Changes to scheduled medicine authorities: Nurse Practitioners

The authority in the Health (Drugs and Poisons) Regulation 1996 (HDPR) for registered nurses, with a national endorsement to practice as a nurse practitioner, provides that the practice must occur under the Nurse Practitioner Drug Therapy Protocol (DTP).

Regulation changes

In November 2018, the HDPR was amended to provide new authorities for certain health practitioners in relation to use of scheduled drugs and poisons. This included changes to the way in which authorities for registered nurses with a national endorsement to practice as a nurse practitioner are provided. The changes remove the requirement for nurse practitioners to work under the Nurse Practitioner DTP.

Who do these changes apply to?

These changes apply to nurse practitioners working in Queensland. A nurse practitioner is a registered nurse whose registration is endorsed under the Health Practitioner National Law, section 95, as being qualified to practice as a nurse practitioner. This endorsement indicates the person has the additional education, training and competence required to assume additional roles, functions, responsibilities and decision-making activities.

New authorities for nurse practitioners

The changes authorise nurse practitioners to the extent necessary to practice nursing to:

- obtain, prescribe, administer or supply a controlled drug or restricted drug
- give someone who may administer or supply a controlled drug an oral or written instruction to administer or supply the drug
- prescribe or supply an S2 or S3 poison
- give someone who may administer or supply an S2 or S3 poison an oral or written instruction to administer or supply the poison.

A nurse practitioner can only perform these activities if:

- the drug or poison is referenced in the Australian Register of Therapeutic Goods
• the activity falls within their scope of practice, and
• the nurse practitioner is reasonably satisfied the person has a therapeutic need for
  the drug.

Performing these activities is in addition to a nurse practitioner’s authority as a registered
nurse.

Operationalising these changes

Nurse practitioners should:
• ensure that they understand the scope of the changes and how this will impact on
  their clinical practice
• note that they are not required to self-declare, and have published, a scope of
  practice.

For more information

Review the legislation

Contact the Office of the Chief Nursing and Midwifery Officer on (07) 3328 9050 or email
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