

15 January 2001

Ref: SM/ND

Mr Michael Kelly
Public Health Branch
Department of Health, Social Services and Public Safety
Room C4.15, Castle Buildings
BELFAST BT4 3PP

Dear Mr Kelly

**REVIEW OF PRESCRIBING, SUPPLY AND ADMINISTRATION OF MEDICINES -
CONSULTATION ON PROPOSALS TO EXTEND NURSE PRESCRIBING**

Thank you for giving the Southern Health and Social Services Council an opportunity to comment on the above consultative document.

The Council supports nurse prescribing by suitably qualified and trained nurses in areas of care for which nurses have clinical responsibility. In extending nurse prescribing the Council would wish to be assured that those given added responsibility receive appropriate education and training on an ongoing basis.

We feel that an extension of the prescribing role would require significant investment in public education. Patients might show some reluctance to accept prescriptions from nurses on the basis that they perceive nurses as being 'less qualified than' or 'not as knowledgeable as' doctors. For example, although many midwives have more experience of maternity care than doctors, some women still prefer to be treated by doctors whom they perceive as having "a higher status".

Principles

From the perspective of an organisation representing the interests of the public the principles outlined appear to be patient focused with patient safety recognised as paramount.

Medical Conditions

In considering the potential medical conditions which nurse prescribing might cover, members of the Council were of the opinion that prescribing should cover as many routine procedures as possible. Specific reference was made to the benefits of nurses being able to prescribe for palliative care and mental health conditions.

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Options for Extending the Nurse Prescribers' Formulary

There was considerable debate around which option to support. A number of members were of the opinion that the process should be incremental with Option 3 being the starting point with a move to Option 4 based on training and experience. Others were of the view that Option 3 was more realistic while others felt that nurses should be treated as dentists and that once trained they should have full discretion based on their training and experience.

Eventually it was agreed to support Option 3 with the door open to proceed to Option 4 as skills and knowledge levels increased. The intervening period could be used to raise public awareness about nurse prescribing and 'iron out' any difficulties which emerged.

Nurses Who May Train to Prescribe

The Council is in favour of all disciplines of nursing being trained to prescribe. However, it is important that those who are trained keep their skills up to date and undergo regular training and refresher training. Service users should be given an opportunity to influence which nurses should be allowed to prescribe. This duty should not be left to employers alone.

Plans for Their Preparation and Training

Nurses working in Northern Ireland should have the same access to training as their colleagues elsewhere in the UK. It might be useful to initiate a number of short term pilots in order to evaluate progress.

I trust you will find these comments helpful. If you require clarification on any of the issues raised please do not hesitate to contact me.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Seamus Magee', with a horizontal line underneath the name.

Seamus Magee
Chief Officer