

SAFE EFFECTIVE PHARMACY PRACTICE

STANDARDS AND GUIDANCE FOR PHARMACIST PRESCRIBERS



CONTENTS

INTRODUCTION	1
ETHICAL PRINCIPLES	3
Make the health and well-being of the patient your first priority	3
Promote patient self-determination, respect patient’s rights, autonomy and freedom of choice.	4
Use your professional judgement in the interests of patients and the public and promote family, whānau and community health.	4
Show respect for others and exercise your duties with professionalism.	5
Actively seek and apply contemporary pharmacy knowledge and skills to ensure a high standard of professional competence.	5
Act in a manner that promotes public trust and confidence in pharmacists and enhances the reputation of the profession.	6
Practise in a manner that does not compromise your professional independence, judgement or integrity, or that of other pharmacists.	6
PHARMACIST PRESCRIBER COMPETENCY FRAMEWORK	7
PP 1: DEMONSTRATE CLINICAL AND PHARMACEUTICAL KNOWLEDGE	7
PP 2: ESTABLISH OPTIONS FOR THE PATIENT	8
PP 3: COMMUNICATE WITH PATIENTS	10
PP 4: PRESCRIBE SAFELY	11
PP 5: PRESCRIBE PROFESSIONALLY	12
PP 6: MAINTAIN QUALITY OF PRESCRIBING PRACTICE	13
PP 7: WORK WITHIN THE CONTEXT OF THE NEW ZEALAND HEALTHCARE SYSTEM	14
PP 8: WORK IN COLLABORATION	15
Appendix 1 – DEFINITIONS	16
Appendix 2 – PHARMACIST PRESCRIBER SCOPE OF PRACTICE	17
Appendix 3 – EXAMPLES OF AREAS OF PRACTICE	17

INTRODUCTION

Pharmacist prescribers have specialised clinical, pharmacological and pharmaceutical knowledge, skills and understanding relevant to their area of prescribing practice. They are authorised to prescribe as designated prescribers under the Medicines (Designated Pharmacist Prescriber) Regulations 2013 and are registered in the Pharmacist Prescriber Scope of Practice¹. This allows them to provide individualised medicines management services, including the prescribing of medicines to patients across a range of healthcare settings and models².

Registration requirements for the pharmacist prescriber scope of practice are:

- at least three years of recent and appropriate post registration experience working in a collaborative health team environment;
- a qualification accredited by the Pharmacy Council for the purpose of this scope of practice; and
- be practising in Competence Standards 1, 2, 4 and 5 from the Competence Standards for the Pharmacy Profession³.

In the New Zealand context, pharmacists registered in this scope will be prescribing within an environment that meets the components of a collaborative health team⁴ setting. In this environment it is inherent that the patient's primary healthcare provider is part of the pharmacist prescriber's collaborative health team, and the pharmacist is the expert in managing a patient's medicines therapy.

The pharmacist prescriber must prescribe within the limits of their professional expertise and competence (both clinical and cultural) and ethical codes of practice. They are responsible and accountable for the care they provide.

About this document

This document incorporates both the ethical obligations expected of a pharmacist prescriber and their required competencies. There may be elements within the competency framework that appear to mirror a specific ethical obligation; however the competencies and ethical obligations are intended to be complementary.

1 See Appendix 2

2 See Appendix 3

3 www.pharmacycouncil.org.nz/standards_guidelines

4 See Definitions

The ethical obligations build on the principles of the Code of Ethics 2011⁵ for the pharmacy profession for the purpose of explaining the pharmacist prescribers' obligations in the collaborative health team environment. The principles of the Code of Ethics 2011 are intended to capture the philosophical foundation of pharmacy practice and to express the responsibilities and professional values that are fundamental and inherent to the pharmacy profession. It therefore remains a relevant professional decision-making framework for pharmacist prescribers.

The Schedule of legislation, regulations, codes of practice (and any subsequent amendments), and statements that directly or indirectly impact on the profession of pharmacy, and are listed in the 2011 Code are not reproduced here. Pharmacist prescribers are equally bound by the 2011 Code and are therefore expected to practise in accordance with all the legislation, regulations, codes of practice, and statements listed.

The competencies outlined are those that are specific to the role of a pharmacist prescriber. The Pharmacy Council also endorses the 2012 National Prescribing Services (NPS) document Competencies Required to Prescribe Medicines⁶ as a useful tool to help identify gaps and needs in prescribing competencies.

Legal authority of the Pharmacist Prescriber Code of Ethics

The following Code of Ethics for Pharmacist Prescribers was prescribed by the Pharmacy Council of New Zealand pursuant to Section 118(i) of the Health Practitioners Competence Assurance Act 2003 and came into effect from 10 July 2013.

5 www.pharmacycouncil.org.nz/standards_guidelines

6 www.nps.org.au/_data/assets/pdf_file/0004/149719/Prescribing_Competerencies_Framework.pdf

ETHICAL PRINCIPLES

The principles in this document are laid out in the same order as the Code of Ethics 2011.

The seven principles are:

-
- Make the health and well-being of the patient your first priority.
 - Promote patient self-determination, respect patients' rights, autonomy and freedom of choice.
 - Use your professional judgement in the interests of patients and the public and promote family, whānau and community health.
 - Show respect for others and exercise your duties with professionalism.
 - Actively seek and apply contemporary pharmacy knowledge and skills to ensure a high standard of professional competence.
 - Act in a manner that promotes public trust and confidence in pharmacists and enhances the reputation of the profession.
 - Practise in a manner that does not compromise your professional independence, judgement or integrity, or that of other pharmacists.
-

Make the health and well-being of the patient your first priority

All decisions related to prescribing must be undertaken within the collaborative health team environment, must be patient-centred and focussed on addressing the healthcare needs of the patient.

You must:

- 1.1. Prescribe only where there is a genuine, identifiable clinical need for treatment given the nature of the patient's health and medical history, and not based solely on the patient's request.
- 1.2. Only prescribe for a patient who is under the care of your collaborative health team.
- 1.3. Be professionally accountable for your prescribing decisions and do not delegate this accountability to any other person.
- 1.4. Refer the patient to another prescriber or health professional if prescribing for the patient, or if other concerns or issues are identified that are outside your defined area of practice.
- 1.5. Take full responsibility and accountability if issuing a prescription that is a continuation of a previous treatment, regardless of whether the earlier prescription was written by you or another prescriber.

Promote patient self-determination, respect patient's rights, autonomy and freedom of choice.

Patients have a right to be involved in decisions about their treatment and care. When the patient's views cannot be fully accommodated you should explain why a particular choice has been made.

Ensure consultations are undertaken with regard for the patient's dignity, privacy and independence.

You must:

- 2.1. Take the patient's views and beliefs into account when discussing treatment options in order to create an environment where shared decision-making is the norm.
- 2.2. Be able to justify your decision for a particular treatment option if a patient's request cannot be fully accommodated.
- 2.3. Ensure that patients are involved, within the limits of their capacities, in understanding the nature of their health needs, the range of possible management options, as well as the likely benefits and risks, and assist them in making informed choices.
- 2.4. Obtain the patient's agreement for any relevant and appropriate physical examination or diagnostic testing you do.
- 2.5. Respect the autonomy of the patient to decide whether to accept your prescribing decisions.

Use your professional judgement in the interests of patients and the public and promote family, whānau and community health.

Balancing the needs of individual patients with those of society as a whole is essential to professional practice. Prescribing decisions should be based on up-to-date/best practice evidence and current professional practice.

You must:

- 3.1. Be evidence-based in your prescribing practice and prescribe in accordance with accepted best practice and any relevant local and national guidelines.
- 3.2. Strive to use resources efficiently, consistent with good evidence based patient care, and balance your duty of care to each patient with your duty of care to the community and wider population.

Show respect for others and exercise your duties with professionalism.

Showing respect for others is essential in forming and maintaining professional relationships with everyone you come into contact within your professional practice.

You must:

- 4.1. Act in accordance with your professional and legal obligations to establish and preserve trust in the patient-pharmacist relationship.
- 4.2. Explain your role as a pharmacist prescriber to the patient and/or their representative.
- 4.3. Be aware and respectful of cultural and religious differences in so far as they apply to prescribing and your interactions with the patient.

Actively seek and apply contemporary pharmacy knowledge and skills to ensure a high standard of professional competence.

You must ensure that your knowledge, skills and performance are of a high standard, up-to-date and relevant to your area of practice.

You must:

- 5.1. Prescribe only within your level of expertise and competence. Do not prescribe outside your clinical knowledge of either the condition, or the medicines required to treat that condition.
- 5.2. Consider the competence and professional requirements of your role if you change your collaborative health team environment and/or extend your prescribing activities. You may need to undertake additional training to ensure you are competent to prescribe in a new area of practice.
- 5.3. Ensure that part of your continuing professional development directly addresses your role as a prescriber. This includes keeping up to date with relevant changes in the law as well as the areas of practice in which you prescribe.

Act in a manner that promotes public trust and confidence in pharmacists and enhances the reputation of the profession.

Patients, colleagues and the public place their trust in you as a pharmacy professional. You must behave in a way that justifies this trust and maintains the reputation of your profession.

You must:

- 6.1. Make your choice of treatment for the patient based on clinical suitability, and clinical and cost effectiveness. The decision must not knowingly be based on biased information or for commercial gain.
- 6.2. Refuse any inducement, gift or hospitality which may affect or be seen to affect your professional judgement when making a prescribing decision.
- 6.3. Have robust procedures in place to ensure the separation of prescribing and dispensing.
- 6.4. Never write prescriptions for yourself.
- 6.5. Only prescribe for those with whom you have a personal relationship where overall management of patient care is being monitored by the health team.

Practise in a manner that does not compromise your professional independence, judgement or integrity, or that of other pharmacists.

Collaboration with other health providers is an important and integral component to pharmacist prescribing. Prescribing by pharmacists should complement care provided by other health professionals, and relies on respect, co-operation and ongoing two-way communication.

You must:

- 7.1. Work collaboratively with other health professionals to serve the best interests of the patient.
- 7.2. Ensure other prescribers within the collaborative health team are aware of your prescribing, including your rationale for treatment or non-treatment options.
- 7.3. Ensure the records you make, in whatever format, are accurate, up-to-date and comprehensive, legible if handwritten and stored securely.
- 7.4. Communicate actions related to prescribing and medication management, where appropriate, to other health professionals involved in the care of the patient. Communication may be verbal, in writing or through electronic media, and actions should be supported by documentation.
- 7.5. Ensure you have professional indemnity arrangements which cover the scope of your prescribing practice.

PHARMACIST PRESCRIBER COMPETENCY FRAMEWORK

The competency framework consists of EIGHT competence standards. These standards are grouped into three areas, with two or three competencies in each area.

The three areas of competency are:

- THE CONSULTATION – consisting of three competence standards
- PRESCRIBING EFFECTIVELY – consisting of three competence standards
- PRESCRIBING IN CONTEXT – consisting of two competence standards

The framework consists of EIGHT competence standards.

Each of the competence standards:

- is described as PP 1 – PP 8 where PP is an acronym for Pharmacist Prescriber
- has an overarching statement which gives an overview of the competence standard and the expectations of the pharmacist prescriber
- has a number of elements eg PP 1.1 which consists of a number of statements eg PP 1.1.1. These describe the behaviours pharmacist prescribers should demonstrate in their practice on an ongoing basis. Some also include evidence examples to indicate how competency could be demonstrated for these activities.

PP 1: DEMONSTRATE CLINICAL AND PHARMACEUTICAL KNOWLEDGE

The pharmacist prescriber must have up-to-date clinical and pharmaceutical knowledge relevant to their defined area of practice.

PP 1.1 Apply clinical understanding relevant to own area of practice

- PP 1.1.1 Understands and is able to explain the conditions being treated, their natural progress and how to assess their severity
- PP 1.1.2 Understands and is able to explain different non-pharmacological and pharmacological approaches to optimising health outcomes

PP 1.1.3 Understands and is able to explain the pharmacodynamics and pharmacokinetics of medicines, how these mechanisms may be altered and how this affects the dosage regimen

PP 1.1.4 Understands and is able to explain the potential for unwanted effects, including adverse drug reactions and drug interactions and how to avoid, minimise and/or manage them

PP 1.2 Apply principles of evidence-based medicine

PP 1.2.1 Understands and applies the principles of evidence-based medicine, and clinical and cost-effectiveness

PP 1.3 Maintain pharmaceutical knowledge relevant to own area of practice

PP 1.3.1 Develops and maintains an up-to-date knowledge of pharmaceutical products relevant to area of practice.

PP 2: ESTABLISH OPTIONS FOR THE PATIENT

The pharmacist prescriber should understand a diagnosis, undertake patient assessments, generate and agree treatment options and follow up on them. The pharmacist prescriber will be able to demonstrate appropriate and relevant diagnostic skills; clinical reasoning and patient assessment skills; and monitoring skills required to optimise medicines related health outcomes for the patient. This will be within the confines of a confirmed diagnosis and the collaborative health team environment.

PP 2.1 Undertake patient assessment

PP 2.1.1 Takes a comprehensive medical history and medication history (including complementary medicines, herbal remedies, over-the-counter medicines, Rongoā)

PP 2.1.2 Assesses the clinical condition using appropriate records, techniques and equipment

PP 2.1.3 Accesses and interprets all relevant patient records to ensure understanding of the patient's management

PP 2.1.4 Evaluates the effectiveness of an individual patient's current medicine therapy

PP 2.1.5 Identifies the nature, severity and significance of the clinical problem

PP 2.1.6 Requests, and interprets relevant investigations
Evidence example: spirometry, biochemistry, haematology orders to monitor effectiveness of medicine/therapy eg therapeutic drug monitoring, chronic disease management (diabetes, cardiovascular disease), nutritional requirements or continuation of therapy

PP 2.2 Generate treatment options

PP 2.2.1 Views and assesses the patient's needs holistically (e.g. cultural, psychosocial, physical)

PP 2.2.2 Considers no treatment, non-pharmacological and pharmacological options (including referral to other members of the healthcare team and/or preventative measures)

PP 2.2.3 Assesses actual or potential drug related problems including the effect of multiple pathologies, existing medicines and contraindications

PP 2.2.4 Assesses the risks and benefits to the patient of taking/not taking a medicine (or using/not using a treatment)

PP 2.2.5 Selects the most appropriate medicines, dosing regimen, route of administration and formulation for the individual patient and prescribes appropriate quantities

PP 2.3 Monitor treatment and make necessary changes to treatment plan

PP 2.3.1 Monitors effectiveness of treatment and potential unwanted effects

PP 2.3.2 Makes changes to the treatment plan in light of ongoing monitoring and the patient's condition and preferences

PP 2.3.3 Establishes and maintains a plan for reviewing the therapeutic objective

PP 2.3.4 Ensures that patient can access ongoing supplies of their medication

PP 3: COMMUNICATE WITH PATIENTS

(including family/whānau and caregivers, and advocates where appropriate).

The pharmacist prescriber should seek to establish a relationship with the patient based on trust and mutual respect. The pharmacist will see the patient as a partner in the consultation and apply the principles of concordance.

PP 3.1 Establish a relationship based on trust and respect

- PP 3.1.1 Listens to and understands the patient's beliefs, ideas, concerns and expectations
- PP 3.1.2 Understands the cultural and religious implications of the diagnosis / prescribing
- PP 3.1.3 Undertakes the consultation in an appropriate setting and adapts to meet the needs of the patient (e.g. health literacy, physical impairments, privacy, confidentiality)
- PP 3.1.4 Deals sensitively with patient's emotions and concerns
- PP 3.1.5 Creates a relationship which does not encourage the expectation that a prescription will be supplied
- PP 3.1.6 Explains the nature of the patient's condition to them, the rationale behind and potential risks and benefits of treatment/management options

PP 3.2 Apply the principles of partnership and concordance

- PP 3.2.1 Enables the patient to make informed choices about their options
- PP 3.2.2 Negotiates an outcome of the consultation that both patient and prescriber are satisfied with
- PP 3.2.3 Encourages the patient to take responsibility for their own health and self-manage their conditions
- PP 3.2.4 Identifies opportunities to discuss health promotion with the patient
- PP 3.2.5 Gives clear instructions about the medication (eg what it is for, how to use it, possible unwanted effects)
- PP 3.2.6 Checks the patient's understanding of, and commitment to their management and follow-up

PP 4: PRESCRIBE SAFELY

The pharmacist prescriber will apply professional reasoning and judgment; will be aware of own limitations; will comply with legal requirements and does not compromise patient safety. The pharmacist prescriber is able to justify their prescribing decisions.

PP 4.1 Apply professional reasoning and judgment

- PP 4.1.1 Recognises priorities and uncertainties when problem solving
- PP 4.1.2 Uses sound reasoning and judgment skills when making decisions/recommendations in everyday and complex situations and resolves issues holistically
Evidence example: utilises skills including analytical skills, judgement skills, interpretation skills, and appraisal of options to make decisions
- PP 4.1.3 Makes decisions in the absence of specific evidence or data, or when there is conflicting evidence or data, and takes responsibility for these decisions

PP 4.2 Aware of own limitations

- PP 4.2.1 Identifies and works within the limits of own knowledge and skill
- PP 4.2.2 Appropriately refers patient or seeks guidance from another member of the collaborative health team or another relevant health professional
- PP 4.2.3 Only prescribes medicines with adequate, up-to-date knowledge of its actions, indications, contraindications, interactions, cautions, dose and side-effects

PP 4.3 Ensure patient safety

- PP 4.3.1 Checks doses and calculations to ensure accuracy and safety of prescribed medicines
- PP 4.3.2 Keeps up-to-date with advances in best-practice with respect to medicines and emerging safety concerns
- PP 4.3.3 Understands and is able to explain about common causes of medication errors and how to prevent them
- PP 4.3.4 Understands and is able to explain the misuse potential of medicines

PP 4.4 Comply with legal requirements

- PP 4.4.1 Understands the need for and makes accurate, clear and timely records and clinical notes
- PP 4.4.2 Generates legible, clear and complete prescriptions, which meet legal requirements

PP 5: PRESCRIBE PROFESSIONALLY

The pharmacist prescriber will work within professional, regulatory and organisational standards and codes of practice.

PP 5.1 Practice professionally when prescribing

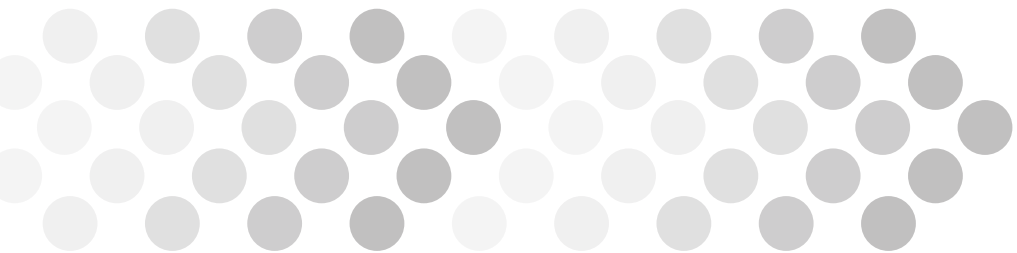
- PP 5.1.1 Accepts personal responsibility for own prescribing and understands the clinical, legal and ethical implications of doing so
- PP 5.1.2 Makes prescribing decisions, based on the identified clinical needs of the patient and not the personal considerations of the prescriber, family/whānau, caregiver, employer, colleagues and/or the pharmaceutical industry

PP 5.2 Work within regulatory, organisation and professional standards and codes of practice

- PP 5.2.1 Understands and can explain how current legislation affects prescribing practice
- PP 5.2.2 Works within the relevant organisational codes of conduct when dealing with the pharmaceutical industry
- PP 5.2.3 Prescribes within current professional and organisational codes of practice / standards
- PP 5.2.4 Uses relevant patient record systems, prescribing and information systems, and decision-support tools
- PP 5.2.5 Maintains patient confidentiality and considers the impact of privacy legislation on professional practice

PP 5.3 Maintain security of prescribing records and forms

- PP 5.3.1 Maintains security of patient information and records whether electronic or manual



PP 6: MAINTAIN QUALITY OF PRESCRIBING PRACTICE

The pharmacist prescriber will actively participate in the review and development of their prescribing practice, and in the critical appraisal of information to improve patient care.

PP 6.1 Participate in Continuing Professional Development (CPD) to maintain quality of prescribing practice

- PP 6.1.1 Takes responsibility for own continuing professional development specific to own practice area
- PP 6.1.2 Uses reflection on practice to adapt and improve own practice
- PP 6.1.3 Shares and debates own and others prescribing practice
- PP 6.1.4 Develops own networks for support, reflection and learning

PP 6.2 Participate in quality improvement activities to develop and improve prescribing practice

- PP 6.2.1 Uses tools to improve prescribing practice including evaluating patient outcomes
Evidence Example: prescribing data, audit and feedback
- PP 6.2.2 Records and reports adverse reactions to medicines, medication errors, and near misses, reviews practice to prevent recurrences
- PP 6.2.3 Establishes inter-professional links with practitioners working in the same specialist area
- PP 6.2.4 Promotes a no-blame environment for discussion and prevention of prescribing errors and near misses

PP 6.3 Access, evaluate and apply information to improve prescribing practice

- PP 6.3.1 Uses relevant, up-to-date information to guide prescribing decisions
- PP 6.3.2 Critically appraises the validity of information sources used in the context of prescribing decisions
- PP 6.3.3 Applies information to the clinical situation, linking theory to practice
- PP 6.3.4 Regularly reviews evidence behind therapeutic strategies
- PP 6.3.5 Understands the advantages and limitations of different information sources

PP 7: WORK WITHIN THE CONTEXT OF THE NEW ZEALAND HEALTHCARE SYSTEM

The pharmacist prescriber understands the structure, relationships and functions of the organisations that make up the New Zealand healthcare system and how their own practice impacts on the wider healthcare system and services. They also have the ability to understand and work within local and national policies that impact on prescribing practice.

PP 7.1 Understand the New Zealand Healthcare System

- PP 7.1.1 Understands how national and local health services and partner organisations work and interact
- PP 7.1.2 Understands economic constraints at local and national levels
- PP 7.1.3 Understands and can explain ways to reduce health inequalities and improve access for different population groups
- PP 7.1.4 Delivers healthcare advice and education in a manner which supports and enhances cultural awareness with respect to the health of the local, regional and/or national populations

PP 7.2 Understand the impact of own practice on the wider healthcare system

- PP 7.2.1 Understands national healthcare strategies, priorities and frameworks relevant to medicines use
- PP 7.2.2 Identifies impact of own practice on national and/or regional healthcare priorities and goals
- PP 7.2.3 Understands and can explain the public health issues related to medicines and their use

PP 7.3 Understand and work within local and national guidelines and policies that impact on prescribing practice

- PP 7.3.1 Applies relevant local and national guidance and policies for medicines use where appropriate
Evidence Example: Prescribing guided by local formularies, care pathways, other local and nationally agreed guidelines e.g. local PHOs, bpacnz Ltd, Pharmaceutical Schedule,
- PP 7.3.2 Understands, explains and works within funding systems related to prescribing Evidence Example: Checks funding status in the Pharmaceutical Schedule. Applies for Special Authority numbers
- PP 7.3.3 Understands and can explain the implications of prescribing unregistered medicines or medicines used for unregistered indications
- PP 7.3.4 Understands how medicines are licensed, sourced, supplied and monitored

PP 8: WORK IN COLLABORATION

THE COLLABORATIVE HEALTH TEAM ENVIRONMENT AND INDIVIDUAL CONTEXT

The pharmacist prescriber works in partnership with other members of a collaborative interprofessional health team for the benefit of patients. The pharmacist prescriber's practice complements that of other team members.

PP 8.1 Work in partnership with the interprofessional health team for the benefit of patients

- PP 8.1.1 Establishes relationships and communication pathways with members of the interprofessional healthcare team based on understanding and trust and respect for each others' roles
- PP 8.1.2 Establishes and maintains credibility with the interprofessional health care team
- PP 8.1.3 Seeks and/or provides support and advice to other members of the interprofessional health care team where appropriate
- PP 8.1.4 Maintains a collaborative health team environment and utilises the interprofessional health care team to its full extent
- PP 8.1.5 Ensures that continuity of care is not compromised, by keeping relevant members of the interprofessional health care team informed in a timely manner

PP 8.2 Display self-awareness and confidence in own ability as a prescriber

- PP 8.2.1 Responds actively to change
- PP 8.2.2 Negotiates the appropriate level of support for role as a prescriber





APPENDIX 1

DEFINITIONS

Collaborative health team

- In a collaborative health team environment the patient is the focus and beneficiary of the collaboration, and members of the patient's healthcare team in sharing patient information. This includes diagnosis, test results, medication history, treatment plans and progress notes etc and enables the pharmacist to make informed decisions about the patient's treatment and care.
- The pharmacist is an established and integral member of a multidisciplinary healthcare team.
- The pharmacist plays an active part in the decision making process with respect to initiating or changing a patient's medicine and his/her decisions and recommendations directly affect the individual patient's medicine therapy.
- The pharmacist holds mutual concern for the well being of the patient; is aware of and contributes to the treatment goals set by both the team and the patient, and has the specialised skills and knowledge to allow him/her to contribute equally to achieve these.
- The pharmacist has direct and up-to-date access to relevant and proportionate information about a patient's medical history and medicines.
- The pharmacist communicates prescribing decisions to other healthcare professionals caring for the same patient and updates the patient's relevant medical record in a timely manner.

Designated prescriber

Under the Medicines Act 1981, a designated prescriber is a person, other than a practitioner or a registered midwife, who (a) belongs to a class of registered health professionals authorised by regulations made under the Act to prescribe prescription medicines subject to certain requirements specified in or imposed under those regulations; and (b) satisfies requirements relating to competency, qualifications, or training specified in or imposed under regulations made under this Act.

Pharmacist Prescriber

Pharmacists who have additional qualifications, experience in clinical pharmacy practice and who work in a collaborative health team environment with other healthcare professionals (primarily with doctors and nurses) to optimise medicines-related health outcomes for individuals and populations. They work in partnership with the patient, his/her family/whānau, caregivers, and the collaborative healthcare team.

APPENDIX 2

PHARMACIST PRESCRIBER SCOPE OF PRACTICE

Pharmacist Prescribers have specialised clinical, pharmacological and pharmaceutical knowledge, skills and understanding relevant to their area of prescribing practice. This allows them to provide individualised medicines management services, including the prescribing of medicines to patients across a range of healthcare settings and models.

Pharmacist Prescribers are not the primary diagnostician and must work in a collaborative healthcare team environment. They can write a prescription for a patient in their care to initiate or modify therapy (including discontinuation or maintenance of therapy originally initiated by another prescriber). They can also provide a wide range of assessment and treatment interventions which includes, but is not limited to:

- Ordering and interpreting investigation (including laboratory and related tests).
- Assessing and monitoring a patient's response to therapy.
- Providing education and advice to a patient on their medicine therapy.

The Pharmacist Prescriber must prescribe within the limits of their professional expertise and competence (both clinical and cultural) and ethical codes of practice. They are responsible and accountable for the care they provide.

APPENDIX 3

EXAMPLES OF AREAS OF PRACTICE

- i. Pharmacist prescriber specialising in a therapeutic area such as renal, paediatrics, aged care, oncology, HIV, mental health, general surgery, respiratory, diabetes, cardiology, stroke; or sub- specialising eg heart failure.
- ii. Pharmacist prescriber working as a generalist eg primary care/ambulatory care (in a GP practice). These pharmacists may prescribe over a broad range of therapeutic areas eg poly-pharmacy, chronic disease management (including repeat prescribing), whilst also addressing specific areas such as gout and diabetes.
- iii. Other examples of generalist pharmacists are Emergency Department pharmacist or an aged care facility pharmacist.
- iv. Pharmacist prescriber working to reduce medication errors in high-risk areas of the healthcare continuum eg medicines reconciliation on admission, surgical pre-admission, discharge from hospital.
- v. Pharmacist prescriber working with a specific class of medicines eg anticoagulation, parenteral nutrition, antimicrobials.

