



COLLEGE OF NURSES  
OF ONTARIO  
ORDRE DES INFIRMIÈRES  
ET INFIRMIERS DE L'ONTARIO

THE STANDARD OF CARE.  
L'EXCELLENCE EN SOINS

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March 6, 2017

**By E-mail**

Doris Grinspun  
Chief Executive Officer  
Registered Nurses' Association of Ontario  
158 Pearl Street,  
Toronto, ON M5H 1L3

Dear Doris:

**Re: NP authority to prescribe controlled substances**

Thank you for your feedback on the proposed regulatory and by-law changes, received February 14, 2017. This response is structured to align with RNAO's recommendations.

***Recommendation #1: Support for proposed regulatory changes***

We appreciate RNAO's support of the College's public protection mandate.

***Recommendation #2: Methadone exemption process***

Developing a methadone exemption process would require collaboration between CNO, the provincial Government and Health Canada. There have been discussions about this; however, there is no activity currently underway. The landscape has changed since the *Methadone Treatment and Services Advisory Committee* report<sup>1</sup> was released. This past October, Suboxone became available on the Ontario Drug Benefit Formulary, which Government describes as "an effective treatment used to relieve opioid withdrawal symptoms that has a lower risk of overdose than methadone"<sup>2</sup>. In alignment with this change, and as part of the provincial opioid strategy, Government announced they are "working with the College of Nurses of Ontario to enable NP prescribing of Suboxone, improving access to a methadone alternative"<sup>3</sup>.

***Recommendations #3 and 4: Education requirement and learning from others***

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<sup>1</sup> Methadone Treatment and Services Advisory Committee. (2016). *Methadone Treatment and Services Advisory Committee Final Report*. Retrieved from

[http://health.gov.on.ca/en/public/programs/drugs/ons/docs/methadone\\_advisory\\_committee\\_report.pdf](http://health.gov.on.ca/en/public/programs/drugs/ons/docs/methadone_advisory_committee_report.pdf)

<sup>2</sup> Ontario Government. (2016). *Strategy to Prevent Opioid Addiction and Overdose*. Retrieved from <https://news.ontario.ca/mohltc/en/2016/10/strategy-to-prevent-opioid-addiction-and-overdose.html>

<sup>3</sup> Ontario Government. (2016). *Strategy to Prevent Opioid Addiction and Overdose*. Retrieved from <https://news.ontario.ca/mohltc/en/2016/10/strategy-to-prevent-opioid-addiction-and-overdose.html>

A national working group of the Canadian Council of Registered Nurse Regulators (CCRNRR) was launched in 2012 to establish consistent national approaches in regulating NPs prescribing controlled substances. As one aspect of the national work, informed by evidence and best practices, the group identified controlled substances education requirements that address federal jurisprudence, the unique risks of harm associated with controlled substances and strategies for mitigating risk of harm. Existing courses were identified and assessed against these requirements – with specific courses recommended and implemented in Canadian jurisdictions. At the time of the review, there was no interprofessional education identified related to the above requirements<sup>4</sup>.

Conflict of interest was considered as part of the national work (e.g., courses administered by pharmaceutical industry were not considered). Furthermore, CNO has existing expectations to address conflict of interest. For example, a regulatory requirement that “a member shall not engage in conduct that results, directly or indirectly, in a personal or financial benefit that conflicts with his or her professional or ethical duty to a patient as a result of prescribing, dispensing, selling or compounding a drug”<sup>5</sup>. Also, in the *NP practice standard*, this is addressed under “conflict of interest”.

As one piece of information used to inform decision-making, CNO conducted a review of regulator policies (e.g., relevant Ontario health regulators as well as international nursing regulators). Part of this process involved consulting with other regulators to understand the rationale for policy decisions. To support informed decision-making, CNO’s website will provide links to resources, including interprofessional resources. CNO continues to be actively engaged, and seeks to learn from, other regulators.

#### ***Recommendation #5: Regulatory process***

In 2011, in advance of the anticipated federal changes that would enable NPs to prescribe controlled substances, the Ontario Government added a regulatory restriction to prohibit Ontario NPs from prescribing controlled substances. Changes to scope of practice are a provincial Government decision. Since the federal changes in 2012, we’ve been consulting with Government. This past October, when policy direction was received from Government, the College expeditiously, and in record time, proposed regulatory changes to Council. We were able to move so quickly given all of the policy work conducted since 2012 to inform decision-making.

We continue to work with Government toward implementation by the end of March 2017 as per Minister Hoskins’ letter: <http://www.cno.org/globalassets/standard-online/ministerletter.pdf>. As we have more information available, we will update the website: <http://www.cno.org/en/trending-topics/nps-and-prescribing-controlled-substances/>.

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<sup>4</sup> There is interprofessional education that builds on foundation controlled substances competencies (e.g., CAMH course for individuals who work in addictions). NPs are expected to identify unique learning needs related to their practice sector and patient population – activities to meet their learning needs may include interprofessional education.

<sup>5</sup> Subsection 16(1) of regulation 275/94 under the *Nursing Act, 1991*

Dr. Grinspun  
March 6, 2017  
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Thank you for your input. Should you require further information, please contact Kevin McCarthy, Director of Strategy, at [kmccarthy@cnomail.org](mailto:kmccarthy@cnomail.org).

Sincerely,

A handwritten signature in black ink, appearing to read "Anne L. Coghlan". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Anne L. Coghlan, RN, MScN  
Executive Director and CEO

/et