

# Guidance note: Interpretation of the CSP definition of physiotherapist independent prescribing.

December 2023

## Introduction

This guidance note is for those who wish to understand the scope and extent of the definition of physiotherapist independent prescribing.

It is particularly aimed at healthcare professionals and leaders within systems and services, for example Medical and/or Nursing & AHP Directors within Trusts, ICSs and ICBs, Pharmacy Leads and local service leads. It intends to reduce unwarranted variation in the implementation and maximisation of physiotherapist independent prescribing by providing clear support on how the definition of the scope of physiotherapist prescribing ought to be interpreted.

The HCPC is the statutory regulator for UK physiotherapists. The HCPC regulates registrant physiotherapists against its own standards of proficiency for physiotherapists<sup>1</sup>. The HCPC has adopted the Royal Pharmaceutical Society's Competency Framework for all Prescribers as the regulatory framework for physiotherapist prescribing practice<sup>2</sup>.

The CSP sets the definition of physiotherapist independent prescribing practice, which applies to all prescribing physiotherapists, whether they are CSP members or not. This is why our medicines resources are available to all, and not restricted to CSP members only.

This guidance note should be read alongside our publication PD026: Practice Guidance for Physiotherapy Prescribers 4<sup>th</sup> Edition

<https://www.csp.org.uk/publications/practice-guidance-physiotherapist-supplementary-andor-independent-prescribers-safe-use>

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<sup>1</sup> <https://www.hcpc-uk.org/standards/standards-of-proficiency/physiotherapists/>

<sup>2</sup> <https://www.hcpc-uk.org/standards/standards-relevant-to-education-and-training/standards-for-prescribing/>

## **What is the definition of the scope of physiotherapist independent prescribing?**

*“The physiotherapist independent prescriber may prescribe any licensed medicine from the BNF, within national and local guidelines for any condition within the practitioner’s area of expertise and competence within the overarching framework of human movement, performance and function. They may also mix medicines prior to administration and may prescribe from a restricted list of controlled drugs as set out in Regulations.”*

### **Why was a definition needed?**

As part of the UK-wide NHSE Chief Professions Officers Medicines Management (CPOMM) project in 2013 to secure independent prescribing by physiotherapists, the Commission for Human Medicines (CHM) requested a clear understanding of the nature and remit of physiotherapist independent prescribing in the form of a definition from the CSP, to assure the CHM that appropriate professional descriptions were in place. This professional definition would provide further information alongside the overarching legislative framework, and the regulatory framework provided by the HCPC.

### **Why is the CSP definition worded as it is?**

It is meant to be a general strategic definition where the wording applies, and is equally meaningful, to all aspects of physiotherapy practice on humans, in all settings, contexts and/or specialities where a physiotherapist might work and have a need to prescribe, now or in the future.

It can be applied to any focus of practice e.g., from a population group practice level, down to a cellular function level within an individual patient with a particular clinical need.

Now that physiotherapist independent prescribing has been successfully implemented into clinical practice over the last 10 years, we now understand that the breadth of this definition may have created some local barriers to full optimisation of physiotherapist independent prescribing. This means that a further guidance note is now needed to avoid physiotherapists being unintentionally prevented from using their full prescribing capabilities in their services, based on local assumptions of physiotherapy practice and the assumed limits to the capabilities of individual physiotherapists.

### **How should the CSP definition be interpreted?**

The purpose of an individual physiotherapist’s prescribing practice is to support and enhance the delivery of physiotherapy interventions to patients that are aimed at

addressing the needs of individuals and groups, related to movement, performance and functioning in their widest sense, in line with the HCPC standards of proficiency for physiotherapists. Physiotherapist independent prescribing also supports the delivery of care pathways and services that can be effectively delivered and/or led by a physiotherapist. Therefore, our definition of physiotherapist independent prescribing

- Should be interpreted using all the words in the definition as a whole, and not by choosing selective words to fit local assumptions.
- Should be interpreted as broadly as possible to enable physiotherapist independent prescribing to occur in situations where the law and Regulations allow it, as well as there being a patient need and context to prescribe.

At the current time, the only legal restriction on physiotherapist independent prescribing scope is in relation to controlled drugs, where the profession currently has a restricted list of 7 controlled drugs.

Local formularies are often used which reflect how a local system controls its prescribers' activities, by setting out what may be prescribed within the system, as well as identifying an individual's personal scope of prescribing practice.

These local formularies should be reasonable and proportionate to the nature and context of the services provided. Whilst formularies may restrict some options for prescribing, based on wider systems governance, local formulary restrictions ought not to unnecessarily limit the practice any profession, or individual professional, for example by making any assumption about the prescribing capabilities of that profession, except where required by law or other specific medicines guidance.

### **How does the CSP interpret 'human movement, performance and function' in the definition of physiotherapist prescribing?**

Movement, performance and function ought to be considered through a variety of perspectives such as the movement, performance and function of any person as a whole being, or the perspective of the movement, performance and function of a person's component systems, organs, tissues, cells, and subcellular structures, either individually and/or collectively.

To be clear, the CSP definition of prescribing does not mean that physiotherapists can only prescribe in a 'musculoskeletal' context. They have the capabilities to

prescribe across a range of contexts. This is because the HCPC Standards of Proficiency (2023) require physiotherapists to:

*“Understand the structure and function of the human body, together with knowledge of physical and mental health, disease, disorder and dysfunction relevant to their profession. [12.1]”*

*“... understand the neurological, musculoskeletal, cardiovascular and respiratory systems” and “the integration and interplay of other human body systems and how they influence the neurological, musculoskeletal, cardiovascular and respiratory systems. [12.6]”*

*“ select, plan, implement and manage physiotherapy interventions aimed at the facilitation and restoration of movement and function.”*

The CSP overarching definition of physiotherapist independent prescribing is designed to be interpreted broadly so that it can apply to all possible contexts where a physiotherapist may need to prescribe and through a variety of different perspectives. To illustrate, one physiotherapist may be assessing long term pain relief to enable a person to continue exercising at home, another physiotherapist may be managing a child’s lung disorder in intensive care to optimise oxygen saturation levels, another physiotherapist may be managing the gastrointestinal effects of a neuromuscular disease. All are equally valid prescribing contexts for physiotherapists.

We hope that clarifying how our definition is to be interpreted, will facilitate any unintentional local barriers to physiotherapist independent prescribing being resolved.

### **Does the CSP definition restrict what settings a physiotherapist can prescribe in?**

No. Physiotherapists work in many clinical specialities. The areas in which physiotherapist prescribing is most often used is within cardiovascular, respiratory, neurological and/or musculoskeletal services for both adults and children, within primary, acute, community care and independent provider settings.

However, physiotherapist prescribing can occur in any clinical setting and/or speciality where physiotherapists work, where there is a need to prescribe, and where there is no legal restriction on a physiotherapist’s prescribing ability e.g., controlled drugs. As physiotherapists’ capabilities are maximised within health services and systems, and evolving health policy, the reach of physiotherapist prescribing may widen over time.



## **Do physiotherapists have the relevant underpinning knowledge and skills to prescribe?**

Yes. At the point of initial registration with the HCPC, all physiotherapists will have acquired a detailed scientific knowledge base in biological, clinical, physical and behavioural science, applied to health, disease, disorder and dysfunction as set in Standard 12 of the Health and Care Professions Council Standards of Proficiency for Physiotherapists. All Physiotherapists are able to draw on this knowledge and skills to inform their practice as set out in Standard 12 <https://www.hcpc-uk.org/standards/standards-of-proficiency/physiotherapists/>

As part of a physiotherapist's post-registration prescribing training, they will follow an HCPC approved prescribing programme (equivalent to a nursing V300 programme) which includes detailed coverage of knowledge of medicines, assessment diagnosis and decision making, and evidence based prescribing amongst other topics: [http://www.ahpf.org.uk/AHP\\_Prescribing\\_Programme\\_Information.htm](http://www.ahpf.org.uk/AHP_Prescribing_Programme_Information.htm)

Details of HCPC approved prescribing programmes are here <https://www.hcpc-uk.org/education/approved-programmes/>

Upon completing an HCPC approved prescribing programme, physiotherapists are able to demonstrate that they meet the competency framework for all prescribers, which applies equally to doctors, nurses, pharmacists and AHP prescribers. <https://www.rpharms.com/resources/frameworks/prescribing-competency-framework/competency-framework>

## **Acknowledgment**

We acknowledge the time and expertise of our prescribing members and their service managers, in a range of clinical settings who have collaborated with us in testing the wording of this document in their workplaces to address local barriers to physiotherapist independent prescribing.

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