

A study identifying why junior doctors made serious prescribing mistakes⁵ led to a concept of four domains of prescribing competence.⁷ The first domain involves the skill of gathering information such as relevant patient diagnoses and medication history (including previous allergies and adverse drug reactions) or recent changes to medicines. The second domain requires a cognitive step that involves using pharmacological knowledge to select not only the right drug for the disease, but also the right drug and dose for the patient with the disease. The third is the ability to safely and effectively communicate these decisions to other health professionals and the patient or carer. This may involve completing either paper-based or computer-generated orders which, in a community setting, constitute clear instructions to pharmacists to dispense or nurses to administer. A critical component of the communication involves discussion with the patient or carer so that they clearly understand the reasons why certain drugs were prescribed and are therefore more likely to adhere to therapy. The fourth domain is the ability to review both therapeutic and adverse impacts of the therapy. This information will inform decisions to continue or modify therapy.

Most medical practitioners have a potentially broad scope of practice when it comes to prescribing, far broader than most non-medical prescribers. While some medical schools have prescribing education programs,⁸ many of the postgraduate vocational training programs lack specific curricula based on frameworks such as the prescribing competency framework.⁴ It could be argued that such a curriculum, with its specific learning outcomes and methods of assessment to ensure safe and effective prescribers, should exist for all clinicians.

Health Workforce Australia is currently working with NPS to develop a framework for prescribing competency. Adopting national prescribing competencies for all prescribers would

inform the training, development and credentialing of all clinicians. This would enable the national professional boards to undertake their key role of ensuring optimal safe and quality healthcare.

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Letters

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Finding independent information on new drugs

Editor, – I read the article by Rosalind Tindale with great interest (*Aust Prescr* 2011;34:85-8). She lists some great resources and the compilation will be very useful for me.

I would like to suggest the Therapeutics Initiative (www.ti.ubc.ca) as an additional resource for independent, critical evaluation of evidence for drugs. All information is currently free of charge.

AM Tejani
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Editorial note: Like *Australian Prescriber*, Therapeutics Initiative is a member of the International Society of Drug Bulletins and can be accessed through our website (www.australianprescriber.com/content/links).