



NEW ZEALAND MEDICAL ASSOCIATION

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By email megan_larken@moh.govt.nz

Dear Megan

Nurse Prescribing in Diabetes Services

Thank you for the opportunity to comment on this proposal.

Support for Delegated Prescribing by Specialist Diabetes Nurses

The NZMA recognises that over time the roles of doctors, nurses and other allied health professionals will evolve in response to the changes in the delivery of health care. To this purpose, we support the proposal to trial limited nurse prescribing by specialist diabetes nurse in principle. This is provided that this is done pursuant to a delegated prescribing model and is supervised by an appropriately qualified registered medical practitioner.

Expansion of Model to Cover Nurses in Non Specialist Care

Paragraph 2.1.9 notes that

“Eventually, the regulation may allow nurses other than those employed in specialist services to prescribe. They would have equivalent qualifications but could be a community nurse or whanau ora nurse.”

While we have received a degree of comfort from the caveat that these other nurses will have “equivalent qualifications”, before we could support this we would need assurance that the level of supervision from appropriately qualified medical practitioners is also equivalent to that for specialist diabetes nurses working within large multi disciplinary teams.

Range of Medicines to be Prescribed

We agree that the range of medicines such nurses can prescribe should be limited. In particular, the ability for a specialist diabetes nurse to be able to

prescribe insulin in an agreed relationship with a team is sensible. Although nicotine replacement therapy is outside the parameters of a practicing diabetes nurse it seems reasonable to also include this due to the comorbidity of the related clinical issues.

However, we do not support the proposed widening of the scope beyond the diabetes field to include the use of ACE inhibitors and some of the other anti-hypertensives. To be able to prescribe and manage these requires a much broader knowledge of pharmacology and a perspective that often goes further than just diabetes with the range of possible co-morbidities. This is not something we believe a specialist diabetes nurse has the necessary skills and qualifications to undertake.

Evaluation of Trial

We are pleased to see that HWNZ proposes to evaluate the results from the demonstration sites. We anticipate that the evaluation model will be established before the trial proceeds and would like the opportunity to have input into the evaluation questions when this occurs.

Qualifications and Experience

In regard to qualifications, training and knowledge we support options a - d of question B3. In regard to option a) "Minimum of four years experience as a registered nurse in diabetes care", we wonder if instead it should be "minimum number of hours" as there will undoubtedly be a number of specialist diabetes nurses who have worked part time.

We would be happy to discuss any ongoing issues that remain of concern.

Yours faithfully

A handwritten signature in black ink, appearing to read 'Peter Foley', written in a cursive style.

Dr Peter Foley
Chair