

NMOP Heart Failure Nurse Specialist Prescribing Pilot Service

Overview

The Heart Failure Nurse Specialist (HFNS) Prescribing Pilot was delivered in Northern Ireland as part of the **Non-Medical Optimisation Programme (NMOP)**.

The pilot enabled **Heart Failure Nurse Specialist independent prescribers** to prescribe medicines using **HS21 prescription forms**, supported by **electronic treatment advice notes (eTAN)** within agreed clinical pathways.

The pilot aimed to:

- Improve **timely access to medicines**
- Reduce duplication within prescribing pathways
- Reduce the need for **GP contact and follow-up** associated with prescribing decisions

Project Overview

The pilot operated between **mid-November 2020 and October 2021** across:

- **Northern Health and Social Care Trust**
- **Western Health and Social Care Trust**
- **Belfast Health and Social Care Trust**

Prescriptions issued during routine clinical care were:

- Issued using **HS21 prescription forms**
- Dispensed via **community pharmacies**
- Supported by **eTAN** to inform GP practices and maintain continuity of care

Key Outcomes

Prescribing Activity and Pathway Change

- At baseline, **no HS21 prescribing** was in place
- By the final audit period, **HS21 prescriptions accounted for 14% (10/69) of medication changes**
- **Telephone contact with GP practices reduced from 25% to 3% of consultations**, indicating reduced reliance on GP input
- There was also a reduction in the number of mechanisms used to initiate prescribing, improving efficiency
- The overall **volume of prescribing activity changed little**, but **how prescribing was delivered became more efficient**.

Access and Timeliness of Care

- The number of prescribing pathway steps reduced from **9 to 7 steps**
- Time to access medication reduced from **4–7 days to 1–4 days**
- Overall, pathways became more streamlined and efficient

Patient Experience

Patient feedback demonstrated:

- **100% satisfaction** with consultations
- High levels of understanding of:
 - Medication purpose (**96%**)
 - How to take medication (**96%**)
 - Risks and side effects (**93%**)
- Reported benefits included:
 - Reduced need for GP appointments (46%)
 - Time savings (61%)
 - Ability to receive treatment in one consultation (82%)

Clinical Practice and Governance

The evaluation identified:

- Strong and effective **governance arrangements**
- Effective use of **eTAN** to support communication with GP practices
- **Very high formulary compliance**, with only **3 non-formulary items out of 150 prescribed**
- **No safety concerns** identified during the pilot

Achievement of Pilot Objectives

The pilot demonstrated that HFNS prescribing within defined pathways can:

- Improve access to medicines
- Reduce duplication in prescribing pathways
- Reduce the need for GP contact and follow-up
- Improve efficiency by reducing steps and mechanisms in prescribing pathways

While system-wide impact was not formally quantified, the evaluation confirmed **clear improvements within pilot pathways**.

Partners Involved

The pilot was delivered in partnership with:

- **Medicines Optimisation Innovation Centre (MOIC)** – evaluation
- **Northern Health and Social Care Trust**
- **Western Health and Social Care Trust**
- **Belfast Health and Social Care Trust**
- **Community pharmacies across Northern Ireland**

Pilot Duration

Mid-November 2020 to October 2021