Introduction

The last research round up provided you with an overview of some papers covering guidance impacting on and the current practice of prescribing analgesia in a primary care setting. The review looked at 3 differing papers covering simple analgesia and guidelines, current analgesia use in people with osteo-arthritis and falls, and patterns of analgesia prescribing in low back pain.

This month’s round up has a focus on nurse and midwife prescribing. The articles reviewed look at the principles of prescribing practice and the implementation and evaluation of nurse prescribing as well as exploring attitudes and beliefs. The papers chosen offer a global perspective rather than being UK centric.

Prescribing Practice: an overview of the principles


This overview article in the advanced practice section of the British Journal of Nursing outlines the general principles on nurse prescribing practice in the UK and its current standing. It acknowledges the types of nurse prescriber and their scope currently working in the UK and the differences between them. It looks at the increase in complexity of the nurses’ scope of practice in general and how nurse prescribing has evolved since its suggestion in 1986 to its current iteration form a legal and professional perspective. Whilst acknowledging the key drivers within the NHS as a primary push for extensions to nurse prescribing it also review the needs of the patient and patient centred care as well as the professional development of the nursing role. Among the aspects considered as benefits of nurse prescribing key areas identified were holistic care, patient centred care, reduction in hospital admissions and reduced length of hospital stays. A major advantage of nurse prescribing practice was identified as an improved quality of life for patents, especially those living with a long term or chronic health condition. The article also outlines ethical, legal and regulatory frameworks for prescribing as well as the key areas of clinical and theoretical knowledge and skills required for safe and effective nurse prescribing practice. The authors conclude that nurse prescribing is an essential part of the advance clinical practice role.


The need for and value of nurse and midwife prescribing: Findings from an Irish research investigation


This research investigative study, published in the International Journal of Nursing Practice aimed to determine the need for, and value of prescribing practice by nurses and midwives who had trained and were qualified in that role. The study sought the views of these practising prescribers themselves with respect to their insights into how their prescribing role was used and its value. This qualitative study employed an interview methodology and was conducted across 2017. Interviews
continued until data saturation was achieved and themes were constructed from the transcribed interview data. Using constant comparative coding and categorisation, 6 themes were elucidated. These came from 12 participants, of whom 10 were nurses and two midwives.

The 6 themes that emerged after analysis were.

(a) more than just writing prescriptions
(b) highly individualized evidence-based specialist care
(c) assured, timely and rapid accessibility to needed care
(d) health system and healthcare efficiency gains
(e) satisfaction with nurse/midwife prescriber services
(f) quality care improvements.

Critical discussion of these themes revealed that in general there was a higher level of practice among qualified prescribers leading to very individualised and specialist care which delivered timely interventions and increased patient and professional satisfaction. The authors conclude that this type of prescribing (currently 1200 nurse and midwife prescribers in Ireland) provided safe and effective care which was cost effective in nature. It allowed needs to be addressed in a prompt and accessible manner promoting holistic patient care within general areas and in nurse or midwife led services. The authors also acknowledged the role it played in general service improvement.


Attitudes and beliefs towards implementation of nurse prescribing among general nurses and nurse specialists in China: A cross-sectional survey study

Dong-Lan Ling, Jiale Hu, Mei-Yun Zhong, Wan-Ting Li, Hong-Jing Yu (2021) Attitudes and beliefs towards implementation of nurse prescribing among general nurses and nurse specialists in China: A cross-sectional survey study Nursing Open; 8:5, pp 2760-2772

This study, cross sectional and survey in nature and in design conducted in China was published in the online Journal- Nursing Open. The aim by the researchers was a rigorous investigation of attitudes and beliefs towards the implementation of nurse prescribing. Those included in the survey were registered general nurses and nurse specialists. Participants were selected using a convenience sampling method across seven Chinese provinces and one autonomous region of mainland China. Using a statistical size calculator to ensure sampling and recruitment met with statistical aims a sample of 414 general nurses and 399 specialist nurses were included in the study. This met the minimum requirements of the power calculation. Completion of an online questionnaire was the method of data collection.

The results suggested that nurse specialists were statistically more favourable in tier attitudes and beliefs toward nurse prescribing than their general nursing counterparts. This was in part thought to be due to their increased years clinical experience and level of professional education suggesting they were more equipped to adopt the role. The fact that the nurse specialist had a professional title suggesting advanced practice was also important. Another factor that was deemed relevant to view and attitudes was practice specialty as those in a more nurse led role were more favourable in their appraisal of prescribing. The authors conclude that in general Chinese nurse were moderately
positive in their attitude towards nurse prescribing. This was seen as suggestive that the wider implementation and expansion of nurse prescribing in China would be welcomed by the nursing profession as beneficial to themselves and patient care.


Conclusion

Nurse prescribing is becoming more widely adopted both in the United Kingdom and on a global scale. These few studies support a growing body of evidence that suggests that nurse prescribing is safe, effective, timely and cost-effective with advantages to holistic patient care and service provision and design. It seems clear that nurse and non-medical prescribing continues to be seen as a valid and valued aspect of many allied health professionals roles in supporting good patient care within a multidisciplinary framework.