

# NMC response to Royal Pharmaceutical Society's consultation on a draft refreshed version of the Competency Framework for All Prescribers

## **Consultation questions and answers**

1. Is the scope and purpose of the competency framework for all prescribers clear? If no, please provide further comments.

YES/NO

Further comments: None

2. Is the framework sufficiently generic to apply to prescribers from your professional background? If no, what needs modification?

YES/NO

Further comments: None

3. Is each competency (1-10) within the framework relevant, within scope, current and fit for purpose for all prescribers? If no, please provide further comments.

YES/NO

Further comments: None

4. Does the framework reflect the key competencies required of a safe and effective prescriber? If no, where are the gaps?

YES/NO

Further comments: None

5. Any additional comments on the competencies within any section of the framework?

#### None

6. Is each supporting statement unique and do they describe a clear outcome? If no, please provide further comments.

YES/NO

Further comments: None

7. Is there any repetition or overlap with the supporting statements? If yes, please provide further comments.

#### YES/NO

8.

Further comments: None

Any additional comments on the supporting statements within the framework?

Whilst on the whole the supporting statements are clear, we do have some minor suggestions for some of the supporting statements that may help clarify them further:

- 1.4 As this statement seems to focus on making reasonable adjustments, would it be clearer to say 'makes reasonable adjustments to the consultation accordingly' rather than just 'adapts accordingly'? The underpinning further information could be similarly amended to make it clear that any 'reasonable adjustments' that are appropriate for the individual patient/carer must be made.
- 2.1 as well as reference to 'no treatment' we would suggest there should also be a reference to 'social prescribing' here.
- 2.5 at 1.6 you refer to 'allergies and intolerances', but here you only refer to 'allergies'. For consistency and completeness we would suggest that here you should also include reference to 'intolerances'
- 3.4 If we are working *with* patients rather than just prescribing to them should this not about 'concordance' and 'non-concordance' rather than 'adherence' and 'non-adherence'?
- 9. Is the information in the "further information" sections clear and fit for purpose? If no, please provide further comments.

## YES/NO

10. If your answer was 'no', please provide further comments.

### N/A

11. Any additional comments on the "further information" sections within the framework?

Whilst on the whole the information in this section is clear and fit for purpose, we do have some minor suggestions for the underpinning further information that may make them even clearer and more comprehensive.

- 1.6 the reference to 'vitamins' could be expanded to include 'minerals'.
- 1.7 we would like to see a reference here to psycho-social assessments as well as physical examinations.

In addition, we have a couple of other suggestions regarding other parts of the document.

In the section on the purpose of the competency framework, we believe it would not be inappropriate to be more assertive and state that the framework should (rather than 'can') be used by prescribers to inform practice and should be used by regulators etc to inform standards, guidance, advice and development of educational materials.

And finally, a more consistent approach to how non-medical prescribers are referred to throughout the document may make it more accessible to those not fully engaged with this subject area. There does appear to be a number of different phrases used to refer to them throughout the document.

12. How might you/your organisation use the framework once it is published?

Since the NMC formally adopted the RPS CF as its standards of proficiency for nurse and midwife prescribers in January 2019, the RPS CF has fulfilled three central regulatory functions for the NMC. It provides the course outcomes for all NMC approved prescribing programmes; it provides a useful tool against which nurse and midwife prescribers can measure their performance and training needs for revalidation purposes; and it provides a benchmark for what constitutes safe and effective prescribing practice for fitness to practise purposes. We anticipate this continuing with the refreshed version once it has been published.

13. How could you/your organisation help to promote the framework once it is published?

We will promote the new framework in a variety of ways. There will continue to be direct links to it via the relevant pages on prescribing on our website. And we will publicise the launch of the refreshed version via the news pages of our website and newsletters/mailshots we send out to a range of stakeholders, including registrants, educators and members of the public, once the final version of the refreshed document is available and a publication/implementation date is known.

14. What might be the barriers to using this framework in practice?

We are unaware of any barriers coming to light since we adopted the RPS CF in January 2019 and do not foresee any new barriers emerging.

15. Are there any supporting references or resources that you think should be highlighted to support implementation of the framework?

None that haven't already been identified as part of the work that went into developing the refreshed version of the RPS CF.

16. Do you have any other comments about the framework?

We hope you find our comments useful. It has been a pleasure working on the development of the refreshed version of the RPS CF and we look forward to it remaining as the NMC's standards of proficiency for nurse and midwife prescribers for many years to come.

Submitted 30/04/2021 by Chris Bell, Standards Development Specialist and lead on the NMC Standards for prescribing programmes (2019).