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Registration standard: Endorsement for scheduled medicines for registered nurses prescribing in partnership

Thank you for the opportunity to provide comments on the Proposed Registration standard: Endorsement for scheduled medicines for registered nurses (RNs) prescribing in partnership.

Aged & Community Services Australia

Aged & Community Services Australia (ACSA) is the leading aged care peak body supporting over 700 church, charitable and community-based, not-for-profit organisations. Not-for-profit organisations provide care and accommodation services to about one million older Australians¹. ACSA represents, leads and supports its members to achieve excellence in providing quality affordable housing and community and residential care services for older Australians.

What is prescribing in partnership?

The NMBA Public Consultation Paper² describes prescribing in partnership as a model where an RN with an endorsement for scheduled medicines undertakes prescribing within their level of competence and scope of practice in partnership with a partner prescriber³ in a governance framework. All RNs use clinical decision making and critical thinking when providing care to consumers. RNs endorsed to prescribe in partnership will have additional education and a period of supervision, to further develop these skills and appropriately apply them when making prescribing decisions.

The RN endorsed to prescribe in partnership:

- will have an authorisation to prescribe medicines by relevant state and territory legislation

¹ Australian Government, Department of Health, 2016-17 Report on the Operation of the *Aged Care Act 1997*, November 2017

² <http://www.nursingmidwiferyboard.gov.au/documents>

³ **Partner prescriber** is an authorised health practitioner who is an authorised autonomous prescriber for example a medical practitioner or a nurse practitioner (more than one partner prescriber may work in partnership with the endorsed registered nurse).

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- will meet the requirements of the prescribing in partnership endorsement, as set by the NMBA's registration standard and guidelines, and
- will meet the policies of the jurisdiction, employer or health service.

The RN endorsed to prescribe in partnership is responsible and accountable for prescribing within their scope of practice and authorisation.

Rationale for registered nurse prescribing in partnership

ACSA understands that the NMBA has worked with the Australian and New Zealand Council of Chief Nursing and Midwifery Officers (ANZCCNMO) to explore potential models of prescribing to determine a model for an endorsement to enable RNs to prescribe scheduled medicines. The NMBA and ANZCCNMO have consulted with governments, key nursing stakeholders, nurses and consumers to formulate the basis for the proposed new registration standard.

The challenges for rural, regional and remote aged care providers in accessing primary health services, the ageing population and higher levels of chronic and complex health care needs of people accessing aged care services is placing a greater demand on providers of aged care services to improve safe timely access to clinical care and medicines for consumers.

Proposed model of RN prescribing in partnership

ACSA is of the view that the proposal to develop a registration standard for the endorsement for scheduled medicines for RNs prescribing in partnership offers potential benefits particularly for providers of aged care in rural, regional and remote areas of Australia. This practice could contribute to quality health outcomes for consumers in areas where access to medical officers is limited.

Benefits include:

- The timely and safe access for consumers to specified medicines
- The potential to prevent unnecessary transfer of residential aged care consumers to hospital emergency departments
- The additional knowledge and skills gained in meeting the requirements for an endorsement for the prescription of scheduled medicines will support additional flexibility within the nursing profession to meet identified needs within the community.
- The significant extension of the registered nurses practicing framework will may attractive career incentives for registered nurses working within the aged care sector.

Comments on the proposed model

Overall

ACSA supports the intention of improving safe and timely access to medicines for consumers, and in principle agrees that suitable qualified and experienced RNs should be able to hold an endorsement to prescribe specified scheduled medicines in partnership with a partner prescriber, however we make the following comments on issues that would need to be considered by the aged care sector:

- There will be a cost to RNs to undertake the required education and an endorsement application fee;
- There may be a cost to aged care providers to support the required education and associated costs for RNs working within their service, if the provider wished to transition their nursing staff to this qualification and changed scope of practice;
- Aged care organisations will need to ensure that clinical governance processes are strengthened and include linkages with partners;
- Consultation by aged care provides with GPs would need to be extensive and ongoing throughout any implementation process to ensure a solid and sustainable partnership that is built on trust and cooperation; and
- ACSA would like to see careful consideration given to the sufficiency of the proposed requirement for application for endorsement of two year's full time equivalent post initial registration experience. We consider that the setting where the experience has occurred is as important as the time period and should be more specified to ensure that the clinical exposure of the applicant meets the requirements for safe prescribing of medicines.

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POLICY AND MEMBER ADVICE OFFICER

Aged & Community Services Australia