

PHARMACIST PRESCRIBING IN MENTAL HEALTH

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The United Kingdom Psychiatric Pharmacy Group and the College of Mental Health Pharmacists have published a joint position statement on supplementary prescribing.

In this article, two of the authors outline the key points

Legislation is now in place to allow suitably trained pharmacists to act as supplementary prescribers. The opportunities that supplementary prescribing offer in mental health and learning disabilities are vast but they also pose risks. It is a particular characteristic of mental health pharmacy services that many staff are employed through service level agreements with managers on both sides of the contract. These managers may not clearly understand the opportunities and risks that pharmacists are exposed to. It was against this background that a joint position statement was drawn up by a working party of national representatives from both the United Kingdom Psychiatric Pharmacy Group (UKPPG) and the College of Mental Health Pharmacists (CMHP) to highlight the impact of supplementary prescribing and its relevance to mental health pharmacy.

The aim of the statement is to describe a framework and to provide guidance for specialist mental health pharmacists, their managers or employers and trusts.

These aims will support the provision of the best pharmaceutical care for people with mental health needs and allow pharmacists to work in a safe and supported environment. They are complementary to the basic premise of supplementary prescribing which states that it must improve patient care. It is further anticipated that the position statement will:

- Aid the development of policies and procedures for supplementary prescribing in a mental health trust before implementation

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- Outline the necessary competence of pharmacists who may wish to become supplementary prescribers
- Encourage the recruitment and retention of pharmacists in the mental health field
- Support business and capacity planning in relation to supplementary prescribing

The joint position statement from the UKPPG and the CMHP provides a broad framework within which pharmacists working in psychiatry and learning disabilities may act as supplementary prescribers.

■ COMPETENCE

The most significant recommendation is to encourage trust managers to consider the competence of those who are to take on supplementary prescribing roles. One method of demonstrating such competence is membership of CMHP (denoted by the letters MCMHP). The statement recognises that there are likely to be other suitable qualifications, but currently this seems the most appropriate standard for assuring specialist pharmacist competence in mental health. Both a general clinical diploma and a master of

Panel 1: Executive summary of the UKPPG and the CMHP joint position statement

- Specialist mental health pharmacists are pharmacists practising in mental health. They will have a special interest in mental health and ideally a postgraduate qualification in the speciality
- Specialist mental health pharmacists will, as supplementary prescribers, contribute to improvements in patient care
- The competence of specialist mental health pharmacist supplementary prescribers must be assured in the area of mental health as well as in prescribing practice. This will ideally be undertaken by nationally recognised organisations using appropriate accreditation schemes
- Specialist mental health pharmacist supplementary prescribers will work autonomously and take full responsibility for their actions
- The specialist mental health pharmacist supplementary prescriber will prescribe medicines according to an agreed clinical management plan that has been developed and agreed with an appropriate independent prescriber
- It is recommended that the employing trust, or equivalent organisation, consider the resource implications before allowing suitable specialist mental health pharmacists to become supplementary prescribers
- It is recommended that the employing trust, or equivalent organisation, must draw up and implement appropriate policies and procedures to ensure a safe working framework within which both the independent and supplementary prescribers will work
- It is recommended that training schemes be developed, on a local and/or regional level, to facilitate the ongoing development of future specialist mental health pharmacist supplementary prescribers
- Independent pharmacist prescribers may develop in the future. Competent specialist mental health pharmacist supplementary prescribers will be in an ideal position to take on this role

pharmacy degree, which includes the supplementary prescribing component, are considered inadequate alone. Neither qualification confers the degree of practical experience, competence and confidence in mental health that CMHP membership would assure. Such qualifications, particularly clinical diplomas, are however, an appropriate and valuable means of professional development before specialist accreditation.

The Department of Health suggested during the consultation process that therapeutics training should not be considered as part of the training requirement for supplementary prescribing. However, following recommendations from the Royal Pharmaceutical Society in the outline curriculum, many establishments offering supplementary prescribing courses are delivering therapeutics as a substantial part of their training programme. Despite this contradiction, the mental health component proposed for such courses is so superficial, if it is taught at all, that it would be unsafe to suggest that such an approach is adequate alone.

The statement clearly highlights a broad range of policies and procedures that should be clarified before we would advise that specialist mental health pharmacists set about training as supplementary prescribers.

STAFFING ISSUES

Some authorities see supplementary prescribing as a solution to immediate staffing problems, and a way of getting leave and discharge prescriptions written. Such roles are routine, clerical and administrative and can readily be managed within a local framework, without the need for a change in primary legislation or the lengthy period of training required to become a supplementary prescriber.

There is concern around remuneration, particularly in the context of Agenda for Change and the lack of recognition of these developments within the English implementation guide for supplementary prescribing (currently the guides for Scotland, Wales and Northern Ireland are awaited).

There is also the need to consider resource implications. Adequately resourced and protected support services and workforce or capacity planning are required. While supplementary prescribing has been proposed as a solution to medical staff shortages and the reduction in junior medical staff hours it does not recognise the current manpower shortages in pharmacy, especially within secondary care mental health services.

Sufficient appropriately trained specialist mental health pharmacist supplementary prescribers must be assured for the future.

LOCAL OR REGIONAL TRAINING

Local or regional training programmes that facilitate formal accreditation should be developed. Such programmes would be best organised with the involvement of practitioners and higher education establishments. Such an approach has obvious ramifications for how pharmacy staff and specialist mental health supplementary (and ultimately independent) prescribers work as part of the clinical team. Although it is not the intention of the joint position statement to dictate boundaries of models of care, various scenarios where supplementary prescribing could occur are described. Examples include lithium or clozapine out-patient clinics, or a case load of patients with schizophrenia or other similar chronic conditions.

The joint position statement on specialist pharmacist supplementary prescribing in mental health and learning disabilities was published and circulated in September 2003, just before the UKPPG annual conference.

The full text of the position statement may be downloaded from www.ukppg.org.uk/supplementary-prescribing-statement-2003.pdf. A full report on the 2003 UKPPG conference, where the issue of pharmacist supplementary prescribing was debated, is available at www.ukppg.org.uk/conference-03.html