NI Centre for Pharmacy Learning & Development

Independent Prescribing Programme

Information for prospective trainee prescribers

18IP1 May 2019

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The following information is provided in order to help a pharmacist decide whether or not the Independent Prescribing Programme is suitable for them:

1. Who can apply to become an independent prescriber?

All entrants to this education programme must meet the following requirements:

1. Current registration with GPhC/PSNI* and be in good standing with them, or any other healthcare regulator with which they are registered
2. At least two years **UK-based** (*not ROI/elsewhere*) post registration patient-orientated experience as a pharmacist in a practice setting.
3. An identified area of clinical or therapeutic practice in which to develop independent prescribing practice and have relevant clinical or therapeutic experience in that area to form the basis of their prescribing practice while training.
4. A Designated Prescribing Practitioner (DPP) who has agreed to supervise their learning in practice. This named medical practitioner must be registered with their professional body and have:
    - Active prescribing competence in 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.

Applicants are also asked for evidence that they have support from their employer or sponsoring organisation for undertaking their training in prescribing. (e.g. employer or a primary care organisation or NHS Trust), including confirmation that the pharmacist will have appropriate supervised practice in the clinical area in which they are expected to prescribe.

* The full course is only offered to pharmacists registered with the PSNI/GPhC and who provide services to the Health and Social Care sector in Northern Ireland. Pharmacists in the Republic of Ireland may undertake the taught components of the programme but upon successful completion these pharmacists are awarded a Post Graduate Certificate from Queen's University Belfast but not a Practice Certificate in Independent Prescribing.

2. What is the difference between independent and supplementary prescribing?

Independent prescribers are responsible for the assessment of patients with undiagnosed or diagnosed conditions, for decisions about the clinical management required and drawing up a treatment plan. The independent prescriber also has the authority to prescribe the medicines required as part of the plan.

Supplementary prescribers are authorised to prescribe for patients whose condition has been diagnosed or assessed by an independent prescriber, within the parameters of an agreed clinical management plan.

Successful completion of this course qualifies you as both an independent and a supplementary prescriber. After qualification you can choose to practise as either an independent or a supplementary prescriber, or both.

3. What conditions can be treated by pharmacist prescribers?

A pharmacist independent prescriber may prescribe autonomously for any condition within their clinical competence. This currently excludes three controlled drugs for the treatment of addiction.

Supplementary prescribers can prescribe any medicine (including controlled drugs) within the parameters of an agreed treatment plan.

Pharmacist prescribers should not prescribe any medicine that they do not feel competent to prescribe.

4. How do I apply for the programme?

The stepwise procedure for application assessment is outlined below:

1. Applicants must complete and submit three application forms (see Appendices 1, 3, 4) electronically to a specific email address (nicpld-prescribing@qub.ac.uk)

2. The Administrator associated with the programme provides all applicants with a standard reply confirming receipt of their application. See example below:

CONFIRMATION OF RECEIPT OF IP APPLICATION

Dear xxxx

Thank you for submitting your three applications forms (COE, DPP and Learning agreement) for the Independent Prescribing course starting in xxxx.

Applications have been accepted from xxxxxx and will be assessed on a first-come first –served basis. The assessment process will begin **after the closing date** for application submission (xxxx).

We aim to notify everyone by xxxx if they have been successful/unsuccessful in obtaining a place. If successful, you will then be emailed pre-course work to complete in preparation for xxxxxx.

Kind regards,
The NICPLD team

3. All applications are assessed against the set criteria. Applicants are contacted once in relation to any queries or incomplete information before a decision is made.

4. Applicants must meet all criteria. Those meeting all criteria will be assigned a place on a first-come first-served basis until all places are allocated. Those who do not meet one or more criteria are not allocated a place.

5. Successful applicants are notified by email from Dr Fran Lloyd that they have secured a place on the course and are sent pre-course work/instructions. Any unsuccessful applicants are notified on the same day by email, explaining why they have not met the criteria. Unsuccessful applicants receive a written explanation of the criteria they have not met and what type of experience and skills they should consider acquiring before reapplying. They are also offered an opportunity to speak to Dr Fran Lloyd in relation to what they need to do in order to meet the criteria for entry.

Note that information on age, dependents, disability, religion, marital status, gender (other than what is available from the name) is **not** requested by NICPLD as part of the application process, as it is has no bearing on the decision to allocate a place.

Successful applicants enter some of this information when registering as students of QUB. However, this information is anonymous and not used in the decision making process.

5. What does the prescribing training course consist of?

Training consists of (a) a four-modular taught aspect and (b) 12 days learning in practice.

(a) Modular course

The course lasts 10 months and the total time commitment (excluding the period of learning in practice) is 400 hours. The number of live* workshops is indicated overleaf for each module.

The live* course dates shown below relate to the cohort beginning in August 2021. Subsequent cohorts will have similar live* course commitments, the final details of which are published after July each year.

Please note that the live* workshops are **compulsory** and no alternative courses can be provided. Therefore, by applying to the course you are committing to all live* courses.

*In 2020/21 live teaching has been replaced with a combination of synchronous and synchronous online zoom teaching. This may continue in 2021/22 if the pandemic is ongoing.

	Module Name	Live* course(s) date			Hours
	Induction	Thurs 26/08/21 **or** Mon 30/08/21 *Students will be allocated to one day in late August (either 26th or 30th) for induction onto the programme*			
1	**Person-centred care & collaboration**	Mon 06/09/21 **or** Tues 07/09/21 **Plus** One day in April 2022 (TBC) *Students will be allocated to one day in September (either 6th or 7th) and one day in April (TBC) in this module*			100
2	**Disease management**	Wed 06/10/21 **or** Thurs 07/10/21 *Students will be allocated to one day in October (either 6h or 7th) in this module*			100
3	**Clinical Skills** *You will be allocated to either Group A **or** B **or** C in this module*	**Group A** TBC – either Dec 2021/Jan 22/ Feb 22	**Group B** TBC – either Dec 2021/Jan 22/ Feb 22	**Group C** TBC – either Dec 2021/Jan 22/ Feb 22	100
4	**Professionalism**	Tues 8/03/22 **or** Wed 9/03/22 *Students will be allocated to one day in March either 8th or 9th) in this module*			100

(b) Learning in practice

You will also need to complete 12 x 7.5 hour days learning in practice during your training. The 12-day period does not have to be completed as one block. It is *your*

responsibility to identify a suitable Designated Prescribing Practitioner (DPP) to mentor you and secure their agreement to supervise you during this period.

Listed below are a few examples of how your Designated Prescribing Practitioner (DPP) could provide learning opportunities as part of your learning in practice:

- Dedicated time and opportunities to observe how the medical practitioner conducts a consultation/interview and the development of a subsequent management plan.
- Opportunities to allow in-depth discussion and analysis of clinical management when patient care and prescribing behaviour can be examined further.
- Facilitate learning by encouraging critical thinking and reflection using the practice portfolio.
- Allow opportunities for the pharmacist to carry out consultations and suggest clinical management and prescribing options, which are then discussed with the supervising medical practitioner.
- Observe the pharmacist carrying out a patient consultation, allow them to self-reflect on their performance and then provide feedback on how to improve their consultation skills.

6. How to identify a Designated Prescribing Practitioner (DPP)

A pharmacist is responsible for identifying their own DPP to mentor them through the course. A DPP must be a **medical practitioner** and is usually someone that you have worked with a long time or intend to begin working closely with and tends to be a General Practitioner in primary care or a Consultant Physician in secondary care.
The GPhC/PSNI has specified that a Designated Prescribing Practitioner (DPP) must be a qualified prescribing practitioner who has:

- 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 professional;
- The ability to assess patient-facing clinical and diagnostic skills.

NICPLD specify that the DPP must be a medical practitioner.

You may be supervised by more than one person during the period of your training but only one practitioner can act as your DPP. The DPP is the person who will certify that you are competent to practise as an independent prescriber.

NICPLD do not hold a list of potential DPPs.

7. Intended clinical area or therapeutic practice in which to develop your independent prescribing

Before coming onto the course you need to decide which clinical area you intend to prescribe in. This course does not teach clinical competence but rather allows you to demonstrate it, so you must be clinically competent in your intended area of prescribing before starting the course. You must specify your intended area of prescribing on the application forms. It is essential that you work in your intended area of practice so you will have exposure to these patients during clinics/ward rounds e.g. if you choose respiratory you must work on a respiratory ward (secondary care) or have access to respiratory clinics (primary care) etc. See Guidance on the Completion of COE Form (Appendix 2 and can be accessed via the NICPLD website).

Irrespective of the clinical or therapeutic area chosen, when you qualify from this course, you will be legally entitled to prescribe in any area. However, as a professional practitioner, you would be required to restrict your prescribing to areas in which you are clinically competent. If you decide to move from one clinical area to another after qualification, you do not need to undertake the course again but we suggest that you document how you are clinically competent in the new area(s) through the usual CPD channels.

The clinical/therapeutic area you choose affects three main components of the programme as outlined below:

- Clinical skills that your DPP must assess in practice

- How you demonstrate your clinical competence as part of Module 2 of this programme - to do this it is essential you work in your intended area of practice
- Completion of the practice portfolio element where you must demonstrate competence in, and exposure to, patients in your intended area of prescribing

a) Choosing your clinical/therapeutic area if working in hospital

Most pharmacists in this sector choose a **single** clinical area in which to undertake their prescribing qualification. This is usually decided by their Line Manager and Trust Pharmacy Manager. This should be an area you work in e.g. if you choose diabetes, you should work on a diabetes ward or in a diabetes outpatient clinic.

b) Choosing your clinical/therapeutic area if working in community/primary care

Within the community/primary care setting, many pharmacists work, or intend to work in general medical practices. These pharmacists may wish to discuss their job role/intended job role with their employer before deciding upon a particular clinical or therapeutic area.

Most pharmacists select a **single** clinical area based on their clinical expertise and the needs of the GP practice. Some practices suggest a clinical or therapeutic area based on the current Quality Outcomes Framework (QOF). Whatever clinical area is chosen it must be an area where you will be exposed to these patients e.g. if you choose diabetes, your practice should run diabetes clinics.

Irrespective of setting, the number of clinical or therapeutic areas chosen will alter the following:

- The number of clinical skills your DPP must assess you on. The greater the number of clinical or therapeutic areas chosen, the greater the number of clinical skills assessments to be undertaken.

- The total number of hours of learning to be submitted in your practice portfolio. A list of 5 hours (minimum) for **each** clinical or therapeutic area must be submitted demonstrating how you have kept up-to-date in these area(s). This list could include (but is not limited to) live courses, print-based courses, online courses, journal articles, COMPASS notes, BNF reading, NICE guidelines etc.

  This learning is submitted with your practice portfolio so any valid learning between the date of course application (11th January 2021) until practice portfolio submission (31st May 2022) is acceptable. Recent learning must be evident.

8. How will my performance on the course be assessed?

There is no final examination for this course. However, each module has an assessment exercise that you must pass. In addition to this the period of learning in practice must be completed and a practice portfolio submitted. Since this course leads to annotation on the pharmacy register, safe and effective practice must be evident at all times. Any unsafe practice will be reviewed and may result in overall failure of the programme.

9. What qualification will I receive?

Upon successful completion of the course and 12 days learning in practice you will be awarded a Postgraduate Certificate in Independent Prescribing from Queen's University Belfast **and** a Practice Certificate from NICPLD to allow you to be annotated on the PSNI and/or GPhC register as an Independent Prescriber.

10. What are the course costs?

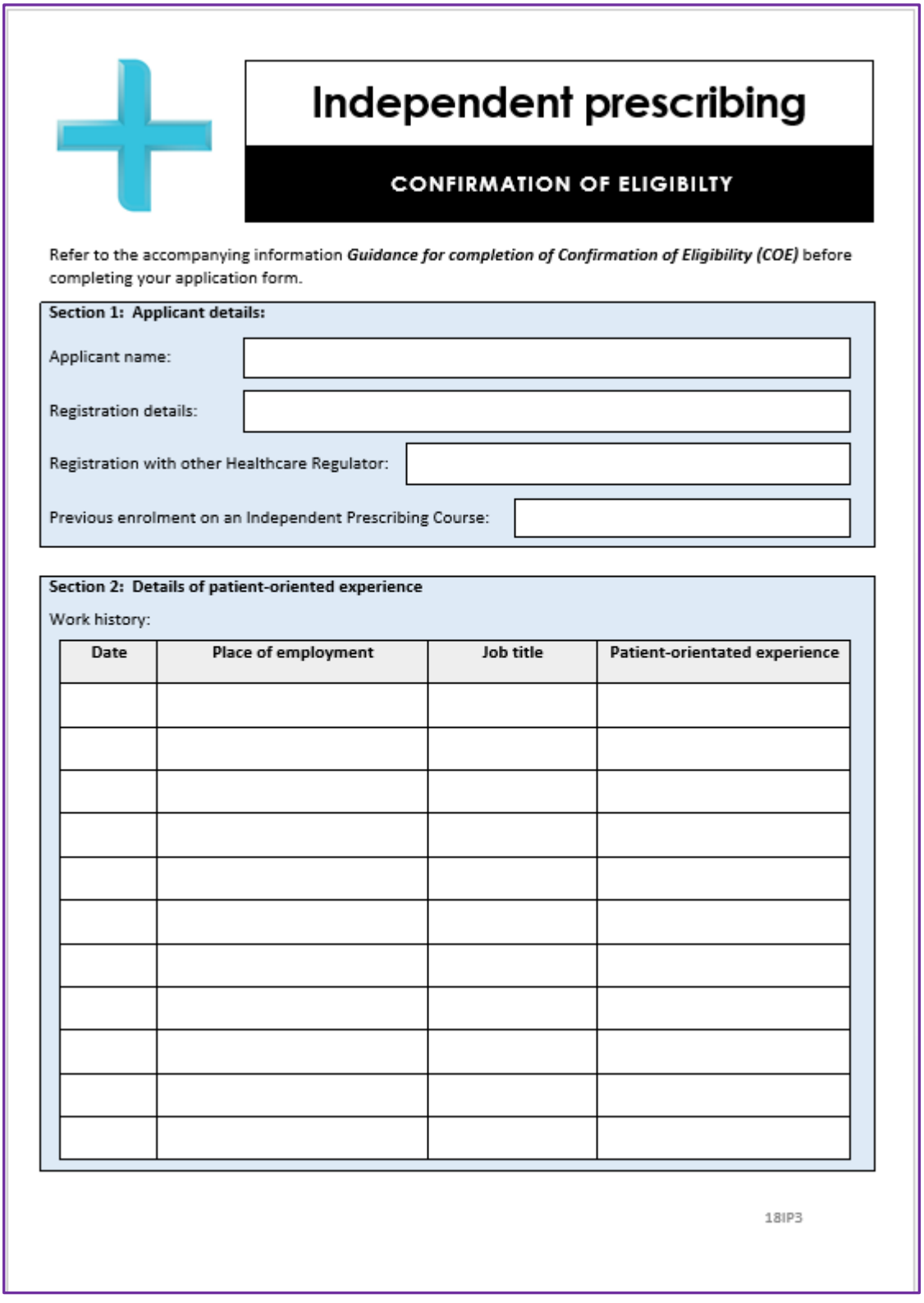
If you are undertaking the course as a stand-alone Post Graduate Certificate course (not part of an extended programme of study), are registered with the PSNI and working as a pharmacist in Northern Ireland the course fees are paid by NICPLD. However, if you withdraw from, or do not complete the course, you will be asked to refund the course fees to NICPLD.

If wishing to undertake the course as part of an extended programme of study (Advanced Pharmacy Practice Master's course) or working outside Northern Ireland, please contact Brian McCaw (b.mccaw@qub.ac.uk) for more information on course fees.

11. Further information

If you would like to discuss possible application please contact Fran Lloyd (f.lloyd@qub.ac.uk) or Laura O'Loan (l.oloan@qub.ac.uk) at NICPLD (028 9097 4477).

Appendix 1 Sample COE form –when applying, please use the actual form on NICPLD website



Independent prescribing

CONFIRMATION OF ELIGIBILTY

Refer to the accompanying information ***Guidance for completion of Confirmation of Eligibility (COE)*** before completing your application form.

Section 1: Applicant details:

Applicant name:

Registration details:

Registration with other Healthcare Regulator:

Previous enrolment on an Independent Prescribing Course:

Section 2: Details of patient-oriented experience

Work history:

Date	Place of employment	Job title	Patient-orientated experience

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Section 3: Proposed prescribing practice

Name of Designated Prescribing Practitioner (DPP):

Intended area(s) of practice:

Evidence of clinical and therapeutic knowledge-base in intended area(s) of practice:

Evidence of clinical and/or therapeutic experience and skills in intended area(s) of practice:

Details of experience of prescribing by others:

Section 4: Details of multidisciplinary support network

Evidence of multidisciplinary support network:

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Section 5: Applicant declaration

I confirm that:

- All details documented are accurate
- I am in good standing with the PSNI and/or GPhC and any other Healthcare Regulator with whom I am registered
- I am available to attend all live courses associated with the IP programme.

Applicant signature:		Date:	
Email address:			
Daytime telephone no:			

Section 6: Employer/Sponsor declaration:

I confirm that:

- support the named individual in their training as an Independent Prescriber;
- to the best of my knowledge, all of the details stated are accurate;
- the applicant is available and permitted to attend all live courses associated with the IP programme.

Name:	
Job title:	
Signature:	
Date:	
Email address:	
Daytime telephone no:	

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Appendix 2 Guidance on COE form

Guidance for completion of Confirmation of Eligibility (COE) form

Acceptance onto the IP programme is dependent upon satisfactory completion of a number of forms, including the Confirmation of Eligibility (COE) form. Given that acceptance onto the programme is dependent upon provision of the correct, relevant information, the following guidance has been produced to assist you in completing the form.

Section 1: Applicant details:

Applicant name: You must state your full name as it appears on the professional register.

Registration details: You must provide the name of the professional body with whom you are registered, either the Pharmaceutical Society of Northern Ireland (PSNI) or the General Pharmaceutical Council (GPhC) and your registration number.

NB: NICPLD are required to carry out a check with the PSNI to verify you are in good-standing and confirm absence of any restriction on your practice as part of the application verification process.

Registration with other Healthcare Regulator: You must declare registration with any other Healthcare Regulator by providing the name of the regulator and your registration number.

Previous enrolment on an Independent Prescribing Course: You must declare if you have previously been enrolled on an Independent Prescribing course. If so, state the course provider and your enrolment date.

Section 2: Details of patient-oriented experience

Work history: You must demonstrate that you have at least 2 years UK-based patient-orientated practice experience (*not ROI/elsewhere).* Within the table, you should record your work history detailing dates, places of employment, job titles and providing examples of your patient-oriented experience in each role. *Specific*

examples of patient-orientated experience are listed below. **You are NOT expected to have examples of all of these and this list is not exhaustive.**

Section 3: Proposed prescribing practice

Name of Designated Prescribing Practitioner (DPP): The DPP is another prescriber with active relevant prescribing competence in the area(s) you intend to practice. You must state the name of your DPP as it appears on their professional register.

Intended area(s) of practice: You must indicate the identified clinical area(s) or therapeutic practice in which you will develop your independent prescribing practice. It must be an area in which you can demonstrate the relevant knowledge-base and experience. Please note that this intended area(s) of practice must match the area(s) listed in your DPP agreement. **It is essential that you work in your intended area of practice so you will have exposure to these patients during clinics/ward rounds e.g. if you choose respiratory you must work on a respiratory ward (secondary care) or have access to respiratory clinics (primary care) etc.**

Evidence of clinical and therapeutic knowledge-base in intended area(s) of practice: You must demonstrate that you have the relevant clinical and therapeutic knowledge relating to your intended area(s) of practice. Please provide evidence that your clinical and/or therapeutic knowledge-base is up-to-date in this/these intended area(s) of practice. *Examples of suitable evidence are listed below.* **You are NOT expected to have examples of all of these and this list is not exhaustive.**

Evidence of clinical and/or therapeutic experience and skills in intended area(s) of practice: You must demonstrate that you have relevant clinical and/or therapeutic experience and skills in your intended area(s) of practice. Within this section, you should record your current scope of practice if relevant. *Other evidence may include those listed below*. You should also detail your experience of prescribing by others, some examples of which are given below. **You are NOT expected to have experience of all of these and these lists are NOT exhaustive**.

Please note that successful completion of a NICPLD Foundation programme provides sufficient evidence of clinical and/or therapeutic experience in the areas of cardiovascular, diabetes, respiratory and older people and no further evidence is required in this section. Applicants need only attach their Foundation programme certificate to their application.

Section 4: Details of multidisciplinary working

Details of multi-disciplinary working: Prescribing typically involves working alongside other health or care professionals as part of a multidisciplinary team. You should document how you have developed a multidisciplinary support network for your intended prescribing practice. *Examples are suggested below.* **You are NOT expected to have examples of all of these and this list is not exhaustive.**

Section 5: Applicant declaration

Applicant signature: You must sign the application form in indelible ink, using your usual signature.

Date: You must annotate the application form with the relevant date.

Email address: You must provide a current email address. This address must match that held for you on record by NICPLD.

Daytime telephone no: You must provide a daytime telephone number on which you can be contacted during normal working hours.

Section 6: Employer/Sponsor declaration

Name: The name of the Employer/Sponsoring organisation representative supporting the application to the IP programme should be stated. For hospital practice this is the Trust Pharmacy Manager. For community/primary care the Sponsoring Organisation can be the Employer/ Federation Lead/ GP practice manager.

Job title: The job title of the Employer or Sponsoring organisation representative should be stated.

Signature: The form must be signed by the Employer or Sponsoring organisation representative.

Date: The application must be annotated with the relevant date.

Email address: The Employer or Sponsoring organisation representative should provide a current email address.

Daytime telephone no: The Employer or Sponsoring organisation representative should provide a current daytime telephone number on which they can be contacted during normal working hours, if required.

The Guidance for Completion of the COE Form includes some examples of patient-orientated experience, prescribing by others and multidisciplinary working to prompt you when completing your own application. These examples are given below. Please note that within the relevant sections, you are not expected to have experience of all of the listed examples, nor are the lists exhaustive.

Examples of patient-orientated experience

Specific examples of patient-orientated experience may include *evidence of undertaking patient counselling; observation/involvement in specialist clinics; care for specific patient groups; screening services; core pharmacy services; drug history taking; medicines reconciliation; medication review.*

Examples of up-to-date clinical and therapeutic knowledge

Evidence that your clinical and therapeutic knowledge is up-to-date include *the current scope of your professional practice, formal live or open learning undertaken, self-directed learning completed (study of guidelines, BNF chapters, COMPASS notes, MHRA updates), any group learning, conferences attended, qualifications achieved or underway*, *feedback from past employers or other healthcare professionals relating to your knowledge-base.*

Examples of activity evidencing clinical and/or therapeutic experience and skills

Evidence of clinical and/or therapeutic experience and skills may include *participation in medication review/MUR, medicines reconciliation upon admission/discharge, drug history taking, kardex review, interfacing between primary and secondary care, clinical audit, provision of services to care homes, writing discharge or outpatient letters, supplying medicines in accordance with PGDs.*

Examples of experience of prescribing by others

Evidence of experience of clinical prescribing by others may include *clinical screening of prescriptions, resolution of prescribing queries, observation of/involvement in clinics, provision of services and/or training, prescribing audits, resolution of medication queries, in-patient Kardex review.*

Examples of multidisciplinary working

Evidence of development of a multidisciplinary support network may include *work as a ward-based team member; medicines information/poisons centre queries; interface pharmacist; kardex review; resolution of prescriber-initiated medication queries; palliative care services; observation of/involvement in clinics queries; provision of services to care homes.*

Appendix 3 Sample DPP Agreement –when applying, please use the actual form on NICPLD website

Independent prescribing

DESIGNATED PRESCRIBING PRACTITIONER (DPP) AGREEMENT

To be completed by the Pharmacist:

Full name: PSNI no:

Clinical or therapeutic area(s) or in which you will develop your independent prescribing practice:

Signature: Date:

To be completed by Designated Prescribing Practitioner (DPP):

I, *(insert full name of DPP)*

agree to be the Designated Prescribing Practitioner (DPP) of the above named pharmacist for their 12 days learning in practice, based at the following setting:

(insert full name and address of learning in practice setting e.g. GP surgery or hospital)

I can confirm this learning in practice setting is a clinical environment which will allow the pharmacist direct access to patients. YES ☐ NO ☐

Declaration by DPP:

I declare that I am a Registered Medical Practitioner and have:

- active prescribing competence applicable to the area(s) in which I will be supervising;
- appropriate patient-facing clinical and diagnostic skills;
- the ability to assess these patient-facing clinical and diagnostic skills;
- supported or supervised the development of other healthcare professionals.

Signature of DPP: GMC No:

Email address: Date:

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Appendix 4 Sample Learning Agreement –when applying, please use the actual form on NICPLD website

Independent prescribing

PRESCRIBER-IN-TRAINING LEARNING AGREEMENT

This agreement clarifies what is expected from the Pharmacist, the Learning Provider (NICPLD), the Designated Prescribing Practitioner (DPP) and the Sponsoring Organisation (SO) during the programme. It should be discussed and signed by all parties at the outset of the programme.

Part One-Pharmacist's Details

Full name of Pharmacist: _____ PSNI No: _____

Part Two – Pharmacist's Undertaking

I, _____ *(insert your name)*

make the following commitments for the duration of the **NICPLD IP programme** whilst I am working

at _____ *(insert SO's name)*

AND for the duration of my **learning in practice** while being mentored

by _____ *(insert DPP's name)*

I will

- Take responsibility for my learning and development, ensuring patient safety at all times;
- Actively seek opportunities to develop competence as an IP, and to complete the clinical skills OSCEs;
- Attend, and engage in, the required IP workshops, and complete all assignments by the agreed timescale;
- Be receptive to constructive feedback from colleagues at all levels, and use this to inform my development;
- Meet regularly with my DPP (at least four times) during my learning in practice to review/reflect on my progress and developing competence;
- Adhere to local workplace policies and regulations;
- Adhere to official QUB and NICPLD IP programme regulations;
- Abide by the Pharmaceutical Society of Northern Ireland (PSNI) Code and all other professional standards and guidance for pharmacists in Northern Ireland;
- Report any issues/concerns that emerge during the IP programme to NICPLD;
- Provide honest and constructive feedback about the IP programme to NICPLD;
- Develop a portfolio of evidence to demonstrate my achievement of the IP competencies, completing and submitting this portfolio by the agreed submission date.

Signature of Pharmacist: _____ Date: _____

Part Three – Learning Provider's Undertaking

The Northern Ireland Centre for Pharmacy Learning & Development (NICPLD)

makes the following commitments to you _____ *(Insert pharmacist's name)*

for the duration of the NICPLD IP programme.

We will

- Administer the IP programme in accordance with GPhC/PSNI accreditation standards and QUB regulations;
- Ensure your identified DPP is in good standing with their professional regulator and is appropriately trained to provide you with effective supervision;
- Support and train your DPP to mentor you effectively during your learning in practice;
- Develop and deliver the relevant resources, using appropriately qualified and experienced professionals, to support you to develop your competence as an IP;
- Work with your DPP to ensure you have exposure to working with other health or care professionals;
- Provide resources to support you and your DPP to undertake the learning in practice and complete the clinical skills OSCEs;
- Provide feedback on the IP assignments within the agreed timescales;
- Support you if fail to meet the assessment criteria for any aspect of the IP programme, and offer appropriate guidance;
- Deal with any issues/concerns that emerge during the IP programme in a timely manner;
- Raise a concern, at an appropriate level, if we become aware that your actions, omissions, working practices, professional performance or mental or physical health may compromise patient safety (refer to PSNI 'Guidance for Pharmacists on Raising Concerns' for further information);
- Be receptive to constructive feedback about the IP programme and any problems encountered, and use this to inform future development;
- Administer the final assessment process, including the Practice Portfolio Review;
- Make reasonable adjustments within the IP programme, including the learning in practice environment, in response to your specific needs;
- Issue you with a Practice Certificate in Independent Prescribing on successful completion of the NICPLD IP programme.

Signed on behalf of NICPLD: _____ Date: _____

Part Four – DPP's Undertaking

I, _____ *(Insert your name and GMC registration number)*

make the following commitments to you _____ *(Insert pharmacist's name)*

for the duration of your **learning in practice**.

I will

- Meet regularly with you (at least four times) during your learning in practice to provide support, ensure development of competence and offer guidance;
- Observe you in practice and assess your clinical skills objectively using QUB CSEC documentation;
- Provide constructive feedback to you in relation to competence development and completion of your clinical skills OSCEs;
- Work with NICPLD to ensure you have exposure to working with other health or care professionals
- Report any issues/concerns to NICPLD that emerge during the supervision of your learning in practice via nicpld-prescribing@qub.ac.uk;
- Make reasonable adjustments during the period of learning in practice in response to your specific needs;
- Discuss and review your practice portfolio at the end of the NICPLD IP programme;
- Complete all documentation as required for the NICPLD IP programme, including the DPP final sign-off, and submit it within the specified timeframe.

Signature of DPP: _____ Date: _____

Part Five – Sponsoring Organisation's Undertaking

_____ *(Insert SO's name)*

makes the following commitments to you _____ *(Insert pharmacist's name)*

for the duration of the **NICPLD IP programme**.

We will

- Support you to develop your competence as an IP;
- Support you to complete all aspects of the IP programme, including your learning in practice, workshops and assignments;
- Report any issues/concerns that emerge during the IP programme to NICPLD;
- Raise a concern, at an appropriate level, if we become aware that your actions, omissions, working practices, professional performance or mental or physical health may compromise patient safety (refer to PSNI 'Guidance for Pharmacists on Raising Concerns' for further information);
- Support you to develop a portfolio of evidence to demonstrate your achievement of the IP competencies;
- Support you to complete and submit your portfolio of evidence by the agreed submission date.

Signed on behalf of Sponsoring Organisation: _____ Date: _____