

Guidance for Continuing Professional Development for Nurse and Midwife Prescribers

The NMC is charged with 'safeguard(ing) the health and well-being of persons using or needing the services of registrants' it does this by establish(ing) from time to time standards of education, training, conduct and performance for nurses and midwives and to ensure the maintenance of those standards' (NMC Order, 2001).

Current PREP Standards

The principles that underpin PREP reinforce the requirement that nurses and midwives must take active measures to maintain their competence through regular professional development. To this end nurses and midwives are required to sign a declaration that they have fulfilled the standards of 450 hours of practice and five study days in each three year period to enable re-registration for both the nursing and midwifery parts of the Register.

Revalidation

The White Paper *Trust, assurance and safety: the regulation of health professionals in the 21st Century* (2007) states that 'public and professional opinion has moved on from a position where trust alone was sufficient guarantee of fitness to practise, to one where that trust needs to be underpinned by objective assurance. Public opinion surveys suggest that people expect health professionals to participate in the revalidation of their registration and that many believe that this already takes place every year'. The NMC is expected to 'have in place arrangements for the revalidation of their (statutorily regulated health professions) professional registration through which they can periodically demonstrate their continued fitness to practise'.

Rationale for CPD for Nurse and Midwife Prescribers

The Shipman Inquiry recommended there should be mandatory continuing professional development requirement for all prescribers, as the recommendations for revalidation are not expected in the short term, this paper proposes an interim position for prescribers. The number of referrals to the National Patient Safety Agency www.npsa.nhs.uk (up to 4000 notifications a month) and to the NMC Fitness to Practise panels indicate that medicines management including prescribing form a significant number of these referrals.

Stakeholder engagement

Widespread stakeholder engagement has taken place across the four UK countries with prescribers, managers, professional bodies, pharmacists, regulatory bodies and users. The proposals below represent the views of stakeholders acknowledging that there was not

always consensus amongst the contributors, but represent what is considered optimum position statement to protect the public.

Principles for CPD for Nurse and Midwife Prescribers

- Prescribers should not be required to undertake additional hours of practice to meet CPD requirements as prescribing is part of their professional practice and should be identified as such.
- Nurse and Midwife prescribers are accountable for remaining up-to-date and competent and therefore continuing professional development should meet individual need.
- NMC recommends that appraisal of CPD needs for prescribing should be undertaken annually as part of performance review, preferably using a recognised tool e.g. National Prescribing Centre, NIPEC Tool.
- There should be no difference in respect of CPD requirements, between Nurse and Midwife Independent Prescribers and Community Nurse Prescribers. The principles of prescribing are the same for both groups.
- Appraisal of CPD needs will determine the required level of input to demonstrate competency, to meet educational and practice needs.
- All prescribers whether or not they work in the NHS, General Practice or the Independent Sector should appraise their CPD needs.
- A portfolio should be kept that demonstrates CPD and prescribers ongoing needs, through reflection.
- Employers should ensure that where prescribing CPD needs are recognised, these are supported by the employer and are addressed to the satisfaction of the employer and employee.
- Where registrants work in areas that cross practice boundaries, recognition of this should be made when determining CPD requirements.
- Registrants are responsible for their own CPD, however, it is expected that employers would support them in meeting their needs.

What form should Continuing Professional Development take?

CPD may take a number of forms including:

- E-learning
- Journals
- Prescribing forums
- Individual study
- Work based learning
- Formal CPD study days
- Action Learning Sets
- The form should be what suits individual practitioners own learning styles and meets individual need.

- It should identify core learning needs and those that are specialist to the field of practice.
- CPD may be accredited through a range of institutions including higher education, professional bodies and prescribing forums, this would be down to local arrangements.

Practice requirements:

- All prescribers must make assessments and undertake prescribing decisions regularly to maintain registration.
- The NMC recognises that many prescribers may undertake prescribing decisions but not always prescribe and it is for this reason the number of prescriptions written should not be the denominator by which competency is assessed.
- Either/both the number of hours spent in prescribing or making prescribing decisions should be counted as CPD. Prescribing should be seen as an integral part of professional practice.

Theory

Prescribers must be able to demonstrate that they have remained up-to date with evidence based practice and 'Best Practice Guidelines'.

Time Commitment

- Where additional CPD is indicated in the performance appraisal, employers have a responsibility to ensure that this may be reasonably met.
- This may be undertaken by private study, formal study days, reflective practice, work based learning, supervision by nurse /midwife prescribers or designated medical practitioners as indicated by appraisal.
- Where possible CPD should be undertaken within a multi-disciplinary context.

Benchmark for CPD

It is expected that any continuing professional development will ensure that all nurse and midwife prescribers are able to continue to meet the '*Standards of Proficiency for Nurse and Midwife Prescribers*' where appropriate.