

RN Prescribing

Can we count on you to urge Premier Wynne and Minister Hoskins to deliver on promised amendments to the *Nursing Act* and subsequent regulations/standards to enable RN prescribing?

Will you ensure that an enabling framework is used to implement RN prescribing in Ontario?

RNs represent the largest group of regulated health-care professionals in Ontario (107,124)¹ and far outnumber any other regulated provider. RNs are present in virtually every health-care setting and work in interprofessional teams. The public has ready access to RNs, and poll after poll shows that RNs are privileged with the highest public trust compared to any other occupation. RNs are often the first person a patient/client sees before or when they enter the health-care system. A key feature of health system effectiveness involves utilizing all health-care professionals, including RNs and nurse practitioners (NPs), to their full competencies, knowledge and skills.

Expanding the scope of practice of RNs will help to maximize the effectiveness and efficiency of interprofessional teams and improve Ontarians access to health services. In 2012, RNAO led an expert provincial task force, which identified the opportunity to expand the role of RNs to include the ability to prescribe medication, order diagnostic testing, and communicate a diagnosis (referred to as RN prescribing).² This recommendation was based on the mountain of evidence demonstrating the success of RN prescribing in the United Kingdom, Australia, Ireland, New Zealand, South Africa, the United States and the Netherlands.³ RN prescribing is also underway in a number of other Canadian provinces.

We believe that Ontarians are ready for RNs to take on an expanded role in the delivery of their care. RNs are often actively involved in the prescribing of medication, communicating diagnoses and arranging for diagnostic testing, through delegation. Settings where this frequently occurs include (but are not limited to): public health units, emergency departments, long-term care, critical care, primary care and nursing stations. However, RNs often feel limited in this capacity as medical directives may not always respond to the highly contextual cases encountered in the clinical setting. RN prescribing supports professional practice and can improve health system access and alleviate wait times. It will be a key factor in the government's commitment to provide 24/7 access to primary care by 2018.

At RNAO's Annual General Meeting in 2013, Premier Kathleen Wynne recognized that nurses want their scope of practice to match their expertise. She committed to working with the College of Nurses of Ontario (CNO) and with RNAO to identify opportunities to expand their scope, including an exploration of RN prescribing.⁴ This was followed by a formal election's platform commitment in May 2014, to implement RN prescribing.⁵ Minister Hoskins reaffirmed the government's support of RN prescribing at RNAO's Queen's Park Day 2015, announcing that consultations would begin in Spring 2015.⁶

RNAO urges that RN prescribing be based on an enabling framework that improves access to care by recognizing the broad depth of RNs' expertise. A key lesson from the U.K. experience is that prescribing lists are restrictive and unintentionally present barriers to achieving care. Instead, there must be recognition that RNs are self-regulated professionals with a duty to understand the limits of their practice. Appropriate standards can be established that utilize this duty, while advancing access to care for Ontarians. Having thousands of RNs practicing to their full and expanded scope across all sectors will have a tremendous impact on current gaps in service, and will promote person-centred care. The current risk of delayed access to care imposed by the limitations on the RN scope of practice are much more worrisome and can be alleviated by a scope expansion.

References:

¹ College of Nurses of Ontario. Membership Totals at a Glance. Retrieved from <http://www.cno.org/en/what-is-cno/nursing-demographics/membership-totals-at-a-glance/>

² Primary solutions for primary care: Maximizing and expanding the role of the primary care nurse (2012, June). *Registered Nurses' Association of Ontario*. Retrieved from: http://rnao.ca/sites/rnao-ca/files/Primary_Care_Report_2012_0.pdf

³ Bradley, E., B. Hynam, and P. Nolan, *Nurse prescribing: reflections on safety in practice*. Social Science & Medicine. 65(3): p. 599-609.

⁴ Enhancing the role of Ontario nurses. (2013, April 12). Government of Ontario. Retrieved from: <http://news.ontario.ca/opo/en/2013/04/enhancing-the-role-of-ontario-nurses.html>

⁵ More nursing powers, better care. (2014, May 16). *Liberal Party of Ontario*. Retrieved from: <http://www.ontarioliberal.ca/newsblog/NewsDetails.aspx?id=More+Nursing+Powers%2C+Better+Care>

⁶ Premier, Minister of Health say province is moving forward on RN prescribing (2015). *Registered Nurses' Association of Ontario*. Retrieved from: <http://rnao.ca/news/media-releases/2015/02/27/premier-minister-health-say-province-moving-forward-rn-prescribing>