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| **2026 Prescribing Practicum Support Plan****for Registered Nurse (RN) prescribing practicum courses**  |
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| **Statement** |
| A practicum support plan needs to be submitted with your Postgraduate Funding (PG) application when enrolling for an RN prescribing practicum (30 credits). Approval to enrol is discussed through the PG career discussion process managed by the Workforce and Practice Development Unit (W&PDU). Approval is required from your Service including nursing leadership. Support to undertake the practicum courses relies on organisational agreement on role development before, during and after the practicum. During the practicum course, additional support beyond the usual study leave entitlements, requires negotiation with the RNs Service. The support plan helps identify the required support to successfully complete the practicum requirements. This information also informs PG prioritisation and workforce planning.  |
| **Applicant Information** |
| RN Name and PDRP level: |  |
| Practicum Course details: |   |
| Clinical area of practice/specialty: |   |
| Discussion with course co-ordinator: Must access required application documentation  | Name, contact details and outcome notes:  |
| **Initial discussion to confirm support to enrol in the practicum and consider potential RN Prescriber or NP role changes with:**  |
| Manager details: | Names, contact details and outcome notes:  |
| **Clinical (Doctor, NP) Supervision**: NP support for mentoring confirmed with their manager Medical leader support for medical mentoring within service confirmed  | Names and outcome notes:  |
| Service Management: e.g. Operations Manager, Practice Manager or Facility Manager.  | Name and outcome notes:  |
| Discussion with a Nurse Director  | Name and outcome notes:  |
| **Practicum requirements** |
| Type details e.g. anticipated amount of release time from usual substantive role Range of clinical areas other than own workplace i.e. rotations, clinics, other organisations etc. |
| **Plans for practicum support - complete this section following the discussions required above**  |
|  |  |  | **Person 1** | **Area** | **Person 2** | **Area** |
| RN prescribing supervisor: | Name and role  |  |  Name and role  |   |