

RN Prescribing

Can we count on you to urge Premier Wynne to deliver on her promised amendments to the *Nursing Act* and subsequent regulations/standards to create a framework for RN prescribing?

A key feature of health system effectiveness involves utilizing all health-care professionals, including nurses, to their full competencies, knowledge and skills. 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).¹ This recommendation was based up the mountain of evidence demonstrating the success of RN prescribing in the United Kingdom. We believe that Ontarians are ready for RNs to play an expanded role in the delivery of their care. RN prescribing supports professional practice and can improve health system access and alleviate wait times. Based on data from 2013, Ontario would have to add 17,239 more registered nurses (17.3 per cent) to the workforce to catch up with the rest of Canada.² This simply cannot be done by increasing production of nurses, therefore RNs currently in the system must work to their full scope of practice. RN prescribing 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.³ This was followed by a formal election's platform commitment in May 2014, to implement RN prescribing.⁴

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 the duty to understand the limits of their practice. Appropriate standards can be established that utilize this duty, while advancing access to care for Ontarians.

References:

¹ 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

² Ontario Pre-Budget 2015: Moving Forward on Deficits: Social, Health, Environment and Infrastructure – Submission to the Standing Committee on Finance and Economic Affairs (2015, January 29). *Registered Nurses Association of Ontario*.

³ 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>

⁴ 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>