

**Virtual
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Improving Access to Optimal Nutritional Care, 22nd Sept 2020, 9 – 11am

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The Impact of a Dietitian Supplementary Prescriber in the Outpatient Oncology Setting

Andrea Davis, Specialist Oncology Dietitian, Royal Free Hospital

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What is Supplementary Non-Medical Prescribing?

- A **non-medical prescriber** is defined as a person who is authorised to undertake independent or supplementary prescribing according to current legislation
- **Supplementary prescribing** is defined as a voluntary partnership between an independent prescriber (IP) (a doctor or dentist) and a supplementary prescriber (SP) to implement an agreed patient-specific Clinical Management Plan (CMP) with the patient's agreement.

Aim of Undertaking a Supplementary Prescribing Course

1. Develop the skills, knowledge and attributes required for safe, appropriate and cost-effective prescribing practice within the context of your prescribing role.
2. Demonstrate a critical awareness of the professional responsibilities associated with safe and effective prescribing practice .

Why did I become a Supplementary NMP?

- Delays in patients receiving prescriptions (await Consultant/GP)
- Impact on nutrition status
- Time wasted for dietitian and doctors
- Taking responsibility
- Patient experience
- Continuity and quality of care

Aim

To allow the dietitian to prescribe relevant medications to oncology patients in the outpatient setting to:

- give quicker access to medication
- improve patient experience
- reduce costs

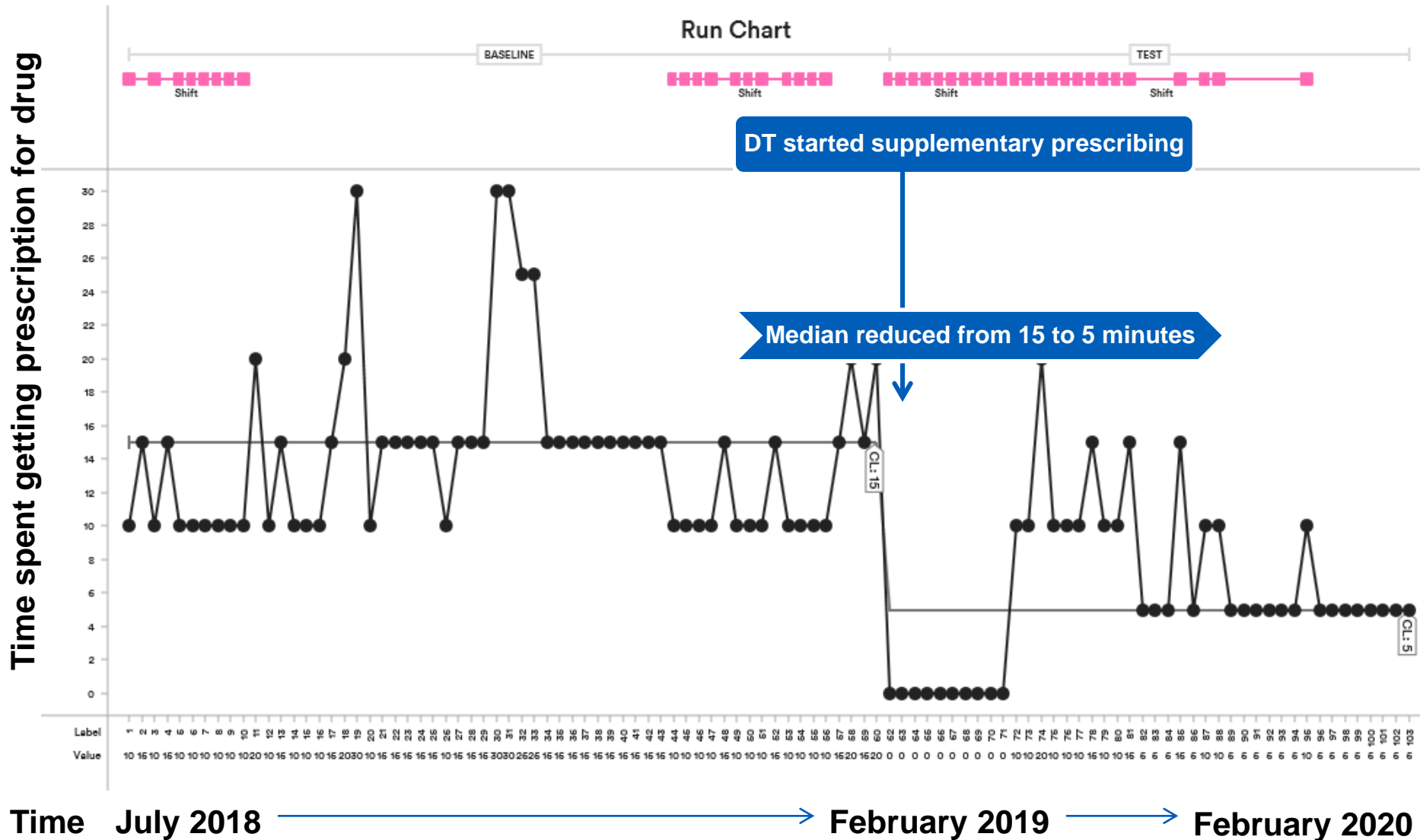
When did we want to achieve this by?

1 year (6 month prescribing course and then logistics of setting service up)

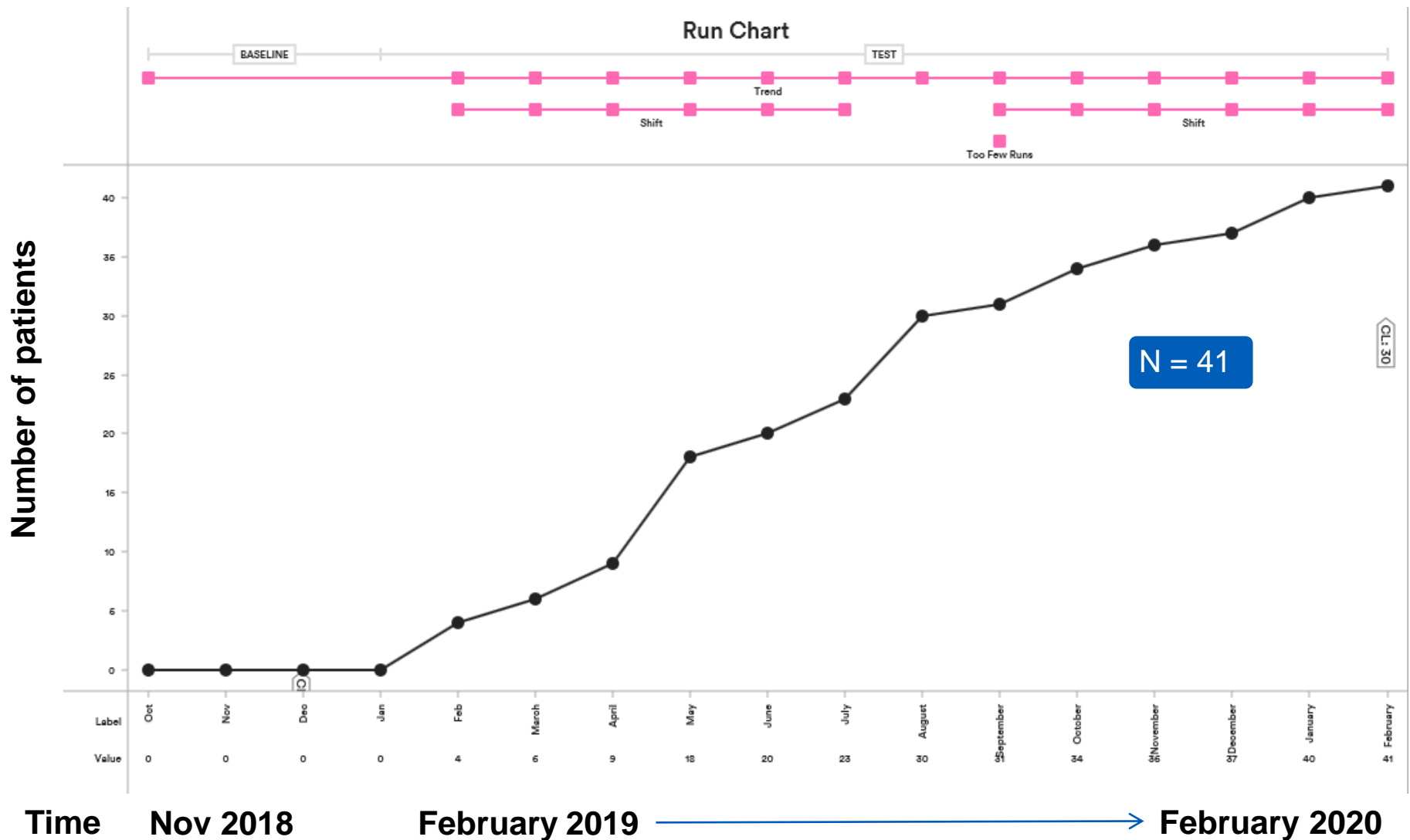
What setting were we working in?

- Oncology outpatient clinics mainly
- Can prescribe for any oncology patient under my dietetic care and my Oncology Consultants care.

Graph 1: Time Spent by Dietitian Getting Patient Prescription



Graph 2: Number of Patients given Prescription by Dietitian



Outcome Measures

- The median time spent by the dietitian to get the patient their prescription in clinic was **reduced from 15 minutes to 5 minutes.**
- 41 patients received a prescription from the dietitian over the 1 year period.
- **88%** of patients reported they were able to start their medication sooner when prescribed by the dietitian (timeframe ranged from the next day to 3 weeks sooner)
- **100%** patients reported improved clinic experience
- **Cost saving of £1428** over 1 year from Feb 2019 – Feb 2020

Patient Experience

Immediate response from dietitian which greatly simplified the process.

Saved a further visit to the GP as it has been difficult getting my medication from them.

The dietitian was very reassuring

Much quicker and far less stressful

The hospital chemist provided my medication immediately

Everything went smoothly, improved my experience 100%

What I learned

What went well?

Reduced cost and time, quicker access to medications, improved patient experience, more autonomy by dietitian, positive feedback and support from medical team.

What didn't go well?

Trying to continually reduce the length of prescription given where appropriate especially when drugs have manufacturing issues

What am I doing differently now?

Dietitian is prescribing for patients within her consultation making time more effective.

How can you improve access to PERT for your patients?

- Consider up-skilling a dietitian as a Non-Medical Prescriber (NMP) in MDT clinics
- Will need support from the MDT for the 6 month course
- Health Education England funded courses available (see criteria needed to apply)

<https://www.hee.nhs.uk/our-work/medicines-optimisation/training-non-medical-prescribers>

Points to consider.....

- 6 month course, very popular!
- Check your local Trust NMP policy for criteria is to apply
- Cost varies depending on university
- Think about who can be your DMP (Designated Medical Practitioner or Consultant)
- Time needed
 - 1 ½ days per week in total
 - 1 day at university/guided study
 - ~5hrs per week shadowing other prescribers
- Cost/benefits of supplementary prescribing in your clinical area

Assessment

- Numeracy assessment
- OSCE
- Essay (critical analysis of a drug you will prescribe)
- Exam (1 hour - pharmacology)
- Portfolio:
 - Scope of practice
 - Learning needs
 - P formulary of a medication
 - Log book (90hrs to be spent with a variety of prescribers related to your scope of practice, minimum 25hrs with DMP)
 - Prescribing consultation
 - Develop Clinical Management Plan
 - Physical examinations (vital observations plus 2 other assessments eg abdo/cardio/respiratory)

What happens after completing the NMP course?

The newly qualified NMP must:

- Register with the HCPC
- Provide confirmation to their employers of their successful annotation
- Complete any other local/employer requirements e.g. scope of practice/formulary
- Ensure they have appropriate indemnity arrangements (be added to the Trust NMP policy and register as a NMP with pharmacy)
- Maintain competence and undertake annual CPD and revalidation as specified by their regulator

Thank you!

Any Questions?