

Appendix 1: Non-Medical Prescribers Approval to Practice form/Annual Declaration

This form **must** be returned before the non-medical prescriber can be registered with the NHS Business Services Authority (NHSBSA) and start prescribing in the practice. It must be updated annually **and** before any changes are made to prescribing practice.

DECLARATION (please cross box as appropriate): NEW APPLICATION <input type="checkbox"/> AMENDMENT* (ie change in prescriber details, practice(s) or scope of practice) <input type="checkbox"/> ANNUAL DECLARATION <input type="checkbox"/>	
<small>*Non-medical prescribers are encouraged to use the Royal Pharmaceutical Society - Professional Guidance: Expanding Prescribing Scope of Practice document when they are looking into expanding/changing their scope of practice</small>	
Prescriber's name:	Title: Mr <input type="checkbox"/> / Mrs <input type="checkbox"/> / Miss <input type="checkbox"/> / Ms <input type="checkbox"/> (please select)
Professional registration no.: (NMC/GPhC/HCPC no. or equivalent)	
Type of prescriber (please cross the box as appropriate):	
Community Practitioner Nurse Prescriber (V100, V150) <input type="checkbox"/> <small>Please note Community Practitioner Nurse Prescribers (V100, V150) DO NOT need to complete table 1 Scope of prescribing practice.</small>	Physiotherapist Independent Prescriber <input type="checkbox"/>
Nurse Independent Prescriber <input type="checkbox"/>	Optometrist Independent Prescriber <input type="checkbox"/>
Pharmacist Independent Prescriber <input type="checkbox"/>	Dietician Supplementary Prescriber <input type="checkbox"/>
	Paramedic Independent Prescriber <input type="checkbox"/>
Profession: for example, Nurse/Pharmacist/Physiotherapist/Podiatrist/Paramedic/Optomtrist/Therapeutic Radiographer	Date of qualification as a prescriber, for example, 20.02.2018: For nurses this must match the date on the NMC register
Base Practice Name & Address:	Practice code:
Date that the prescriber commenced/will commence prescribing at the practice:	Tel. No:
Job Title:	Clinical Speciality:
Non-medical prescriber email address:	Name and Email of clinical supervisor/DPP:
Employer/line manager email address:	
Are you prescribing - Manually <input type="checkbox"/> Electronically <input type="checkbox"/> (Please cross <input checked="" type="checkbox"/> relevant boxes)	
Do you work as a prescriber in another Provider / Practice?	Name(s) of Provider/Practice:
YES <input type="checkbox"/> / NO <input type="checkbox"/> <small>If you have ticked 'yes', please also complete and submit the "SUPPLEMENTARY FORM FOR COMPLETION BY NON-MEDICAL PRESCRIBERS WORKING ACROSS MULTIPLE PRACTICES"</small>	

<p>Will you prescribe Schedule 2–5 Controlled Drugs? YES <input type="checkbox"/> / NO <input type="checkbox"/></p>	<p>(Please cross <input checked="" type="checkbox"/> relevant boxes)</p> <p>Schedule 2 <input type="checkbox"/> eg diamorphine, Fentanyl</p> <p>Schedule 3 <input type="checkbox"/> eg temazepam</p> <p>Schedule 4 <input type="checkbox"/> eg zopiclone, diazepam, testosterone</p> <p>Schedule 5 <input type="checkbox"/> eg codeine based preparations, pholcodine</p>
<p>Will you prescribe for children under 12 years old? YES <input type="checkbox"/> / NO <input type="checkbox"/></p> <p>Please refer to ICB Non-Medical Prescribing Governance Framework for General Practice for considerations when prescribing for children</p>	
<p>Please tick that you have read and agree to adhere to the ICB Non-Medical Prescribing Governance Framework for General Practice <input type="checkbox"/></p>	
<p>Please tick that you have read and agree to adhere to the RPS, A competency framework for all prescribers <input type="checkbox"/></p>	



Table 1: Scope of Prescribing Practice

BNF chapter	Please tick	BNF chapter	Please tick
<i>Gastrointestinal system</i>		<i>Cardiovascular system</i>	
Drugs used in the management of Dyspepsia and GORD eg antacids, alginates		Positive Inotropic Drugs eg Digoxin	
Antispasmodics and other drugs affecting gut motility		Diuretics eg Frusemide, Spironolactone	
Antisecretory drugs eg PPIs, H2 receptor antagonists		Anti-Arrhythmic Drugs eg Amiodarone, Flecainide Acetate	
Drugs used in the management of acute diarrhoea		Beta-Adrenoceptor Blocking Drugs eg Bisoprolol, Propranolol	
Laxatives		Drugs to treat Hypertension	
Drugs used in the management of Chronic bowel disorders eg IBD (Crohn's disease or ulcerative colitis), IBS.		Heart Failure Drugs	
Local preparations for anal and rectal disorders eg haemorrhoidal preparations		Nitrates, Calcium Channel Blockers & Antianginal Drugs	
Drugs affecting intestinal secretions eg Pancreatin (Creon), Ursodeoxycholic Acid		Sympathomimetics eg Dopamine, Ephedrine, Noradrenaline	
		Anticoagulants	
		Antiplatelet drugs	
<i>Respiratory system</i>		Fibrinolytic Drugs eg Alteplase, Streptokinase, Urokinase	
Drugs used in the management of Asthma eg Beta-2 agonists, Inhaled Corticosteroids		Antifibrinolytic Drugs eg Tranexamic Acid	
Drugs used in the management of COPD eg Muscarinic antagonists, oral corticosteroids		Lipid-Regulating Drugs eg statins, ezetimibe	
Cough and congestion drugs/preparations			
Drugs affecting sputum viscosity eg Mucolytics - Carbocisteine		<i>Central Nervous system</i>	
Peak flow and inhaler devices		Antiepileptics	
Nebulisers		Analgesics	
Antihistamines		Hypnotics and Anxiolytics	
Nasal Decongestants		Antidepressants	
		Antimanic drugs eg Lithium	
<i>Infections</i>		Antipsychotics eg Amisulpride, Olanzapine, Haloperidol	
Antibacterial drugs eg Amoxicillin		Antimuscarinic drugs used in Parkinsonism eg Procyclidine	
Antiprotozoal drugs eg antimalarials – quinine sulphate, Mefloquine, Chloroquine, Proguanil / Atovaquone (Malarone)		CNS stimulants and drugs used for ADHD eg Methylphenidate, Dexamfetamine, Atomoxetine	
Antifungal drugs eg Fluconazole, Terbinafine, Nystatin		Drugs used in nausea and vertigo eg Cyclizine, Domperidone, Metoclopramide	
Antiviral drugs eg Oseltamivir		Dopaminergic drugs used in Parkinsonism eg Co-beneldopa	
Anthelmintics eg Mebendazole		Drugs used in the management of dementia eg Donepezil, Memantine	
		Drugs used in substance dependence eg Acamprosate, methadone, bupropion, Nicotine preparations – gum, lozenges, patches.	
		Drugs used in the management of obesity eg orlistat	

BNF chapter	Please tick	BNF chapter	Please tick
Endocrine system		Obstetrics, Gynaecology and Urinary-Tract Disorders	
Drugs used in diabetes eg Metformin		Drugs used in the treatment of vaginal and vulval conditions eg Clotrimazole Cream, Estriol, Metronidazole cream, Estradiol	
Thyroid Drugs eg Levothyroxine		Drugs for urinary retention eg Tamsulosin	
Antithyroid Drugs eg Carbimazole and Propylthiouracil		Drugs for erectile dysfunction eg Tadalafil, Sildenafil	
Corticosteroids (Endocrine) eg Fludrocortisone, Hydrocortisone, Prednisolone, Dexamethasone		Contraceptives eg Combined Hormonal Contraceptives, Oral Progestogen-only Contraceptives, Parenteral Progestogen-only Contraceptives, IUD, emergency contraception	
Sex Hormones eg HRT, Progestogens, Male Hormones and Antagonists (Testosterone, Finasteride)		Drugs for urinary frequency, enuresis and incontinence eg Fesoterodine, Oxybutynin, Solifenacin	
Hypothalamic and Pituitary Hormones and Antioestrogens eg Clomifene, Desmopressin, Somatropin			
Drugs affecting bone eg Alendronic Acid, Risedronate		Nutrition and Blood	
		Drugs used in anaemia eg oral iron	
Malignant disease and Immunosuppression		Fluids and Electrolytes eg oral potassium, Dioralyte	
Cytotoxic Drugs eg Methotrexate		Oral Nutrition eg Fresubin, Aymes	
Drugs affecting the immune response eg Azathioprine, Ciclosporin, Tacromilus		Vitamins and Minerals eg Calcium supplements, Thiamine, Vitamin B compound,	
Sex hormones and hormone antagonists in malignant disease eg Ethinylestradiol Tablets, Medroxyprogesterone Acetate Tablet, Letrozole, Tamoxifen, Octreotide		Foods eg SMA powder	
		Other health supplements eg Melatonin	
Musculoskeletal and Joint Diseases			
Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)		Eye	
Drugs used in rheumatic diseases eg Methotrexate, Hydroxychloroquine, Leflunomide		Anti-infective eye preparations eg Antibacterial (Chloramphenicol), Antifungal, Antiviral (Ganciclovir)	
Local corticosteroid injections eg Methylprednisolone Acetate (Depo-Medrone)		Corticosteroids and other anti-inflammatory preparations eg Prednisolone eye drops, Betamethasone ear/eye/nose drops, Sodium cromoglicate eye drops	
Drugs used in gout eg Allopurinol, Colchicine, Febuxostat		Mydriatics and Cycloplegics eg Atropine sulphate eye drops, Cyclopentolate eye drops, Tropicamide eye drops	
Drugs used in neuromuscular disorders eg Tizanidine, Baclofen tablets		Treatment of glaucoma eg Timolol eye drops, Latanoprost eye drops.	
Drugs for relief of soft tissue inflammation eg Rubefacients and Topical NSAIDs		Local anaesthetics eg Tetracaine 1% single use eye drops	
		Tear deficiency, eye lubricants/astringents eg Hypromellose.	

BNF chapter	Please tick	BNF chapter	Please tick
<i>Ear, Nose & Oropharynx</i>		<i>Skin</i>	
Drugs used in Otitis externa		Preparations/drugs used in dry and scaling skin disorders (eczema and psoriasis)	
Drugs used in Otitis media		Drugs used in infections of the skin eg Fusidic acid cream, Metronidazole cream, Clotrimazole cream	
Drugs used in removal of earwax		Drugs used in inflammatory skin conditions	
Drugs used in nasal congestion		Antiperspirants	
Drugs used in nasal inflammation, nasal polyps and rhinitis		Drugs used in pruritus	
Drugs used in dry mouth		Topical and oral preparations for rosacea and acne	
Mouthwashes and Gargles		Drugs used for scalp and hair conditions eg Capasal, Coal Tar Shampoo	
Drugs used in oral ulceration and inflammations		Skin cleansers, antiseptics and desloughing agents	
Drugs used in Oropharyngeal bacterial infections		Camouflagers	
Drugs used in Oropharyngeal fungal infections		Sun protection and photodamage preparations	
Drugs used in Oropharyngeal viral infections		Preparations for warts and calluses	
<i>Immunological products and Vaccines</i>		<i>Anaesthesia</i>	
Vaccination eg Hepatitis A, B, Rabies, Influenza, Coronavirus Vaccine		Local Anaesthesia eg Instillagel, Tetracaine (Ametop), Emla cream	
<i>Other drugs and preparations: wound management products, dressings, stoma appliances, incontinence appliances, elasticated garments etc.</i>		<i>Emergency treatment of poisoning</i>	

In line with the ICB Policy for Non-Medical Prescribing in General Practice and ICB Non-Medical Prescribing Governance Framework for General Practice, I have discussed and agreed my areas of practice and competence with my GP clinical supervisor/DPP and they confirm that I am competent to take a patient history, undertake a clinical assessment and/or diagnose within the area and field of practice identified.

Note: The GP clinical supervisor/DPP is responsible for providing support and mentorship and for monitoring competencies, prescribing and a prescriber's CPD portfolio at agreed intervals (minimum once per year)

Signing this form:

- provides an assurance regarding its review and confirms that you agree to your roles and responsibilities as defined in Appendix 3 – ICB Non-Medical Prescribing Governance Framework for General Practice
- confirms your consent to share your details with MLCSU for the purposes stated under the confidentiality section below.

	NAME	PROFESSION	SIGNATURE	DATE
Non-medical prescriber
Clinical Supervisor/DPP
Employer/line manager

Please email the completed interactive form(s) to: mlcsu.nmpregister@nhs.net

Secure Emails: To ensure data is sent safely and securely you must submit this form via an NHSmail email address eg nhs.net or nhs.uk

Please ensure that you inform us promptly if the non-medical prescriber leaves this practice so that they can be de-registered with NHSBSA

Confidentiality:

The information you provide on this form (and the supplementary form) will be used to support your registration with the NHSBSA and your addition on to the ICB non-medical prescribing register, enabling you to start prescribing within your practice(s).

Following the introduction of the Data Protection Act 2018 and General Data Protection Regulation (GDPR), NHS Lancashire and South Cumbria ICB would like to make you aware of the following:

- The MLCSU will only share your information with the NHSBSA for the purpose of processing your application.
- The completed documents will be held in line with MLCSU's retention schedules and in line with NHS England Records Management Code of Practice.
- MLCSU will share your details with the Lancashire and South Cumbria ICBs Non-Medical Prescribing Lead to support the ICBs governance processes for non-medical prescribing (see Appendix 3 - ICB Non-Medical Prescribing Governance Framework for General Practice).

We may need to communicate with you via e-mail. The e-mail address you provide will be included in a 'group e-mail' used to send information to non-medical prescribers (eg prescribing alerts, courses, conferences, etc.). The Blind Carbon Copy facility will be used. Further information on the ICBs data processing activities and how you can exercise your individual rights (which meet the Data Protection Act 2018 and GDPR) can be found on the Lancashire and South Cumbria's Privacy Notice.

SUPPLEMENTARY FORM FOR COMPLETION BY NON-MEDICAL PRESCRIBERS WORKING ACROSS MULTIPLE PRACTICES

Non-Medical Prescriber Details

Full Name	
Title (Mr / Mrs / Miss / Ms)	
Contact email address	
Professional Registration No.	

To be completed by the GP Clinical Supervisor/DPP

I can confirm as the GP Clinical Supervisor/DPP of the non-medical prescriber that I take responsibility for the oversight of the non-medical prescriber's prescribing competencies working across all the practices they are registered with.

GP Clinical Supervisor/DPP Signature: Name (**PLEASE PRINT**):

Date: Contact details/email address:

To be completed by the practice manager of each additional practice where the non-medical prescriber will prescribe

By signing this form, practices are authorising the MLCSU to register the non-medical prescriber with the NHS Business Services Authority as a prescriber for the practices below. Oversight of prescribing will rest with the non-medical prescriber's GP Clinical Supervisor/DPP.

Practice Name	Practice Address	Practice Code	Non-medical prescriber start date at practice (dd/mm/yy)	Practice Manager of practice (PRINT NAME)	Practice Manager of practice (Signature)