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Prepared to prescribe? : Pharmacy trainees' experience of, and performance in, the Prescribing Safety Assessment

Presented by

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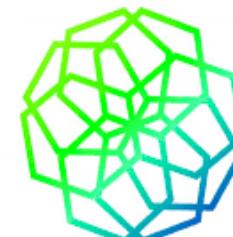
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Health Education England

Prescribing safety assessment (PSA)

Background

- The British Pharmacological Society and Medical Schools Council developed and introduced the PSA to enable final year medical students to demonstrate that they have the necessary knowledge to prescribe safely as they enter NHS practice
- This is now a compulsory online summative assessment for all entrants into UK foundation medical programmes.



PSA Structure

The PSA is based on the competencies identified in the General Medical Council's Outcomes for Graduates, such as writing new prescriptions, reviewing existing prescriptions, calculating drug doses, identifying and avoiding ADRs and medical errors and amending prescribing to suit individual patient circumstances.

Each PSA comprises eight sections (covered in 60 question items that have to be completed over two hours): Prescribing, Prescription review, Planning management, Providing information about medicines, Calculation skills, Adverse drug reactions, Drug monitoring, Data interpretation.



Pharmacist prescribers

- Pharmacists can train on a GPhC accredited IP programme after a minimum of two years appropriate experience
- The demand for pharmacist prescribers is increasing and will continue to do so due to recommendations in:
 - Lord Carter's review of productivity in hospital
 - Five year forward view
 - GP forward view
- Interest has been expressed by Department of Health and Scottish Government for pharmacists to be prescribers by virtue of their primary registration or shortly thereafter.



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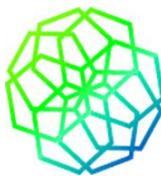
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PSA for pharmacists

- To support explorations as to whether pharmacy trainees could be prepared to take on prescribing responsibilities at registration or early in their careers, HEE undertook a small scale trial of the PSA with pharmacy undergraduates and pre-registration trainees in 2015
- This study represents a larger pilot trial



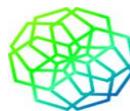
Aims

- The purpose of this pilot was to investigate the application of the PSA to pre-registration pharmacists:
 - To provide a preliminary indication of the performance of pharmacy undergraduates and pre-registration pharmacy trainees in the PSA
 - To test the feasibility of administering and delivering the PSA in schools of pharmacy
 - To examine the potential relevance of the PSA and associated training materials to pharmacy
 - To assess the attitudes of the cohort towards the PSA and their readiness to prescribe.



Methods

- Four schools of pharmacy (Keele, Manchester, Bradford, Sunderland) recruited final year pharmacy undergraduate students and pre-registration pharmacy trainees undertaking training with both hospital and community pharmacy employers in their locality to undertake the PSA.
- 633 candidates took part in this pilot assessment. Pre-registration pharmacy trainees in community (n=27) and hospital (n= 209) and undergraduate pharmacy students (n=397)
- Performance data and feedback from candidates was obtained.



Results

- Performance
 - Pharmacy pre-registration trainees performed well, community trainees average mark was 86.3% and hospital 85.3%
 - MPharm students average mark was 73.0%
 - Both sets of students performed best in calculation questions and worst in data interpretation.
- Feasibility
 - It is feasible to deliver the PSA in pharmacy training. Although on a small scale this study showed that it was feasible to deliver the PSA to trainees in both a hospital and community setting



Results

- Relevance
 - Overall candidates undertaking the PSA felt that it was relevant and applicable to their training, describing it as useful, practical and confidence giving
- Attitudes
 - Students were accepting of the PSA and engaged in preparing for and undertaking it.



Conclusions

- Evaluation of the implementation of pharmacist prescribers has indicated that patient satisfaction and acceptability is high
- The Modernising Pharmacy Careers (MPC) programme called for the reform of pharmacy education, it suggested that pharmacy undergraduate programmes should take students further towards prescribing roles at the point of registration and that there should be greater expedience towards full independent prescribing thereafter
- The PSA may have a future utility in pharmacy education
- Evidence from the training of doctors shows that educational interventions alone do not prevent prescribing errors in clinical practice
- Significant clinical exposure and opportunities to practise the complex task of prescribing in advance of taking on this role must be facilitated

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