



*Nurse Practitioners
New Zealand*

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Belinda Ray-Johnson
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PHARMAC
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Email: consultation@pharmac.govt.nz

Dear Ms Ray-Johnson

Thank you for the opportunity to provide a submission to the Pharmac consultation on "Proposals related to Nurse Prescribers" which opened on the 19th of July.

We acknowledge the work undertaken on prescribing by Registered Nurses practicing in Diabetes health and the positive reviews that this work achieved. We welcome the changes proposed as it will extend the ability to prescribe to suitably qualified Nurses in primary health and speciality teams, allowing them to work to the top of their scope of practice, improving access to care and reducing the number of steps required for patients to access medications and treatment. We believe that this will reduce the need for standing orders and make prescribing practice more accountable and transparent.

"Registered Nurse Prescriber", means a registered nurse who meets specified requirements for qualifications, training and competence to be a designated prescriber for the purpose of prescribing specified prescription medicines under the Medicines (Designated Prescriber-Registered Nurses) Regulations 2016"

We agree with the above proposal to add a new definition of Registered Nurse Prescriber to Section A: General rules, of the pharmaceutical schedule.

"Nurse Prescriber", means a person who is a Nurse Practitioner in terms of the Medicines Act 1981, or a Registered Nurse Prescriber"

We agree with amending the definition of 'Nurse Prescriber' to include both Nurse Practitioners and Registered Nurse Prescribers in Section A: General Rules of the Pharmaceutical Schedule. However, we do feel that there may be a risk of confusion given that Nurse Prescriber (which will include Nurse Practitioners) and Registered Nurse Prescriber sound similar, but will have vastly different prescribing powers - one being a Designated Prescriber whilst Nurse Practitioners are Authorised Prescribers under the Medicines Amendment Act.

“Specialist”, in relation to a Prescription, means a ~~doctor~~ Practitioner who holds a current annual practising certificate and who satisfies the criteria set out in paragraphs a. or b. or c. or d. below:

- a. the doctor is vocationally registered in accordance with the criteria set out by the Medical Council of New Zealand and the HPCA Act 2003 and who has written the Prescription in the course of practising in that area of medicine; or
- b. the doctor is recognised by the Ministry of Health as a specialist for the purposes of this Schedule and receives remuneration from a DHB at a level which that DHB considers appropriate for specialists and who has written that prescription in the course of practising in that area of competency; or
- c. the doctor is recognised by the Ministry of Health as a specialist in relation to a particular area of medicine for the purpose of writing Prescriptions and who has written the Prescription in the course of practising in that area of competency; or
- d. the ~~doctor~~ Practitioner writes the prescription on DHB stationery and is appropriately authorised by the relevant DHB to do so.

We agree with amending the definition of *Specialist* in Section A: General Rules of the Pharmaceutical Schedule to the above wording. We would like some clarification around the meaning of “appropriately authorised” in part d) and how the appropriate authority would be given and by whom. Additionally, we are concerned that despite this definition removing an issue which has caused problems for patients trying to obtain their medications, as prescribed by a Nurse Practitioner, a further practice barrier remains, in that those Nurse Practitioners working outside the DHB system, such as Primary care, NGO services or the private sector, would be excluded.

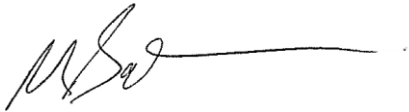
We also note the proposal goes on to say that Special authority applications by Nurse Practitioners will continue to be limited to medicines where they meet the “relevant practitioner” application criteria, but anticipate a review of the Special Authority system will occur shortly. We do have concerns around Registered Nurse Prescribers not being able to apply for Special Authority Approvals, but seek clarification if they would be able to apply for renewals of Special Authority as people with stable long-term conditions may be cared for by Registered Nurse Prescribers.

We also would like to draw your attention to the following paragraph in the Pharmaceutical schedule definition of Hospital Pharmacy specialist:

a “specialist” means a doctor who holds a current annual practicing certificate and who satisfies the criteria set out in paragraphs (a) or (b) or (c) of the definitions of Specialist below.

This definition may also need reviewing in light of the other amendments.

Yours sincerely

A handwritten signature in black ink, appearing to read 'M Baldwin', followed by a long horizontal line extending to the right.

Mark Baldwin NP
Secretary NPNZ