



NHS TAYSIDE

Non-Medical Prescribing Policy

Author:
**Non Medical Prescribing Leads
Group**

**Sub-Group of Drug & Therapeutics
Committee**

Last Updated: May 2010

Review Date: August 2011

Document No:

Issue No:

UNCONTROLLED WHEN PRINTED

Signed: **Dr Andrew Russell, Medical Director
(Authorised Signatory)**

CONTENTS

Section Title	Page Number
1 PURPOSE AND SCOPE	2
2 AIMS AND OBJECTIVES	2
3 STATEMENT OF POLICY	3
4 EDUCATION/TRAINING/CONTINUOUS PROFESSIONAL DEVELOPMENT	
4.1 Accessing Education and Training	4
4.2 Professional Registration	5
4.3 Continuing Professional Development	5
5 ROLES & RESPONSIBILITIES	
5.1 Role of Individual Practitioners	5
5.2 Role of Managers	8
5.3 Role of the Designated Prescribing Practitioner	9
5.4 Role of the Non-Medical Prescribing Professional Leads	10
5.5 Role of Prescribing Administrators	10

APPENDICES

<i>Appendix I</i>	Course Criteria for Accessing Education
<i>Appendix II</i>	Flow-Charts
<i>Appendix III</i>	Clinical Management Plan
<i>Appendix IV</i>	Ordering Security and Issue of Prescription Pads
<i>Appendix V</i>	Annual Review/Appraisal
<i>Appendix VI</i>	NHS Tayside NMP Leads Group - Communication Reporting Structure
<i>Appendix VII</i>	NHS Tayside NMP Professional Leads Contact Details

1. PURPOSE AND SCOPE

Modernisation of the NHS requires a fundamental shift in the way healthcare is delivered. Part of the agenda is ensuring that the contribution of all staff is maximised through role development. However, any role development needs to be implemented within a governance framework to reduce and manage risks to patients, healthcare staff and to the NHS Board.

The purpose of this policy is to set out the administrative and procedural steps necessary to ensure patient safety and quality of care relating to non-medical prescribing within NHS Tayside.

This Policy applies to all NHS Tayside Non-Medical Registered Prescribers, potential Non-Medical Prescribers, Designated Medical Practitioners and Managers responsible for service development and role development of staff.

This Policy must be used in conjunction with national guidance from professional and regulatory bodies, as well as local policies and procedures NHS Tayside have in place for safe and secure handling of medicines (<http://www.nhstaysideadtc.scot.nhs.uk/SSHM/MAIN/Front%20page.htm>).

Non-Medical Prescribers include Nurses, Midwives, Health Visitors, Pharmacists, Physiotherapists, Podiatrists, Radiographers and Optometrists. This list is not exhaustive and may be expanded following further legislative changes.

2. AIMS AND OBJECTIVES

The key aim of this policy is to outline the circumstances in which non-medical prescribing practitioners can prescribe within NHS Tayside, and set out the systems and procedures that must be adhered to, to assure safe and effective non-medical prescribing practice in order that:

- Patients benefit through improvements to the quality of care through timely assessment and access to medicines
- Prescribing practice is compatible with the service development plans of the organisation and clinical speciality and is an appropriate extension of a practitioner's role.
- Non-Medical Prescribers are appropriately qualified for their role, work within agreed national and local policy, and are identifiable in the organisation in order they are kept up to date on prescribing issues both locally and nationally.
- There is a local register of qualified non-medical prescribers to facilitate communication and co-ordination of care and to support clinical and corporate governance.
- Non-Medical Prescribers are supported in their role and have access to continuous professional development in respect of prescribing practice.
- ***This policy does not address Patient Group Directions (PGD's).*** The NHS Tayside policy for PGD's can be accessed via the Drug and Therapeutics Committee website.
- ***This Policy does not address transcribing/transposing*** – separate NHS Tayside guidance is being developed for this practice.

3. STATEMENT OF POLICY

NHS Tayside, as an organisation, encourages and supports the growth and development of Non-Medical Prescribing within the scope of this policy document.

New prescribing roles may be introduced to deliver on local, and/or national policies, plans or priorities. The expansion of prescribing roles offers considerable scope for services to be redesigned to improve patient access, experiences and outcomes and to make more effective use of available skill-mix. Whatever the background to the development it is important to ensure that it is fully integrated into the wider team delivery of healthcare and that common clinical, corporate and professional governance arrangements are in place.

The range of professionals eligible under legislation to issue an NHS prescription for medicines and/or appliances is increasing. Irrespective of their professional group the individual must:

- Successfully complete an educational programme approved by the relevant professional body, e.g. NMC, HPC, RPSGB
- Be listed on a current professional register, maintained by their professional regulatory body in such a way as to signify that they hold an approved, current prescribing qualification.
- Be listed on the NHS Tayside Non-Medical Prescribing (NMP) Register / Database.
- Comply with this policy and other relevant policies within NHS Tayside that affect prescribing, such as Safe and Secure Handling of Medicines (Dec 2008), and Medicines for Exceptional Use (March 2007)

Non-Medical Prescribers are individually and professionally accountable for their prescribing practice, as for any other area of practice, and must act at all times in accordance with their Code of Professional Conduct of their respective professional body. However, irrespective of their professional background, the same local governance principles must apply to all who prescribe. Non-Medical Prescribers are professionally accountable for their own prescribing decisions including actions and omissions and cannot delegate this accountability to any other person. They must ensure that they are clear of the boundaries and accountability of their role and be able at all times, to demonstrate their ability, knowledge and competence to prescribe.

Non-Medical Prescribers must also understand and meet their obligations regarding corporate governance in terms of financial and budgetary management and policy, Health and Safety, and the management of risk. This obligation extends to ensuring that prescribing decisions are taken and reviewed with due regard to resource efficiency and budgetary management.

If a Non-Medical Prescriber moves to another area of practice they must work within the requirements of the new role, which may, or may not include a prescribing role. Where prescribing is included, together with their manager they must ensure that the necessary systems, processes and governance frameworks are in place and must only ever prescribe within their level of experience and competence.

Managers and clinical leads must ensure budgetary arrangements are in place, as are systems and procedures to assure safety, effectiveness, efficiency, appropriateness and acceptability. Managers also have an accountability for ensuring through PDP/KSF processes that prescribers are confident and competent for the role, are working within their competencies and the necessary governance arrangements to support this policy are in place.

Each directorate (Nursing, AHP, Pharmacy) must identify a lead person (known as the NMP Professional Lead) who will be a member of the Non-Medical Prescribing Group, and ensure the necessary governance arrangements for NMP are operational. The Director or equivalent of their professional group will nominate the professional lead role.

Non-Medical Prescribers will only prescribe within their scope of practice and must have relevant knowledge, skills and competence, e.g. prescribing for children and young people.

4. EDUCATION, TRAINING AND CONTINUOUS PROFESSIONAL DEVELOPMENT

4.1 Accessing Education and Training

Practitioners applying to undertake a course of education and training leading to a prescribing qualification will obtain the approval of their Manager.

Individuals approved by their Manager as a suitable candidate will be referred to the NMP Lead for their professional group.

When approved by their Manager the practitioner must complete *Appendix I* plus a formal application using the Joint NHS Tayside/University of Dundee application form, available from the NMP Professional Lead.

All individuals selected for prescribing training, once qualified, must have the opportunity immediately to prescribe in the post that they will occupy.

Applicants must provide evidence of eligibility to undertake prescribing. Approval will be subject to the individual meeting any necessary professional requirements and individuals will be required to provide evidence of ability to study at Degree level (SCQF level 9).

A Designated Medical Practitioner (DMP) must be identified by the applicant, to supervise and assess the competency of the practitioner.

The standardised application process must be adhered to for each professional group (as authorised by their NMP Professional lead).

4.2 Professional Registration

On successful completion of an approved programme of education and training, the individual must inform their NMP Professional Lead and manager. They must arrange for their entry in the register maintained by their Regulatory Body to be updated or annotated to

confirm their status as a prescriber and must provide their NMP Professional Lead with evidence of professional registration before proceeding to develop a prescribing role.

4.3 Continuing Professional Development

Practitioners undertaking prescribing roles must act in accordance with the codes of conduct, standards and ethics set by their individual professional bodies.

Practitioners are professionally accountable for their own practice and for ensuring that they have the necessary up-to-date knowledge and skills to prescribe competently and safely.

Practitioners must ensure that they undertake Continuous Professional Development (CPD) activities that enable them to meet this obligation and that a record of training and other activities undertaken is documented

Employers and Managers will include a review of CPD activities in relation to prescribing practice into the performance review process and ensure that agreed development needs are incorporated into Personal Development Plans (PDP).

5. ROLES AND RESPONSIBILITIES

5.1 Role of Individual Practitioners

Before undertaking a prescribing role, practitioners must successfully complete a formal programme of education and training resulting in a prescribing qualification and they must register with their professional body as a prescriber.

Newly qualified Non-Medical Prescribers will adhere to the relevant flow charts outlined in *Appendix II* for the purposes of confirming NMP status and securing prescribing stationery.

Practitioners must only prescribe within the limits of their registration.

They must be aware of, and must comply with any statutory requirements applicable to their prescribing practice. If a prescriber moves to another area of practice they must consider the requirements of the new role and only ever prescribe within their level of experience and competence, and with their managers approval.

Practitioners have an obligation to prescribe responsibly and in their patient's best interests and must:

Clinical Responsibility

- Make an appropriate assessment of the patient's condition and only prescribe to meet the patient's genuine clinical needs
- Carry out any relevant physical examinations/clinical assessment of patients competently and with regard to the patient's dignity and privacy.
- Communicate with patients / carers in a way that allows them to understand the patient's needs, concerns and expectations about their medicines and enables the patient to make an informed choice about their treatment (including the risks and benefits).

- Ensure that patients are aware that they are being treated by a non-medical practitioner and of the scope and limits of their prescribing.
- Prescribe within their level of competence, scope of professional practice.
- Prescribe safely, appropriately and cost-effectively.
- Prescribe from the NHS Tayside Prescribing Guide/Wound Care Formulary except where individual patient circumstances dictate use of a non-formulary choice. Best practice would be for the NMP to discuss this choice with the responsible physician.
- Ensure separation of the prescribing, dispensing and/or administration of medicines wherever possible.
- Where the practitioner is both prescribing and dispensing for an individual patient, a suitably competent second person must be involved in checking of the dispensed medicine. If the practitioner does both prescribe and dispense for the patient without the involvement of a suitably competent second person then records must be made to ensure good clinical governance and probity.
- Not prescribe an unlicensed medicine.
- Adhere to the NHS Tayside Policy on the Prescribing of Medicines for Exceptional Use and the Safe and Secure Handling of Medicines Policy
- Prescribe “off-label” medicines only where it is acceptable clinical practice and a local policy exists for the use of such medicines.

Professional Responsibility

- Not prescribe for themselves or anyone else with whom they have a close personal relationship (e.g. family and friends), other than in emergency/exceptional circumstances, where there are no other reasonable options available without compromising patient care.
- Prescribe only for the therapeutic area agreed with Line Manager and NMP Lead
- Not direct prescriptions they have written to any particular pharmacy.
- Prescribing pads/paper are viewed as controlled stationary and all Non Medical Prescribers are responsible for ensuring the safe and secure storage of their prescribing stationary at all times. Any breach in this responsibility will be viewed as a disciplinary matter, and as part of formal proceedings that would ensue the fitness of the prescriber to continue to be recognized by NHS Tayside as a prescriber may be reviewed.
- Assure the security of prescribing stationary at all times. They must store prescription pads safely and contact their manager (designated GP if working in a general medical practice), and their Non-Medical Prescribing Professional Lead immediately for advice if they are lost or stolen. All unused stationary should be returned as soon as possible to the Non Medical Prescribing Lead.
- Not ask for or accept any inducement, gift or hospitality, which may affect, or be seen, to affect their judgement when making a prescribing decision.
- Comply with local policies on maintaining a “register of interest” and sign the Code of Corporate Governance as required by NHS Tayside.
- Nursing & Midwifery Council recommends that every nurse/midwife prescriber should ensure that they have professional indemnity insurance. They are strongly advised to contact their professional body, to ensure that their indemnity insurance covers them for the scope of their prescribing practice. Other professionals should ensure they are aware of their own professional requirements.

- Ensure they have access to appropriate mentorship/peer review of their prescribing practice
- Ensure their prescribing details are accurate and any changes notified to their NMP Lead
- Ensure they are on the Ward Prescribing Register as a Non-Medical Prescriber, with a copy of their signature and the scope of their prescribing competence (i.e. Cardiovascular Medicines)

Record Keeping

- Write prescriptions clearly and legibly and ensure that they are identifiable as the prescriber.
- Ensure that only the correct, approved documentation is used. If in doubt contact their Manager or NMP Professional Lead.
- Make a contemporaneous, comprehensive, clear record of their consultation and prescription for an individual patient in the main medical record at the time of the consultation. Where this is not possible, they will make a contemporaneous record, which is then added to the main medical record within 48 hours of the consultation i.e. General Practice Medical Record/Hospital Medical Record.

Adverse Incidents

- Document known or suspected adverse drug reactions in patient notes and via the **Yellow Card System** (www.yellowcard.gov.uk)
- Adhere to NHS Tayside adverse incident reporting systems, and inform their line manager of all prescribing incidents/near misses.
- Ensure that all incidents or errors in their prescribing practice are reported to their line manager immediately and immediate action is taken to ensure the safety and well being of patients /clients, in line with NHS Tayside Safe and Secure Handling of Medicines Manual.

In addition to the above Supplementary Prescribers will:

- Prescribe according to the Clinical Management Plan (CMP) agreed with the Independent Medical Prescriber, for an individual patient using NHS Tayside template (*Appendix III*).
- Refer all individual patient circumstances that fall outside the CMP, or outside the Supplementary Prescriber's competency, to an Independent Medical Prescriber who is responsible for that patient's care.
- Develop an effective relationship with the Independent Medical Prescriber.
- Supplementary Prescribers may prescribe unlicensed or off-label medicines if agreed with the Independent Medical Prescriber and the patient within an individual CMP and in line with NHS Tayside Policy on the Prescribing of Medicines for Exceptional Use.
- Ensure that CMPs are reviewed annually or more frequently as appropriate.

5.2 Role of Managers

Managers must:

- Be actively involved in the decision to develop new prescribing roles and take accountability for ensuring that any such developments are fully compliant with local and national clinical, corporate and staff governance standards, policies, guidelines and principles.
- Discuss with all key stakeholders any new Service Developments, requiring to have Non-Medical Prescribers, prior to the implementation of any such services. Managers must have written agreement regarding budgets prior to staff applying for prescribing courses.
- Ensure that staff undertaking prescribing roles are registered/recorded as prescribers on their professional register and have the necessary competencies, are clear of the boundaries and accountability associated with their role and that they are able continually, to demonstrate their ability, knowledge and competence to undertake prescribing.
- Ensure that NMP Professional Leads are informed of any changes required to the local Register of Non-Medical Prescribers.
- Adhere to NHS Tayside systems to ensure that all non-medical prescribers have access to the necessary information, equipment and support to allow them to practice safely.
- Ensure NMP are provided with opportunities to meet continuous professional development requirements.
- Ensure that within the NMP's Annual Review/Appraisal (**Appendix V**) that their Personal Development Plan includes:
 - The area of practice to which their prescribing relates
 - Agreement on, and documentation of the parameters/scope of their prescribing roles (e.g. BNF chapters).
 - Assurance of current professional registration as a prescriber
 - Details of relevant CPD
 - Assurance that appropriate arrangements for peer review / clinical supervision are in place
- Ensure that arrangements are in place to assure the security of prescription pads and other controlled stationery and that, where appropriate, these are retrieved from any NMP who leaves/changes their employment, prior to their leaving the organisation
- Ensure that the NMP Professional Lead is informed whenever staff leave/change their employment or whenever the scope and/or range of an individual practitioner are prescribing role changes.
- Ensure that all necessary resources are in place to allow the practitioner to proceed to prescribing in practice.
- Line managers must ensure that all incidents or errors in an individuals prescribing practice are investigated fully and that required actions are carried out in line with NHS Tayside Safe and Secure Handling of Medicines and the relevant Human Resource Policy.
- Inform Non-Medical Prescribing Lead of all incidents/errors associated with non-medical prescribing practice to ensure review and continuous improvement of systems and processes.

- Ensure Non-Medical Prescribers within an inpatient setting have recorded their details on the Ward Prescribing Register as a Non-Medical Prescriber, with a copy of their signature and the parameters of their prescribing competence (i.e. Cardiovascular Medicines)

5.3 Role of the Designated Medical Practitioner (DMP)

The Designated Medical Practitioner will:

- Be a Registered Medical Practitioner.
- Be familiar with local Higher Education institution requirements and the National Prescribing Centre guidance ‘Training Non-Medical prescribers in practice- A guide to help doctors prepare for and carry out the role of a designated medical practitioner’.
- Assess and verify that all necessary learning outcomes are met and that the practitioner is competent to assume the prescribing role by the end of the period of supervised practice.

5.4 Role of the Non-Medical Prescribing Professional Leads

- Lead in the development and implementation of prescribing for their profession.
- Be responsible for operational and professional support elements of NMP.
- Identify, prioritise, select and support candidates to undertake the approved courses.
- Co-ordinate education and training for Non-Medical Prescribers from application to completion of course.
- Confirm professional registration status of Non-Medical Prescribers at point of qualification and/or commencement of employment with NHS Tayside.
- Manage the agreed NHS Tayside database for their profession.
- Assure processes for ordering supply and management of prescribing stationery and other necessary prescribing tools (BNF issues, Scottish Drug Tariff etc).
- Advise staff regarding indemnity issues and regulatory frameworks.
- Monitor and review all prescribing incidents/near misses in accordance with NHS Tayside risk management systems and take action to continuously improve non-medical prescribing practice, systems and processes.

In addition to the above, **AHP / Nurse NMP Prescribing Leads** will:

- Provide support to practitioners throughout their prescribing education and training.
- Ensure that registration processes are adhered to on qualification.
- Undertake an annual review of all prescribing incidents/near misses in accordance with NHS Tayside risk management systems and identify further education requirements.
- Support and advise Line Managers in respect of investigations into non-medical prescribing incidents/ errors.

5.5 Role Of Prescribing Administrators

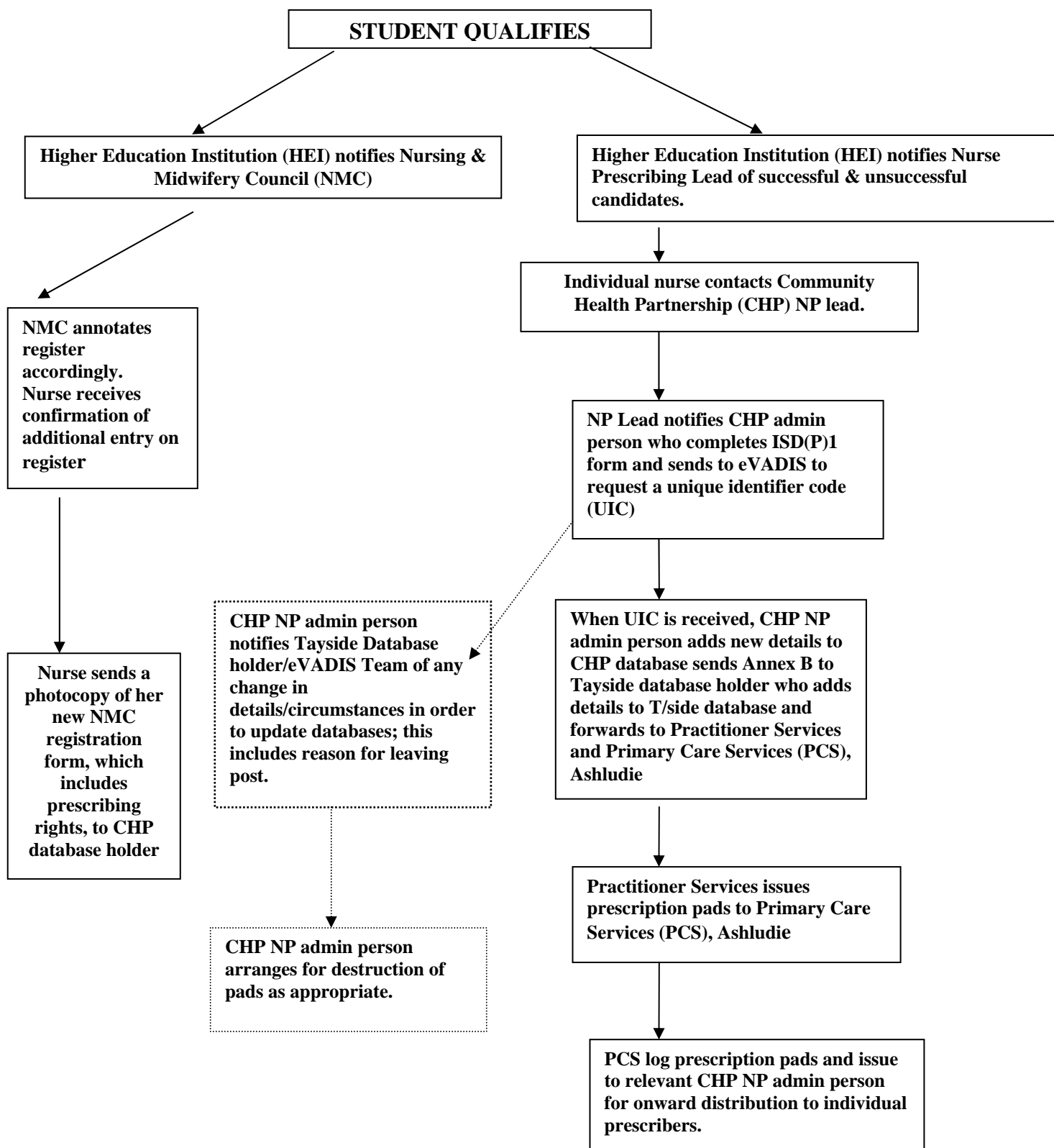
- Maintain a database of all Non-Medical Prescribers across Tayside for designated professional groups
- Collate Annex B forms and pass to Information Statistics Division (ISD) of the Common Services Agency for processing.

- Liaise with Primary Care Services and Primary Care Services Division of the Common Services Agency (PSD) as appropriate in relation to prescription pads.
- Adhere to flow charts developed by NMP Professional Prescribing Leads
- Distribute BNF's, Drug Tariffs, Bulletins, the Tayside Prescriber, and prescribing information/legislation to NMP Professional Leads.

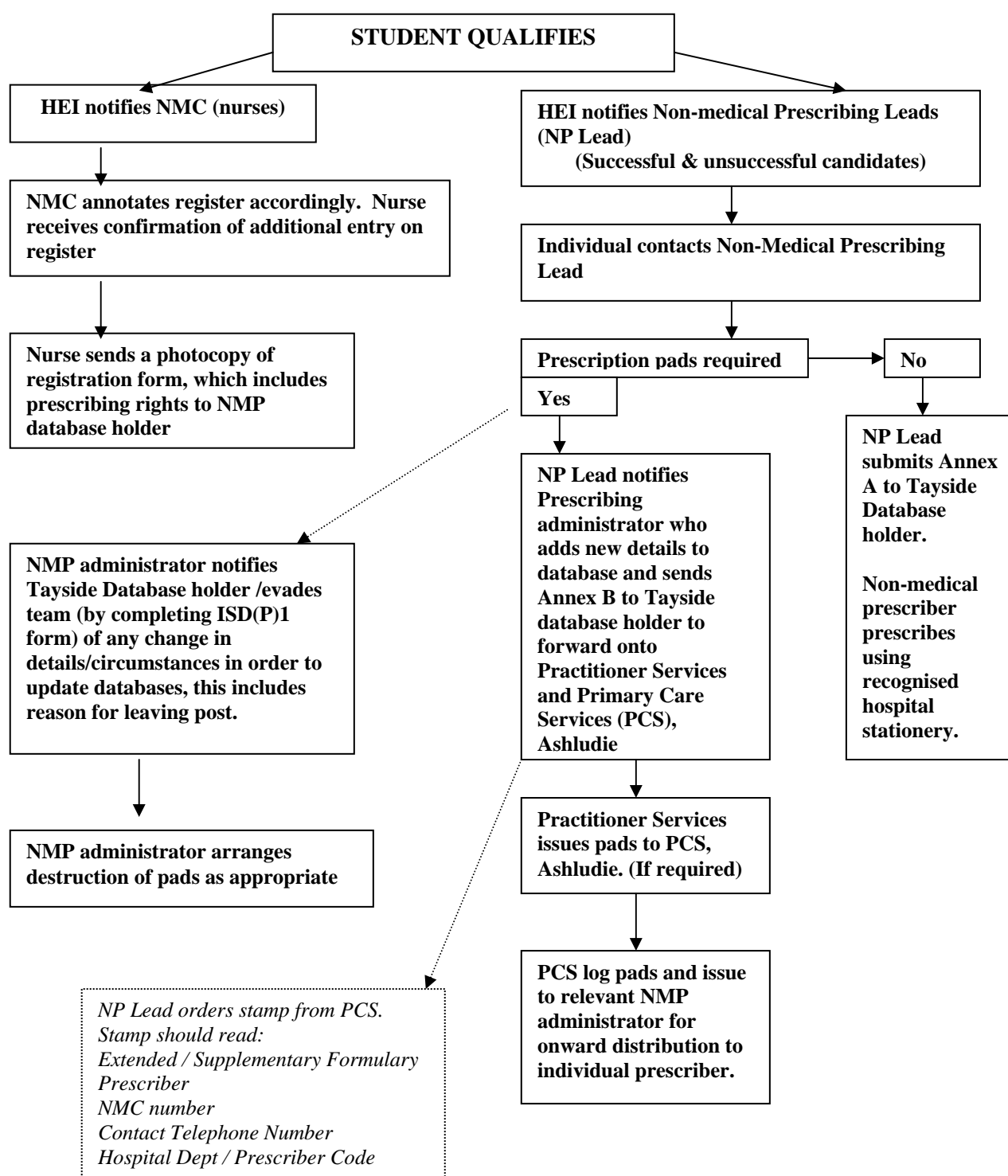
COURSE CRITERIA FOR THE MANAGER/PRACTITIONER

Please sign and submit these details with a completed application form to NMP Lead

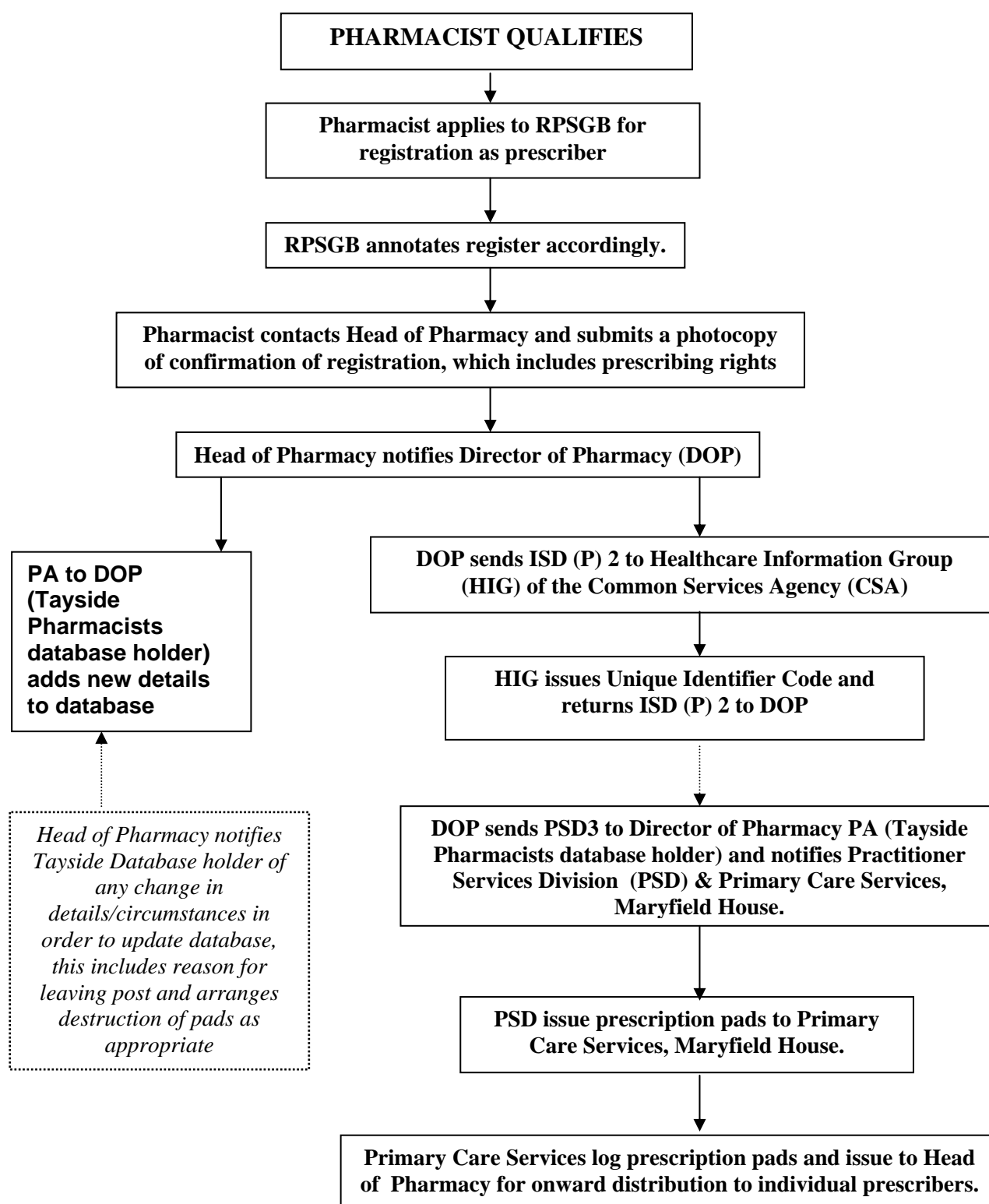
	Agreed and Specified	Date
Identified Service requirement/need for prescribing		
Proposed Area of Prescribing Practice		
Parameters of Prescribing role (e.g. BNF Chapters)		
Identify patient benefit to service area		
Prescribing Budget Identified		
Applicant capable of studying at degree level		
Once qualified, must have opportunity to prescribe immediately		
Designated medical practitioner		
Competent to assess and diagnose within their role		
Nurses must be 3 years post-registration. The year immediately preceding the application, must be in the clinical area in which they intend to prescribe		
Study leave agreed		
Signature of Manager: Signature of Practitioner:		

PRIMARY CARE BASED NON-MEDICAL PRESCRIBERS (Nurses) ¹

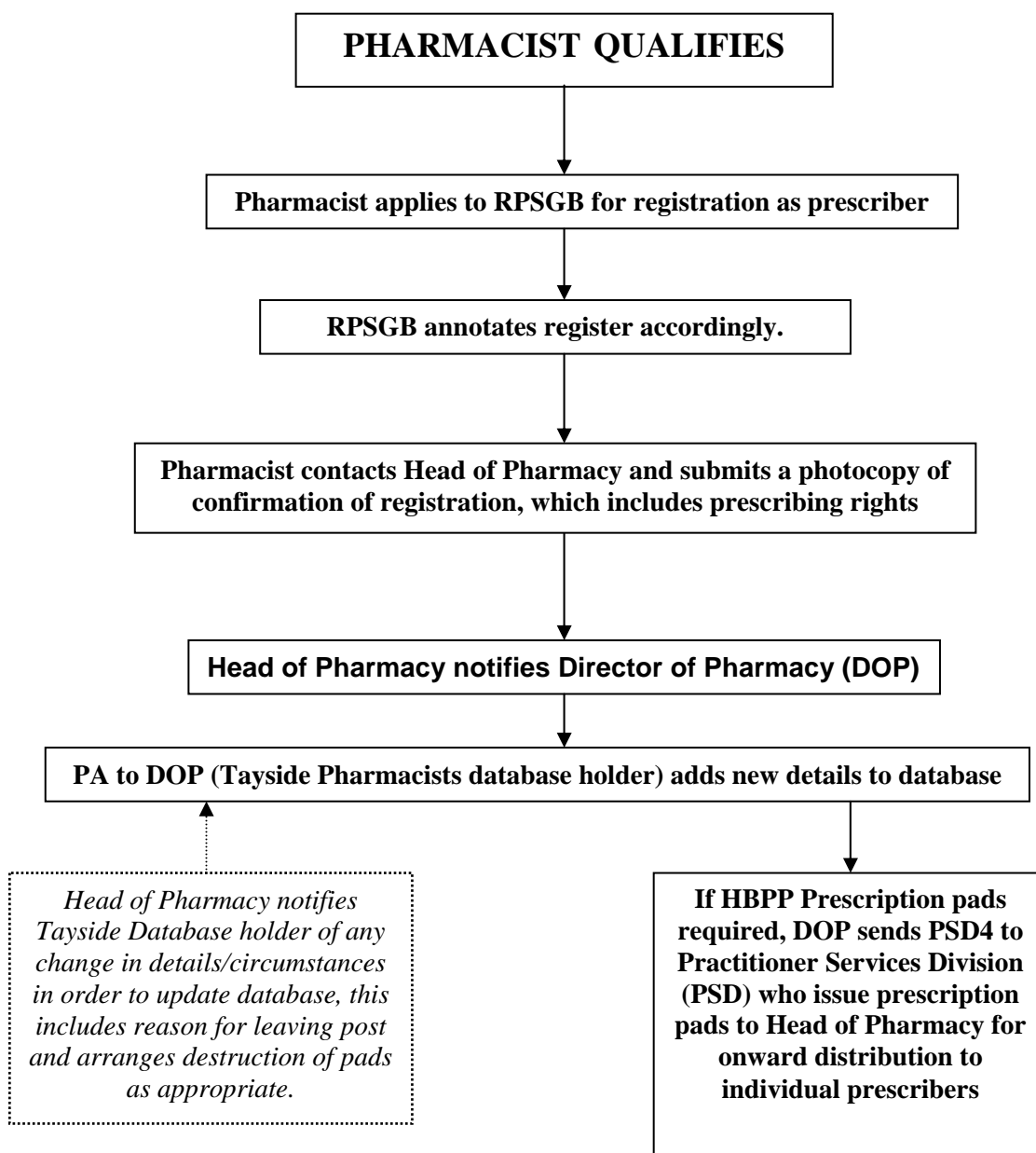
¹ Flowcharts may be subject to change, if in doubt contact Non-Medical Prescribing Lead

HOSPITAL BASED NON-MEDICAL PRECRIBER (Nurses) ¹

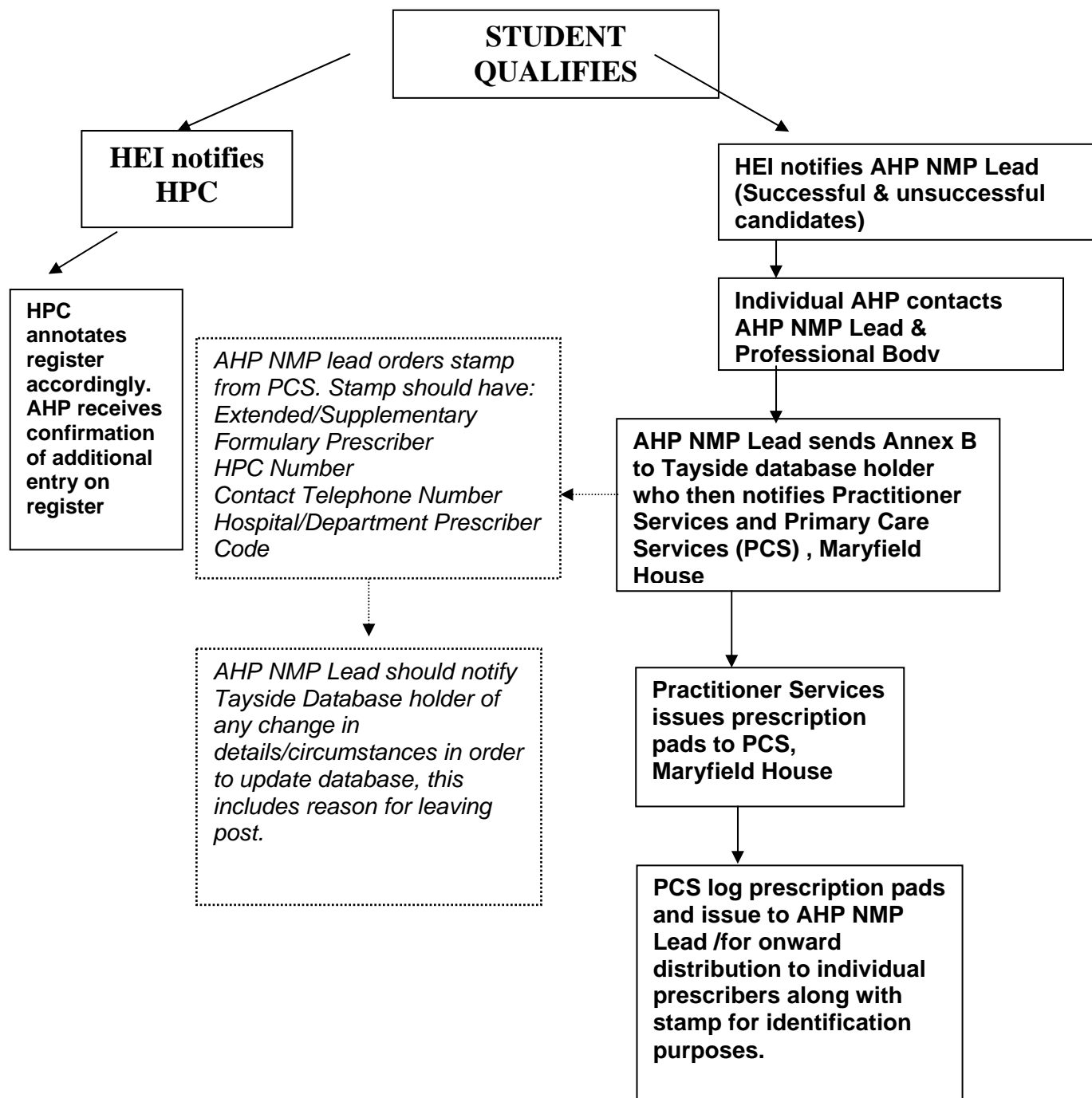
¹ Flowcharts may be subject to change, if in doubt contact Non-Medical Prescribing Lead

PHARMACIST PRESCRIBER in PRIMARY CARE¹

¹ Flowcharts may be subject to change, if in doubt contact Non-Medical Prescribing Lead

PHARMACIST PRESCRIBER IN SECONDARY CARE ¹

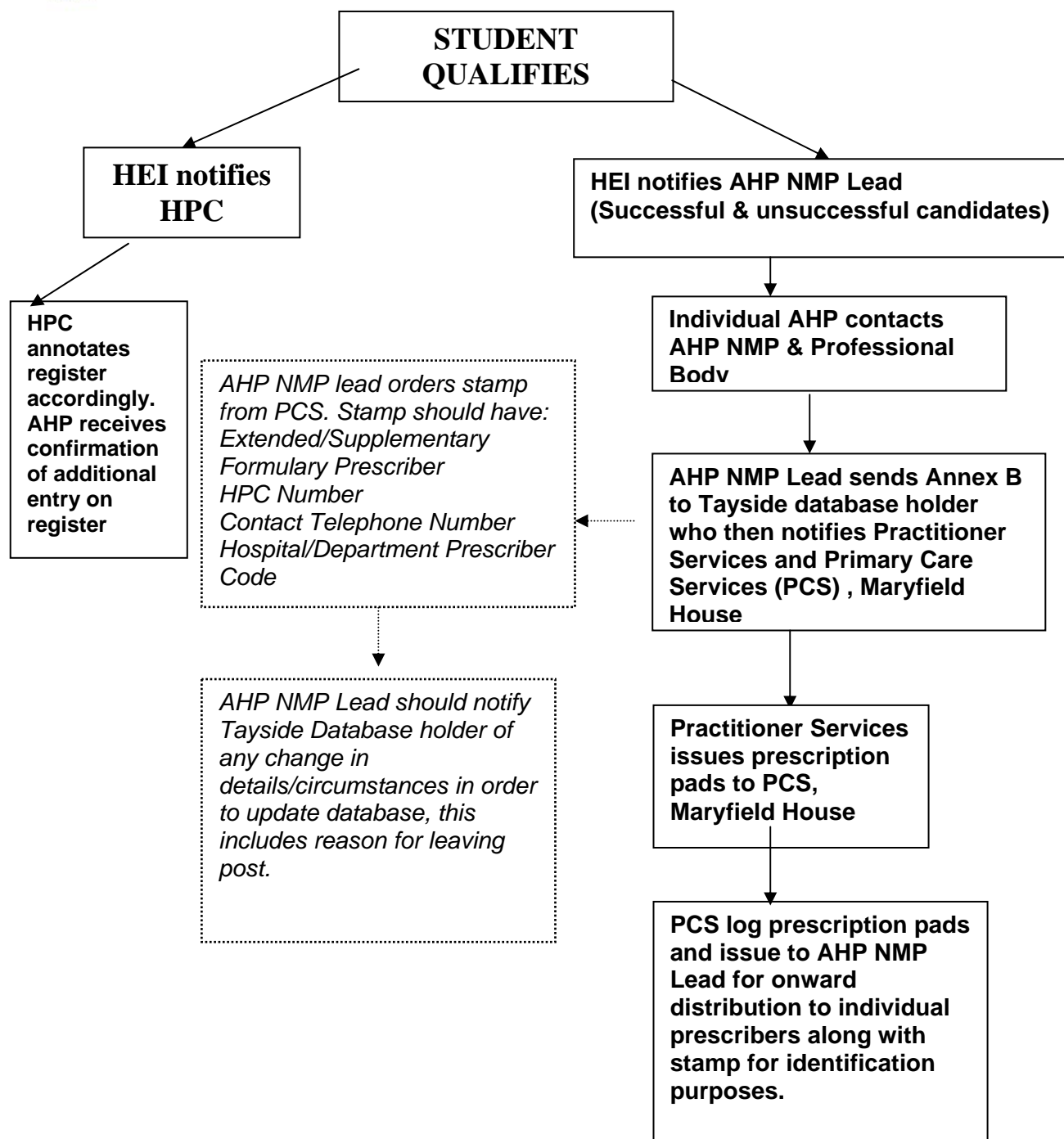
¹ Flowcharts may be subject to change, if in doubt contact Non-Medical Prescribing Lead

ALLIED HEALTH PROFESSIONS PRESCRIBER ¹

¹ Flowcharts may be subject to change, if in doubt contact Non-Medical Prescribing Lead



HOSPITAL BASED AHP PRESCRIBER¹



¹ Flowcharts may be subject to change, if in doubt contact Non-Medical Prescribing Lead

CLINICAL MANAGEMENT PLAN FOR:

PATIENT NAME:		CHI NUMBER:		DOB:	
ADR/sensitivities:		Process for reporting ADRs:			
Co-morbidities	Goals of therapy	Details of medicines that may be prescribed by SP	Monitoring	Circumstances for referral back to IP	Guidelines or protocols supporting CMP

Agreed by independent prescriber: (Sign & Print)	Date:	Agreed by supplementary prescriber: (Sign & Print)	Date:	Agreed with patient – date:	Date for implementation
--	-------	--	-------	-----------------------------	-------------------------

Frequency of review by independent prescriber:	Frequency of review by supplementary prescriber:	Joint review date / frequency	Shared record to be used by IP and SP
--	--	-------------------------------	---------------------------------------

ORDERING, SECURITY AND ISSUE OF PRESCRIPTION PADS

Ordering

Check with NMP Professional Lead for advice on ordering

Security and issue

The NMP Professional lead must follow the procedure for accessing prescription pads for non-medical prescribers.

- Check with professional register that NMP is registered with professional body.
- Apply for unique prescribing code from ISD using form ISD1 for nurses and ISD (P) 2 for pharmacists and AHPs.
- Confirm unique prescribing code and order prescription pads (GP10N/GP10P/HBPP/HPBN) (minimum of 5) from Practitioner Services Division. These prescription pads are then delivered to the practitioner's place of work, following authorisation by the Professional Lead.
- Security of prescription pads is the responsibility of the individual practitioner who must ensure their safekeeping in a locked environment with a record of the current prescription pad's serial numbers.
- NMPs in hospitals may use various methods to prescribe; for example ward order to be used for inpatients and discharge supplies only, internal hospital prescription form and HBPN/HBPP and Immediate Discharge letter.
- Prescriptions, which are currently provided for pharmacists in primary care, GP10P (5) are hand-written. To ensure an accurate record is kept the pharmacist then enters the prescription details electronically on the practice computer system.
- Computer generated prescriptions should be encouraged as this assists with governance and minimises risk.
- The employer has the responsibility to ensure that all prescription pads are returned from practitioners who have left employment.

Procedure to be followed in the event of loss of prescription forms or pads

- The loss or theft of prescription forms or pads should be reported to the professional lead and the GP or hospital designated manager.
- The professional lead should notify the Fraud Liaison Officer at Counter Fraud Services.
- The non-medical prescriber will be advised to write and sign all following prescriptions in red for a period of two months.
- The NHS Board will advise all pharmacies in their area and adjacent Boards with the name and address of the prescriber concerned.

This will normally be in writing within 24 hours with the exception of weekends.

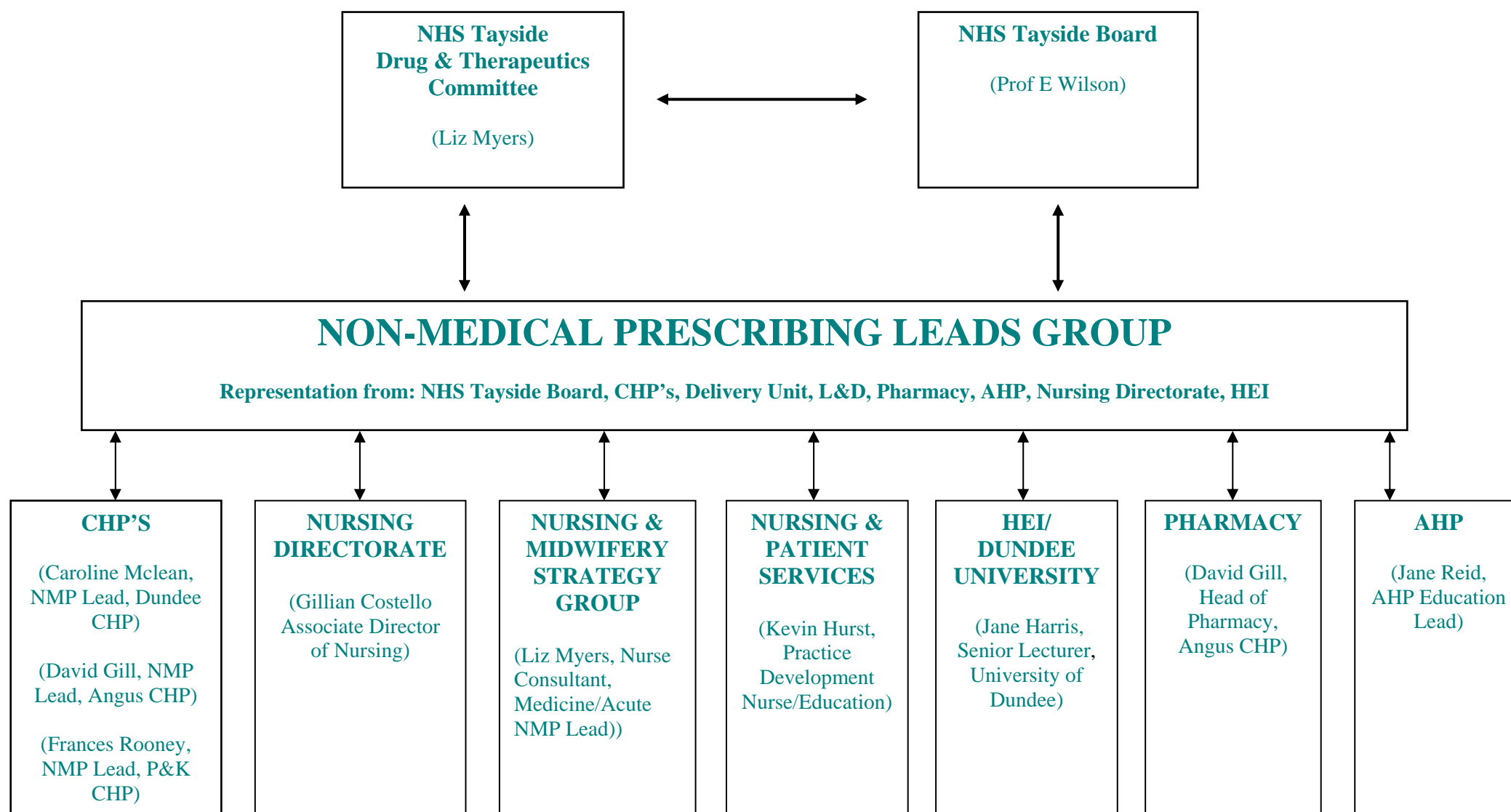
NON-MEDICAL PRESCRIBERS ANNUAL REVIEW/APPRAISAL

Name	
Type of Prescriber	
Professional Registration	
Area of Prescribing Practice	
Parameters of Prescribing role (e.g. BNF Chapters)	
Details of CPD	
Attendance of Peer Review / Clinical Supervision	
Check Security of pads (locked)	
Critical Incident / Near misses	
Active / Non-Active	
Date left NHS Tayside	
Action Plan Required	

- **Copy to NMP Personal Development file and Copy to NMP Lead**

NON MEDICAL PRESCRIBING LEADS GROUP 2010

COMMUNICATION REPORTING STRUCTURE



NHS TAYSIDE NMP PROFESSIONAL LEADS

<u>NHS TAYSIDE</u> Prof E Wilson - Chair, Non Medical Prescribing Leads Group Nurse Director NHS Tayside Board Chief Executives Department Kings Cross Dundee DD3 8EA Tel: 01382 424174 Email: elizabeth.wilson4@nhs.net	
<u>ANGUS CHP AND PHARMACY LEAD</u> David Gill - Head of Pharmacy Angus CHP Pharmacy Office St Margaret's House Orchard Loan Orchardbank Business Park Forfar Tel: 01307 474846 Email: david.gill@nhs.net	
<u>DUNDEE CHP</u> Caroline Mclean- Non Medical Prescribing Lead Westgate Health Centre Dundee Tel 01382647490 Email: cmclean@nhs.net	
<u>PERTH & KINROSS CHP</u> Frances Rooney- Head of Pharmacy Perth & Kinross CHP Offices Perth Royal Infirmary Perth Tel 01786475119 email: frances.rooney@nhs.net	
<u>ALLIED HEALTH PROFESSIONS</u> Jane Reid AHP NMP Lead AHP Directorate Trust Offices Dundee Royal Liff Hospital DUNDEE DD2 5NF Direct Dial 423065 Internal Extension: 24013 Email: jane.reid@nhs.net	
<u>DELIVERY UNIT</u> Dr. E. Myers, Acute Nurse Prescribing Lead Ninewells Hospital, DUNDEE. DD1 9SY Tel 01382 660111 (Ext 33649) Email: e.myers@nhs.net	Kevin Hurst Practice Development Nurse/Education Nursing & Patient Services Level 9, Ninewells Hospital DUNDEE DD1 9SY Tel 01382 660111 (Ext 2777) Email: kevin.hurst@nhs.net