

Pharmacist Prescriber Practice Plan

Date

Employing organisation

Collaborative team leader

Your role within the team

Role and functions of other team members

Days or times to be spent as a pharmacist prescriber (e.g. if running a specific clinic, FTE)

Mentoring and Clinical Governance

- Who will provide mentoring? How will it be provided?
- Who will provide supervision? How will it be provided?
- Any additional mentoring from other team members or relevant external sources

Prescribing practice

- Clinical areas you will prescribe in / types of patients / conditions seen
- Situations where you would not prescribe (e.g. circumstances where you would refer the patient back to lead medical practitioner)
- Medicines or medicines groups to be prescribed
 - All medicines that you intend to prescribe, including for repeat prescribing **must be listed**. This is your confirmation that you are competent to prescribe these medicines.
- Referral, documentation and communication processes
- Identifying patients for clinics, monitoring and follow up, and measurable outcomes
- How access to patient records will be managed
- Process for ordering diagnostic tests and reviewing results
- Protocol for repeat prescribing (include a copy of your organisation's repeat prescribing policy) and how you are taking accountability of repeat prescribing
- Types of circumstances / situations when you would be comfortable to prescribe autonomously, and conversely when you would discuss a prescribing decision with the lead medical practitioner
- Quality improvement including clinical audit of prescribing

Management of potential conflict of interest

Actual, potential or perceived influences on your prescribing practice (e.g. pharmaceutical industry or if you are asked to prescribe for a patient you are related to or know personally)

Continuing education process

- Peer review/ peer support regularly to review cases
- Process for changing team
- CPD process for changing/ expanding practice area

Summary of input into PPP

- Outline of changes to your recent plan (compared to previous/ initial version)
- Outline who has provided input into your updated PPP and relation to the changes (e.g. pharmacist prescriber peer input)

Sign-off – the practice plan needs to be signed¹ and dated by the clinical lead, and uploaded when making your application

¹ If the final document plus signature is larger than 2MB, an organisational/ work email from the clinical lead stating that they have discussed the plan and endorse it, (with a copy of the plan attached), is an acceptable alternative.