

EXTENDED LIMITED INDEPENDENT PRESCRIBING AUTHORITY FOR NURSE PRACTITIONERS WORKING IN SEXUAL AND REPRODUCTIVE HEALTH CARE SCOPE OF PRACTICE

Statement about *Extending Prescribing Authority to Sexual and Reproductive Health Nurse Practitioners* (the application) to the Minister of Health

- 1 The New Prescribers Advisory Committee (NPAC) has assessed the Nursing Council's application extending limited independent prescribing authority to nurse practitioners working in a sexual and reproductive health care scope of practice.
- 2 We are satisfied that the application meets the criteria necessary for extending limited independent prescribing authority in the areas of sexually transmitted infections (STI) and family planning. The application demonstrates a clear public health need for nurse practitioners prescribing in these areas.
- 3 We have some outstanding concerns regarding the inclusion of hormone replacement therapy (HRT) and sexual dysfunction treatments in the scope of practice and have been unable to reach consensus regarding this.
- 4 The Nursing Council has provided detailed information regarding the necessary core competencies required for nurse practitioners working in this scope of practice. We consider that the education structure proposed by the Nursing Council will ensure that nurse practitioners are competent to prescribe. The scope of practice itself has been progressed and is well-developed.
- 5 A significant amount of work has gone into developing the indicative medicines list. However, the list requires additional input from experts to ensure that pharmacological interventions are appropriate for prescribing in a sexual and reproductive health care scope.
- 6 We would have liked greater analysis of the submission documents. The consultation advice is not presented in a clear manner and more comprehensible links between comments and the organisations, groups or individuals that provided them could have been made. Māori were consulted at appropriate levels.

Introduction

- 7 There are a significant number of nurses working in a sexual and reproductive health care scope of practice. The Nursing Council has applied to extend prescribing rights to qualified nurse practitioners working in this scope and considers that the extension of prescribing authority will result in improved patient care and access to services.

- 8 The NPAC presents the following advice regarding the application to the Minister of Health.

Background

History of the application assessment process

- 9 The Nursing Council submitted its application to the NPAC on 12 February 2002. We considered the application on 12 March 2002 and requested that the Nursing Council provide further information on:
 - the scope of practice, clientele, age groups and settings
 - the justification for some medicines included on the indicative medicines list
 - international evidence and the justification for extending prescribing authority
 - the consultation document and the organisations, groups and individuals who were consulted
 - the references pertaining to documents on which the application is based.
- 10 We received the additional material on 30 April 2002 and a Subcommittee was established to review the Nursing Council's application, meeting on 28 May 2002. The Subcommittee noted that the application had progressed sufficiently and referred it back to the full Committee for final deliberations.
- 11 At the Committee meeting on 17 June 2002 we decided to present formal advice to you regarding this application.

Specific issues for consideration arising from the Nursing Council's application

- 12 In addition to issues raised earlier in this report, the NPAC would like to comment on the following:
 - the inclusion of medicines that fall outside of the scope of practice including HRT and sexual dysfunction treatments
 - the analysis of submissions received on consultation
 - errors in the application

Inclusion of medicines outside of scope of practice

- 13 The indicative medicines list contains several pharmacological interventions that fall outside of the defined scope of practice including medicines that are not available in New Zealand and preparations to treat complex conditions like menopause-related conditions and erectile dysfunction. The indicative medicines list also contains some errors in the indications given for certain prescription medicines. Further work is needed on this list to ensure that nurse practitioners have access to appropriate treatments. Although we consider that

access to an open Pharmaceutical Schedule is preferable to a prescribed formulary, the Nursing Council should seek additional expert advice regarding the list.

- 14 The applicant seeks to extend limited independent prescribing authority to cover treatment for HRT, sexual dysfunction and menopause. These conditions are complex and may be linked to other health conditions. Nurse practitioners working in a sexual and reproductive health care scope of practice may not have access to full patient information or access to the medicines required to treat other health conditions.
- 15 The Nursing Council notes that nurse practitioners in this scope of practice work in a collaborative-prescribing environment and the NPAC supports greater communication between health practitioners.

Consultation

- 15 As comments in the submissions are not linked to any particular group, it is difficult to validate which organisation, group or individual raises which issue(s). The document also lacks a comprehensive list of those organisations, groups and individuals that were consulted. There is some concern that more consultation could have been undertaken in the areas on the periphery of the scope of practice such as HRT and sexual dysfunction. In particular, there appears to be a lack of consultation with current specialist medical prescribers working with these conditions in a sexual and reproductive health scope (such as endocrinologists or geriatricians). There are also several minor errors in the tables summarising the submissions.

Consultation with consumer groups

- 16 The application contains little evidence of consultation with consumer groups.

Errors

- 17 There are a number of errors in this application, including errors for indications and contraindications of the indicative medicines list that will need to be addressed.

Recommendations

Consensus

- 18 The Committee did not reach consensus regarding the extension of prescribing authority to nurse practitioners working in a sexual and reproductive health care scope of practice. There are outstanding concerns regarding:

- the indicative medicines list

- the justification and inclusion of treatment for HRT, menopause and sexual dysfunction
- who should be responsible for the development of clinical guidelines covering nurse practitioners working in this scope of practice.

Recommendations

19 The NPAC recommends that the Minister of Health:

- **Agree** that nurse practitioners working in the scope of sexual and reproductive health care be granted limited independent prescribing authority and that they have access to the open Pharmaceutical Schedule but are limited to those medicines relevant to a defined scope of practice.
- **Agree** that the Nursing Council work with experts to further progress the indicative list of medicines.
- **Agree** that the applicants develop clinical guidelines to ensure that prescribing in an open environment has adequate clinical safety mechanisms.

14 The NPAC requests that:

- the applicants work with experts to further progress the indicative list of medicines
- the applicants ensure that all available evidence is considered in the development of clinical guidelines and clinical pathway development within the scope of practice.