

Practice Directive RN Prescribing

College of Registered Nurses and Midwives
of Prince Edward Island

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*Throughout the document, the term “RN”, “Nurse” or “Nursing Practice” refers to the Registered Nurse Authorized Prescriber, RN(AP).

Background

The healthcare system in Canada has been seeking opportunities to improve accessibility to services and to increase the number of healthcare providers available to meet the care needs of Canadians. Registered nurses, as the largest body of health professionals, can be supported to extend their scope of practice to include diagnosing, prescribing, and ordering diagnostic tests.

RN prescribing has existed in Canada for many years, and it is thought to have begun in the 1990s (Kroezen, van Dijk, Groenewegen, & Francke, 2011). At that time, RN prescribing would have been situational and inconsistent across employers and practice settings (Sibbald, 2000). Jurisdictions in Canada have not implemented standards for practice, frameworks, and legislation for RN prescribing until more recently.

There is a desire on Prince Edward Island to improve the efficiency of care provision. By implementing RN prescribing in specified areas of practice, the hope is to increase the quality of care for residents of PEI by allowing authorized RNs to practice with an extended scope in a safe, competent, and ethical manner.

Introduction

The purpose of this practice directive is to guide nursing practice for the RN Authorized Prescriber on Prince Edward Island. This document will describe the required certification to become an RN Authorized Prescriber, the general practice guidelines, reserved activities, competencies, and practice expectations.

Required Certification

RN(AP)s must complete an approved program on registered nurse prescribing approved by Council. RNs who have completed an approved education program will receive certification from the College that will allow the RN to have the special authorization of “Registered Nurse (Authorized Prescriber)” or RN(AP). This designation is the identification of an RN who is authorized to prescribe.

In addition to the reserved activities for RNs, there will be additional reserved activities for RN(AP)s added to the *Registered Nurses Regulations* related to RN prescribing.

RN(AP)s must follow the *Regulated Health Professionals Act* and abide by all regulations, standards, practice directives, and policies set out by the College. In addition, RN(AP)s must practice within their scope of practice and must perform according to the competencies of both the RN and RN(AP).

Clinical Areas

An RN, as a part of a self-regulating profession, is responsible to obtain and maintain the clinical competencies necessary to prescribe safely in the clinical environment in which they work. It is the RN's responsibility to familiarize themselves with, and adhere to, employer policies and procedures that support registered nurse prescribing within specified clinical settings. RNs must have the individual competencies to practice within the clinical setting in which they intend to prescribe. For example, an RN working in diabetes management must have the necessary knowledge, skill, ability, and experience to work in diabetes management to be an RN(AP) within that clinical practice setting. An RN(AP) that moves to another clinical practice setting must ensure they are clinically competent prior to engaging in RN prescribing.

Registered Nurse Prescribing can occur within the following clinical settings:

- Wound Care
- Sexual and Reproductive Health
- Diabetes Education
- Public Health
- Primary Care
- INR clinics
- Asthma Education
- Employee Health
- Community Mental Health

RN(AP)s can only prescribe medications from the Schedule in the *Registered Nurses Regulations (2023)*. As well, each clinical practice setting has specific medications that are allowed to be prescribed. For example, an RN(AP) who works in diabetes management may be permitted to prescribe insulin but an RN(AP) who works in wound care cannot. Please see the attached appendix for more details.

Standards for RN (AP)s

- The practice for RN(AP)s is grounded in the values, knowledge, and theories of professional nursing practice.
- RN(AP) competencies build and expand upon the competencies required of an RN.
- RN(AP) competencies require additional nursing education related to the role of authorized prescribing.
- RN(AP)s work in consultation with other healthcare providers to provide safe, high-quality healthcare services.

- It is vitally important that RN(AP)s, employers, and clients understand that the RN(AP) is not intended to replace an existing care provider, be the most responsible care provider, or practice independently or autonomously.
- The scope of practice for the RN(AP) is limited to the specific health conditions identified by the employer.
- Self-employed nurses are not authorized to prescribe in their self-employed practice.
- RN(AP)s may discontinue a medication which they have ordered. Discontinuing a medication is the process of stopping a singular medication that may no longer be a benefit to a client. They may only discontinue medications ordered by another prescriber following consultation and collaboration with that prescriber.
- The RN(AP) will not prescribe any medication regulated by the Controlled Drugs and Substances Act. Also, they will not prescribe any medications for study or research purposes.

Competencies for RN(AP)s

1. Assess the client and determine the client's condition is stable. If the client is unstable or has an unpredictable outcome, an RN(AP) has an obligation to inform the client and report the finding to the client's most responsible care provider.
2. Utilize professional knowledge, skills and judgement when prescribing and follow the RN(AP)s' prescribing requirements.
3. Consider standards, guidelines, medication alerts, professional obligations, employer policies, social determinants of health and ethical implications when prescribing.
4. Consult with physicians or NPs as required. Communicate effectively with the other healthcare providers involved in the care of the client.
5. Prior to prescribing a medication:
 - a. Complete a comprehensive assessment by taking a history as well as reviewing related laboratory or diagnostic imaging tests
 - b. Order related screening and diagnostic tests and interpret reported findings as required
 - c. Consider the client's health history, current health status, age, and client specific circumstances (eg: financial)

- d. Communicate health findings and/or diagnoses to clients and families, including health outcomes and treatment options
 - e. Ensure that the medication is not contraindicated for the client and is prescribed with the appropriate dosage, route, and frequency.
 - f. Obtain informed consent
 - g. Provide client education related to clinical diagnosis and any prescribed medications, including:
 - i. Expected action of the drug
 - ii. Importance of compliance with prescribed frequency and duration of the drug therapy
 - iii. Potential side effects and adverse effects
 - iv. Medication and dietary interactions
 - v. Specific instructions to follow
 - vi. Recommended follow-up
6. Prescribe in accordance with both the provincial and federal standards and legislative requirements.
 7. Prescribe only within the RN(AP)'s competence. If a client requires care beyond that which can be provided by the RN(AP), the client is referred to the appropriate healthcare provider.
 8. Complete prescriptions accurately, completely, and legibly.
 9. Monitor and document the client's response and decide to continue, adjust, or withdraw the drug, or to consult with a physician, NP, and/or pharmacist.
 10. Monitor for adverse drug reactions and report to Health Canada if appropriate.
 11. Document client interaction and consultation with physicians or NPs. Maintain a record of all prescriptions written, including refills.
 12. Provide adequate discharge information if the client returns home
 13. When prescribing a medication, the plan of care must include follow-up or evaluation

Ethical Considerations for Prescribing

- Be accountable for prescribing decisions, including actions and omissions, and cannot delegate this accountability to any other person
- Only prescribe medications to clients that the RN(AP) has a comprehensive knowledge of the client's health and medical history

- Do not prescribe for family members or for themselves
- Store blank prescription forms in an appropriate manner and ensure they are not accessible to the public. Do not provide anyone with a blank, signed prescription
- Advocate for policy and guidelines that supports safe prescribing practices for RN(AP)s

Scope of Employment

Scope of employment is the description of the nurse’s role defined by the employer through job descriptions, policies, guidelines, and procedures. The employer must have policies, resources, and procedures to support the safe and competent prescribing practices of the RN(AP). Employers must identify and endorse (through an appropriate policy or procedure) the specific types of client health conditions for which the RN(AP) will prescribe. The policies should also indicate contexts and parameters in which the prescriber may, or may not, prescribe. For example, a RN(AP) working in wound care is permitted to prescribe antibiotics; however, this is for antibiotics directly related to their work in wound care. If the client is experiencing signs and symptoms of a urinary tract infection (UTI), the RN(AP) is not permitted to prescribe an antibiotic to treat the UTI.

Difference between a NP and a RN(AP)

Registered Nurses (AP)s and Nurse Practitioners (NPs) are both registered nurses who have completed different levels of education and perform different roles in meeting client’s needs. CRNMPEI regulate both RN(AP)s and NPs. The following table demonstrates how the two roles differ.

RN(AP)	NP
An RN with an expanded scope of practice to include prescribing authority	Has a license to practice as an NP
Have obtained additional continuing education regarding prescribing from a program approved by CRNMPEI council	Has graduate education from an approved program and passed a licensing exam
Authorized to prescribe specific medications and order diagnostic/ screening tests in specific clinical areas for specific conditions with access to the support of a collaborative team	Authorized to practice and prescribe autonomously for unlimited clients with varying degrees of health care needs
Not authorized to prescribe Controlled Drugs and Substances	Authorized to prescribe Controlled Drugs and Substances

Authorized to order laboratory and diagnostic screening tests that are directly related to the prescribed treatment	Authorized to order all laboratory and diagnostic screening tests and manage the results
Cannot prescribe as a self-employed nurse	Can prescribe as part of self-employment

(College of Registered Nurses of Newfoundland & Labrador, 2022)

Appendix:

Clinical Practice Areas and Medications

Wound Care: analgesics, antibiotics, antifungals, medicated dressings, topical anesthetics, topical corticosteroids

Sexual and Reproductive Health: antibiotics, antifungals, analgesics, anti-inflammatories, antivirals, contraceptives, emergency contraceptives, topical anaesthetics

Diabetes Education: hypoglycemics, insulin, nicotine replacement, glucagon

Public Health: antibiotics, analgesics, antifungals, anti-inflammatories, antivirals, contraceptives, emergency contraceptives, lactation aids and suppressants, nicotine replacement, opioid antagonists, vitamins, immune globulins, epinephrine

Asthma Education: nicotine replacement, beta 2 agonist inhalers, corticosteroid inhalers, leukotriene inhibitors

Employee Health: antibiotics, immune globulins, epinephrine, permethrin

Community Mental Health: opioid antagonists, nicotine replacement

Primary Care: contraceptives, emergency contraceptives, nicotine replacement, opioid antagonists, vitamins, epinephrine

INR Clinics: anticoagulants, nicotine replacement, vitamins

REFERENCES

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<https://www.cnps.ca/rnprescribing>

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CRNM: Competencies for RN(AP)s

https://www.cnm.mb.ca/uploads/document/document_file_229.pdf?t=1527020882

CRNM: Practice Expectations for RN(AP)s

https://www.cnm.mb.ca/uploads/document/document_file_230.pdf?t=1555606288

CRNM: Scope of Practice for RN(AP)s

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<https://www.princeedwardisland.ca/sites/default/files/legislation/r-10-1-regulated-health-professions-act.pdf>

Regulated Health Professions Act--Reserved activities regulations

<https://www.princeedwardisland.ca/sites/default/files/legislation/r10-1-10-regulated-health-professions-act-reserved-activities-regulations.pdf>

Registered Nurses Regulation.

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