



Handbook for Registered Nurse Prescriber in Community Health recertification programme

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1. The Handbook

This handbook is for all nurses who are participating in the Registered Nurses Prescriber in Community Health (RNPCH) programme.

It is also a resource for all Clinical Supervisors and Mentors who are supporting the nurses. It aims to give you a central reference point for the programme content, processes and requirements.

2. Introduction

The preparation required to become RNPCH includes education, clinical supervision and credentialing of competence to prescribe in preparation for Nursing Council New Zealand (NCNZ) approval to be a prescriber within this scope. The programme will be completed in 6 months.

Prescribing for registered nurses (RNs) in community health is a limited, guideline-based model of prescribing designed to cater for normally healthy people who have specific minor ailments or common conditions in the community. The preparation, role and responsibility of RNPCH is not equivalent to other prescribing roles i.e. medical or nurse practitioners, registered nurses prescribing in primary health and specialty teams or pharmacist prescribers. A description of the 3 levels of nurse prescribing is found in Appendix 1: *'Comparison of nurse prescribing models in New Zealand'*

The Nursing Council of New Zealand (NCNZ) believes that the three models for registered nurse prescribing will provide flexibility for different patient needs and that prescribing authority will:

- Make care more convenient for patients and free up doctors' time
- Improve patient access to healthcare
- Promote close collaboration between team members and build on the existing skills and knowledge of registered nurses
- Enable nurses to take accountability for prescribing decisions based on their assessments rather than working under standing orders or asking a doctor to sign a prescription

3. Vision and Values

The RNPCH Trial and evaluation programme was guided by the values and objectives of CMH strategic vision. The vision highlights the commitment to work 'Together' with other sectors to achieve equity in health outcomes for Maaori, Pacific and communities with health disparities. Connected community and primary health care services have a central role in reducing inequalities in health for our community.

4. Overview of the Learning Programme

The learning programme aims to adequately prepare the RN in health literacy, pharmacology, medication management, clinical assessment and appropriate diagnostic reasoning skills. The potential health conditions for this type of prescribing include common skin conditions such as simple eczema, impetigo, fungal infections and parasites, common aches and pains, constipation, ear infections, sore throats and rheumatic fever prophylaxis and ongoing treatment.

The RN will undergo six months of education which consists of a blended learning approach. This includes two face to face study days, online learning, clinical supervision within the workplace and the development of a portfolio.

4.1 Learning Outcomes

At the end of the programme the RNs will:

- Demonstrate assessment of patients with minor common conditions
- Plan appropriate therapy for common and minor conditions
- Calculate appropriate doses of medicines from the RNDPCH medicine list
- Write a safe and legal prescription from the RNDPCH medicine list
- Describe the limitations of their prescribing practice
- Demonstrate knowledge of nationally approved management guidelines related to common conditions in the Community/Primary Health
- Demonstrate use of clinical health pathways in the care and treatment of the patient/client
- Demonstrate how to order laboratory tests and obtain results
- Document and communicate prescribing decisions to clinical supervisor/mentor
- Detect and report adverse drug reactions in a timely manner
- Discuss and provide a patient with appropriate information about their medicines ensuring health literacy is maintained

4.2 Study days

Compulsory attendance at the two six hour study days is required. Absenteeism at a study day will be managed on a 'case by case' basis. This will mean that an 'individual study plan' will be developed with the Programme Co-ordinator and the RN.

4.3 eLearning Course

The eLearning course consists of an estimated thirty hours of learning.

The online learning resources include pathophysiology and management of common conditions, pharmacology, including principles of pharmacodynamics and pharmacokinetics at the level of a graduate nurse. Also included are learning resources on antimicrobial resistance and stewardship, legislation and regulations that need to be considered in RN designated community nurse prescribing.

Included in the eLearning course are links to the 'Auckland regional health pathways' that direct the RN to the specific health condition for which they will be making prescribing decisions.

The eLearning course consists of six modules:

- a) Module one: Health assessment and Clinical Reasoning
- b) Module two: Dermatology
- c) Module three: Ear Infections
- d) Module four: Primary and Secondary Prevention of Rheumatic Fever
- e) Module five: Legal aspects of RN Designated Prescriber in Community health
- f) Module 6: Principles of Pharmacotherapeutics

4.4. Portfolio

In order to demonstrate on-going competence the RN will develop a portfolio that will include:

- Self-assessment of NCNZ competencies, demonstrating how these have been met.
This must be verified by the clinical supervisor
- Current evidence that relates to the prescribing decisions made
- Two case studies to demonstrate clinical decision making, assessment, treatment recommendations and evaluation of treatment plan

If the required three yearly portfolio submission has been made prior to the due date of the RNPCH portfolio, the indicators that reflect prescribing decisions need only to be completed and submitted.

The portfolio is assessed by the Programme Co-ordinator and presented to the Panel of assessors who verify and approve the portfolio. The panel of assessors include a range of health care professionals.

Continuing competence requirements will be monitored three yearly by NCNZ within the recertification programme. This will include:

- Evidence that prescribing is incorporated into current practice
- Regular professional development to update prescribing knowledge
- A regular peer review, audit or credentialing of prescribing

The authorisation would restrict the nurse to prescribing only from the approved community schedule of prescription medicines.

A record of clinical practice hours/days must be included in the portfolio.

The portfolio submission date ishowever, if the RN meets all required competencies earlier, the portfolio may be submitted before the due date.

4.5 Clinical Supervision

Clinical supervision serves as an educative and supportive function whereby the RN can share concerns and difficulties with their clinical supervisor (who has greater experience than the RN) regarding their clinical practice. It is a process that allows for the RN to develop their clinical practice through the support of the clinical supervisor through direct or indirect observation so that quality nursing care is delivered.

4.5.1 Clinical Supervisor Responsibilities

The role of the clinical supervisor is to provide guidance and support to the RN in gaining practice experience during the programme. The clinical supervisor is therefore expected to:

1. Have a clear understanding of the requirements of the programme.
2. Negotiate with the RN the fortnightly supervision meetings to discuss RN's learning outcomes, their progress and achievement.
3. Create learning opportunities and enable the RN to make the best possible use of all resources within the clinical environment.
4. Working alongside the RN and observing their performance during patient/client care so that their specific learning needs are met.
5. Overseeing teaching and learning opportunities and organising other relevant members of the health care team to contribute towards the RN's learning and practice
6. Provide timely/ongoing constructive feedback to RN

4.5.2 RN Responsibilities

A record of professional development goals, competencies met and any action that needs to be undertaken by either clinical supervisor and/mentor must be kept by the RN. This information will contribute towards the development of a portfolio. The RN must:

- Negotiate learning contract and time frames with clinical supervisor
- Participate in clinical teaching experiences provided
- Reflect on constructive feedback provided by clinical supervisor
- Develop a plan to meet the requirements provided
- Develop a plan to meet the requirements of the clinical competencies
- Acknowledge own skills and knowledge level
- Seek support and information required in a timely manner

5. Mentorship

Mentoring is either a formal or informal process that enables professional development through guidance, support, counsel and insight. The RN will meet regularly with a Mentor of their choice for professional support.

6. Case Review: Feedback Log

The RN will keep a case review feedback logbook which must be taken to each clinical supervision meeting. This will help monitor their progress in practice on a fortnightly basis to explore growing competency. The logbook will contain a record of the patient history, diagnosis, treatment plan, advice, evaluation and rationale for prescribing decisions. Clinical practice will be evidenced in the portfolio by working with the clinical supervisor, and identifying relevant practice issues and suggesting or implementing changes within the clinical supervision records.

7. Communication

Communication to the programme co-ordinator must be done via email:

The clinical supervisor/mentor and RN may decide how they would prefer to communicate with each other. This can be decided on in the first meeting and documented in the learning contract. If any concern/issue requires being addressed, a 'cause for concern meeting' form must be completed by either the clinical supervisor/mentor or RN. This will be discussed with the programme co-ordinator and CNA if required.

Appendix 1: Comparison of nurse prescribing models in New Zealand

Table 1: Comparison of nurse prescribing models in New Zealand

Proposed Registered nurse prescribing in community health	Registered nurse prescribing in primary health and specialty teams	Nurse practitioner Prescribing authority
Designated prescriber: Able to prescribe from a limited schedule of Medicines.	Designated prescriber: Able to prescribe from a schedule of common Prescription medicines.	Authorised prescriber: Able to prescribe any Prescription medicine.
<p>Scope of practice</p> <p>Must be credentialed on a recertification programme for registered nurse prescribing in community health. Uses clinical pathways/ guidelines to treat a small number of conditions for normally healthy people.</p>	<p>Scope of Practice</p> <p>Must work in a collaborative team with an authorised prescriber available for consultation. Able to diagnose and treat common conditions (e.g. asthma, diabetes, hypertension) within a collaborative team.</p>	<p>Scope of Practice</p> <p>Able to independently assess, diagnose and treat a range of conditions for a population group in an area of practice. May work autonomously or within a health care organisation. Consults with health professional colleagues</p>
<p>Additional Qualification</p> <p>Recertification programme including education, supervision in practice and credentialing.</p>	<p>Additional Qualification</p> <p>Post graduate diploma in registered nurse prescribing for long term conditions and common conditions</p>	<p>Additional Qualification</p> <p>Clinical Master’s degree in nursing.</p>

NZNC, 2016

Appendix 2: Standards for Registered Nurses Prescribing in Community Health Courses

Aim: to prepare registered nurses to prescribe from the list of community nurse medicines safely and appropriately.

This course will prepare community nurses to undertake a period of clinical learning to prescribe from the list of community nurse medicines safely and appropriately. This course will provide the registered nurse with an understanding of the legal, ethical and practical considerations that underpin community nurse prescribing as well as basic principles of therapeutics and pharmacokinetics.

Standard 1: Each programme complies with the legislated requirements and Nursing Council policies and guidelines.

Criteria:

- The co-ordinator for the programme is a registered nurse with a current annual practising certificate; and
- Other teaching staff have relevant experience or presenting knowledge; and
- Any programme preparing nurses for prescribing must comply with the relevant regulations.

Standard 2: Each programme will have a curriculum that supports a registered nurse to develop knowledge of common ailments and infections and prescribing.

Criteria:

- Each programme will be developed collaboratively between the nursing/health service provider(s) and an accredited education provider, and include appropriate multidisciplinary input; and
- The programme is located within the New Zealand health context; and
- The development of nursing prescribing competency for community nurses is the focus for the programme; and
- The curriculum will include integration of relevant theory, research and practice for achieving the competencies for community nurse prescribing; and

- The content for programmes leading to nurse prescribing will include:
 - underpinning legislation, schedules of medicines, access to subsidies and ethical obligations
 - antimicrobial resistance and prescriber responsibilities
 - prescribing medicines safely across the lifespan.
 - pharmacology and prescribing of relevant medications related to minor ailments and illnesses; and contraception
 - drug actions, interactions and side effects /adverse reactions in the context of practice.
 - assessing minor ailments and health conditions including clinical assessment that identifies other medical conditions and medicines
 - clinical pathways, protocols and decision support tools to inform clinical decisions
 - optimal prescription writing
 - limits of their prescribing practice and when to refer on
 - Working with the patient, using health literacy skills to appropriately select and educate them regarding their medicines; and
 - demonstrates responsibility for documentation and communication with the healthcare team

Standard 3: Each module will have clearly defined student-centred teaching, learning and assessment strategies which support the development of community nurse prescribing.

Criteria:

- the expertise and academic qualifications of the facilitators teaching the course and nurse prescribing are appropriate; and
- the facilitator will have clinical expertise in facilitating and teaching the course and nurse prescribing, maintain currency of knowledge and skills within the appropriate area(s) of practice; and
- the programme delivery will include multidisciplinary input; and
- the assessment strategies used are appropriate for assessing competence to prescribe as a community nurse prescriber; and
- There is a clear assessment process and tool which is used to assess the community nurse prescribing competencies and skills of students.

Standard 4: Appropriate facilities and resources will be available to support the programme.

Criteria:

- access to relevant and current literary resources (journals/texts) and search facilities; and
- a plan of appropriate practicum experience with a registered nurse mentor/supervisor negotiated for students; and
- Technical support, such as computers, video linking, laboratories and e-mail are available with the expectation going forward for on-line learning modules.

Standard 5: Programme will have the following learning outcomes for the registered nurse:

Criteria: At the end of the course the nurse will:

- Demonstrate assessment of patients with minor common conditions
- Plan appropriate therapy for common and minor conditions
- Calculate appropriate doses of medicines from the Community Nurse Prescribers list
- Write a safe and legal prescription from the RN prescribing in community health list
- Describe the limitations of their prescribing practice
- Demonstrate knowledge of nationally approved management guidelines related to common conditions in the Community/Primary Health
- Demonstrate use of Pathways in the care and treatment of the client
- Demonstrate how to order laboratory tests and obtain results
- Document and communicate prescribing decisions to clinical supervisor
- Detect and report adverse drug reactions in a timely manner
- Discuss and provide a patient with appropriate information about their medicines ensuring health literacy is maintained.

Standard 6: Each programme will have detailed information on processes used to ensure quality improvement is a focus.

Criteria:

- programme evaluation; and
- staff selection criteria and processes, appraisal and development (including all academic and clinical staff); and
- student entry criteria and selection processes; and
- Assessment and moderation.

Appendix 3: Draft Outline of the study days

Here is the outline of the study days that were provided for our first programme. You may want these to run concurrently or separate them. Feedback we had was that the learning days were very full of information. Some nurses suggested that an additional session on PDRP support would have been helpful. We did offer drop in sessions that were not well attended. You may need to consider this for your groups.

Registered Nurse Designated Prescriber in Community Health Programme

Day One:

9am	Welcome and Introductions	
9.15-9.45	Overview of Programme	
9.45-10.45	eLearning course overview	
	Morning tea	
11am-12noon	Auckland Region Health Pathways	
	LUNCH	
12-30-2pm	Legal Aspects of RN Prescribing	
2pm-3pm	Antimicrobial Stewardship and Health Literacy	
3pm-4.20pm	Health Assessment	
	Evaluation and Close	

Day Two:

Please bring along your Otoscopes for the clinical skills session

9am	Welcome	Presenter/facilitators
9.15	E learning Update	
9.30-10.15	Practical Management of Childhood Eczema	
	Morning tea	
10.30-11am	Health Literacy and Medications (workshop) video and group work	
11am-11.45	Prudent use of labtests/Diagnostics	
11.45-12noon	Programme Evaluation	
	LUNCH	
12-30		

1pm	Health Literacy and Medications, cont. (workshop) ppt and discussion	
1pm- 2pm	Managing Ear conditions	
2pm- 3pm	Ear Assessment : Clinical Skills workshop	
3pm- 4pm	Skin Conditions in children	
	Evaluation and Close	