LOSING THE PLOT, OR STICKING TO THE SCRIPT: The experience of a Registered Nurse in seeking guidelines on scope of practice and professional protection with entering data onto Opiate Treatment Therapy prescriptions.

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## Introduction:

Traditionally prescriptions were written by pen on a paper scriptpad, and was the exclusive domain of the doctor, and outside the scope of practice of the Registered Nurse. The introduction and development of electronic technology have changed prescribing formats and practices. In one State of Australia it has now become not only accepted practice but expected practice for Registered Nurses to prepare S8 scripts for patients on Opiate Replacement Therapy, for the doctor to electronically sign. One nurse has questioned the validity of this practice and received resistance and avoidance whilst seeking guidance, clarification and professional protection from relevant regulatory authorities.

## Abstract body text:

- Purpose/Outline: To raise the potential professional and legal implications of nurses entering data onto electronic scripts. To open a discussion amongst health professionals for their professional protection regarding data entry for S8 scripts with Opiate Treatment Therapy.
- Conclusion/Significant results: Inconclusive or lack of response from numerous authorities. AHPRA consulted awaiting outcome 6 months later.
- Audience: AOD health professionals involved in Opiate Therapy scripts.
- Description of Issue: Scripts have traditionally been the responsibility of Doctors, and outside the scope of practice of registered nurses. Recently it has become accepted practice and expected practice for nurses to electronically prepare S8 scripts for Opiate Treatment Therapy, for doctors to electronically sign the scripts. There is lack of clarity of whether this is within or outside the nurses' scope of practice. Clarity was sought from regulatory bodies to provide professional guidance and protection.
- Conclusions: No clear statement has been forthcoming. However, it has been a barrier to employment.

## **Discussion And Conclusion:**

- Despite research into government regulations and policy, no clear statement is available.
- Other Government authorities consulted avoided the issue and referred respectively to each other.
- Nurses' Union avoided a definitive statement, and lost interest.
- AHPRA after 6 months still awaiting a response.
- DANA ambivalent, neither condemning nor condoning the practice. Open for further professional discussion.

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