



Proposed Registration standard for scheduled medicine endorsement consultation

**Australian Primary Health Care Nurses Association (APNA)
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The role of primary health care nurses in medication management

Nurses are a substantial component of the primary health care workforce, and make an increasingly important contribution to primary health care in Australia. Primary health care nurses play a major role in improving health outcomes through their role in delivering quality chronic disease management, immunisation services, and other preventative care, as well as curative care, care for the ageing, dealing with issues such as medicines safety, and implementing improvements in primary health care systems.

There are now almost 11,000 nurses working in the general practice sector alone, and the majority of general practices in Australia employ at least one nurse. In addition, nurses make an important contribution across a number of other primary health care settings, such as community health services, schools, workplace health, prisons and many other settings.

In contrast to similar overseas countries, very few nurses working in primary health care in Australia have independent prescribing rights: such rights are limited to nurse practitioners and eligible midwives.

Nevertheless, primary health care nurses can and do play an important role in medication management in general practice and other primary health care settings. This role typically includes:

- Reviewing medication use in the context of a patient's health assessment and/or the development of chronic disease plans.
- Advising patients on issues relating to quality use of medicines.
- Helping to identify patients at risk of adverse events due to poor management, poor understanding of their medication, and/or compliance issues.
- Contributing to the patient's health record including notes on medication use.
- Advising patients on, and directly administering, vaccines.
- Managing stores of medications and vaccines (including starter packs).
- Some nurses also take on more extended roles in medication management. For example, remote area nurses frequently initiate medications under standard protocols.

Questions for consideration

1. Do you support the scope of the current endorsement for scheduled medicines and current approved registration standard being expanded to include registered midwives as well as registered nurses?

Yes as long as the individual practitioner, whether registered nurse or midwife, has demonstrated advanced skills and knowledge and fulfilled the requirements of the relevant qualification required for endorsement within the individual's specific scope of practice.



2. Do you support the current scope extending beyond rural and isolated practice for both registered nurses and registered midwives?

Yes, a diverse range of practice contexts will benefit from this. From APNA's point of view this will benefit patients attending primary health care settings, such as general practice, where demand often exceeds capacity in all geographical areas; urban as well as regional and rural. It will also facilitate nurses in primary health care with advanced skill sets to work to their full scope of training, knowledge and skills. In doing so, it will also address the need to improve timely access for people with non-urgent conditions in all geographical locations.

Many registered nurses have already undertaken education and met competencies for expanded practice prior to the National Registration and Accreditation Scheme commencement on 1 July 2010 to meet the needs of their patient population. Recognition of these qualifications and scope was lost. Expanding the current scope of endorsement will recognise and acknowledge the advanced skills and knowledge that these registered nurses already have as well as those that may be required to undertake such education to enable timely, safe and accessible healthcare for patients.

Expanding endorsement beyond rural and remote nurses will help address health workforce issues that currently exist and have been forecast to increase over the next decade. It will facilitate the health sector to be flexible and innovative to meet patient needs.

3. Is the scope of application of the scheduled medicines endorsement registration standard suitable?

Yes. The standard is not restrictive but rather allows flexibility by the States and Territories to determine, in accordance with their respective drugs and poisons legislation and the Department of Health, appropriate skill sets for endorsement and health settings for its use.

4. Are the requirements of the scheduled medicines endorsement registration standard suitable?

Yes:

- It recognises that endorsements require appropriate education and training to ensure safe, quality care is given.
- It incorporates all the relevant legislation and stakeholders, including employers, to ensure that endorsed providers are used appropriately and where needed within the healthcare system.

5. Are there other requirements that should be included in the scheduled medicines endorsement registration standard?

None identified.



6. Are the definitions contained in the standard clear and appropriate?

Not all are. For example, Health Services Permit is not a generic term used in all States and Territories.

Perhaps a glossary of terms to ensure all relevant stakeholders clearly understand the meaning such as the glossary of terms contained in the *Nurse Endorsement Policy Framework 2012* (Department of Health, Victoria).

7. What is the likely impact of this proposal on individual registrants?

Proposed expansion of endorsement for scheduled medicines will widen the nurses' current scope of practice within their workplace to encompass their actual scope, in accordance with their training and education.

It will provide assurance to members of multidisciplinary teams of the registered nurse training, skills, knowledge and competence to perform expanded/advanced roles within their workplace; thereby reducing concerns surrounding legal liability within the multidisciplinary team.

This will also assist in reducing the workload of doctors where capacity of the health service is exceeded.

8. Are there jurisdiction-specific effects for health practitioners, or governments or other stakeholders that the National Board should be aware of, if this registration standard is approved?

None identified.

9. Are there any implementation issues the National Board should be aware of?

Implementation will require widespread education and dissemination to all relevant stakeholders, including professional associations, union groups, employers and health organisations.



About APNA

The vision of the Australian Primary Health Care Nurses Association (APNA) is for a healthy Australia through best practice primary health care nursing.

APNA is the peak professional body for nurses working in primary health care including general practice. With more than 3500 members, APNA provides primary health care nurses with a voice, access to quality continuing professional development, educational resources, support and networking opportunities.

APNA continually strives to increase awareness of the role of the primary health care nurse, and to be a dynamic and vibrant organisation for its members.

Primary health care nursing is wide ranging and covers many specialist areas including general practice, Aboriginal health, aged care, occupational health and safety, telephone triage, palliative care, sexual health, drug and alcohol issues, women's health, men's health, infection control, chronic disease management, cardiovascular care, immunisation, cancer, asthma, COPD, mental health, maternal and child health, health promotion, care plans, population health, diabetes, wound management and much more.

APNA aims to:

1. Support the professional interests of primary health care nurses
2. Promote recognition of primary health care nursing as a specialised area
3. Provide professional development for primary health care nurses
4. Represent and advocate for the profession
5. Collaborate with other stakeholders to advance our mission
6. Ensure a sustainable and growing professional association, by and for primary health care nurses.