

30 March 2015

## **HCPC response to the NHS England consultation on proposals to introduce independent prescribing by radiographers across the United Kingdom**

### **1. Introduction**

- 1.1 The Health and Care Professions Council (HCPC) welcomes the opportunity to respond to this consultation on the proposal to introduce independent prescribing by registered radiographers in the United Kingdom who have received appropriate training.
- 1.2 The HCPC is a statutory UK-wide regulator of health, social work, and psychological professions governed by the Health and Social Work Professions Order 2001. We regulate the members of 16 professions. We maintain a register of professionals, set standards for entry to our register, approve education and training programmes for registration and deal with concerns where a professional may not be fit to practise. Our main role is to protect the health and wellbeing of those who use or need to use our registrants' services.

### **2. Our responses**

- 2.1 We have provided responses to the consultation questions where relevant to our role as the professional regulator for radiographers.

#### **Question 1: Should amendments to legislation be made to enable radiographers to prescribe independently?**

- 2.2 We support the proposal to allow radiographers to undertake training in order to qualify to prescribe independently.
- 2.3 In some settings and circumstances, the existing mechanisms which enable radiographers to administer medicines (for example, Patient Group Directions) or to supplementary prescribe medicines in accordance with a Clinical Management Plan, are suitable to meet the needs of patients and service users. However in other circumstances, as the consultation document highlights, these mechanisms are not always sufficient – for example, in community-based services where there may not be easy access to a doctor or another prescriber, or where service users may require one-off or unplanned care.
- 2.4 We are supportive of this proposal as a way to streamline patients' access to prescribed medicines and reduce unnecessary delays in patients receiving

advice or treatment. We believe that ultimately this would have the effect of improving outcomes for patients.

- 2.5 Independent prescribing has already been successfully introduced for two other HCPC-registered professions, namely physiotherapists and chiropractors / podiatrists. Therefore there is a system of regulation in place to ensure safe and effective independent prescribing by members of these professions, which is easily applicable to radiographer independent prescribing.
- 2.6 The HCPC has produced standards for prescribing<sup>1</sup> which set out requirements for programmes delivering prescribing training, as well as the skills, knowledge and understanding necessary for safe and effective independent prescribing practice. The standards are generic across professions and therefore would apply to independent prescribing by radiographers without the need for amendment.
- 2.7 We use the standards for prescribing when making decisions about approval of training programmes for independent prescribing. We would continue to undertake this function in respect of new programmes or existing programmes wishing to extend their intake to include radiographers. This would ensure that radiographers qualifying in independent prescribing are able to practice safely and effectively.
- 2.8 We would annotate the HCPC Register entries of radiographers who have completed an approved training course in independent prescribing. The annotation ensures that only appropriately trained radiographers can independently prescribe and also enables service users and members of the public to see who is qualified.
- 2.9 In addition, radiographer independent prescribers would continue to be required to meet all of the other standards set by the HCPC, including the standards of proficiency for radiographers; the standards of conduct, performance and ethics; and the standards for continuing professional development.<sup>2</sup>

**Question 2: Which is your preferred option for the introduction of independent prescribing by radiographers?**

- 2.10 We favour Option 2 as set out in the consultation document, which would allow for independent prescribing by radiographers for any condition from a full formulary. We believe it is the most appropriate option in that it would be most effective in improving the experience of patients and service users. Other options, such as prescribing for specific conditions or from a list of specified medicines, could limit the number and types of patients who benefit.

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<sup>1</sup> The standards for prescribing were published in 2013 and can be found here: <http://www.hcpc-uk.org/publications/standards/index.asp?id=692>

<sup>2</sup> All HCPC standards are published on our website: <http://www.hcpc-uk.org/aboutregistration/standards/>

**Question 3: Do you agree that radiographers should be able to prescribe independently from the proposed list of controlled drugs?**

**Question 4: Should amendments to medicines legislation be made to allow radiographers who are independent prescribers to mix medicines prior to administration and direct others to mix?**

2.11 We do not have specific comments regarding whether radiographers should be able to independently prescribe certain controlled drugs or to mix medicines prior to administration and direct others to mix. We feel that others, such as professional bodies, service providers and other regulators, may be better placed to respond.

2.12 If these proposals are introduced, we would expect that radiographers only independently prescribe controlled drugs or mix medicines prior to administration where it is within the scope of their training and skills. Robust clinical governance arrangements would also be vital to ensuring that these activities are carried out appropriately and safely.

**Question 5: Do you have any additional information on any aspects not already considered as to why the proposal for independent prescribing SHOULD go forward?**

**Question 6: Do you have any additional information on any aspects not already considered as to why the proposal for independent prescribing SHOULD NOT go forward?**

2.13 We do not have any additional information to provide on any aspects that would either prevent or support this proposal going forward.

**Question 7: Does the 'Consultation Stage Impact Assessment' give a realistic indication of the likely costs, benefits and risks of the proposal?**

2.14 We do not have any specific comments about the assumptions or estimates made in the Consultation Stage Impact Assessment.

2.15 The introduction of independent prescribing for radiographers would have some cost implications for the HCPC, including the costs associated with approval and monitoring of new or altered training programmes and annotation of the Register. However these activities could be undertaken within the framework of our existing processes and therefore do not represent a barrier to implementation of the proposal.

**Question 8: Do you have any comments on the proposed practice guidance for radiographer independent and/or supplementary prescribers?**

**Question 9: Do you have any comments on the 'Draft Outline Curriculum Framework for Education Programmes to Prepare Radiographers as Independent Prescribers'?**

**Question 10: Do you have any comments on the ‘Draft Outline Curriculum Framework for Conversion Programmes to Prepare Radiographer Supplementary Prescribers as Independent Prescribers’?**

2.16 The HCPC participated on the Allied Health Professions (AHP) Medicines Project Board, which contributed to the development of the practice guidance and draft outline curriculum framework documents. We do not have any further comments on these documents.

**Question 11: Do you have any comments on how this proposal may impact either positively or negatively on specific equality characteristics, particularly concerning: disability, ethnicity, gender, sexual orientation, age, religion or belief, and human rights?**

**Question 12: Do you have any comments on how this proposal may impact either positively or negatively on any specific groups, e.g. students, travellers, immigrants, children, offenders?**

2.17 We believe that other stakeholders would be better placed to respond to these questions. However, we do not consider that our regulatory systems for independent prescribers would have an adverse impact on any minority group.