

MEDIA RELEASE

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Lessons from extended prescribing rights in the UK

Australia can learn a lot from the prescribing system in the UK, according to Nick Barber, Professor of Pharmacy at the University of London, writing in the latest edition of *Australian Prescriber*.

Professor Barber considers issues around prescribing and access to medicines in the UK, and whether extending prescribing rights to nurses and pharmacists has eased pressure on the health system.

In the UK, supplementary (originally called dependent) prescribing rights were introduced in 2003 and were followed by independent prescribing rights in 2006. The new prescribers work as part of a team with the doctor but they are legally responsible for their own prescribing. They have access to, and contribute to, the patient's medical records.

Professor Barber talks about importance of relevant training for new prescribers and how training has been set up in the UK.

“Currently nurses and pharmacists have common training, some of which the pharmacists find very simple – separate training will probably work better. Some nurses want specific prescribing skills and resent having to learn a wider curriculum. If Australia widens the range of prescribers, it can avoid our errors and draw on our experiences of education,” he argues.

“Extending prescribing rights is logical. The burden of knowledge associated with medicines is vast and expanding, so it makes sense to share the task of prescribing while retaining an integrated system of care,” he writes.

“Overall, there is a clear rationale to extend prescribing rights. While it needs continued evaluation, it seems to have improved access to medicines and has been liked by health professionals,” Professor Barber concludes.

Media enquiries to Katie Butt, NPS Media Adviser, 0419 618 365 or kbutt@nps.org.au

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