

Declaration from proposed Designated Prescribing Practitioner (DPP)

(also known as HCPC practice educator and NMC practice assessor)*

Proposed DPP: Please complete this declaration, which is aligned to The Competency Framework for Designated Prescribing.

Practitioners, in relation to the proposed DPP role. The applicant will upload a copy to their online application for review by the admissions team.

Name of Applicant:		Yes	No
Knowledge/Skills	I am an experienced prescriber in a patient-facing role with active prescribing competence applicable to the areas in which I will be supervising	☐	☐
	I am an active prescriber in a patient-facing role, consulting with patients and making prescribing decisions based on clinical and diagnostic assessments, in the applicant's scope of practice	☐	☐
	I confirm I have up-to-date patient-facing, clinical and diagnostic skills in the applicant's scope of practice	☐	☐
	I regularly reflect and audit my prescribing practice to identify my developmental needs (including recording continuing professional development (CPD) on the knowledge and skills to support my role as a DPP)	☐	☐
	I confirm I meet all the competencies in the Royal College of Pharmacy Competency Framework for all Prescribers	☐	☐
	I have experience of conducting assessment of trainees in clinical practice	☐	☐
Partnerships	I agree to support and supervise the applicant in the workplace, providing feedback on their progress towards, and achievement of the relevant knowledge, skills and behaviours	☐	☐
	I confirm the competence of the applicant (<i>for nurse trainees this includes the practice supervisor</i>)	☐	☐
	I agree to facilitate multidisciplinary team approaches to training	☐	☐
	I agree to supervise the applicant for 33% to 50% of their hours of learning in practice	☐	☐
	I will ensure that the period of supervised learning in practice is normally completed within a six to ten-month period from Commencement of the programme	☐	☐
Governance	I have been provided with information previously, or by the applicant, about the role	☐	☐
	I have the support of my employing organisation to act in this role	☐	☐
	Whilst supporting this applicant, how many other prescribing students will you be supporting as a DPP (<i>include nurse prescribing trainees you are supporting as a practice supervisor</i>)	☐	☐
	I work in the same employing organisation as the applicant	☐	☐
	In line with my professional code of conduct I agree to be honest and objective in assessing performance and writing references	☐	☐
	In line with my professional code of conduct I agree to raise concerns about the conduct and competence of others	☐	☐
	I am aware that if at any time I feel I do not have the competence or confidence to continue in this role I should discuss this urgently with the programme team	☐	☐
Experience	I agree to undertake a University induction for this programme	☐	☐
	I have previously undertaken the role of practice supervisor for a nurse prescribing trainee	☐	☐
	I have previously undertaken the role of Designated Medical Practitioner (DMP) or Designated Prescribing Practitioner (DPP) for a prescribing trainee	☐	☐

Educational Experience	Please choose one of these options (see overleaf for more details)	1. I have been a DPP at the University of Reading in the past two years or		☐	☐
		2. I have annotation as a General Medical Council recognised trainer or		☐	☐
		3. I have attached evidence, or will submit evidence during induction, of my previous training in workplace-based learning (see overleaf for examples) or		☐	☐
		4. I have attached evidence of my experiential experience in supporting workplace-based learning (see DPP information sheet for examples) or		☐	☐
		5. I will complete workplace-based learning training during induction		☐	☐
Contact Details	Name:		Healthcare Profession:		
	Employer:		Registration Number:		
	Work email address:				
	Signature:		Date:		

