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Citation for final published version:

Black, Adam, Franklin, Bryony, Gage, Heather, Norton, Christine, Murrells, Trevor and Courtenay, Molly 2022. Independent nurse medication provision: a mixed method study assessing impact on patients' experience, processes, and costs in sexual health clinics. Journal of Advanced Nursing 78 (1), pp. 239-251.

10.1111/jan.15075

Publishers page: https://doi.org/10.1111/jan.15075

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Table A: Components and data sources

Perspective	Component	Nurse Prescribing	Patient Group Direction	Data source
		HEI course		Chaff acception points
		Senior staff supervision time	Not applicable	Staff questionnaires.
	Training and	Study time and back fill		Time diary to write and
	governance		Time to write and update PGDs	update Patient Group
NHS		Not applicable	Committee approval time	Directions
			Time for local training of nurses	Directions
		Medication delivery, error	Review of clinic records	
	Clinic processes	Consultation	Nurse diaries	
		Impact on workload	Nurse diaries, clinical records	
		Unplanned repeat consul	Review of clinic records	
Patients	Dationt ovneriones	Consultation	Dationt questionnaire	
Patients	Patient experience	Satisfaction with inform	Patient questionnaire	
Nurse (costs)	Training	Personal study time	e and loss of leisure	
	Training	Out-of-pocket expense	Staff quastiannaires	
Nurse (benefits)	Drosposts	Promotion prospec	Staff questionnaires	
	Prospects	Subjective benefi		

PGDs= patient group directions; NHS= National Health Service; HEI= Higher Education Institute

Table B: Medication analysis from clinical notes review

	Nui	rse prescribers		Patien	t group directio	ns	All	
Summary statistics	Medications given	Medications not given	Total	Medications given	Medications not given	Total	Total	
Number of presentations/ consultations	399	344 [†]	743	480	459	939	1682	
Number of individual drugs	620		620	737		737	1357	
Number of drugs per consultation	1.55		1.55	1.54		1.54	1.54	
Number of individual errors			879			965	1844	
Errors per presentation / consultation			1.18			1.03	1.10	
Madication provision arrays	Nurse p	rescribers (N=8	79)	Patient gro	Dath /0/ of total)			
Medication provision errors [‡]	Minor	Moderate	Severe	Minor	Moderate	Severe	Both (% of total)	
Drug interactions not documented	0	2	1	1	6	0	10 (0.5%)	
Inappropriate patient group direction use	0	0	0	34	29	0	63 (3.4%)	
Medication risk assessment	10	67	0	35	115	2	229 (12.4%)	
Prescription documentation omission	458	292	0	514	175	0	1,439 (78.0%)	
Under, over, wrong prescribing [‡]	21	27	1	18	36	0	103 (5.6%)	
TOTAL (% of all errors)	489 (55.6%)	388 (44.1%)	2 (0.2%)	602 (62.4%)	361 (37.4%)	2 (0.2%)	1844 (100.0%)	

^{† 18} consultations taken from nurse diaries [‡]103 related to under, over and wrong prescribing. Nurse prescribers, 24 drugs were considered wrong or overprescribed; 25 instances where drugs were not prescribed but deemed warranted (total cost £324). Patient group direction users, 35 drugs were considered wrong or overprescribed; 19 drugs were not prescribed and deemed warranted (total cost £289).

Table C: Nurses' motivation for independently providing medications

Training motivation	Nurse prescr	ibers (n=26)	Patient group di	rections (n=35)
Training motivation	n	%	n	%
Enhance clinical skills	24	92.3	29	82.9
Improve patient experience	24	92.3	28	80.0
Expectations of employer	16	61.5	30	85.7
Increase knowledge of medications / pharmacology	20	76.9	22	62.9
Facilitate service delivery	20	76.9	26	74.3
Improve job satisfaction	24	92.3	29	82.9
Remove existing restrictions to medication delivery	21	80.8	24	68.6
Obtain academic credits	10	38.5	N/	'A

Table D: Summary of findings

Perspective	Item	Nurse prescribers	Patient Group Directions	Balance / comment
	Resource implications and costs for local services/ employers Service level	Local employers pay fees to enable nurses to attend university courses to gain a nurse prescribing qualification. Service senior staff provide up to 12 days of on-the-job supervision to nurses in training. 1.55 medications prescribed per	Local employers design, approve and implement patient group directions for individual medications, including training of local nurses. Patient group directions are revalidated every three years. 1.54 medications prescribed per	Local services incur costs when designing and implementing patient group directions and supporting nurses to undertake nurse prescribing courses. Once trained, both patient group direction users and nurse prescribers provide medications to large numbers of patients over many years. Unlike nurse prescribers, the scope of practice of patient group directions users is limited. Patient group direction users had higher proportion of inappropriate
NHS: costs and	outcomes	consultation; 96.1% appropriateness; 96.0% safety. 1.18 errors per consultation; 55.6% minor.	consultation; 94.0% appropriateness; 99.7% safety. 1.03 errors per consultation; 62.4% minor.	consultations (p<0.001), but a lower error rate (p=0.001). No significant difference in safety (high for both groups).
outcomes for services		Mean (SD) consultation durations (minutes): overall 24.9 (12.9); new vs follow-up: 27.3 (13.0) vs 19.6 (10.8); when medication given vs not given: 25.7 (12.7) vs. 23.3 (13.1).	Mean (SD) consultation durations (minutes): overall: 22.8 (13.9); new vs follow-up 25.7 (15.1) vs 19.4 (12.0); when medication given vs not given: 23.3 (14.2) vs. 22.1 (13.3).	Being a new (not follow up) consultation and providing medications added to consultation length for both groups of nurses but no difference between nurse prescribers and patient group direction users.
		Nurse prescribers sought advice from other health professionals in 13% of consultations, mean 11 minutes	Patient group direction users sought advice from other health professionals in 26% of consultations, mean 8 minutes	Nurse prescribers sought support from colleagues less than patient group direction users but for longer durations when they did.
		19.5% unplanned re-consultation rate; none judged potentially unavoidable	17.1% unplanned re-consultation rate; none judged potentially unavoidable	Unplanned re-consultation rates of patient of nurse prescribers and patient group direction users were similar and related to: new clinical issues/ positive test (50%), symptom exacerbations / medication side effects (29%), behaviour (17%).
Patients	Patient level outcomes	Over 96% satisfaction with nurse consultation.	Over 96% satisfaction with nurse consultation.	No differences were observed between patients of nurse prescribers and patients of patient group direction users in satisfaction with consultations or in information provision related to medications.
		Mean score of 13.3 (out of 16) in satisfaction with information around medications	Mean score of 13.5 (out of 16) in satisfaction with information around medications	
Nurses	Training costs	Nurses spent an average of 26 days of their own time for studying and £32 on travel and materials costs	Training in patient group directions incurred virtually no personal time or expenditure for most nurses	Nurses undertaking university prescribing courses reported giving up leisure time to study and incurring small out-of-pocket expenditures on travel and books, but they were more likely to be employed in more senior positions with higher remuneration than patient group direction
	Prospects	70% of nurse prescribers were salary bands 7 or 8.	83% of nurses using patient group directions were salary bands 5 or 6	users. Nurse prescribers were motivated by the aims of enhancing the patient experience and improving their clinical skills and job satisfaction. Patient group direction users are more likely to be involved in prescribing in response to an expectation by their employer.

SUPPLEMENTARY TABLES

Supplementary Table 1: Clinical supervision during training reported by nurse prescribers responding to the questionnaire

Participant	Designat	ed Medical Practiti	oner (n=26) (7.5hc	our days)	Othe	r supervision (n=1	4 from the 26 respo	ondents) (7.5 hour d	ays)	Overall clinical
(n=26)	Consultant	Associate Specialist	Registrar	Total	Associate Specialist	Registrar	Nurse Practitioner	Pharmacist	Total	supervision
1	5			5						5
2	11			11						11
3	8			8			✓			8+
4	4.5			4.5				1.5	1.5	6
5	4.5			4.5						4.5
6	8			8						8
7	8			8						8
8	11			11		✓				11+
9			8	8						8
10			11	11						11
11	11			11						11
12	11			11			✓	✓		11+
13	2			2	1.5				1.5	3.5
14	2			2						2
15			8	8						8
16	8			8		2.7	3		5.7	13.7
17			2	2			1		1	3
18		5		5						5
19	2			2						2
20	11			11						11
21	5			5		1	2	1	4	9
22	5			5			1.5		1.5	6.5
23	5			5						5
24		✓		N/A						N/A
25	✓			N/A		✓	✓		N/A	N/A
26	✓			N/A						N/A

^{✓ =} Support from professional group obtained, but no duration reported by participants. + = time on top of this entry, but no additional duration provided by respondent. N/A= unable to ascertain duration.

Supplementary Table 2: Hours and cost of senior staff supervision time during nurse prescriber training, as reported by nurse questionnaires

		Amount of clinical supervision provided during nurse prescribing training where a duration was provided (n=23/26, 88.5%)												
Measure [†]	Desi	gnated Medical F	Practitioner (n=23	3/26)	0	Other supervision (n=10/14 from the 26 respondents)								
ivicasa: c	Consultant	Associate Specialist	Registrar	Total ^{>}	Associate Specialist	Registrar	Nurse Practitioner	Pharmacist	Total [¶]	Overall clinical supervision total				
Mean (days)	6.8	5.0	7.3	6.8	1.5	1.9	1.9	1.3	2.5	7.4				
SD	3.3	0.0	3.8	3.3	0.0	1.2	0.9	0.4	1.9	3.3				
Range	2 to 11§	5	2 to 11 [§]	2 to 11	1.5	1 to 2.7	1 to 3	1 to 1.5	1 to 5.7	1 to 13.7§				
Unit cost (/day) [‡]	£1,012.50	£960.00	£442.50	£904.86 (221.84)	£960.00	£442.50	£397.50	£465.00	£486.18 (180.43)	£863.71 (251.00)				
Mean cost	£6,885.00	£4,800.00	£3,230.25	£6,153.05	£1,440.00	£840.75	£755.25	£604.50	£1,215.45	£6,391.45				

†Missing durations entries (n=3/26) not included in this dataset. ‡Cost calculations: daily cost = [hourly cost] x7.5, mean costs= unit costs/day x total mean supervised days for each section. Hourly costs: Cost of specialist training support was obtained from 'Hospital-based health care staff' in Curtis & Burns (2016); page 191 for doctors: consultant doctor £135/hour; registrar £59/hour; associate specialist £128/hour. Page 188 for nurse practitioner band 7 nurse £53/hour; pharmacist Band 8 £62/hour (pharmacist was considered as Band 8 hospital nurse). §where range given mid-point used: 0 to 3 was considered 2 days; 10 or over considered 11 days (full DMP supervision is 12 days; this range considered as 10-12). Overall supervision includes DMP time and additional supervision so overall range increases. ¶Total and total costs are weighted based on full data set (i.e. not a mean of means). SD= standard deviation

Supplementary Table 3: Study time (days) during nurse prescriber training reported by nurse respondents to questionnaire

Salary band	Bosnonsos (n)	Units (£) [†]	Study days							
	Responses (n)	Units (£)	Measure	Range	Mean [†]	Standard Deviation	Total			
6	6 7	£44/hr	n	3 to 26	16.7	9.4	117			
0		£330/day	£	£990 to £8,580	£5,511.00	n/a	£38,610.00			
7	7 12	£53/hr	n	1 to 31	19.6	9.2	235			
/		£397.50/day	£	£397.50 to £12,322.50	£7,791.00	n/a	£93,412.50			
8	F	£62/hr	n	26	26	0	130			
8	5	£465.50/day	£	£12,103	£12,103.00	n/a	£60,515.00			
All assessment of the	2.4	£394.50/day	n	1 to 31	20.1	8.6	482			
All reported [‡]	24		£	£394.50 to £12,229.50	£7,929.45	n/a	£192,537.50			

[†]Day cost= hourly costx7.5. Costs were based on from 'Hospital-based health care staff' in Curtis & Burns (2016); page 188 for Band 5 nurse £35/hour, Band 6 nurse £44/hour, Band 7 £53/hour, Band 8 nurse £62/hour. ‡All means calculated from full relevant dataset (i.e. not based on mean of means).

Supplementary Table 4: Time to write and obtain committee approval for patient group directions based on observation log

D	Write patient	group direction	Update patient group direction [†]		
Resource	Hours	Hours Cost [‡]		Cost [‡]	
Time to write patient group directions					
Primary patient group direction author (Band 8 nurse/ researcher)	5.1	£316.20	1.3	£80.60	
Consultant doctor	0.8	£108.00	0.1	£13.50	
Combined resource from department's Band 8 team (2x nurses)	1.8	£111.60	0.2	£12.40	
Total	7.8	£535.80	1.7	£106.50	
Committee time to approve patient group directions					
Lead pharmacist (Band 8)	0.5	£31.00	0.2	£12.40	
Lead directorate nurse (Band 9)	0.5	£61.00	0.2	£24.40	
Lead directorate clinician (consultant doctor)	0.5	£67.50	0.2	£27.00	
Non-medical prescribing committee (x7 Band 8 nurses)	3.5	£217.00	1.7	£105.40	
Total	5.0	£376.50	2.3	£169.20	
Overall total to write and approve	13.8	£912.30	4.0	£275.70	

[†]The total time to update a suite of nine patient group directions was divided by nine to give an approximate time to update each individual patient group direction. ‡Duration to write patient group directions were approximations based on the researcher's log or estimations. Costs were based on from 'Hospital-based health care staff' in Curtis & Burns (2016); page 188 for Band 8 nurse £62/hour (and pharmacist was considered as Band 8 hospital nurse), and Band 9 nurse £122/hour, page 191 for doctors £135/hour.

Supplementary Table 5: Formal Patient Group Direction training resources

	Responses	Number of PGD trainees in group					Training hours					
Category of Patient Group Direction training reported [†]	PGD teaching (n=29)		Responses		Range	Mean	SD	Responses		Donne (bus)	Mean	CD.
	n	%	n	%	(persons)	ivieali	30	n	%	Range (hrs)	(hrs)	SD
Class teaching	23	79.3	14	60.9	1 to 30	10.9	7.8	14	60.9	0.5 to 30	5.2	8.6
Question & answer	20	69.0	7	35.0	1 to 15	9.1	4.7	5	25.0	0.5 to 8	2.7	3.0
Workshops	6	20.7	3	50.0	5 to 13	8.5	3.8	2	33.3	1 to 2	1.5	0.7
Self-directed learning	20	69.0						7	35.0	2.5 to 15	6.9	5.1
e-learning	10	34.5						4	40.0	1 to 5	2.1	1.9
One-to-one training	11	37.9						4	36.4	1 to 20	7.0	8.8

[†]Respondents may have had multiple methods of patient group direction training. Calculations based on completed entries in the staff questionnaires; mid-points used when a range given. Skewed results as a large amount of training involved lone training or classroom teaching with multiple students (i.e. e-learning 10 respondents reported lone personal training, whereas two respondents detailed classroom teaching with 30 students undertaking a contraception course which involved patient group directions as one part of a larger syllabus). Interquartile range not used due to small sample size and need to capture all variations of patient group directions training. Trainers' costs not included, or time taken to design training packages (as unable to calculate from data collected). PGD= patient group direction; SD= standard Deviation

Supplementary Table 6: Professional study time (hours) during training reported by patient group direction users responding to questionnaire

Band	Responses	Units (£)†	Study hours (hours)							
(n)	Units (£)	Measure	Range	Mean [†]	SD	Median	Mode	Total		
F	4	C2E /br	n	0 to 15	4.3	7.2	1	0	17	
5 4	4	£35/hr	£	£0 to £525	£150.50	£252.00	£35.00	£0.00	£595.00	
6	21	£44/hr	n	0 to 11.3	2.1	2.9	0	0	44.3	
8	21		£	£0 to £497.20	£92.40	£127.60	£0.00	£0.00	£1949.20	
7	5	5 652 /h	n	0 to 85.2	26	38.4	0	0	130.2	
,	5	£53/hr	£	£0 to £4,515.60	£1,378.00	£2,035.20	£0.00	£0.00	£6,900.60	
All	20	£44.30/hr	n	0 to 85.2	6.4	17.2	0	0	191.5	
reported [‡]	30		£	£0 to £3,774.36	£283.52	£761.96	£0.00	£0.00	£8,483.45	

[†] Costs were based on from 'Hospital-based health care staff' in Curtis & Burns (2016); page 188 for Band 5 nurse £35/hour, Band 6 nurse £44/hour, Band 7 £53/hour. This includes data from a university contraception training module that was not specific to patient group directions but did facilitate delivery of contraception through patient group directions. ‡All results calculated and weighted from full relevant dataset (i.e. not based on mean of means). SD= standard deviation.