

## POSITION STATEMENT

### National competencies for the prescribing of medicines

#### Position

The Society of Hospital Pharmacists of Australia (SHPA) supports safe and effective prescribing of medicines by all health professionals, including pharmacists, who are authorised to undertake prescribing within their scope of practice. SHPA endorses the national Prescribing Competencies Framework as a framework used to underpin a nationally consistent approach to prescribing by all health professionals.<sup>1,2</sup>

All health professionals who prescribe medicines need to be equipped with the right knowledge, skills, attitudes, behaviours and values to make prescribing decisions that will facilitate the best possible health and economic outcomes for the consumer.

Appropriate education and training is necessary to support safe and effective prescribing by health professionals, regardless of their professional background.

In addition to nationally agreed competencies, SHPA supports the following principles:

1. Patient safety is paramount.
2. Whenever possible, there should always be a separation of the functions of prescribing, dispensing and administration of medicines in all practice settings. 'Separation' ensures that another health professional will be required to take an independent review of the next step in the medicines management pathway. It is acknowledged that in some settings or in emergencies this may not always be possible, but the principle is supported as it provides the checks and balances necessary for safer prescribing.

Separation would ensure that:

- a nurse prescriber would not dispense and/or administer a medicine that s/he has prescribed
  - a pharmacist prescriber would not dispense a medicine that s/he has prescribed
  - a medical prescriber would not dispense a medicine that s/he has prescribed
  - orders would continue to be reviewed by an independent pharmacist (via dispensing) and an independent nurse (via administration)
3. Prescribing should be based on a defined clinical need and/or treatment goal and an accurate, complete and comprehensive medication history or medication management plan.
  4. Prescribers should operate within their scope of practice and refer to another health professional when the consumer's use of medicines is outside their scope of practice or the consumer's condition fails to improve within a specified period of time.
  5. Prescribing is best undertaken via a collaborative model, where health professionals, including pharmacists may participate as prescribers within a healthcare team that includes the person's main healthcare provider. This should be underpinned by frequent and effective communication between all members of the healthcare team, including the main healthcare provider and the consumer.
  6. Prescribers require a full understanding of the nine steps and three background processes of the medicines management pathway.

SHPA supports the aims of the *Health Professionals Prescribing Pathway (HPPP) Project*<sup>3</sup> currently being undertaken in Australia to develop a nationally consistent approach to prescribing by health professionals, other than medical practitioners, and that supports safe practice, quality use of medicines and effectiveness of healthcare services.

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## Background

Prescribing should take place within a quality use of medicines (QUM) paradigm, one of the four pillars of Australia's National Medicines Policy. QUM means selecting management options wisely, choosing suitable medicines if a medicine is considered necessary, and using medicines safely and effectively.

The *Guiding Principles to achieve continuity in medication management*<sup>4</sup> developed by the Australian Pharmaceutical Advisory Council describes a pathway that is applicable to the use of all medicines, independent of the setting, health professionals involved and funding source.

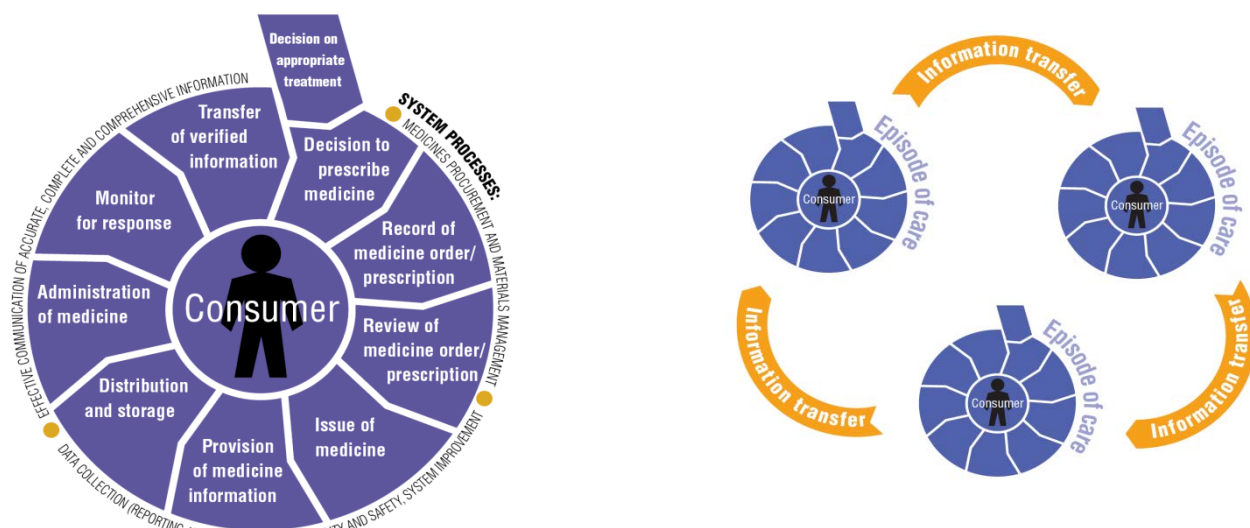


Figure 1 Medication management cycle and Continuity in medication management<sup>4</sup>

The first step in the prescribing of a medicine involves a decision on the most appropriate treatment option for the consumer. If this is the use of a medicine, the decision becomes the choice of the most appropriate, safe and cost effective medicine for that person. Other medicines already being used must be considered. The decision may be influenced by treatment protocols, cost effectiveness and acceptability to the consumer, as well as the funding source.

The intention of the prescriber then needs to be conveyed to others involved in the medicines management pathway. The medicine order (or prescription) needs to be clear and unambiguous and contain enough information to support the use of the medicine as intended.

Review of the medicine order by another suitably qualified health professional provides safeguards for the prescriber and consumer. It is essential in assessing safety, appropriateness and ensuring optimal use of the medicine, and to meet legislative requirements.

**Approved by SHPA Federal Council – October 2012** (supersedes the June 2005 version)

## References:

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