

Nurse Practitioners New Zealand

A division of the College of Nurses Aotearoa (NZ) Inc PO Box 1258 Palmerston North 4440 p: +64 6 358 6000

Friday 8 January 2016

Christine Chapman Therapeutic Group Manager PHARMAC PO Box 10 254 Wellington 6143

Email: COPDconsultation@pharmac.govt.nz

Dear Ms Chapman,

Nurse Practitioners New Zealand (NPNZ) would like to thank Pharmac for seeking feedback for the "Proposal to list new respiratory products and changes to some currently listed products", which opened on the 18th of December.

We welcome the changes proposed as it will improve access to treatment for many New Zealanders, and that some of the new long acting muscarinic antagonists (LAMA) will be available without the need for Special Authority.

We note that under the section on LAMAs Umeclidinium is to be listed without a Special Authority or HML restriction and would be able to be prescribed by Nurse Practitioners with respiratory scope.

Nursing Council of New Zealand authorise three scopes of practice which are Enrolled nurse, Registered nurse and Nurse Practitioner (NP). Many Nurse Practitioners manage patients with respiratory illnesses in addition to those NPs working within the respiratory specialty area. They will include but are not limited to older adult, primary health care (PHC) and emergency care.

Nursing Council NZ is currently undergoing a review of the NP scope of practice and as a consequence the scope is broadening. This will mean that defining areas of practice within the scope will reflect population groups such as long term conditions rather than more disease focussed areas of practice such as respiratory medicine, meaning that in the future there will not be an area of practice NP – Respiratory per se. In addition NPs working across many areas of practice, including PHC request spirometry under well-defined diagnostic criteria which is within the diagnostic skill set of NPs. For these reasons NPNZ would ask that this artificial and soon to be obsolete restriction not be included and for the authority to prescribe LAMAs to include simply Nurse Practitioner Scope of Practice.

Secondly we note that for Tiotropium Bromide Special Authority the initial application is still restricted to a General Practitioner or relevant Specialist. There is an ever increasing number of NPs who provide the role of primary care giver especially in PHC and older adult care. Given the increasing numbers of Nurse Practitioners these areas and the changing models of healthcare

provision NPNZ respectfully ask that initial application for Tiotropium Bromide Special Authority be altered to include Nurse practitioners.

We look forward to hearing back from Pharmac as regards our submission.

Warm regards

Mark Baldwin MSc; PG Dip, B.A.(Hons)

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