Neither agree nor disagree

Partially agree

**Strongly agree**

Comments:

**None**

**Q2:** Do you agree that the role of practice educator should be extended to all qualified, registered (and where relevant, annotated) prescribers with the relevant skills, knowledge and experience to support safe and effective learning?

Don't know

Strongly disagree

Partially disagree

Neither agree nor disagree

Partially agree

**Strongly agree**

Comments:

**It is our view that there is sufficient evidence of non-medical prescribers that are competent practitioners and E-prescribing systems are now commonplace which have many additional safety checks.**

**Q3:** Do you agree that adopting the Royal Pharmaceutical Society's 'A Competency Framework for All Prescribers' as the HCPC's standards for all prescribers would sufficiently deliver education and training outcomes for inter-professional learning?

Don't know

Strongly disagree

Partially disagree

Neither agree nor disagree

Partially agree

**Strongly agree**

Comments:

**It is felt that basing the prescribing on the RPS competency framework is a sound proposal and establishes a single standard of practice across all prescribing professions. Additionally, it would make it easier for other HCPC regulated professions to be given prescribing rights in the future if it was felt to be of benefit to patient care.**

**Q4:** Do you agree that adopting the Royal Pharmaceutical Society's 'A Competency Framework for All Prescribers' as the HCPC's standards for all prescribers would sufficiently deliver education and training outcomes for profession-specific learning?

Don't know

Strongly disagree

Partially disagree

Neither agree nor disagree

**Partially agree**

Strongly agree

Comments:

**Consideration may need to be given as to whether there should be some additional competencies specific to each profession**

**Q5:** Do you think that any additional standards or guidance specific to education and training in prescribing are needed?

Yes

**No**

Don't know

Comments:

**None**

### **Questions about the standards for all prescribers**

**Q6:** Do you agree with our proposal to adopt the Royal Pharmaceutical Society's 'A Competency Framework for All Prescribers' as the HCPC's standards for all prescribers?

Don't know  
Strongly disagree  
Partially disagree  
Neither agree nor disagree  
Partially agree  
**Strongly agree**

Comments:

**None**

**Q7:** If the HCPC were to adopt the Royal Pharmaceutical Society's 'A Competency Framework for All Prescribers', do you think that any additional standards or guidance specific to prescribing practice are needed?

Yes  
No  
**Don't know**

Comments:

**It is possible that some discipline specific ones may be required.**

#### **Questions about implementation**

**Q8:** We would like to implement revised Standards for prescribing (**both** standards for education providers and standards for all prescribers) for the 2019/2020 academic year. Do you agree that this it is reasonable to implement revised Standards for prescribing by **September 2019**?

Yes  
No  
Don't know

Comments:

**The changes do not appear to be too onerous and it therefore should be possible.**

**Q9:** Do you think that as proposed, the revised Standards for prescribing would suitably support safe and effective prescribing by HCPC registrant groups who may gain the opportunity to train in prescribing in the future?

**Yes and certain other HCPC registrants may be suitable to become supplementary prescribers.**

## General questions

**Q10:** Do you think that any aspects of our proposals could have equality, diversity or inclusion implications for groups or individuals with protected characteristics?

**No**

If yes, please suggest how you think this should be addressed.

**Q11:** Any other comments about our proposals?

**This is a sensible and timely proposal. Having one set of standards means they are easier to maintain and update.**

**Consideration should be given to the inclusion of biomedical scientists on the list of professions allowed (following suitable training and competency checks) to be prescribers of defined items. The issue of blood products (legally a medicine), such as anti D and factor concentrates, has long been under the control of biomedical scientists in transfusion labs in many hospitals and this is anomalous under current regulation. There are also a small (but potentially increasing) number of biomedical scientists in transfusion laboratories who are involved in direct patient care where prescription powers (again for defined items) would be appropriate e.g. patients undergoing cell salvage or apheresis.**