

Clinically Enhanced Pharmacist Independent Prescribing Course (CEPIP) Frequently Asked Questions

The UCL CEPIP Course

Q – Why should I choose the UCL CEPIP Course?

A – The UCL CEPIP course has been developed from the outset as an integrated clinically enhanced pharmacist independent prescribing course. It has been developed by pharmacists for pharmacists. The course development team includes pharmacists who are using their prescribing skills in extended/advanced practitioner roles such as urgent care settings, home care services, mental health services and GP practices. The team also includes academic pharmacists with extensive experience in the design, development and delivery of pharmacist independent prescribing courses. The course is specifically designed to meet the needs of pharmacist prescribers working in medicines optimisation, GP practice, Urgent and Emergency Care and provision of NHS 111 services and care homes. Community pharmacists will be able to use the prescribing and physical examination skills to collaborate with their local GP practices and extend their services.

‘Clinically enhanced’ refers to the additional skills that you will acquire around history taking and physical examination as part of the UCL independent prescribing course. Developing these new skills throughout the course will take you on a journey to a much broader appreciation of what holistic care looks and feels like, and in turn you will develop as a more rounded healthcare professional. These skills are essential in order to initiate prescribing. During the CEPIP course you will develop the skills to make an informed decision in each instance of prescribing. You will be able to apply these skills to make an informed judgement in each prescribing instance as to whether you are competent to prescribe drug X for patient Y at time Z.

The course incorporates five full days of physical examination skills teaching. This teaching will be led by medics and supported by pharmacists who use physical examination skills in their daily practice so that you can learn from their experience of extending their pharmacy role. We will be using the Clinical Skills Suite and equipment to ensure you gain hands-on experience of diagnostic skills needed for diagnosis which you can develop further with your DMP during your supervised time in practice

We will continue to support you after you have qualified as a prescriber through the use of social media networks and events.

Q - What is the difference between this clinically enhanced course and a standard independent prescribing course?

A - This means that the physical examination skills included in the course go beyond those required by the GPhC for pharmacist independent prescribing programmes. In relation to physical examination skills, the GPhC indicative content includes:

- Clinical examination skills relevant to the condition(s) for which the pharmacist intends to prescribe
- Recognition and responding to common signs and symptoms that are indicative of clinical problems. Use of common diagnostic aids for assessment of the patient’s general health status; e.g. stethoscope, sphygmomanometer, tendon hammer, examination of the cranial nerves.
- Working knowledge of any monitoring equipment used within the context of the treatment/clinical management plan

The aim of the physical examination skills teaching in the UCL CEPIP course is to enable the trainee independent prescriber (TIP) to clinically assess patients using focused medical history taking and physical examination skills whilst having an awareness of additional tests and referral pathways to aid in diagnosis. The course will also enable the TIP to safety net patients and manage risk. The course will cover the major body systems described below. In addition TIPs will need to develop competence in any particular physical examination skills required for their scope of practice that they will have identified with their DMP.

The following body systems will be taught on the course:

1. Cardiovascular
2. Respiratory
3. Abdomen
4. Ear, nose and throat
5. Musculoskeletal
6. Neurological assessment
7. Peripheral vascular and lymphatic system
8. Visual acuity and ophthalmoscopy
9. Mental health

Q – How much time will I need to spend studying?

A - There are a number of elements of the course. These are detailed below:

1) Face to face teaching. In light of COVID-19, the majority of the teaching for this academic year will take place via online webinars. Where circumstances change and the University's risk assessment deems it appropriate, these may change to face-to-face teaching days. There will be an opportunity to attend one face-to-face study around physical assessment skills. This will not be mandatory due to the guidelines associated COVID 19.

The dates for the face-to-face study day and online webinars for your cohort are shown on the website. You must attend all online webinars in order to pass the course. We ask you to confirm in the application pack that you are able to attend the dates for your cohort. If you are unable to attend an online webinar, you will be required to attend with the next cohort and this will delay your completion of the course.

2) Learning in practice time. It is a GPhC requirement that TIPs spend a minimum of 90 hours of supervised practice over the duration of the course. The 90 hours is a minimum requirement. You may decide, with your DMP that you require longer in practice in order to develop the competencies required to become a prescriber. At the end of the 90 hours your DMP must sign you off as having achieved all of the [Royal Pharmaceutical Society's \(RPS\) Competencies for All Prescribers](#). Of the 90 hours, no more than 30 hours can be spent passively observing others practice. You must actively be involved in patient care for at least 60 hours.

3) On-line learning. A large part of the learning material for the course is delivered on-line via UCL's virtual learning environment. The learning material will support and supplement the learning from the face-to-face study days and the learning in practice time.

4) Self-directed study. The content of the face-to-face study days and the on-line learning will be directed by UCL and informed by the GPhC requirements for the course. By the end of the course you will be required to demonstrate your achievement of the learning outcomes for the course and the RPS prescribing competencies. How much additional study you will need to undertake to achieve the learning outcomes and competencies will depend on your prior knowledge and experience, and how long you take to assimilate the knowledge and develop the skills and competencies. Everyone is different. For example, if you have not studied applied therapeutics for a while, you may need to spend more time on this subject than someone who has recently completed a PG Diploma. You may need to read beyond the learning material presented in the on-line learning. The amount of self-directed learning that you need to undertake will depend on you.

5) Completion of the course assessments. The amount of time required to complete the course assessments will depend on you. There are a number of different elements of the assessment including completion of a prescribing portfolio. This will be your record of your learning in practice time, and will be completed as you progress through the course.

As a very rough guide, Universities associate 10 hours of studying for every one credit of a course. Since this is a 60 credit course, the total amount of study time required would be around 600 hours. This is nominally broken down as shown in Table 1 below. The average weekly hours are based on completing the course in 6 months. If you complete the course in 9 or 12 months, this will be reduced. Please use the average weekly hours as a rough guide only, as you will find that the mix of activities each week varies. The study days do not take place every week. In the weeks where you have a study day scheduled, you may find you need to reduce some of the time spend on other activities. We have planned the online learning to take about 10 hours per week for the first 26 weeks, so this will be consistent. How much Learning in Practice time you complete each week will depend on your individual arrangements with your DMP.

Table 1 Overview of Student Effort

Type of activity	Approximate total hours	Average weekly hours
Online learning (including self-directed study)	260 hours	10 hours
Study days (online and face-to-face)	60 hours	2 hours
Learning in practice time	90 hours	3 hours
Portfolio development	100 hours	3.5 hours
Completion of course assessments	90 hours	3 hours
Total	600 hours	21.5 hours

Q – What are the course assessments?

A - The purpose of assessment is to confirm that the student has achieved the learning outcomes for Independent Prescribing and can demonstrate the competencies within the RPS Competency Framework for all Prescribers. Assessment must provide confirmation of the pharmacist’s clinical competence in the area(s) for which they intend to prescribe; including the clinical assessment of patients and the ability to use basic diagnostic aids and make an assessment of the patient’s general health. A range of assessment methods are used on this course to test achievement of the course learning outcomes and the prescribing competencies, and to ensure that the full breadth and depth of student’s knowledge and skills are assessed. These include: written coursework (a critical reflection on defined areas of practice and two written case studies); portfolio (including reflective activities and workplace based assessments); and OSCEs. The purpose of the OSCE is to assess the students’ competence in a controlled environment. All assessments are grounded in the student’s practice to ensure relevance to the workplace.

Q – How long is the course?

A – The Course can be completed in 6, 9 or 12 months. This is in recognition that practitioners may need a varying amount of time in order to develop their competence as a prescriber, depending on their prior experience and their progress throughout the course. You will be required to meet with your DMP in Month 5 to review your progress and agree your course completion date. You will also be assigned a UCL tutor note who will review your progress towards the course assessments and will also need to agree your course completion date.

Q – How will UCL support me when I am studying the course?

You will be supported on the course by experienced academic and administrative teams. You will meet the Academic Lead and the UCL Course Tutors at every study day. They are available in between study days via e-mail, telephone and face to face if you need. You will be assigned a tutor to support you in developing your portfolio and your assessments. You will have regular contact with your tutor as they provide you with feedback on your work.

Q – How soon after completing the course can I apply to the GPhC for annotation of my name against the register as an Independent Prescriber?

A - Once you have undertaken all the assessments, your results will need to be considered by the Board of Examiners. The Board of Examiner meets four times a year. We would, therefore, anticipate that we would be able to inform you of the outcome of the course within three months of completion of the course assessments.

Pharmacists who successfully complete the course will be awarded a certificate of completion, the *Practice Certificate in Independent Prescribing*. This provides evidence that you have successfully completed the programme and the period of learning in practice. You are required to submit this Certificate to the GPhC when you apply for annotation of the register as an Independent Prescriber.

Q – What do I need to consider before I apply to study for the UCL CEPIP course?

A - We recommend that you identify a service need for you to train as an Independent Prescriber before you apply for the course. This will mean that you can focus on the scope of practice required for the service during the course. It also means that you will be able to use your new skills and build your expertise in prescribing, as soon as you qualify. The longer you leave it to use your prescribing skills once you are qualified, the harder it will be. Many people who do not use their prescribing skills straight away find that they need to complete a 'return to prescribing practice' course prior to being able to prescribe within a service.

We advise that you discuss the service need with your employer or supporting organisation. By supporting organisation we mean the organisation who are supporting you to undertake the course and for whom you are likely to be using your prescribing skills. Your employer or supporting organisation are required to complete a statement within the application pack confirming support of your application.

You will also need to have identified a medical practitioner to support you during the course. Please ensure you have discussed their role, how they will be involved with your learning and how they will be supporting your training. For example; setting up a plan for your induction, a plan for effective supervision that may delegate to appropriate health care professionals etc. You and your DMP may wish to read through the GPhC framework at standards 6, 8 and 9 from [GPhC framework](#), focusing on standard 6, 8 and 9. Please see the section on Designated Medical Practitioners (DMPs) below for more information about this role.

Independent Prescribing in General

Q - What is the aim of pharmacists independent prescribing?

A - To provide patients with quicker and more efficient access to medicines through making the best use of the skills of trained pharmacist prescribers allowing medical prescribers to focus on patients with more complicated conditions and complex treatments.

Q - What are the roles and responsibilities of the pharmacist independent prescriber?

A - To be the pharmacist prescriber responsible for the patient's care including diagnosis and assessment. In addition, to prescribe within the limits determined by their own clinical competence and professional code of conduct while accepting professional accountability and clinical responsibility for their prescribing practice within a clinical governance framework. They will refer patients when the patient's condition or treatment no longer falls within their competence.

Q - What conditions can pharmacist independent prescribers prescribe for?

A - There are no legal restrictions on the clinical conditions that may be dealt with by pharmacist independent prescribers. Pharmacists are generally required to choose a scope of practice in which to train as an independent prescriber.

Q – Do I need indemnity insurance to train as an Independent Prescriber?

A - Pharmacists are advised to check with their employer and/or their personal insurer before they begin that they are fully covered in their role as a trainee independent prescriber (TIP) and a future role as a qualified independent and supplementary prescriber.

Q – Why do I need to define a scope of practice in which to develop my competence as a prescriber?

A - The GPhC stipulates that pharmacists must choose a defined scope of practice in which to develop their skills and competence as a prescriber. Clearly this could be interpreted in a number of ways. For example one student might stipulate essential hypertension (narrow scope), whilst another might stipulate acute medicine which is a much broader term and possibly more subjective, but equally valid. In our application pack we have included a learning needs analysis which asks for a breakdown of the group of patients, disease state(s), work place setting and details of the multidisciplinary team within which the IP will work. This is to guide you to begin thinking about the scope and infrastructure in place to support your prescribing practice. It is not designed to restrict your prescribing practice once you have qualified.

In order to develop your competence as a prescriber within the timeframe of the course, we advise that you choose an area of practice that you feel comfortable with and that is appropriate for your role, for the purposes of the course. This means you can focus your 90 hours in practice on developing the competencies required to be a prescriber within an area that you are familiar with. You will then be able to apply the competencies you have learnt to extend your scope of practice, or to take a more generalist approach, once you are qualified.

Q- Can my scope of practice be a generalist scope?

A - In prescribing practice, the 'scope' is not only drug/disease specific in practice, but also patient and time specific. In other words, do I as a prescriber feel competent to prescribe drug X, for patient Y at time Z, and most importantly can I justify my actions. In terms of 'generalist scope of practice' we have spent some considerable time thinking about this. Our stance is that the onus is on the prescriber to apply the skills that they have learned and developed, to make an informed judgement in each prescribing instance as to whether they are competent to prescribe drug X for patient Y at time Z – moving away from arbitrary lists of medicines or disease states. The key to using a generalist scope is that the prescriber is equipped with the skills to be able to assess their own competence and justify their actions. Here at UCL we will be putting an emphasis on this during the course and delivering teaching during the study days around this very aspect.

For the purpose of the course, we suggest that you define an area of practice that you feel comfortable with and that is appropriate for your role.

Q – Can I prescribe outside of my scope of practice once I have qualified as a prescriber?

A – There are no legal restrictions on the clinical conditions for which pharmacists can prescribe but you have a professional responsibility to be competent to prescribe whatever you are writing on the prescription. The focus on a particular area of practice for the CEPIP course is not designed to restrict you to a particular scope of practice once qualified. During the CEPIP course you will develop the skills to make an informed decision in each instance of prescribing. The onus is on you, as the prescriber, to apply the skills you have learned and developed, to make an informed judgement in each prescribing instance as to whether you are competent to prescribe drug X for patient Y at time Z – moving away from arbitrary lists of medicines or disease states.

The Designated Medical Practitioner

Q - What is a Designated Medical Practitioner (DMP)?

A – A Designated Medical Practitioner is a medical practitioner that meets the GPhC experiential requirements to support a Pharmacist training to be an Independent Prescriber.

Q – What are the qualifications required for acting as a DMP?

A - To act as a Designated Medical Practitioner you need to be:

- A registered medical practitioner with at least three years medical, treatment and prescribing responsibility for a group of patients/clients in relation to the clinical condition(s) for which the trainee independent prescriber is going to use their independent prescribing skills.

EITHER:

- within a GP practice and either vocationally trained or in possession of a certificate of equivalent experience from the Joint Committee for Postgraduate Training in General Practice

OR

- A specialist registrar, clinical assistant or a consultant within a NHS trust or other NHS employer
- Have some experience or training in teaching and/or supervision in practice
- Have the support of you employing organisation or GP practice to act as the DMP who will provide supervision, support and opportunities to develop the trainee independent prescriber's competence in prescribing practice

In addition, in line with the GPhC framework, the prospective designated prescribing practitioners must have:

- active prescribing competence applicable to the areas in which they will be supervising
- appropriate patient- facing clinical and diagnostic skills
- supported or supervised other healthcare professionals, and
- the ability to assess patient-facing clinical and diagnostic skills

Q - What is the role of the Designated Medical Practitioner (DMP)?

A – The important aspects of the DMP's role are to support the trainee pharmacist prescriber by providing access to a patient-centred environment where they can safely develop and practise the skills of a prescriber under supervision. The DMP also provides training, support and feedback to the pharmacist so they can develop their prescribing skills. This includes consultation, clinical assessment and monitoring linked to their planned scope of prescribing practice. The DMP also assesses the pharmacist against the competencies required to become an independent prescriber.

Please refer to the [Royal Pharmaceutical Society's \(RPS\) competency framework](#) for DPP's which provides descriptors to support the understanding of the DMP role.

Q – How much time does my DMP need to spend with me?

A – You are required to undertake a minimum of 90 hours of “supervised practice” time over the 6-month course. This time must be planned and consist of activities relevant to the development of the prescribing competencies, linked to the pharmacist's learning contract and scope of prescribing practice. The trainee pharmacist prescriber is required to maintain and submit a record of their activities in practice which is reviewed for appropriateness by the

course team. The DMP is not required to directly supervise all of the 90 hours in practice, but the DMP must have responsibility for the time the pharmacist spends in practice because at the end of the course the DMP is required to confirm that the pharmacist has completed these hours and demonstrated the competencies required to become a prescriber.

Q – How much time do I need to spend ‘Learning in Practice’?

A - It is a GPhC requirement that TIPs spend a minimum of 90 hours of supervised practice over the duration of the course. The 90 hours is a minimum requirement. You may decide, with your DMP that you require longer in practice in order to develop the competencies required to become a prescriber. It is not uncommon for a TIP to complete significantly more than 90 hours learning in practice time in order to develop their competence as a prescriber. You should be prepared for this. At the end of the your LiP time your DMP must sign you off as having achieved all of the [Royal Pharmaceutical Society’s \(RPS\) Competencies for All Prescribers](#).

Q – What are the entrance criteria?

A - The entry requirements for the course are stipulated by the GPhC. Pharmacists wishing to apply for this course must fulfil the following requirements:

1. Be a pharmacist registered with the GPhC or the Pharmaceutical Society of Northern Ireland (PSNI)
2. Have at least two years appropriate patient-orientated experience in a UK hospital, community or primary care setting following your Pre-registration year
3. Have identified an area of clinical practice in which to develop their prescribing skills and have up-to-date clinical, pharmacological and pharmaceutical knowledge relevant to the intended area of prescribing practice
4. Demonstrate how they reflect on their own performance and take responsibility for their own CPD.
5. Be able to provide written endorsement from an appropriate medical practitioner (the 'designated medical practitioner' - DMP) that s/he will supervise the 'learning in practice' element of the Course, in the clinical area in which the pharmacist intends to prescribe independently immediately on qualification.

Q – How do I apply for the UCL CEPIP course?

A - To apply for the course you are required to complete an on-line application form and an application pack that needs to be uploaded into the Select online application system.

You will need to provide the following information in the application pack:

1. Personal details.
2. Applicant statement. You are required to include a statement that demonstrates how you meet the entrance criteria for the course.
3. Learning needs analysis. This section asks about the area of clinical practice in which you will be prescribing. You will need to talk to your employing or supporting organisation to agree the clinical area or service for which you intend to prescribe. You will also need to talk to your DMP to help you develop your plan for how you are going to develop your competence in this area.
4. Declaration from designated medical practitioner
5. Declaration from employer/sponsor/employing organisation, including a reference that describes your suitability to train as a prescriber including:
 - Your patient facing work experience
 - Your involvement in the multi-disciplinary aspects of prescribing
 - Assurance of your pharmaceutical skills and knowledge in your intended area of practice
6. Source of funding
7. Applicant declaration