1. **THE CONSULTATION**

**Competency 1: Assess the patient**

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| **Statements supporting the competency** | **Notes** |
| 1.1 Undertakes the consultation in an appropriate setting. |  |
| 1.2 Considers patient dignity, capacity, consent and confidentiality. |  |
| 1.3 Introduces self and prescribing role to the patient/carer and confirms patient/carer identity. |  |
| 1.4 Assesses the communication needs of the patient/carer and adapts consultation appropriately. |  |
| 1.5 Demonstrates good consultation skillsand builds rapport with the patient/carer. |  |
| 1.6 Takes and documents an appropriate medical, psychosocial and medication history including allergies and intolerances. |  |
| 1.7 Undertakes and documents an appropriate clinical assessment. |  |
| 1.8 Identifies and addresses potential vulnerabilitiesthat may be causing the patient/carer to seek treatment. |  |
| 1.9 Accesses and interprets all available and relevant patient records to ensure knowledge of the patient’s management to date. |  |
| 1.10 Requests and interprets relevant investigations necessary to inform treatment options. |  |
| 1.11 Makes, confirms or understands, and documents the working or final diagnosis by systematically considering the various possibilities (differential diagnosis). |  |
| 1.12 Understands the condition(s) being treated, their natural progression, and how to assess their severity, deterioration and anticipated response to treatment. |  |
| 1.13 Reviews adherence (and non-adherence) to, and effectiveness of, current medicines. |  |
| 1.14 Refers to or seeks guidance from another member of the team, a specialist or appropriate information source when necessary. |  |

**Competency 2: Identify evidence-based treatment options available for clinical decision making**

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| **Statements supporting the competency** | **Notes** |
| 2.1 Considers both non-pharmacological and pharmacological treatment approaches. |  |
| 2.2 Considers all pharmacological treatment options including optimising doses as well as stopping treatment (appropriate polypharmacy and deprescribing). |  |
| 2.3 Assesses the risks and benefits to the patient of taking or not taking a medicine or treatment. |  |
| 2.4 Applies understanding of the pharmacokinetics and pharmacodynamics of medicines, and how these may be altered by individual patient factors. |  |
| 2.5 Assesses how co-morbidities, existing medicines, allergies, intolerances, contraindications and quality of life impact on management options. |  |
| 2.6 Considers any relevant patient factors and their potential impact on the choice and formulation of medicines, and the route of administration. |  |
| 2.7 Accesses, critically evaluates, and uses reliable and validated sources of information. |  |
| 2.8 Stays up to date in own area of practice and applies the principles of evidence-based practice. |  |
| 2.9 Considers the wider perspective including the public health issues related to medicines and their use, and promoting health. |  |
| 2.10 Understands antimicrobial resistance and the roles of infection prevention, control and antimicrobial stewardship measures. |  |

**Competency 3: Present options and reach a shared decision**

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| **Statements supporting the competency** | **Notes** |
| 3.1 Actively involves and works with the patient/carer to make informed choices and agree a plan that respects the patient’s/carer’s preferences. |  |
| 3.2 Considers and respects patient diversity, background, personal values and beliefs about their health, treatment and medicines, supporting the values of equality and inclusivity, and developing cultural competence. |  |
| 3.3 Explains the material risks and benefits, and rationale behind management options in a way the patient/carer understands, so that they can make an informed choice. |  |
| 3.4 Assesses adherence in a non-judgemental way; understands the reasons for non-adherence and how best to support the patient/carer. |  |
| 3.5 Builds a relationship which encourages appropriate prescribing and not the expectation that a prescription will be supplied. |  |
| 3.6 Explores the patient’s/carer’s understanding of a consultation and aims for a satisfactory outcome for the patient/carer and prescriber. |  |

**Competency 4: Prescribe**

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| **Statements supporting the competency** | **Notes** |
| 4.1 Prescribes a medicine or devicewith up-to-date awareness of its actions, indications, dose, contraindications, interactions, cautions and adverse effects. |  |
| 4.2 Understands the potential for adverse effects and takes steps to recognise, and manage them, whilst minimising risk. |  |
| 4.3 Understands and uses relevant national, regional and local frameworks for the use of medicines. |  |
| 4.4 Prescribes generic medicines where practical and safe for the patient, and knows when medicines should be prescribed by branded product. |  |
| 4.5 Accurately completes and routinely checks calculations relevant to prescribing and practical dosing. |  |
| 4.6 Prescribes appropriate quantities and at appropriate intervals necessary to reduce the risk of unnecessary waste. |  |
| 4.7 Recognises potential misuse of medicines; minimises riskand manages using appropriate processes. |  |
| 4.8 Uses up-to-date information about the availability, pack sizes, storage conditions, excipients and costs of prescribed medicines. |  |
| 4.9 Electronically generates and/or writes legible, unambiguous and complete prescriptions which meet legal requirements. |  |
| 4.10 Effectively uses the systems necessary to prescribe medicines. |  |
| 4.11 Prescribes unlicensed and off-label medicines where legally permitted, and unlicensed medicines only if satisfied that an alternative licensed medicine would not meet the patient's clinical needs. |  |
| 4.12 Follows appropriate safeguards if prescribing medicines that are unlicensed, off-label, or outside standard practice. |  |
| 4.13 Documents accurate, legible and contemporaneous clinical records. |  |
| 4.14 Effectively and securely communicates information to other healthcare professionals involved in the patient’s care, when sharing or transferring care and prescribing responsibilities, within and across all care settings. |  |

**Competency 5: Provide information**

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| **Statements supporting the competency** | **Notes** |
| 5.1 Assesses health literacy of the patient/carer and adapts appropriately to provide clear, understandable and accessible information. |  |
| 5.2 Checks the patient’s/carer’s understanding of the discussions had, actions needed and their commitment to the management plan. |  |
| 5.3 Guides the patient/carer on how to identify reliable sources of information about their condition, medicines and treatment. |  |
| 5.4 Ensures the patient/carer knows what to do if there are any concerns about the management of their condition, if the condition deteriorates or if there is no improvement in a specific timeframe. |  |
| 5.5 Encourages and supports the patient/carer to take responsibility for their medicines and self-manage their condition. |  |

**Competency 6: Monitor and review**

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| **Statements supporting the competency** | **Notes** |
| 6.1 Establishes and maintains a plan for reviewing the patient’s treatment. |  |
| 6.2 Establishes and maintains a plan to monitor the effectiveness of treatment and potential unwanted effects. |  |
| 6.3 Adapts the management plan in response to on-going monitoring and review of the patient’s condition and preferences. |  |
| 6.4 Recognises and reports suspected adverse events to medicines and medical devices using appropriate reporting systems. |  |

1. **PRESCRIBING GOVERNANCE**

**Competency 7: Prescribe safely**

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| **Statements supporting the competency** | **Notes** |
| 7.1 Prescribes within own scope of practice, and recognises the limits of own knowledge and skill. |  |
| 7.2 Knows about common types and causes of medication and prescribing errors, and knows how to minimise their risk. |  |
| 7.3 Identifies and minimises potential risks associated with prescribing via remote methods. |  |
| 7.4 Recognises when safe prescribing processes are not in place and acts to minimise risks. |  |
| 7.5 Keeps up to date with emerging safety concerns related to prescribing. |  |
| 7.6 Reports near misses and critical incidents, as well as medication and prescribing errors using appropriate reporting systems, whilst regularly reviewing practice to prevent recurrence. |  |

**Competency 8: Prescribe professionally**

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| **Statements supporting the competency** | **Notes** |
| 8.1 Ensures confidence and competence to prescribe are maintained. |  |
| 8.2 Accepts personal responsibility and accountability for prescribing and clinical decisions, and understands the legal and ethical implications. |  |
| 8.3 Knows and works within legal and regulatory frameworks affecting prescribing practice. |  |
| 8.4 Makes prescribing decisions based on the needs of patients and not the prescriber’s personal views. |  |
| 8.5 Recognises and responds to factors that might influence prescribing. |  |
| 8.6 Works within the NHS, organisational, regulatory and other codes of conduct when interacting with the pharmaceutical industry. |  |

**Competency 9: Improve prescribing practice**

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| **Statements supporting the competency** | **Notes** |
| 9.1 Improves by reflecting on own and others’ prescribing practice, and by acting upon feedback and discussion. |  |
| 9.2 Acts upon inappropriate or unsafe prescribing practice using appropriate processes. |  |
| 9.3 Understands and uses available tools to improve prescribing practice. |  |
| 9.4 Takes responsibility for own learning and continuing professional development relevant to the prescribing role. |  |
| 9.5 Makes use of networks for support and learning. |  |
| 9.6 Encourages and supports others with their prescribing practice and continuing professional development. |  |
| 9.7 Considers the impact of prescribing on sustainability, as well as methods of reducing the carbon footprint and environmental impact of any medicine. |  |

**Competency 10: Prescribe as part of a team**

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| **Statements supporting the competency** | **Notes** |
| 10.1 Works collaboratively as part of a multidisciplinary team to ensure that the transfer and continuity of care (within and across all care settings) is developed and not compromised. |  |
| 10.2 Establishes relationships with other professionals based on understanding, trust and respect for each other’s roles in relation to the patient’s care. |  |
| 10.3 Agrees the appropriate level of support and supervision for their role as a prescriber. |  |
| 10.4 Provides support and advice to other prescribers or those involved in administration of medicines where appropriate. |  |

**For further information, including the structure, further information, glossary terms, background, and supporting tools and resources, please see the Competency Framework for all Prescribers on the RPS website here:** [**https://www.rpharms.com/cfap**](https://www.rpharms.com/cfap)**.**