

Rural and Isolated Practice Registered Nurses

Medicines and Poisons Act 2019

Introduction

From 27 September 2021, the [Medicines and Poisons Act 2019](#) (MPA) and the [Medicines and Poisons \(Medicines\) Regulation 2021](#) (MPMR) and associated legislative instruments define the lawful actions in relation to medicines¹ (schedule 2 (S2), 3 (S3), 4 (S4) and 8 (S8)) of the Poisons Standard²) for therapeutic use in Queensland.

The MPA and MPMR can be accessed from the Queensland Legislation website via *In force legislation*– www.legislation.qld.gov.au.

The legislative instruments that have been approved by the chief executive³ (Director-General) to support the MPMR include departmental standards and extended practice authorities. These legislative instruments can be accessed from the Queensland Health website - [Legislation, departmental standards and extended practice authorities](#).

This information sheet has been prepared to provide an overview of the new provisions for Rural and Isolated Practice Registered Nurses, formerly known as Rural and Isolated Practice Endorsed Nurses (RIPENS).

Background

The *Health (Drugs and Poisons) Regulation 1996* (HDPR) authorised registered nurses (RNs), holding a Nursing and Midwifery Board of Australia (NMBA) endorsement for scheduled medicines registered nurses (the RIPEN endorsement), to supply and administer certain Schedule 4 and Schedule 8 medications. These registered nurses practiced under the Drug Therapy Protocol - Rural and Isolated Practice Endorsed Nurse (the DTP), according to a Health Management Protocol (HMP).

The RIPEN endorsements were granted under section 94 of the *Health Practitioner National Law Act 2009* (*National Law*). As these endorsements were only used in Queensland and Victoria, there was debate nationally about whether they should remain in the *National Law*, and after extensive national consultation the NMBA advised in 2013 that they would be discontinuing it. This is because the consultation found, amongst other things, that all RNs are adequately prepared in their undergraduate degrees to 'supply and administer' medications under protocol, and as such supply and administration is within the scope of all RNs. If an activity is within the scope of all RNs, then an endorsement is not required or appropriate.

¹ Section 11, *Medicines and Poisons Act 2019*.

² The legal title of the Standard for Uniform Scheduling of Medicines and Poisons (SUSMP) that details the schedules for medicines and poisons and packaging and labelling requirements - [The Poisons Standard \(the SUSMP\) | Therapeutic Goods Administration \(TGA\)](#).

³ The Director General, as chief executive of Queensland Health (section 10, *Public Services Act 2008*), is responsible for administering the legislation portfolio set out under the Queensland Government's [Administrative Arrangements Order](#).

The proposed removal of the RIPEN endorsement created a potential legislative issue, as the *HDPR* definition of a RIPEN directly referenced the RIPEN endorsement and if the endorsement was removed over 700 RIPEN's would not be authorised to practice as they had previously.

The replacement of the *HDPR* with the new *MPMR*, provided an opportunity to address this issue, and establish provisions that enable RNs to work to their full scope, and enable the deployment of accessible nurse led models of care to priority populations.

Extended practice authority – registered nurses

The *MPA* (section 232(4)) enables the Director-General to make extended practice authorities (EPA) to state the places or contexts an approved person is authorised to undertake additional regulated activities (dealings) with medicines. EPAs impose conditions on dealings with the medicines specified and may require a person to hold particular qualifications or training.

Chapter 1, Part 4 of the *MPMR* establishes the requirements for an EPA, including safeguards for the use of EPAs and criteria the Director General must consider before making an EPA, such as community need, any risks associated with the proposed dealing with the medicines, and the governance capability of the entity (Chapter 9, Part 1).

Schedule 1, Part 1 of the *MPMR* establishes the Extended Practice Authority-registered nurse (EPA-RN).

EPA-RN

The EPA-RN contains four main parts which provide authorities for RNs.

Part A provides a legislative framework which enables all RNs to administer and give a treatment dose of certain scheduled medicines, subject to conditions, such as organisational credentialling.

The EPA-RN Part B provides an equivalent authority to the *HDPR* for rural and isolated practice registered nurses. It says, amongst other things, that:

'A registered nurse may only administer or give a treatment dose of medicines under Part B of this EPA if the registered nurse:

3.1.1. is practicing in an isolated practice area or at a rural hospital; and

3.1.2. has completed a program of study relevant to the use of medicines in providing emergency and acute care in rural and isolated practice; and

3.1.3. the program of study was previously recognised by the Nursing and Midwifery

Board of Australia (NMBA) to enable the registration of the registered nurse to be endorsed as 'qualified to obtain, supply and administer schedule 2,3,4 & 8 medicines for nursing practice in a rural and isolated practice area' 12 under the Health Practitioner Regulation National Law (Queensland).'

This means that all registered nurses who currently hold the RIPEN endorsement will be able to continue to practice to the extent that they currently do. Similarly, other registered nurses may practice under this authority if they meet the requirements at 3.1.1 - 3.1.3. As the MPMA does not reference the RIPEN endorsement, the withdrawal by the NMBA will not interfere with the EPA-RN Part B authority.

EPA-RN Part C and D provide authorities for Sexual Health and Immunisation program RNs respectively.

Additional resources

In addition to the linked resources referred to in this factsheet, other relevant documents, resources and information sheets may be accessed from [Factsheets and supporting documents](#).

For further information contact

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