



Examining the impact of nonmedical prescribing on the role identity of physiotherapists – A mixed methods study

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Glossary

Non-medical prescribing: The prescribing of medicines by healthcare professionals other than Doctors or Dentists. There are two main formats:

Supplementary prescribing: a tripartite agreement between a Doctor or Dentist, a supplementary prescriber and a patient.

Independent prescribing: responsibility and accountability for the assessment of patients with undiagnosed and diagnosed conditions and for decisions about the clinical management required, including prescribing.

Thought leaders: Leaders in the development of NMP, NHS England, University Lecturers, NMP leads.

Background

1. Physiotherapists have been able to train as non-medical prescribers since 2006
2. Since 2012 they have been able to train as Independent Prescribers
3. Despite this only 3% of physiotherapists currently are prescribers. Why?
4. Literature search reveals gap in understanding of role identity for physiotherapy.....[Research Gap]

Aims

1. Explore what the role identity of physiotherapy is from a range of perspectives
2. Explore what happens when physiotherapists become prescribers
3. Examine impact of prescribing on role identity at range of levels including

- a) impact on patients including patient care
- b) Impact on pre registration education
- c) Impact on scope of practice

Mixed Methods typology

Exploratory Sequential Model

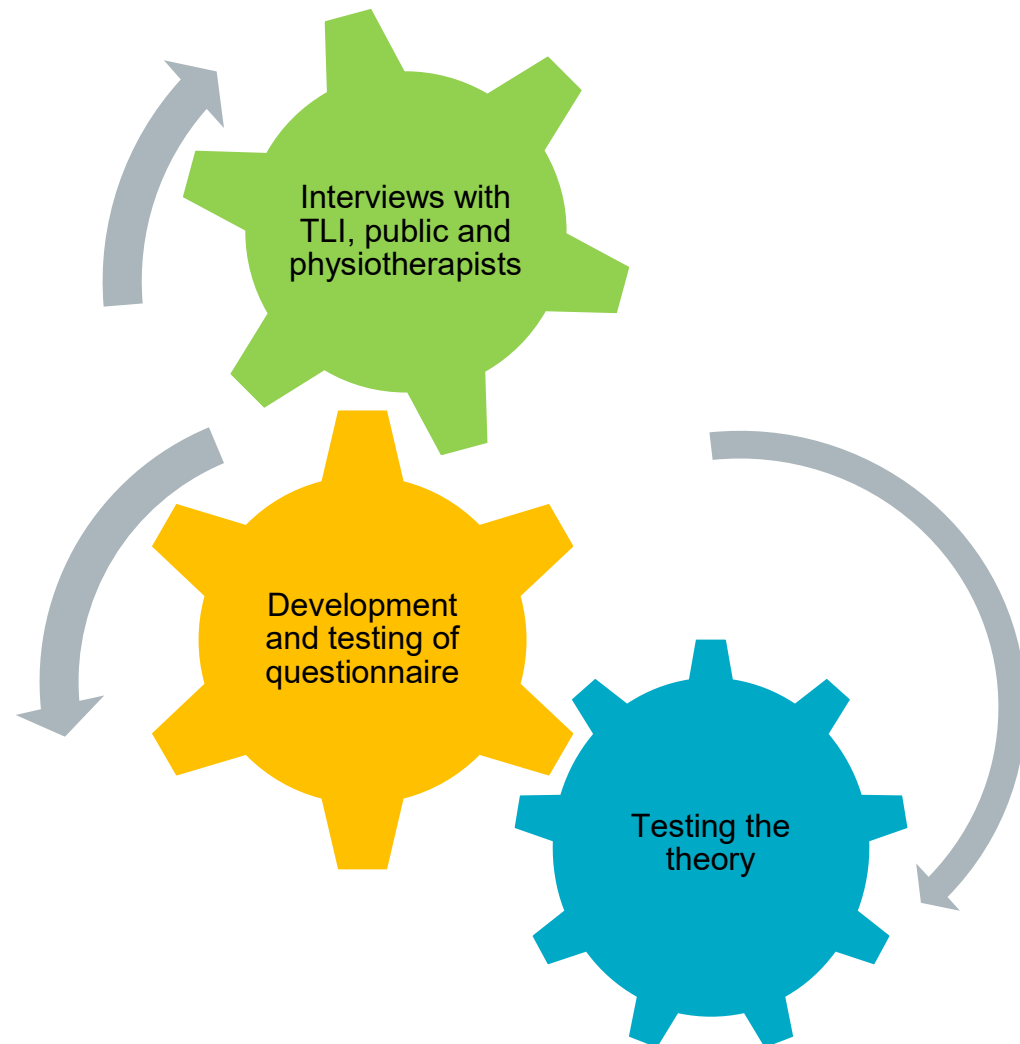


Methodology – Mixed Methods

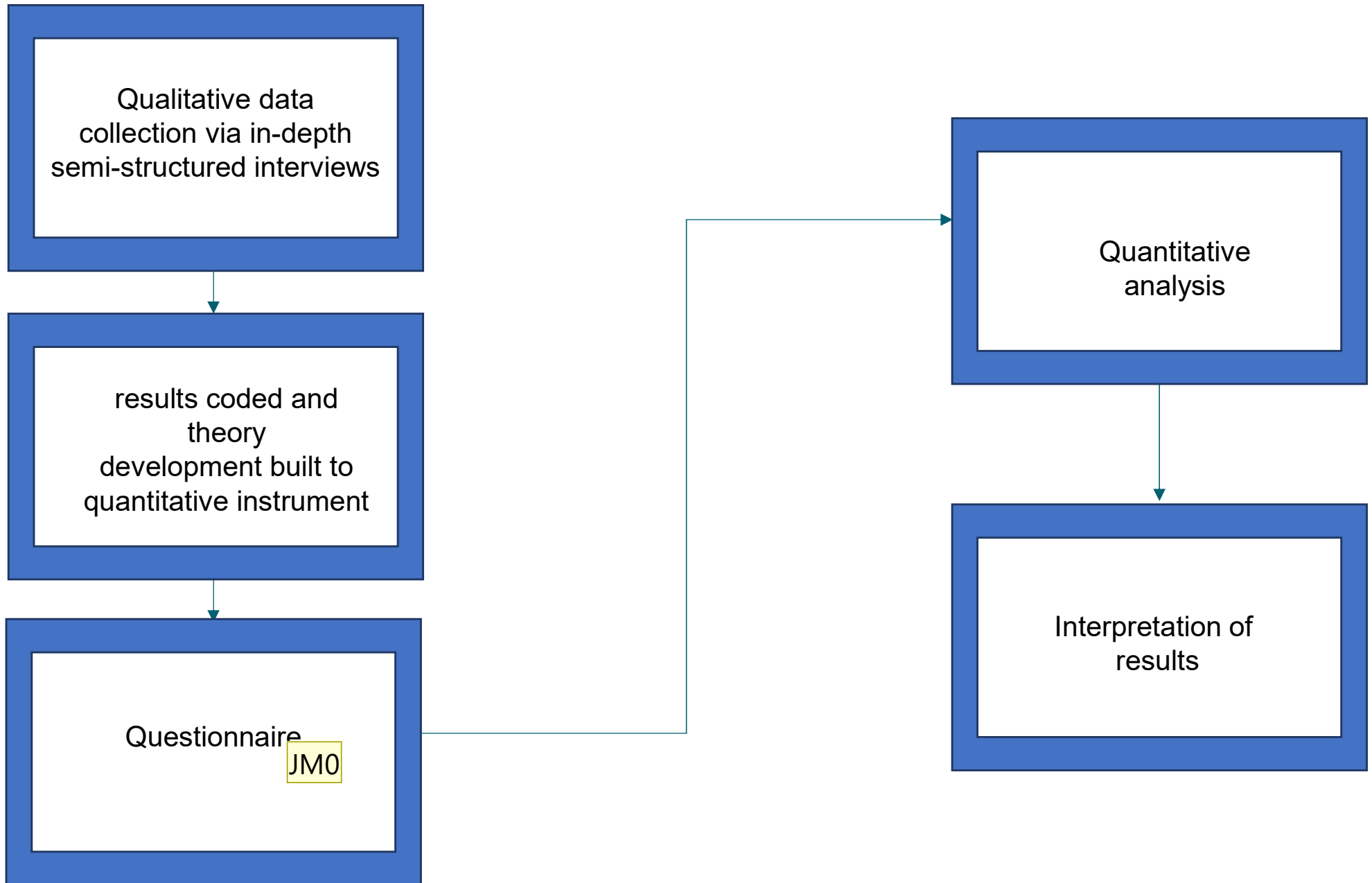
Theory
Generation –
Phase 1

Questionnaire
development
– Phase 2

Theory
Testing –
Phase 3



Research Design



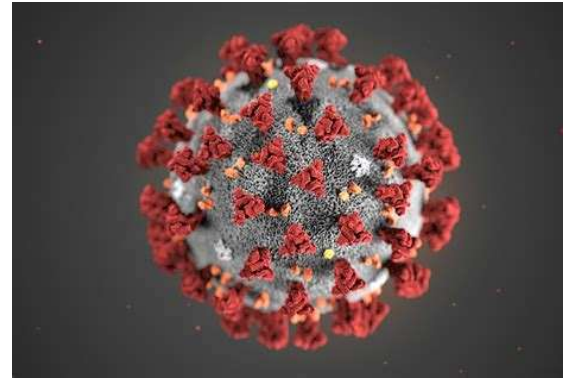
Slide 7

JM0

Needs a bit of tidying up - centre of the box

Julie Macinnes, 2022-01-31T16:08:44.834

Phase 1



1. Interviews with Thought leaders and Influencers
2. Interviews with members of the public
3. Interviews with physiotherapists (prescribers and non prescribers)

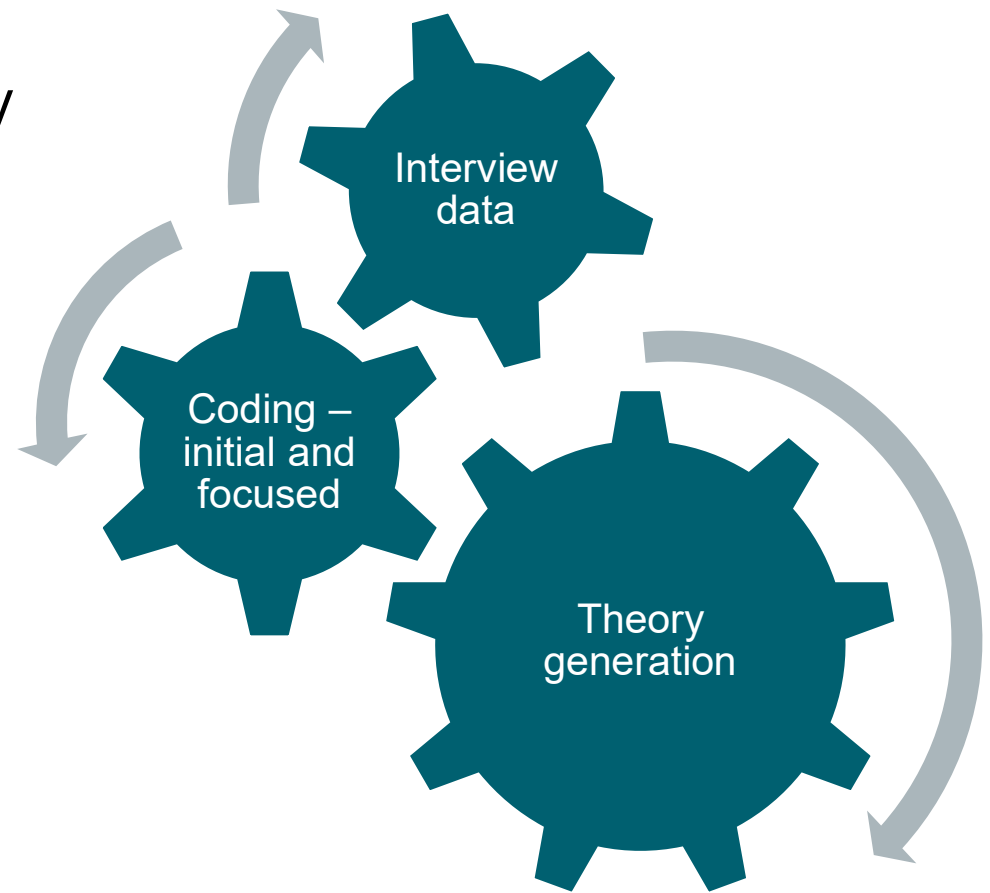


Phase 1

Methodology of choice –
Constructivist Grounded Theory
– (Charmaz 2014)

Application of constant
comparison of data

Aiming to develop theory of
what happens in role identity



Phase 2

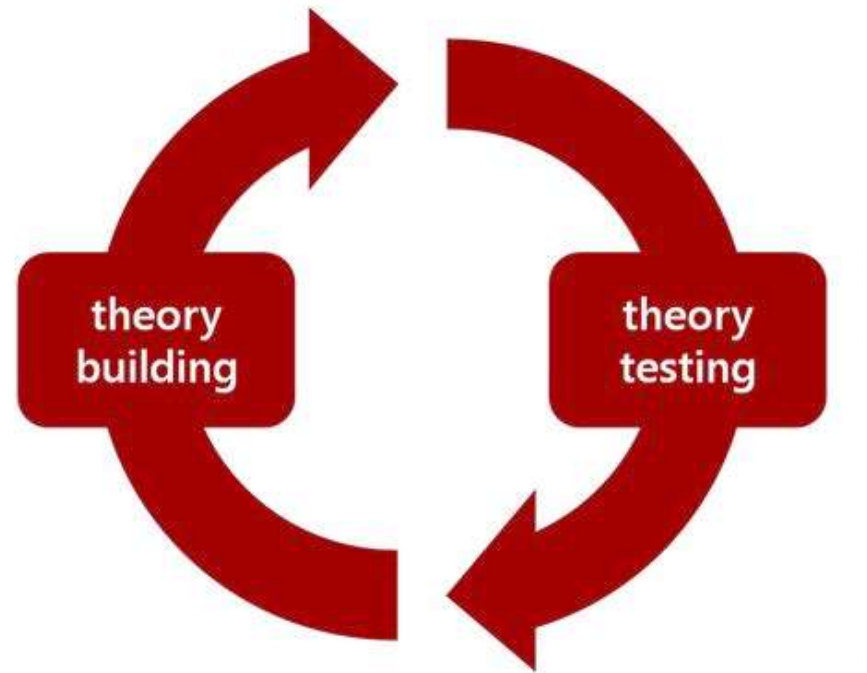
- Questionnaire Development
- Critical feedback via expert panel
- Questionnaire validation with Cognitive interviews of random sample of physiotherapists from phase 1

Phase 3

Testing the theory.

Questionnaire

Descriptive/Inferential
Statistics.



Results phase 1

Analysis with NVivo

The screenshot displays the NVivo software interface. The top menu bar includes options like File, Edit, Home, Import, Create, Explore, Share, Modules, Layout, View, Window, and Help. Below this is a toolbar with icons for Clipboard, Item, Organize, Visualize, Code, Autocode, Uncode, Code In Vivo, Spread Coding, Case Classification, File Classification, and Workspace. A search bar is located in the top right corner.

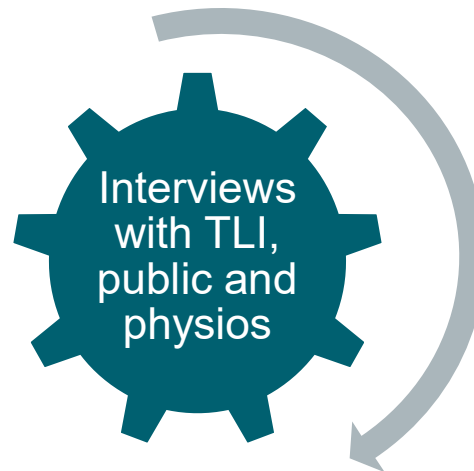
On the left side, a list of interview transcripts is shown, with 'Physio Interview 13' selected. The central pane displays the text of this interview, which includes several paragraphs of dialogue between a patient (P) and a therapist (I). The right-hand pane, titled 'CODE STRIPES', shows a list of themes or codes that have been applied to the text. These themes include:

- undergraduate knowledge
- changing practice
- public awareness
- scope expansion
- Career choice influencing factors
- developing trust
- Representing physiotherapy
- attitudes to prescribing by physiotherapists
- prescribing by junior staff
- which model – medical vs rehab
- changing role identity
- working in new ways (FCP – Covid impacts)
- Coding Density
- part of the healthcare team

The bottom status bar indicates '1 item selected' and shows the file path: Data > Files > Phase 1 > Physiotherapist interviews > Interviews Physiotherapists > Physio Interview 13.

Analysis - Methods

Constant Comparison ↔ Memoing



Initial coding → Focused coding → Categories

Excerpt of a code book

Name	Files	References
Private Practice JM0	3	7
professional domains	2	13
professional identity issues + or -	10	121
public awareness	12	64
resistance	9	27
risk	2	11
scope expansion	6	16
undergraduate education	11	43
USP identity	3	28
which model - medical vs rehab	3	18
workforce development	9	20

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JMO

This column is a bit redundant - can an example of a description be added?

Julie Macinnes, 2022-01-31T16:10:15.623

Excerpt code book 2

Name	Description	Files	References
adapting professional identity		16	138
Advanced Practice		20	58
attitudes to prescribing by physiotherapists		19	74
awareness of NMP		21	28
being accountable		2	3
being affected by age		2	3
being prescriber ready		18	19
beyond MSK		14	15
breaking trust		1	2
centering the patient		1	3
changing practice		13	25
changing undergraduate education		16	48
concordance		1	2
coping with change		1	1
developing the workforce		11	23
evaluating vision		14	78
exercise		10	11
expectation of improvement		3	3
finance		1	1
frustrations		12	51
imaging physiotherapy		18	46
Impact of prescribing on societal drivers		5	18
Increasing uptake		7	27
influence of medicine management		10	21
international perspective		1	1
leading from government		2	11
local versus national		4	8
need for prescribing		5	8
NHS service		10	18
part of the healthcare team		5	6
physical rehabilitation		3	3
physical treatments		14	17
population needs		12	32
Private Practice		6	10
professional domains		12	29
public awareness		16	77
relating image		7	9
resisting change		10	30
risk		4	14
scope expansion		7	18
specialist		15	28
trusting		19	70
USP identity		4	29
which model - medical vs rehab		4	20
working generically		12	37
working in new ways		19	84

Excerpt code book 3

Theme	Description	File	Reference
Context: Practice	Where prescribing medication is seen as relating to advanced practice in physiotherapy	34	88
Attitudes to prescribing by physiotherapists	How people perceive prescribing by physiotherapists, is it a good or bad thing	36	151
Being aware of NMP	What is the awareness especially among the public of non medical prescribing	23	30
Being prescriber ready	What do people feel about physiotherapists qualifying from a pre reg programme being prescriber ready	31	39
Experiencing risk	What are the potential risks of physiotherapists prescribing medications	12	27
Prescribing by junior staff	What are the views of people towards junior physiotherapists (>3 yrs qualified) prescribing medications	14	50
Selecting models of care - medical vs rehab	Does it matter to physiotherapy which model of care is adopted	19	53
Being accountable	What does it mean to HCPs and public to be accountable, how does prescribing impact this	6	10
Being affected by age	How does the age of the clinician impact the perception of their competence among the public	3	4
Being an adjust	viewpoints of prescribing by physicon, is it core to skills or just another tool in the box	3	5
Career choice influencing factors	What factors influenced people who became physicon?	18	68
Concepting the patient	The importance of placing the patient at the centre of the consultation. Does prescribing affect this	5	8
Changing practice	What factors lead to change in practice from prescribing	27	56
Changing undergraduate education	How does UG education need to adapt to enable better interaction with prescribing programmes by physiotherapists	26	69
coping with change	How important is this to physicon?	3	3
Cultural influences on career choice	International perspectives from physicon who qualified outside of the UK. What led them to choose physiotherapy	2	5
Dealing with uncertainty	How do people deal with uncertainty	2	8
Developing - existing role identity	How the role identity of physiotherapists changes when significant skills are learnt	32	221
Influences of prescribing skills	How prescribing skills can particularly influence change in role	19	37
USP identity	Importance of a USP identity to physiotherapy	6	31
Developing the workforce	Adapting work patterns to meet new challenges	16	41
part of the healthcare team	Being part of the wider healthcare team	16	32
Developing trust	Key skills in developing trust between clinicians and patient	37	163
breaking trust	Instances of betrayal in trust - abuse of power	2	3
concordance	The route to building trust	2	3
Evaluating roles	How prescribing has developed within the profession	15	79
Expanding improvement	viewpoints of users of physiotherapy	3	3
Finance	viewpoints of physicon - suitable recompense for added skills	3	8
Motivations	Frustrations with Controlled Drug holdings and lack of support	20	88
Imaging physiotherapy	How people view physiotherapy from both outside and inside the profession	36	102
Impact of prescribing on societal drivers	How prescribing has met the needs of patients	8	21
Increasing uptake	What factors might lead to improving uptake of physiotherapists in prescribing programmes	7	27
International perspective	Views from across the channel	1	1
International background	How an international background impacts role	2	4
Joined up thinking	Working across professional boundaries	5	7
Key skills		1	3
key skills - communicating	Communication	6	13
listening	Listening	4	9
physical rehabilitation		5	6
problem solving		1	2
using exercise	Using exercise as a key skill	11	12
Leading from government	Govt initiatives	2	11
Local versus national	Drivers for change and development within physiotherapy	4	8
Leading to prescribe	Drivers to prescribe	13	21
NHS services	NHS related viewpoints	12	21
Physical treatments	Views of public as to what is expected in physicon	14	17
Prescription needs	What does the public need	12	32
Private Practice	Issues within private practice	7	11
Professional domains	Boundary thinking	24	87
Public awareness	What does the public think?	33	152
emerging influences	How experience affecting public awareness	4	8
meeting the need	Concerns about change being too rapid	2	3
Representing physiotherapy	How physicon self themselves to others	12	28
Changing public perception	Work done on challenging public perceptions	23	34
relating image	Reconciling changes in image	9	11
Resisting change	Concerns about change, wanting to maintain current ways of doing things	14	30
socialist	How the public view physicon and how other professions view them	17	30
sporting activity	How important is this?	1	1
time availability	Concerns about impact on time of added responsibility	2	2
Undergraduate knowledge	Previous pharmacology knowledge, from UG studies	14	17
Working in new ways (FCP - Covid impacts)	Impact of Covid on ways of working and new role of FCP in Primary care	34	163
scope expansion	New ways of working/geriatric roles? CP - impacts of prescribing	19	40
working generatively	Working across boundaries, FCP role	16	42

The importance of memos 1

Developing professional identity	
How did I personally relate to the phenomena	This code sits at the very heart of my project and so I was relieved to see that it was a subject JM01 that people had views on and sought to verbalise their insights
Why did I choose the naming of the code, what does the name mean	I initially called this code Issues of Professional identity but felt this was too descriptive and reflecting on reading Saldana and Charmaz I wanted to reflect an active process. The opinions are about change in how the profession is perceived with some participants alluding to a more holistic identity due to prescribing, whilst others had some concerns about losing historic origins
What does this say about role and ritual within physiotherapy	Physiotherapy is equated strongly with its MSK area of practice, less so with the other health fields it is involved in. Public participants talked a lot about close contact, the importance of trust in the relationship. One participant shared a breach of trust where the physiotherapist crossed a therapeutic boundary which led to cessation of therapy. Whilst patients expect close bodily contact, the issue of power that the physiotherapist has within the consultation is something that needs to be thought about and considered

Slide 18

JM0

Hard to read in this font - can you give maybe fewer examples and larger font?

Julie Macinnes, 2022-01-31T16:10:45.593

The importance of memos 2

How did I personally relate to the phenomena?

Why did I choose the naming of the code, what does the name mean?

What does this say about role and ritual within physiotherapy?

What makes this a valid coding statement?

What other codes does this relate to?

How is this relating to emerging theory?

The importance of memos 3

Developing Professional Identity.

What does this say about role and ritual within physiotherapy

Public participants talked a lot about close contact, the importance of trust in the relationship. One participant shared a breach of trust where the physiotherapist crossed a therapeutic boundary which led to cessation of therapy. Whilst patients expect close bodily contact, the issue of power that the physiotherapist has within the consultation is something that needs to be thought about and considered

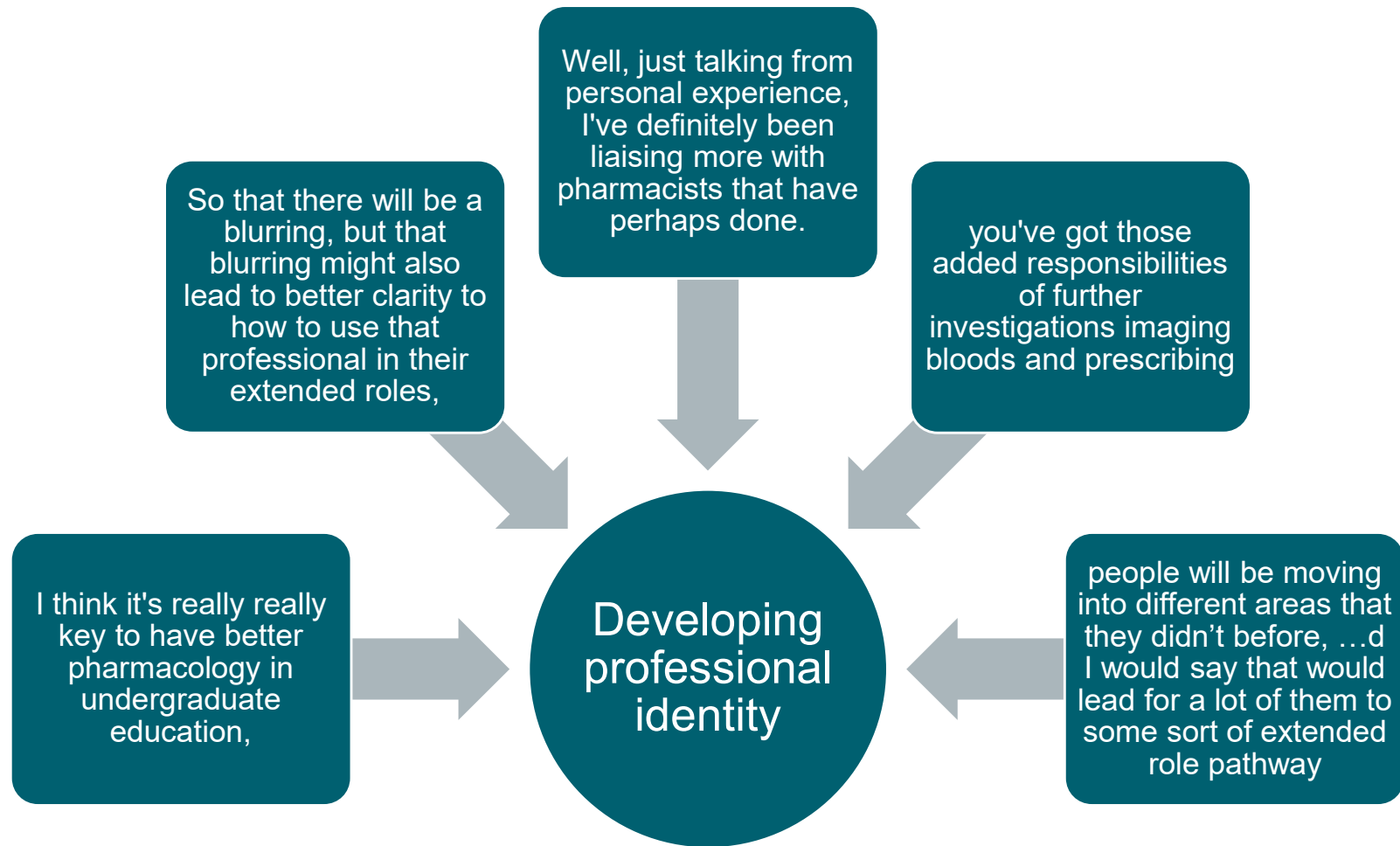
Early results

From the public and thought leaders and influencers, and physiotherapists

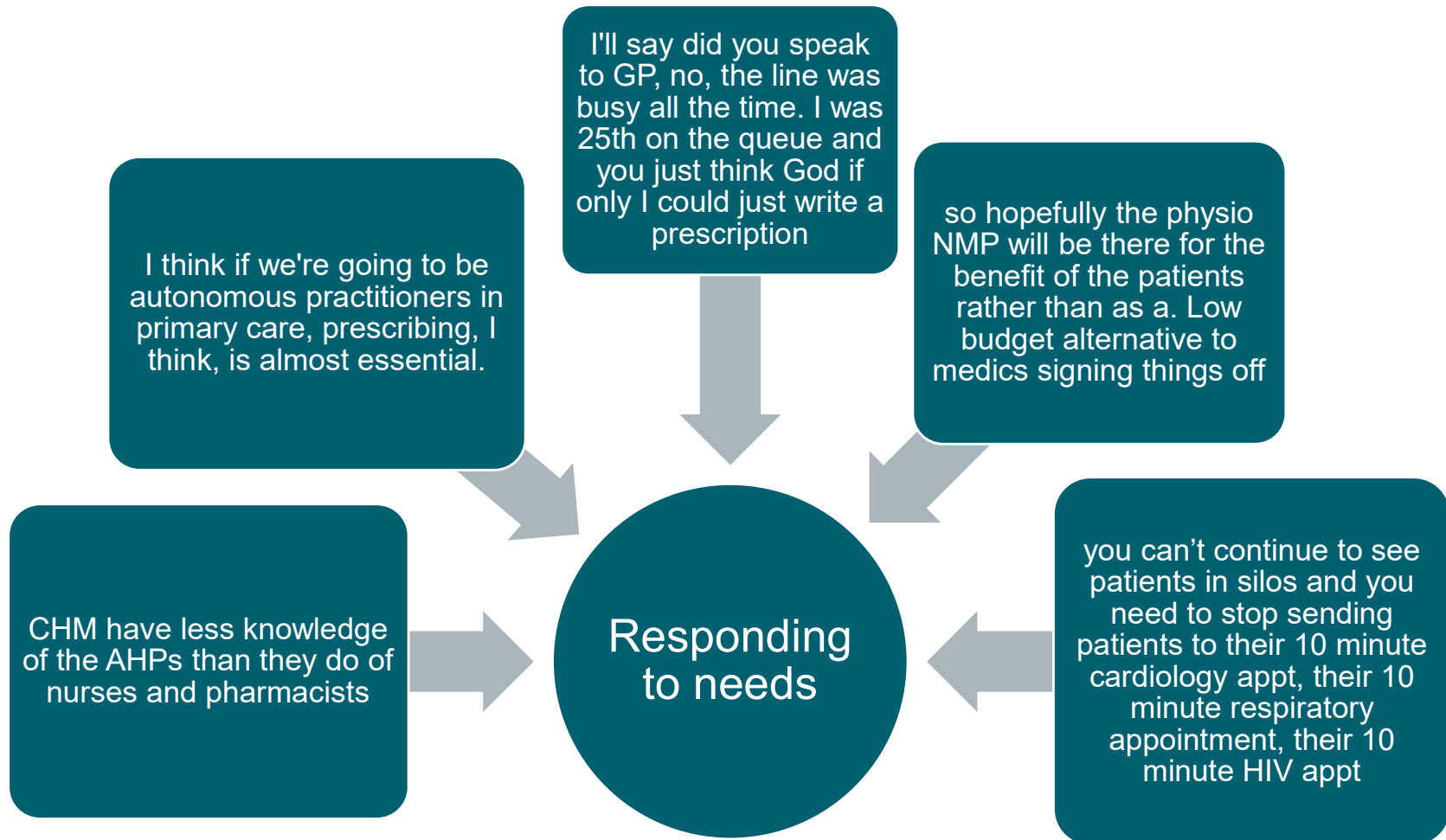
5 Key areas

1. Developing professional identity
2. Responding to needs
3. Coping with frustration
4. Imaging physiotherapy – within the profession
5. Imaging physiotherapy – outside the profession

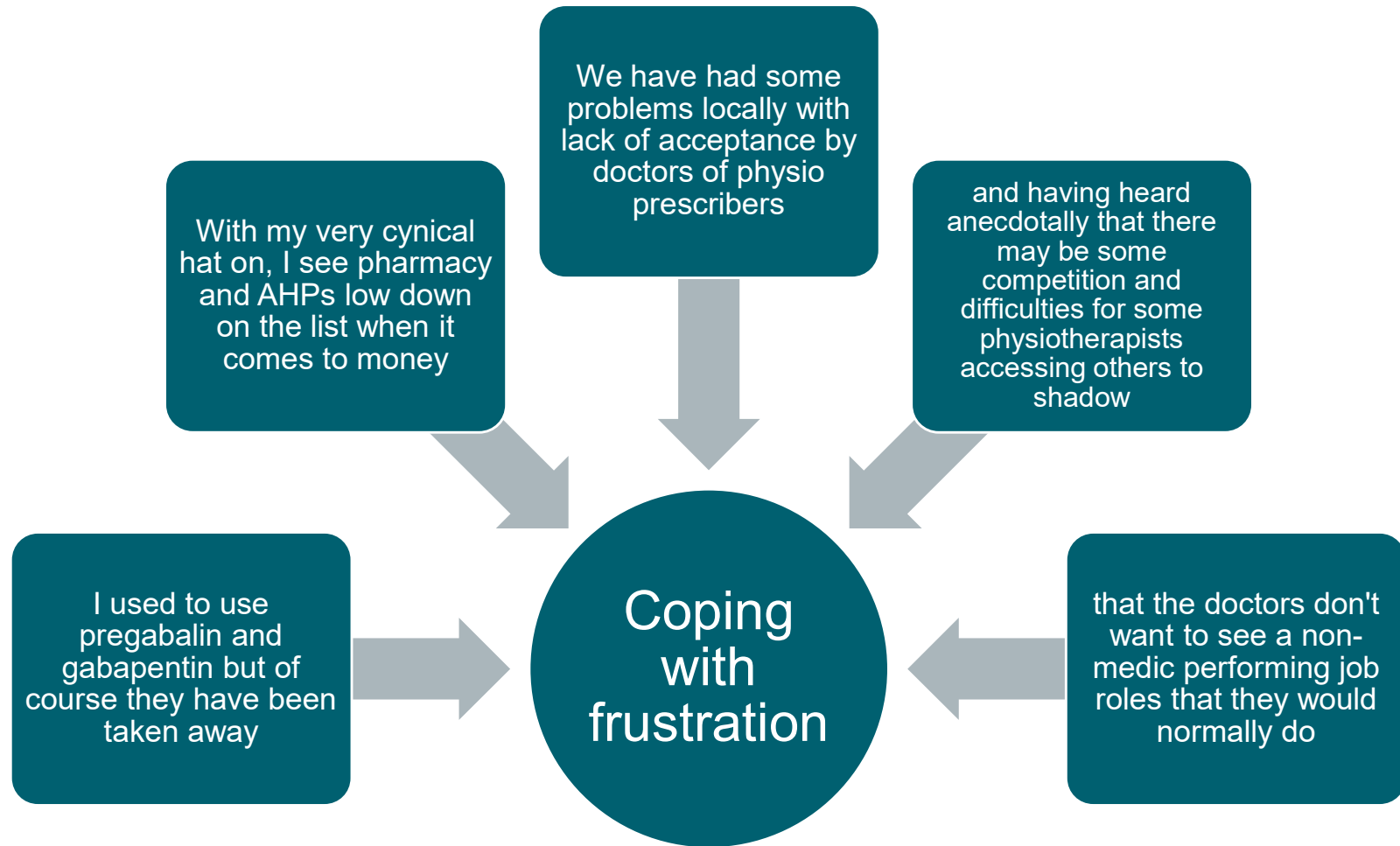
Developing professional identity



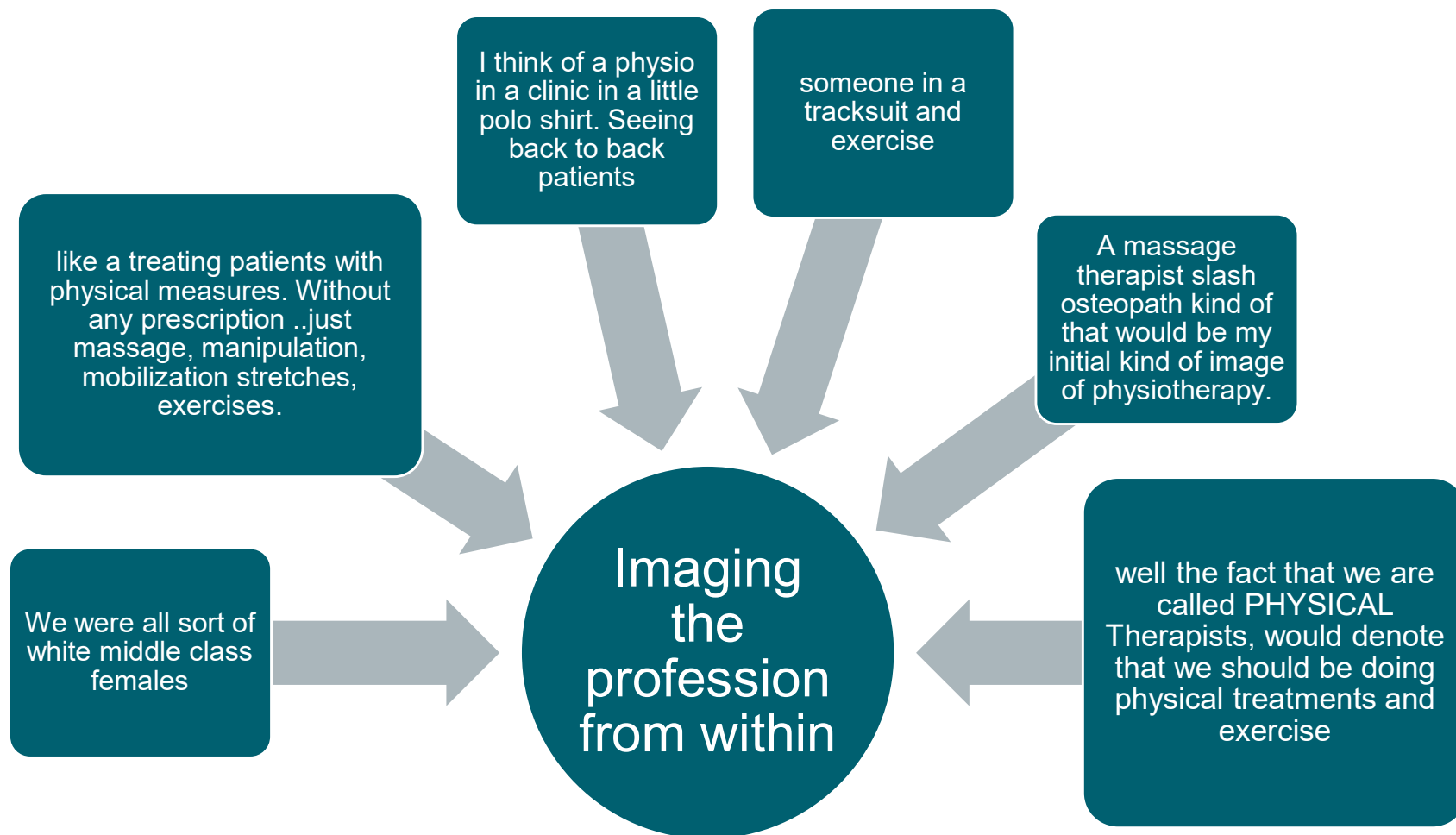
Responding to needs



Coping with frustration



Imaging physiotherapy – the physio perspective



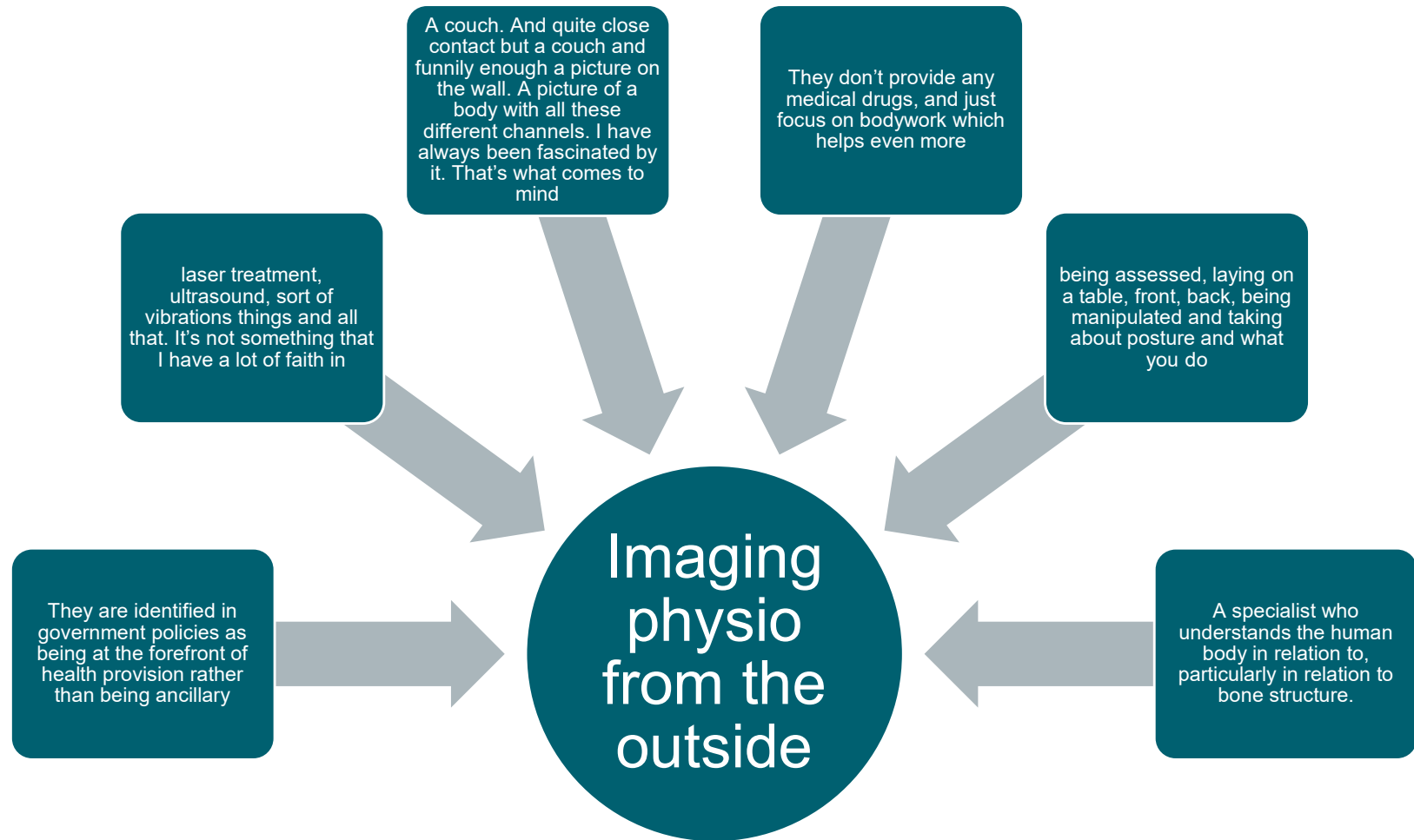
Slide 25

JM0

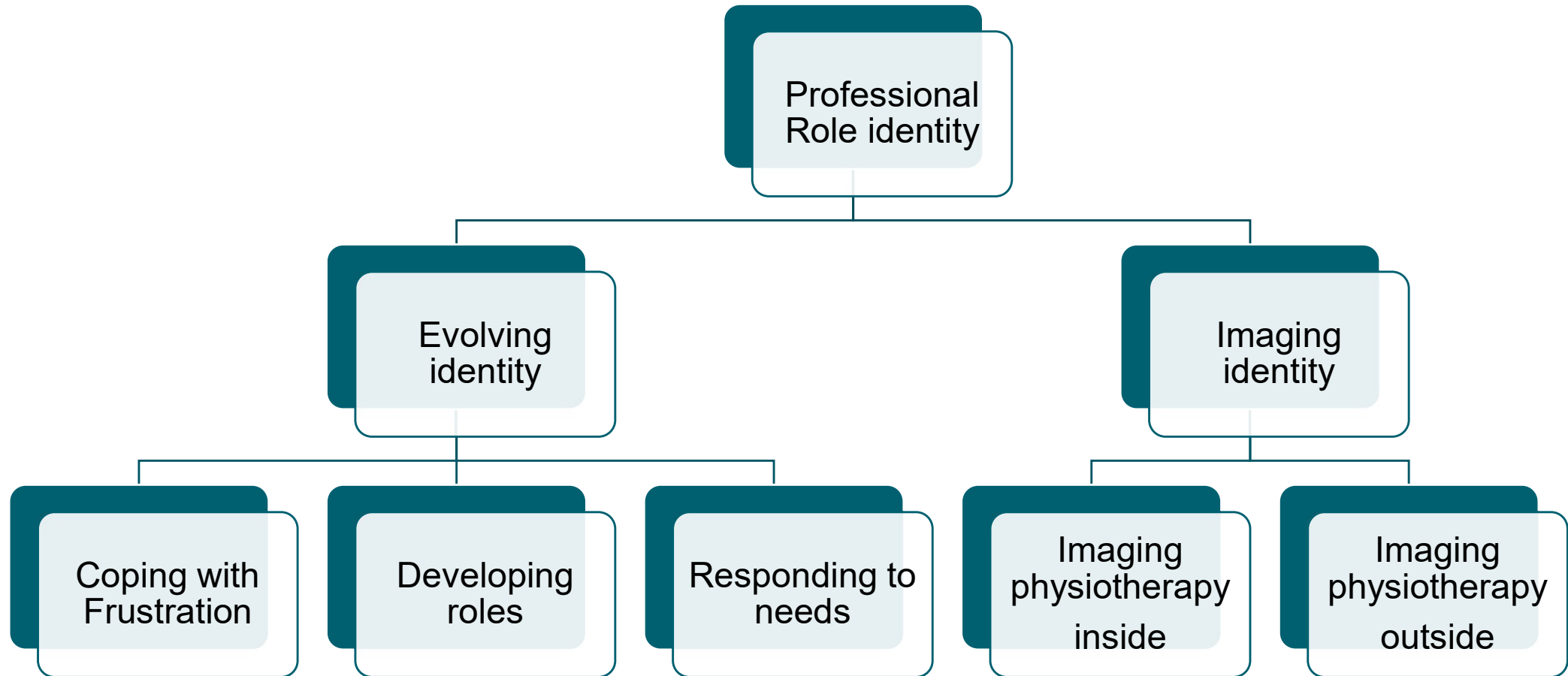
I love this about polo shirts and tracksuits - uniform is so tied up with prof identity

Julie Macinnes, 2022-01-31T16:11:43.828

Imaging physio from the outside



Conceptual model



Questionnaire

The image shows a web browser window displaying a Qualtrics survey preview. The desktop view on the left shows a survey introduction and a consent question. The mobile view on the right shows the same content adapted for a smaller screen.

Desktop View:

- Buttons:** Restart Survey, Place Bookmark
- Mobile view on:** Toggle switch is turned on.
- Progress:** 0% Survey Completion
- Text:**

I would like to invite you as a physiotherapist to take part in a research project to improve understanding of the impact that prescribing medications has on the role identity of physiotherapists. The term "role identity" encompasses what it means to be a physiotherapist. Interviews with a range of stakeholders including physiotherapists, prescribing course leads, Department of Health representatives and members of the public have been completed and a theory of what I think happens to the role identity of physiotherapists has been developed. The purpose of this questionnaire is to test this theory within a wider population of physiotherapists.
- Text:**

Please click [here](#) to access the information leaflet
- Question:**

*I have read the information leaflet
- Response:**

☐ Yes
- Text:**

*Please indicate that you have read and chosen whether to undertake the study
- Response:**

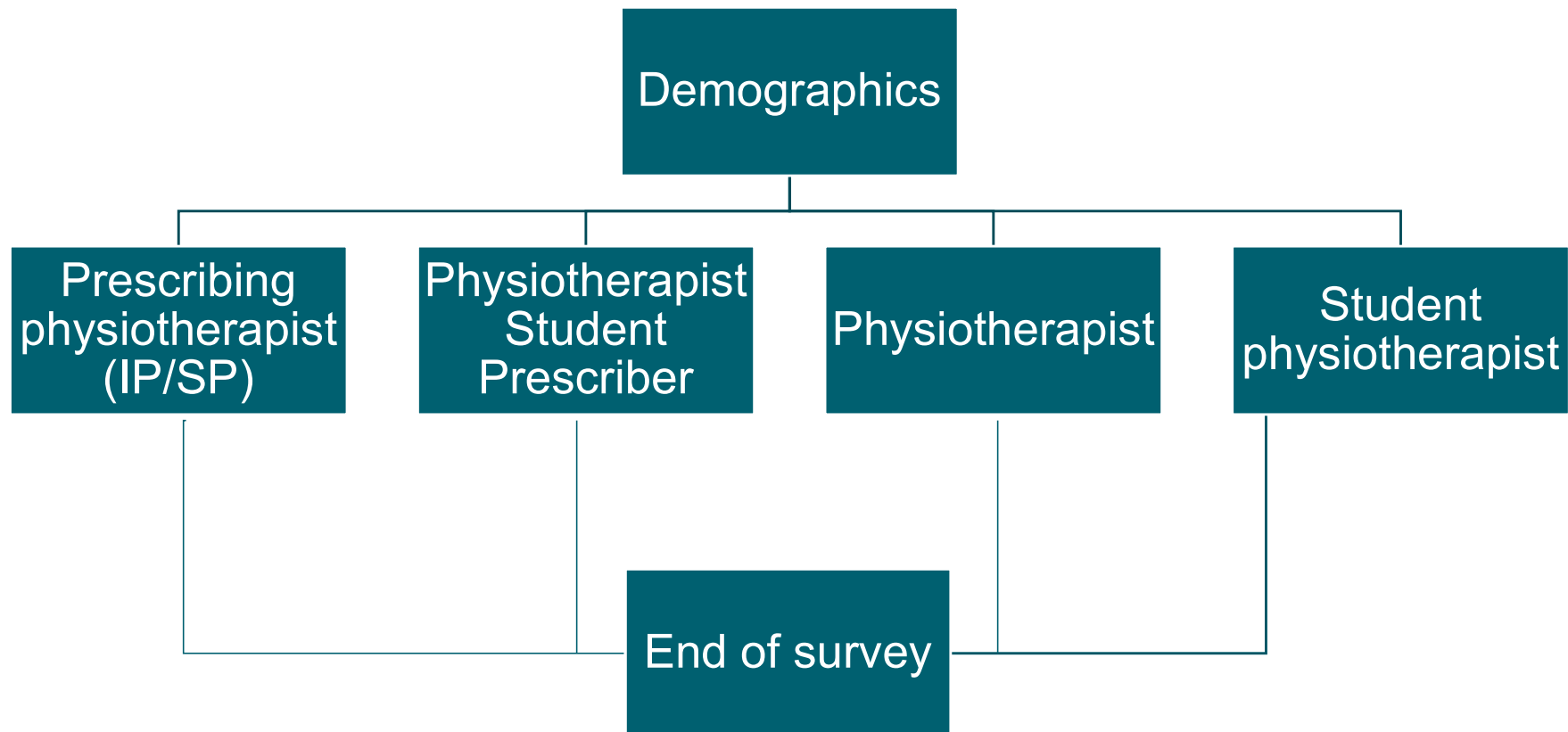
☐ I am happy to proceed with the study

Mobile View:

- Progress:** 0% Survey Completion
- Text:**

I would like to invite you as a physiotherapist to take part in a research project to improve understanding of the impact that prescribing medications has on the role identity of physiotherapists. The term "role identity" encompasses what it means to be a physiotherapist. Interviews with a range of stakeholders including physiotherapists, prescribing course leads, Department of Health representatives and members of the public have been completed and a theory of what I think happens to the role identity of physiotherapists has been developed. The purpose of this questionnaire is

Questionnaire Design



Analysis

Cronbach's α - content reliability

Factor analysis – tool validity

Descriptive statistics – demographic data within group data

Kruskal-Wallis test – non-parametric analysis of 4 separate groups

Where are we at now?

Phase 3 the questionnaire is live. If you are a physiotherapist and would like to participate then use this QR code. Details also available at www.physioprescriber.com



And if you
know a
physio, then
share you
should.

Bibliography

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Slide 32

JM0

The pink is a bit hard on the eyes - ? change to a different colour?

Julie Macinnes, 2022-01-31T16:12:28.814