



24 November 2015

Alison Hussey
Senior Advisor, Nursing
Office of the Chief Nurse
Ministry of Health
PO Box 5013
Wellington 6145

Dear Alison

Thank you for the opportunity to supply feedback on the Consultation on amendment of the Medicines (Standing Order) Regulations to enable Nurse Practitioners to issue standing orders.

This feedback has the full support of College of Nurses members.



Consultation on amendment of the Medicines (Standing Order) Regulations to enable nurse practitioners to issue standing orders

Please respond to the questions below.

1. What do you see as the potential benefits of an amendment to the Regulations to authorise nurse practitioners to issue standing orders **now** rather than as part of the review of the regulatory regime for therapeutic products?

This is an essential development on several grounds. Nurse Practitioners are authorised prescribers and the writing of standing orders is a component of that responsibility. Their current inability to perform this function inevitably leads to diminished access for consumers, re work for clinicians, delays in timely care, and frustration for all concerned. A prompt amendment will allow all members of the clinical team to function as efficiently as possible in delivering timely and safe care.

2. What do you see as the potential risks of an amendment to the Regulations to authorise nurse practitioners to issue standing orders **now** rather than as part of the review of the regulatory regime for therapeutic products?

There are no risks.

Nurse Practitioners are authorised prescribers with appropriate education, clinical experience and authority to be able to issue and monitor standing orders for registered nurses.

3. Please provide examples to show the implications of an amendment to the Regulations to authorise nurse practitioners to issue standing orders **now** rather than as part of the review of the regulatory regime for therapeutic products?

There is a steady increase in the number of NPs working in aged care, primary health care and palliative care. These are all areas of diminished availability of medical staff either permanently or at various times of the day. NPs have begun to replace medical services in these settings. If NPs cannot participate in the standing order process as authorised prescribers do then patient comfort, safety and effective treatment will be reduced by delays and inefficiencies.

Yours sincerely



Professor Jenny Carryer RN PhD FCNA(NZ) MNZM
Executive Director