

Evaluation of Physiotherapist and Podiatrist Independent Prescribing, Mixing of Medicines and Prescribing of Controlled Drugs: **LAY Summary**

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Summary

Changes to prescribing powers of physiotherapists and podiatrists in 2013 means they are now, as doctors do, able to prescribe medicines independently. Legally they can prescribe any medicine; professionally they must stick to areas they know best. In order to understand the effect of this change on care provided by physiotherapist and podiatrist independent prescribers, a study was commissioned.

In order to understand the different ways that physiotherapists and podiatrists use prescribing in practice we looked at previous studies that had been published. A survey was used to explore how and where physiotherapist and podiatrist independent prescribing is being put in to action. From the survey, and our contacts we chose 14 different hospital and community based clinics around England and put physiotherapist and podiatrist consultations, and prescriptions under the microscope.

We compared services provided by physiotherapists and podiatrists who are qualified prescribe to those provided by physiotherapists and podiatrists who are not qualified to prescribe. This helped us assess whether there are any differences in the quality of care or cost of services. We asked physiotherapists and podiatrists about their experiences and views on training, what makes their job difficult and spoke to other professionals working in the same place. Patients were also asked about their experience.

We found physiotherapist and podiatrist independent prescribers work within either a single or multi-professional service, and use various methods to provide medicines to patients. Physiotherapist and podiatrist independent prescribing is acceptable to most people, with many benefits including satisfaction with information provided and improved access to services. At this early stage, there is some evidence to suggest that care is slightly more costly, but this information is limited and would need to be explored in more detail.

Overall training for the role was satisfactory. No safety worries were found, but improvements could be made to prescription writing, medicines information communication, and side effects, as is the case for all prescribers.

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