

Dietitian Prescriber Policy

DIETITIAN PRESCRIBER POLICY This policy replaces the following Board policy:		
Dietitians Prescriber Policy	August 2017	
This policy should be read in conjunction with the following Board d	ocuments:	
Policy name	Approved	
<u>Scope of Practice: Dietitian</u>	March 2017	
Professional Standards & Competencies for Dietitians	November 2017	
Code of Ethics and Conduct for Dietitians	November 2017	
Dietitian Prescriber Training Policy (under development)		
Guidelines/Statements	Approved	
Products Dietitians Can Prescribe	December 2019	
PHARMAC Online Pharmaceutical Schedule	(online updates)	
Prescribing Supervision Guidelines (under development)		
<u>Continuing Professional Development (including audit process)</u>		
This policy refers to the following key legislation/legal notices:		
Health Practitioners Competence Assurance Act 2003		
Medicines Act 1981		
Medicine Regulations 1984		
Medicines (Designated Prescriber—Dietitians) Regulations 2015		
Specified Prescription Medicines for Designated Dietitian Prescribers		
Medicines (Designated Prescriber—Dietitians) Notice 2015 (Board re	quirements)	
This policy should be considered in conjunction with relevant legisle	ition:	
Dietary Supplements Regulations Act 1985		
Health and Disability Commissioner Act 1994		
Privacy Act 1993		
Retention of Health Information Regulations 1996		
Consumer Guarantees Act 1993		

Revision Schedule		
Version	Date Approved	Next Review
1	December 2010	
2	March 2016	October 2016
3	October 2016	March 2017
4	August 2017	August 2018
5	September 2020	September 2022
6		

Policy Statement

The Dietitians Board (the Board) protects public health and safety by ensuring registered dietitians are qualified, competent and fit to practise.

(Health Practitioners Competence Assurance Act 2003, HPCA Act)

The Board is responsible for the regulation of '**Dietitian Prescribers**' under the <u>Medicines (Designated</u> <u>Prescriber—Dietitians) Regulations 2015</u> (the Regulations).

Registered dietitians with the 'Dietitian Prescriber' endorsement on their Annual Practising Certificate (APC) must adhere to <u>Board requirements</u> relating to qualifications, training, and competence in order to prescribe:

- Prescription medicines that are specified for prescription by dietitians,
- Other vitamins and minerals, electrolytes, compound electrolytes, and
- Special Foods.

Any practitioner failing to meet Board requirements (outlined in this policy) must not prescribe these products; non-compliance may be an offence.

1. Role of the Dietitian Prescriber

A dietitian must have their APC endorsed with 'Dietitian Prescriber' before they can prescribe.

Dietitians are the nutrition experts on multidisciplinary and interdisciplinary health care teams. They have evidence-informed, scientific knowledge of nutrition, medical nutrition therapy, and the composition and use of food and nutritional products available on the New Zealand market.

Therefore, dietitians are uniquely placed to:

- make a nutrition diagnosis, which identifies an existing nutrition problem that the dietitian is responsible for treating independently, and where appropriate,
- prescribe approved prescription medicines, other vitamins and minerals, electrolytes, compound electrolytes and Special Foods (oral, enteral and parenteral products) to optimise nutritional status.

The Scope of Practice: Dietitian has one <u>Restricted Activity</u> – Prescribing of enteral and parenteral nutrition where the feed is administered through a tube into the gut or central venous catheter.

While it is within the Dietitian's Scope of Practice to prescribe these and other approved products, Dietitian Prescribers must comply with local District Health Board/employer prescribing policies. A clinical governance agreement must be in place before dietitians prescribe any product on national medication charts. Practitioners should have strong links with Pharmacy.

Dietitian Prescribers must comply with the <u>Medicines Regulations 1984</u>. For example, prescribing is restricted to the treatment of patients under the prescriber's care (\$39) and there is a maximum 3-month limit of supply (\$39A).

2. Dietitian Prescriber Approved Products

This section focuses on prescriptions written for dispensing from a community pharmacy. It mainly refers to Government-subsidised products (PHARMAC's New Zealand Pharmaceutical Schedule, Section B- Community Pharmaceuticals).

Dietitian Prescribers are authorised to prescribe:

- Approved prescription medicines: cholecalciferol (vitamin D), zinc and pancreatic enzymes,
- Other <u>vitamins</u> and <u>minerals</u>, electrolytes, <u>compound electrolytes</u>, and
- Special Foods (<u>PHARMAC schedule</u>).

In mid-2020 the PHARMAC HML schedule did not include parenteral products.

The Board maintains and publishes a list of <u>Products Dietitians Can Prescribe</u> (products within the Scope of Practice: Dietitian). These products may be eligible for <u>PHARMAC subsidy</u>.

Only specialist dietitians (practising in a quaternary or metabolic specialist services) should prescribe and apply for subsidised dispensing (Special Authority, SA) of the following Special Foods: paediatric products for children awaiting liver transplant (<u>SA1098</u>) and children with chronic renal failure (<u>SA1099</u>), as well as food and supplements for children and adults with inborn errors of metabolism (<u>SA108</u>).

3. Requirements to obtain 'Dietitian Prescriber' endorsement (S6, S8 Regulations)

All registered dietitians have a <u>prescribed qualification</u>, which indicates that they can provide safe, competent and professional dietetic care in a variety of settings (\$15, \$16 HPCA Act).

To obtain the APC endorsement 'Dietitian Prescriber', a dietetic student¹ or registered dietitian must meet all of the following training and competence requirements within 24 months of completing their Dietitian Prescriber Training (or <u>prescribed qualification</u>):

3.1 Complete Dietitians Board-approved Dietitian Prescriber Training²;

3.2 Demonstrate their independent ability to safely and competently prescribe²:

- <u>approved</u> prescription medicines, and
- other vitamins and minerals, electrolytes, compound electrolytes, and
- Special Foods (oral, enteral and parenteral products) to optimise nutritional status; (based on core competency 1.5.4, <u>Professional Standards and Competencies for Dietitians</u> 2017)
- 3.3 Log their prescribing supervisor's approval (with feedback) of <u>all</u> their proposed prescriptions (at least 5 real patients/clients) on the Dietitians Portal;
- 3.4 Use requirement 3.3 task to obtain their prescribing supervisor's sign-off/declaration that the supervisee has demonstrated they are **competent** and fit to safely prescribe, monitor and evaluate:
 - <u>approved</u> prescription medicines, and
 - other vitamins and minerals, electrolytes, compound electrolytes, and
 - Special Foods (oral, enteral and parenteral products) to optimise nutritional status (sign-off logged under Supervision tab of the Dietitian portal).

¹ New Zealand-trained dietetic students shall meet requirements 3.1 to 3.4 prior to completion of their prescribed qualification. Education providers must include confirmation in the course completion letter that students have met these requirements.

² Board requirements for standalone courses and those embedded in accredited dietetic education programmes are outlined in the Board's Dietitian Prescriber Training Policy (under development). Requirement 3.2 is summative assessment of the Dietitian Prescriber Training. It may include hypothetical cases.

Failure to meet these requirements within the allowed time will result in the supervisee being required to repeat all four requirements to obtain the endorsement at their own expense.

The practitioner's 'Dietitian Prescriber' authorisation will appear on the Dietitians Board Public Register (published under \$138(1), \$149 HPCA Act). A dietitian may request to have their endorsement removed at any time.

4. Prescribing supervision requirements (S7, S8 Regulations)

All Dietitian Prescribers must have a **prescribing supervisor** and be in an active supervised prescribing relationship.

The 'prescribing supervisor' must be a New Zealand Registered Dietitian with:

- a current APC, endorsed 'Dietitian Prescriber' (with no condition 'to practise under supervision'), and
- the equivalent of at least 3 years prescribing experience in New Zealand.

The prescribing supervisor should have relevant expertise for formal observations and peer review of the supervisee's prescribing practice. Ideally, the prescribing supervisor would have undertaken supervision training. The prescribing supervisor may also be the practitioner's practice/professional supervisor. If no Dietitian Prescriber is available in person or remotely (e.g. online video or phone conference), then the prescribing supervisor can be a medical practitioner (i.e. GP, paediatrician or adult medical specialist).

Prescribing supervision sessions may be in person or remote (e.g. online video or phone conference), individual or group sessions, and may include oral and/or written communications. It is the supervisee's responsibility to keep accurate records of all supervisory sessions and to routinely log them on the Dietitians portal.

If a prescribing supervisor has any concerns about a practitioner's competence, fitness to practise or professional conduct, then they should contact the Registrar to discuss the matter.

5. Requirements to maintain Dietitian Prescriber endorsement (S7, S8 Regulations)

To maintain competence and the APC endorsement, all Dietitian Prescribers are required to engage in continuing professional development (CPD) to maintain and enhance their prescribing practice (\$40 HPCA Act).

Prescribing dietitians must be familiar with contemporary research and clinical developments in dietetic prescribing practice, which includes up-to-date knowledge of approved prescription medicines, other vitamins and minerals, electrolytes, compound electrolytes and Special Foods. Prescribing dietitians must also have their prescribing practice regularly reviewed.

Prior to APC renewal each year, a Dietitian Prescriber must complete and log on the Dietitians Portal:

- At least two prescribing 'continuing education' activities, including the Annual Prescriber Update, and
- At least one 'peer review' of their prescribing practice (e.g. a case study including their prescription, monitoring and evaluation, OR their update of a prescribing resource or relevant standards of care).

A random selection of Dietitian Prescribers shall have their CPD prescribing activities audited each year by a MyCCP Auditor with prescribing experience.

If a Dietitian Prescriber fails to complete the required CPD tasks in a practising year, the endorsement shall be removed until such time they meet the annual requirements.

If a practitioner wishes to have their Dietitian Prescriber endorsement reinstated then the following guidelines will apply:

Duration of non- compliance/ non- practising status	Requirements to reinstate Dietitian Prescriber endorsement	
< 2 years	Meet all prescribing CPD requirements for the last year the practitioner held an APC	
2-4 years	Meet all prescribing CPD requirements for the last year the practitioner held an APC	
	Successful completion of the Annual Prescriber Update for the current year.	
	Log at least one 3, 4 or 5-credit activity, which is their Prescribing supervisor's 'peer review' of their proposed prescribing practice.	
	If prescribing CPD requirements are not met to an acceptable standard (competence concerns are raised), then prescribing supervisor sign-off of their prescribing competence shall be required (requirements 3.3 and 3.4).	
>5 years	Complete Board-approved Dietitian Prescriber Training and pass summative assessment (requirements 3.1 and 3.2).	
	Obtain prescribing supervisor's sign-off of their prescribing competence (requirements 3.3 and 3.4).	

6. Prescription audits

The Ministry of Health tracks all prescriptions written by health professionals and provides the Board with quarterly reports of prescriptions written by dietitians.

The Board conducts regular audits of this prescribing data. This process may identify practitioners who are prescribing illegally or unsafely (high-risk products).

The HPCA Act contains strong sanctions to prevent health practitioners from practising outside their scope of practice. Any Dietitian Prescriber who is allegedly prescribing unapproved prescription medicines will be investigated and could be prosecuted before the Health Practitioners Disciplinary Tribunal (\$100 HPCA Act).

7. Prohibition against prescribing specified prescription medicines (\$10, Regulations)

A dietitian who does <u>not</u> have a current APC with 'Dietitian Prescriber' endorsement (or who does but fails to comply with this policy) must not prescribe prescription medicines. A person who does so commits an offence and is liable on conviction to a fine not exceeding \$500.

8. Role of the Prescribing Expert Advisory Group

The Board can appoint committees of the authority who are not members of the authority (Schedule 3, S16 HPCA Act), in this case the Prescribing Expert Advisory Group.

The purpose of the Prescribing Expert Advisory Group (comprised of experienced Dietitian Prescribers) is to work proactively to ensure the Board receives timely and accurate information to inform its governance and regulatory work with regards to dietitian prescribing.

The Expert Advisory Group's Terms of Reference outlines its purpose, mandate and scope, membership, accountability, and administrative requirements. It reports regularly to the Board.