

Fact sheet

Updated June 2019

Endorsement for scheduled medicines for registered nurses (rural and isolated practice)

Introduction

The Nursing and Midwifery Board of Australia (NMBA) undertakes functions as set by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The NMBA regulates the practice of nursing and midwifery in Australia, and one of its key roles is to protect the public. The NMBA does this by developing registration standards, professional codes, guidelines and standards for practice which together establish the requirements for the professional and safe practice of nurses and midwives in Australia.

The [Registration standard: Endorsement for scheduled medicines for registered nurses \(rural and isolated practice\)](#) describes the necessary qualifications that a registered nurse must demonstrate when applying for and maintaining endorsement for scheduled medicines (rural and isolated practice).

The following questions answer common queries about the *Registration standard: Endorsement for scheduled medicines for registered nurses (rural and isolated practice)*.

What does the Endorsement for scheduled medicines for nurses (rural and isolated practice) mean?

The endorsement means that the registered nurse has met the requirements of the NMBA *Registration standard: Endorsement for scheduled medicines for nurses (rural and isolated practice)* and is qualified to obtain, supply and administer scheduled medicines.

Do all states and territories in Australia require the Endorsement for scheduled medicines for nurses (rural and isolated practice) to allow RNs to supply medicines under protocol/policy?

No. Most Australian states and territories have processes in place to authorise/enable RNs to supply and administer scheduled medicines according to protocol/policy **without** the need for the RN to be endorsed.

In the states (Victoria and Queensland) that require the endorsement to supply scheduled medicines, RNs holding the endorsement are able to administer or supply medicines in accordance with the Primary Clinical Care Manual.

This endorsement is limited to the administration and supply of medicines only and only applies to RNs working in approved rural and remote health services. The endorsement is intended to facilitate access to medicines for urgent and/or acute care presentations, but also allows for the supply of medicines for limited long-term health conditions.

I am a registered nurse with an Endorsement for scheduled medicines for nurses (rural and isolated practice). Does the endorsement mean the NMBA has determined I am competent to work in rural or isolated practice?

No. The NMBA does not set standards for education or endorse RNs in specialised areas of nursing practice. It is important to note the endorsement to supply does not imply an RN's competence to work in rural and isolated practice, only that they are qualified to obtain, supply, and administer scheduled medicines under protocol.

I have heard the Endorsement for scheduled medicines for nurses (rural and isolated practice) may be discontinued. Why?

The NMBA in 2013 consulted nationally on a proposal to expand the ability to supply medicines under protocol across all areas, which was not supported by the majority of jurisdictions. The NMBA therefore in 2015 consulted on the proposal to discontinue the endorsement, as it is not required nationally. This was supported by the majority of jurisdictions.

The NMBA's proposal to discontinue the endorsement has been further supported by the clear evidence from the feedback to the 2017 discussion paper, and from Australian Nursing and Midwifery Accreditation Council (ANMAC), that RN undergraduate education already adequately prepares RNs to supply medicines via approved protocol/policy.

When will the Endorsement for scheduled medicines for nurses (rural and isolated practice) be discontinued?

The NMBA has been working with the jurisdictions that require the endorsement to supply to authorise/enable RNs to supply under protocol. The endorsement will not be discontinued until there is an appropriate alternative mechanism in those jurisdictions for RNs to supply under protocol.

The NMBA is committed to ensuring that there is no adverse impact on health service provision with the planned discontinuation of the current endorsement to supply.

Further advice will be provided in early 2019 when Health Ministers have considered the NMBA's *Endorsement for scheduled medicines for registered nurses prescribing in partnership* on the discontinuation of the *Endorsement for scheduled medicines for nurses (rural and isolated practice)*.

Why is the NMBA proposing an Endorsement for scheduled medicines for registered nurses prescribing in partnership?

On recommendation from the Health Workforce Principal Committee (HWPC), 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 registered nurses (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. You can find further information in the public consultation paper that will be released later in July 2018.

I work in a state that currently requires the endorsement to supply scheduled medicines. Will I still be able to obtain, supply, and administer scheduled medicines when this endorsement is discontinued?

The NMBA has been consulting with the two states (Victoria and Queensland) that require the endorsement to supply to ensure that they have an alternate mechanism to authorise rural and isolated practice RNs to supply under protocol/policy.

The NMBA has agreed with these two states that it will **not** discontinue the endorsement to supply until an appropriate alternate mechanism is in place, in order to prevent any impact on health service delivery. Given the agreed intention to discontinue the endorsement to supply, the NMBA has encouraged the jurisdictions to develop alternate mechanisms as required.

I hold an Endorsement for scheduled medicines for nurses (rural and isolated practice). What will I need to do to transition to the proposed Endorsement for scheduled medicines for registered nurses prescribing in partnership?

Once the standard and guidelines for the proposed model for RN prescribing in partnership have been agreed by the COAG Health Council (Health Ministers) and accreditation standards for the education requirements for the units of study established, possible transition pathways (which are likely to require additional education) will be developed in order for RNs holding the endorsement to transition to the *Endorsement for scheduled medicines for registered nurses prescribing in partnership*.

I have submitted an application for endorsement which is currently being assessed by the Australian Health Practitioner Regulation Agency (AHPRA). Will the proposed change affect my application?

If you have completed an [NMBA-approved program of study](#), assessment of your application will not be affected.

For more information

- [Registration standard: Endorsement for scheduled medicines for registered nurses \(rural and isolated practice\)](#)
- Visit www.nursingmidwiferyboard.gov.au under *Contact us* to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (in Australia) +61 3 9275 9009 (overseas callers)

Document control

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