australian college of nurse practitioners

Supporting Nurse Practitioners through advocacy resources, networking and professional development

Nursing and Midwifery Board of Australia Consultation September 2018
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The Australian College of Nurse Practitioners thank you for the opportunity to provide feedback on the Proposed Registration Standard: Endorsement for Scheduled Medicines for Registered Nurses Prescribing in Partnership.

As the national peak body for Nurse Practitioners and advanced practice nurses in Australia, the Australian College of Nurse Practitioners is active in advancing nursing practice and improving access to health care. The College has over 1100 members nationally.

Feedback from our members supports that suitably qualified and experienced Registered Nurses should hold endorsement to prescribe.

While this proposed approach appears to support the progression of Registered Nurses scope of practice, we are concerned about the details in relation to what constitutes a partnership model and the level of control the partner has over nursing scope of practice.

While it is acknowledged in the consultation paper Registered Nurses demonstrate the flexibility to progress their scope of practice, the case studies provided within the document demonstrate the proposed limitations in decision making in relation to prescribing, with the Registered Nurses working for, or consulting on behalf of the partner prescriber. These case studies are not reflective of the arrangements in other countries and appear to limit Registered Nurses scope of practice and decision making. Evidence demonstrates that partnership arrangements such as this do limit scope of practice and that collaborative models that recognise each health practitioners autonomy are more effective (Lane, 2012; Raftery & Harvey, 2015; Schadewaldt, McInnes, Hiller, & Gardner, 2013)

The Australian College of Nurse Practitioners would like more information about proposed partnership models and the NMBA's position in relation to supervision of Registered Nurses by other health practitioners.

Question 1:
The Australian College of Nurse Practitioners agree that suitably qualified and experienced Registered Nurses should hold an endorsement to prescribe, as this clearly demonstrates a distinct difference to other Registered Nurses with general registration.

Question 2:
The Australian College of Nurse Practitioners recommends that the partnership model not be prescriptive, to enable flexible models of care and the Registered Nurses to practice to their full scope and within their context of practice.

Question 3:
The Australian College of Nurse Practitioners supports a minimum of 3 years' experience which is aligned with the pathway for nurse practitioner endorsement.

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Question 4:
Additional study requirements are supported by the Australian College of Nurse Practitioners but a number of workforce initiatives will also be needed to support uptake of the endorsement, particularly in the primary health care and aged care sector.

Question 5:
The Australian College of Nurse Practitioners does not support a period of supervised practice and the partner prescriber should not have decision-making power in relation to competency. This should be addressed as part of the recommended modules of study and covered off prior to seeking endorsement.

There are several other considerations that have not been mentioned in this consultation but warrant addressing:

1. In previous submissions to the Standing Committee on Health, the Australian College of Nurse Practitioners have recommended the consistent application of state and territory legislation to reduce the risk to the RN and to improve workforce mobility.
2. Professional indemnity policies be reviewed to ensure suitable products are available to protect the RN with endorsement for scheduled medicines.
3. Industrial instruments including the Federal Award be modernised to recognise and reward expanded scope of nursing practice.
4. Exploration of access to the Pharmaceutical Benefits Scheme for Registered Nurses to ensure that clients are not out of pocket when they receive a prescription from the Registered Nurse. It would not be appropriate for a client in a Residential Aged Care Facility to be charged for a private script issued by a Registered Nurse.

Thank you again for the opportunity to provide feedback. Should you require additional information please contact me at [redacted]

Yours sincerely

[redacted]

Leanne Boase
President
Australian College of Nurse Practitioners

References

Lane, K. (2012). When is collaboration not collaboration? When it's militarized. *Women and Birth, 25*(1), 29-38. doi:10.1016/j.wombi.2011.03.003

Raftery, C., & Harvey, T. (2015). Collaboration is the new black. *The Journal for Nurse Practitioners, 11*(9), 912. doi:10.1016/j.nurpra.2015.08.031

Schadewaldt, V., McInnes, E., Hiller, J. E., & Gardner, A. (2013). Investigating characteristics of collaboration between nurse practitioners and medical practitioners in primary healthcare: a mixed methods multiple case study protocol. *Journal of Advanced Nursing, 70*(5), 1184-1193. doi:10.1111/jan.1229