

A Practical Guide to Effective Non Medical Prescribing in End of Life Care

For Current and Aspiring Non Medical Prescribers

Friday 15 April 2016 Hallam Conference Centre, London

10% card payments discount*
15% Group booking discount**



Chair and Speakers include:

Claire Henry

Chief Executive

The National Council for Palliative Care

Deborah Robertson

Consultant Editor

The Journal of Nurse Prescribing

Supporting Organisation



THE
NATIONAL
COUNCIL FOR
PALLIATIVE
CARE



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“Non-medical prescribers are saving the NHS in England an estimated annual £777m, which could be increased further by at least £270m a year if more GP practices were to employ them, according to a new report.” Nursing Times, 10th Dec 2015

“The way we care for dying people is a litmus test for the kind of society we are and for our health and care services. That’s why it’s essential that people have around the clock access to pain relief and symptom control.”
Simon Chapman, Director of Public and Parliamentary Engagement at Dying Matters and the National Council for Palliative Care

“People have watched their loved ones dying in pain or in an agitated state because their symptoms have been ineffectively or poorly managed... These cases show how pain, agitation and other distressing symptoms were not adequately controlled as people neared the end of their lives. This caused additional unnecessary suffering for the person who was dying, and also for their loved ones, who were by their bedside in their final days and hours. In many cases, this distress could have been avoided.”

The Parliamentary and Health Service Ombusman May 2015

“Everyone is telling us – from GPs, families and carers – that more needs to be done to improve access to specialist palliative care and pain control at home. ..“We know that effective pain management at home is an important factor that influences whether someone has a ‘good death’, and we only have one chance to get it right”
Imelda Redmond, Director of Policy and Public Affairs at Marie Curie

“NMP in a palliative care context may be one mechanism through which people can be supported to remain at home with well controlled symptoms at the end of life. For example, patients with cancer typically spend 65-80% of their last 6 months of life at home and adequate pain control is often hindered by poor access to effective timely analgesia. These patients often have multiple, rapidly changing symptoms requiring highly specialist management”
Non-Medical Prescribing in Palliative Care: A Regional Survey, Dr Lucy Ziegler University of Leeds 2015

Chaired by **Claire Henry, Chief Executive at the National Council for Palliative Care** this important national conference focuses on the important issue of Nurse/Non Medical Prescribing in End of Life Care. It is widely recognized that pain and symptom control at the end of life is not always optimal, the development of non medical/nurse prescribing has a key role in improving pain and symptom control for patients at the end of life. The conference, which includes national updates, extended in depth sessions and case studies will focus on developing your skills as a non medical/nurse prescriber in end of life care.

10.00 Chair's welcome: Non-Medical Prescribing: National Update

Claire Henry *Chief Executive* The National Council for Palliative Care

10.10 Non Medical Prescribing: National Update

Penny Franklin

Associate Professor
Plymouth University

- national developments in non medical prescribing
- developing confidence and competence in your ability to prescribe
- demonstrating compliance with the NMC Code for revalidation
- the benefits of non-medical prescribing in end of life care

10.40 Non-Medical Prescribing for Symptom Control in End of Life Care

Deborah Robertson

Consultant Editor, The Journal of Nurse Prescribing
Senior Lecturer & Programme Leader Non-medical Prescribing,
University of Chester

- non-medical prescribing for symptom control: current issues
- improving confidence in prescribing practice
- empowering nurses to prescribe in end of life care
- improving non medical prescribing practice
- supporting non medical prescribers: infrastructure needed to support the safe and effective development and implementation of Non Medical Prescribing
- developing advanced roles around non medical prescribing

11.10 Questions & answers, followed by coffee & exhibitions 11.20

11.45 EXTENDED SESSION: Non Medical Prescribing for Pain

Niamh Molloy

Pain Management Nurse
University Hospital Waterford

- pain management competencies
- developing, demonstrating and maintaining continued competence in Non Medical Prescribing for Pain
- developing your skills in providing a more effective pain management plan
- key principles in the assessment of pain
- ensuring a holistic patient focused approach

13.05 Questions & answers, followed by lunch & exhibitions 13.15

Case studies in practice

14.00 Controlled drugs and the use of drugs beyond product licence

Emily Wighton

Specialist Palliative Care Pharmacist
The Royal Marsden NHS Foundation Trust

- controlled drugs and non medical
- what are the issues
- the use of drugs beyond the product licence
- clinical supervision and assessment of competence
- our experience

14.30 Non-Medical prescribing for in-patient pain

Cath Miller

Director of Nursing
with **Catherine Malia**
Nurse Consultant
St Gemma's Hospice

- non-medical in a hospice setting: issues and benefits
- overcoming issues such as training required, engagement and support of primary care, expectations of the role, not wanting to de-skill doctors and difficulties in accessing prescription pads
- the benefits we have seen from non medical prescribing in St Gemma's Hospice

15.00 Non Medical Prescribing in the community setting

Robert Hammond

Team Leader
Central and North West London NHS Foundation Trust

- the role of non medical prescribing in enabling people to remain at home
- developing the prescribing role in community nursing
- our experience and case histories

15.30 Questions & answers, followed by lunch & exhibitions 15.50

16.00 Anticipatory Prescribing: 'Just in Case' boxes to support patients to die at home

Anticipatory prescribing can provide access to essential medications for symptom control at the end of life. Current best practice recommends that medications to manage pain, breathlessness, nausea and vomiting, and agitation are prescribed with authorisation for administration when it is recognised that someone is entering the final days of life. NICE 2015

Gail Linehan

Director of Care Services and Strategy Development
St Raphael's Hospice

- ensuring that there is a supply of drugs in the patient's home, combined with the apparatus needed to administer them, with the intention that they are available to an attending clinician for use after an appropriate clinical assessment
- difficult issues with anticipatory prescribing: managing risks
- the nurses role as a prescriber and administrator of anticipatory prescribing
- implications of the December 2015 NICE Guidance for anticipatory prescribing

16.30 Non Medical Prescribing in end of life care: Overcoming the Challenges

Margaret Gibbs

Specialist Senior Pharmacist
with **Jan Thirkettle**
Advanced Nurse Practitioner
St Christopher's Hospice

- why are nurses who are trained to prescribe in end of life care not prescribing?
- difficult issues in end of life care prescribing
- our experience: tips and advice from St Christophers

17.00 Questions & answers, followed close

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Download

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The PDF will be emailed out after the conference, please fill in the 'Your Details' section above, ensuring your email address is clear and the 'Payment' section..

For more information contact Healthcare Conferences UK on **01932 429933** or email jayne@hc-uk.org.uk

Venue

Hallam Conference Centre, 44 Hallam Street London, W1W 6JJ. A map of the venue will be sent with confirmation of your booking.

Date

Friday 15 April 2016

Conference Fee

- ☐ £365 + VAT (£438.00) for NHS, Social care, private healthcare organisations and universities.
☐ £300 + VAT (£360.00) for voluntary sector / charities.
☐ £495 + VAT (£594.00) for commercial organisations.

The fee includes lunch, refreshments and a copy of the conference handbook. VAT at 20%.

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