

# Doctors Prescribing Assessment: Guide for Foundation Doctors

## Health Education England London and South East Pharmacy

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### Brief History of the Doctors Prescribing Assessment

The EQUIP study published in 2009 found that of 50,016 orders written by foundation doctors, there was an error rate of 8.4%, with 5.25% being classed as serious and 1.89% as potentially lethal<sup>1</sup>. Within the study there were many recommendations to minimise prescribing errors, including:

*“Support of foundation year one trainees in learning local practices and procedures pertinent to prescribing should be provided at induction to the foundation year and when moving between posts” [5(p134)].*

Additionally, organisations such as the Care Quality Commission had set requirements<sup>2</sup> that Trusts could be assured that staff handling medicines had the competency and skills needed to do so safely<sup>2,3</sup>.

In 2011, Health Education England, Kent, Surrey and Sussex Pharmacy team, in collaboration with South Thames Foundation School undertook a review of the prescribing teaching and support given to Foundation Doctors across the region, which found marked differences across NHS Trusts. It was therefore decided that a standard approach could be provided through the implementation of a regional prescribing assessment, which used local charts and resources are used to assess Foundation Doctors practical prescribing skills. In 2011 the first doctors prescribing assessment was piloted<sup>4</sup>.

The assessment was successful and was implemented across Kent, Surrey and Sussex in 2012. It is endorsed by South Thames Foundation school and It is highlighted within the “Supporting junior doctors in safe prescribing” guidance produced by the Royal College of Physicians, as good practice<sup>5</sup>.

### Principles of the Doctors Prescribing Assessment

The overarching aim of the Doctors Prescribing Assessment is to identify prescribers who require further development in their prescribing skills and give opportunity to support them through targeted educational interventions.

<sup>1</sup> [https://www.gmc-uk.org/-/media/documents/FINAL\\_Report\\_prevalence\\_and\\_causes\\_of\\_prescribing\\_errors.pdf\\_28935150.pdf](https://www.gmc-uk.org/-/media/documents/FINAL_Report_prevalence_and_causes_of_prescribing_errors.pdf_28935150.pdf)

<sup>2</sup> <https://www.cqc.org.uk/guidance-providers/healthcare/medicines-management-healthcare-services>

<sup>3</sup> Care Quality Commission Management of Medicines Outcome 9:

[https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=3&ved=2ahUKewilov2wtNThAhX6TBUlHQOOD7QQFjACegQIBRAC&url=https%3A%2F%2Fwww.cqc.org.uk%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2FPCA\\_OUTCOME\\_9\\_new.doc&usq=AOvVaw1ne8mdJh\\_POHY9ZJZmTDz8](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=3&ved=2ahUKewilov2wtNThAhX6TBUlHQOOD7QQFjACegQIBRAC&url=https%3A%2F%2Fwww.cqc.org.uk%2Fsites%2Fdefault%2Ffiles%2Fdocuments%2FPCA_OUTCOME_9_new.doc&usq=AOvVaw1ne8mdJh_POHY9ZJZmTDz8)

<sup>4</sup> <https://www.pharmaceutical-journal.com/news-and-analysis/development-of-a-regional-prescribing-assessment-for-trainee-doctors/11123664.article>

<sup>5</sup> <https://www.rcplondon.ac.uk/projects/outputs/supporting-junior-doctors-safe-prescribing>

This is achieved through:

- Using a standardised assessment, that has been created based on high risk areas for medication errors.
- The assessment is adapted for use with local prescribing systems (drug charts / electronic prescribing) and local guidelines. This has benefits including:
  - o Highlighting training needs for cohorts if they have issues orientating with either the system or guideline
  - o Identifying struggling trainees who cannot practically prescribe on the Trust system (opposed to an artificial system)
- Using marking criteria, to aid standardisation and give consistent feedback; and further development via SCRIPT<sup>6</sup>
- To ensure support is given to foundation doctors who have been identified

The Doctors Prescribing Assessment is a tool for the Trusts Pharmacy departments, Post Graduate Medical Education (PGME) department and medicines governance systems to reinforce a culture of patient safety and continuous education to improve prescribing standards.

## Overview of the Assessment

The Prescribing Assessment consists of a long answer written assessment, which has five scenarios, each with several questions. There is no defined pass-mark; however, guidance will be given to the trainees as to the level of further training and assessment that may be required locally according to the total mark obtained and the number of serious errors that arise (Trust decision).

There is a marking guide that accompanies the prescribing assessment which must be used by those marking completed assessment. Within the guide it indicates for each point, when a mark can be awarded or not, and when an answer should be classified as a serious error.

***Serious Error – is when a prescribing decision made within the assessment would lead to patient harm if it were to occur in practice.***

All serious errors raised within the assessment should be actioned at a Trust level. Within the marking guide there are developmental points and it signposts further learning available on the SCRIPT<sup>7</sup> e-learning programme.

The assessment has been designed for it to be carried out using local prescribing resources, such as local drug charts and guidance, to mimic prescribing in practice.

The NHS is moving to electronic prescribing and it is possible to implement this assessment on these systems with adaptation of the assessment and the appropriate resource allocated to facilitate it. In 2016 Western Sussex Hospitals NHS Foundation Trust implemented an electronic prescribing assessment, replacing the current long answer written assessment with four scenarios..

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<sup>6</sup> <https://www.safeprescriber.org/>

<sup>7</sup> <https://www.safeprescriber.org/>

## Relation to the Prescribing Safety Assessment

It was envisioned in 2011, when the Doctors Prescribing Assessment was created, that the need for a regional assessment would diminish once the Prescribing Safety Assessment (PSA), was implemented.

The PSA<sup>8</sup> was jointly by the British Pharmacological Society and the Medical Schools Council in response to the following EQUIP recommendation:

*“Education in and summative assessment of practical prescribing should be part of every undergraduate programme” [5(p133)].*

However, since its implementation we have not seen a reduction in the numbers of serious errors being made within the Doctors Prescribing Assessment. The statistical analysis, states that there is a statistical correlation between failure of the PSA and failure of the doctors prescribing assessment. The Doctors Prescribing Assessment is seen as an essential requirement to highlight the importance of safe and effective prescribing by the foundation doctors and trusts who undertake it.

Information on the PSA including in background, context, delivery and requirements are available (and kept up to date on):

- <https://www.bma.org.uk/advice/career/applying-for-training/prescribing-safety-assessment>
- <https://prescribingsafetyassessment.ac.uk/>
- <https://www.medschools.ac.uk/our-work/assessment/prescribing-safety-assessment>

Please check the UK Foundation Programme website

<http://www.foundationprogramme.nhs.uk/> (search PSA) for information

## Doctors that fail the PSA

When a doctor fails the PSA, feedback is provided as the total percentage mark gained in the PSA, with performance data for each section of the assessment. Doctors and their supervisors should use the feedback to focus training on the areas which require further development.

For prescribing leads who have been asked to assist a trainee who has failed the PSA, appendix 1 provides an overview of the SCRIPT modules mapped the sections of the PSA that doctors can undertake to aid in revision. More information on SCRIPT can be found in section 3.6.

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<sup>8</sup> <https://prescribingsafetyassessment.ac.uk/>