



# Competencies for Registered Nurse Prescribing Schedule 1 Drugs and Ordering Diagnostic Tests

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## Purpose

The purpose of this document is to describe the **COMPETENCIES**<sup>1</sup> a registered nurse (RN) must have to

- prescribe **SCHEDULE 1 DRUGS** (except for controlled drugs and substances); and
- order diagnostic tests in a specific **CLINICAL PRACTICE AREA** using a **CLINICAL SUPPORT TOOL**.

The competencies guide curriculum development for RN prescribing education and inform the public and employers on the practice expectations of an RN authorized to prescribe and to order diagnostic tests.

This is a companion document and must be used with the *Registered Nurse Prescribing Schedule 1 Drugs and Ordering Diagnostic Tests: Requirements and Standards* (College of Registered Nurses of Alberta [CRNA], 2022a) and the *Registered Nurse Prescribing Schedule 1 Drugs and Ordering Diagnostic Tests: Guidelines* (CRNA, 2022b).

## Becoming an RN Authorized to Prescribe

The *Health Professions Restricted Activity Regulation* (Alta Reg 22/2023, s 60) authorizes an RN to prescribe Schedule 1 drugs in accordance with the requirements and standards of practice in the document *Registered Nurse Prescribing and Ordering Diagnostic Tests: Requirements and Standards* (CRNA, 2022a). An RN must apply to the registrar for authority to prescribe Schedule 1 drugs (except controlled drugs and substances) and to order diagnostic tests within a specific clinical practice area.

Throughout this document the phrase 'an RN who is authorized' means an RN has met the CRNA requirements and is authorized by the CRNA to, in a specific clinical practice area

- prescribe Schedule 1 drugs (except for controlled drugs and substances); and
- order diagnostic tests.

<sup>1</sup> Words or phrases in **BOLD CAPITALS** upon first mention are defined in the glossary.

An RN who is authorized must

- conduct a comprehensive health assessment appropriate to the specific clinical practice area;
- interpret and apply the clinical support tool for the clinical practice area when ordering diagnostic tests and prescribing;
- order and interpret diagnostic tests as indicated in the specific clinical support tool; and
- consult or transfer the **CLIENT** care to other health-care professionals if the ordering diagnostic tests and prescribing decision is beyond their scope, knowledge, or **COMPETENCE**.

## Assumptions

- The following assumptions form the basis for the competencies for an RN who is authorized.
- Their practice is grounded in the values, knowledge, and theoretical foundations of professional registered nursing practice.
- Their competencies build and expand upon the entry-level competencies required of an RN.
- Before being authorized, they have successfully completed an **APPROVED NURSING PROGRAM** for prescribing and the ordering of diagnostic tests.
- Before being authorized, they have completed a minimum of 3000 hours of RN clinical practice that satisfies the registrar, 750 hours of which are within the specific clinical practice area where they will order diagnostic tests and prescribe.
- They practise in collaboration with other health-care providers.
- They only prescribe medications and order diagnostic tests as described in the clinical support tool.

# Competencies

These competency statements are organized using four categories:

- professional responsibility and **ACCOUNTABILITY**;
- knowledge-based practice;
- ethical practice; and
- service to the public.

The number and order of the competency statements do not indicate their importance. Some competencies could be placed in more than one category but are in only one for clarity and convenience.

## Professional Responsibility and Accountability

An RN who is authorized, demonstrates professional accountability and responsibility, and practises in accordance with the following:

- *Health Professions Act (HPA, 2000)*
- *Health Professions Restricted Activity Regulation (Alta Reg 22/2023, s 60)*
- *Practice Standards for Registrants (CRNA, 2023)*
- *Code of Ethics for Registered Nurses (Canadian Nurses Association [CNA], 2017)*
- *Restricted Activities Standards (CRNA, 2022c)*
- *Registered Nurse Prescribing Schedule 1 Drugs and Ordering Diagnostic Tests: Requirements and Standards (CRNA, 2022a)*

### Competencies

1. Practises in accordance with relevant legislation, the *Health Professions Restricted Activity Regulation (Alta Reg 22/2023, s 60)*, the CRNA standards and guidelines, and organization policies.
2. Prescribes medications and orders diagnostic tests for the client in a specific clinical practice area and understands that this authorization does not automatically transfer with them to another clinical practice area.

3. Practises within the limits of their own competence and consults or transfers client care to other health-care professionals if not **COMPETENT** to provide the required care, if the required care is outside the specific clinical practice area for which they have been authorized to order diagnostic tests and prescribe, or if the required care is beyond what is indicated in the clinical support tool.
4. Demonstrates accountability for ordering diagnostic tests and prescribing decisions.
5. Participates as a member of the interprofessional team and understands the differences between the roles and responsibilities of team members in the prescribing process.
6. Participates in the review, development, and improvement of prescribing practice such as, but not limited to, quality improvement and risk management practices, prescribing audit tracking systems, clinical decision-making tools, and organizational policies which support safe prescribing practices.
7. Prescribes appropriately in accordance with provincial and federal legislative requirements and standards.
8. Participates appropriately in required and relevant provincial or national reporting programs.
9. Maintains their competence for the ordering of diagnostic tests and prescribing within the specific clinical practice area.
10. Adheres to the CRNA continuing competence requirements for an RN who is authorized to prescribe.
11. Applies clinical tools to monitor and improve their ordering of diagnostic tests and prescribing practice (e.g., decision-making framework, record keeping systems, audit results, etc.).

## Knowledge Based Practice

An RN who is authorized, draws on diverse sources of knowledge, e.g., nursing knowledge, pharmacotherapeutics, the sciences, humanities, research, ethics, spirituality, culture and diversity, relational practice, and **CRITICAL THINKING**. The RN applies this knowledge competently when providing **EVIDENCE-INFORMED** nursing care.

### Competencies

12. Demonstrates knowledge of health conditions, the natural progress of the condition, and how to assess the severity of the condition.
13. Conducts a comprehensive assessment of the client.
14. Demonstrates understanding and assesses the congruency between the current medication plan and the health condition of the client.
15. Demonstrates knowledge of the impact that supplements, and complementary and alternative therapies may have on the client's condition, care plan, and ordering of diagnostic tests and prescribing decisions.
16. Applies the appropriate clinical support tool for the specific clinical practice area.
17. Identifies factors that may impact diagnostic test results.
18. Interprets the results of appropriately ordered screening and diagnostic tests to inform safe prescribing as indicated in the clinical support tool.
19. Applies critical thinking to synthesize health assessment information and identify health risks and concerns.
20. Applies the clinical support tool as appropriate to the nursing diagnosis.
21. Applies the clinical support tool to determine care options including no treatment, or possible non-pharmacological and pharmacological interventions, in collaboration with the client, family, and other members of the health-care team as appropriate, while considering client perspectives, and best outcomes.
22. Develops a care plan based on evidence-informed practice and the clinical support tool for the specific clinical practice area.
23. Demonstrates understanding of the principles of prescribing and evidence-informed prescribing practices.
24. Applies knowledge of **PHARMACOTHERAPY** when prescribing medication.



25. Demonstrates understanding of drug interactions and actions of other medications that are prescribed for the client.
26. Uses the clinical support tool to prescribe pharmacotherapy based on the client's health history, current health status, disease, disorder, condition and stage of life, and individual circumstances.
27. Communicates effectively with clients, family, and other members of the health-care team as appropriate regarding the client's health assessment findings, nursing diagnosis, and care plan.
28. Discusses prescribed medications with the client including rationale for selection, expected benefits, interactions of the drug, potential side effects, administration, instructions, costs of medication, importance of compliance, and recommended follow-up.
29. **COLLABORATES** with the client, family, and other members of the health-care team as appropriate in monitoring the client's response to the care plan, including medication therapy.
30. Evaluates the client progress toward expected outcomes.
31. Revises care plan in **CONSULTATION** with the client and health-care team.
32. Completes comprehensive documentation of the prescribing decision that is accessible to all members of the health-care team (e.g., type and amount of drug, indication for use, goal of treatment, frequency, client instructions, and follow-up required).
33. Makes an appropriate referral to another health-care professional where necessary.

## Ethical Practice

An RN who is authorized, demonstrates competence by applying the principles in the code of ethics adopted by Council in accordance with Section 133 of the HPA (2000) and the *College Bylaws* (CRNA, 2022d), and the CRNA document specific to professional boundaries.

### Competencies

34. Understands the limits of their authorization to prescribe Schedule 1 drugs and order diagnostic tests.
35. Prescribes in the best interest of the client and is not influenced by factors that can be a conflict of interest such as, marketing incentives and strategies to promote medications, financial support by pharmaceutical companies or companies that manufacture and sell diagnostic tests, or other health-care interests.

36. Demonstrates ethical responsibilities and legal obligations in all forms of communication for the collection, use, and disclosure of client health information in accordance with applicable privacy legislation, regulations, standards, and policies governing RN practice.
37. Demonstrates respect for the client's right to confidentiality and collects, uses, and discloses prescribing and diagnostic data only when it is pertinent to the care that is provided.
38. Prescribes medications or orders diagnostic tests only for a client with whom they have a **THERAPEUTIC RELATIONSHIP**.
39. Demonstrates understanding of the client's right to refuse treatment or the medication prescribed.

## Service to the Public

An RN who is authorized, understands that in the best interests of the public, practice must be in collaboration with clients, family, and other members of the interprofessional team.

### Competencies

40. Establishes appropriate collaborative practice relationships with other authorized prescribers in the same specific clinical practice area to support consultation and referral.
41. Communicates effectively with other health-care professionals involved in the care of the client to ensure continuity and coordination of care.
42. Collaborates with the client, family, and other members of the health-care team in prioritizing health concerns and developing the care plan.

## Glossary

**ACCOUNTABILITY** – The obligation to answer for the professional, ethical, and legal responsibilities of one’s activities and duties (Ellis & Hartley, 2009).

**APPROVED NURSING PROGRAM** – A nursing education program approved by the Nursing Education Program Approval Committee (NEPAC), as requested by the registrar, in accordance with RN prescribing and ordering of diagnostic test standards and criteria.

**CLIENT** – Refers to patients, residents, families, groups, communities, and populations.

**CLINICAL PRACTICE AREA** – The clinical area where an RN who is authorized to prescribe and order diagnostic tests, practises. The focus of the clinical practice may be related to the type of care (e.g., wound care), practice setting (e.g., emergency department, home care, primary care, ambulatory clinics, occupational health), specific issue (e.g., sexually transmitted infection, sexual assault), or medical diagnostic grouping (e.g., diabetes or other chronic disease management).

**CLINICAL SUPPORT TOOL** – An evidence-informed tool used by the practice setting to guide decisions related to prescribing and ordering of diagnostic tests and ordering medical radiography.

**COLLABORATES** – (or collaboration) Client care involving joint communication and decision-making processes among the client, the nurse, and other members of a health-care team who work together to use their individual and shared knowledge and skills to provide optimum client-centered care. The health-care team works with clients toward the achievement of identified health outcomes, while respecting the unique qualities and abilities of each member of the group or team (CNA, 2010).

**COMPETENCE** – The integrated knowledge, skills, judgement, and attributes required of a nurse to practise safely and ethically in a designated role and setting (CRNA, 2019).

**COMPETENCIES** – The observable ability of a registered nurse that integrates the knowledge, skills, abilities, and judgment required to practise nursing safely and ethically (CRNA, 2019).

**COMPETENT** – The application of knowledge, skills, abilities, and judgement required to practise nursing safely and ethically (CRNA, 2019).

**CONSULTATION** – Conferring with, seeking information, advice, or direction.

**CRITICAL THINKING** – Purposeful, informed and outcome-focused thinking that includes clinical reasoning, judgement and decision making (Alfaro-LeFevre, 2013).

**EVIDENCE-INFORMED** – The process of combining the best available evidence through a variety of sources such as research, grey literature, experience, context, experts, and client experiences and perspectives.

**PHARMACOTHERAPY** – Treatment and prevention of diseases, disorders, and/or symptoms by means of drug therapy. This includes consideration for characteristic interactions of a drug with the body in terms of absorption, distribution, metabolism, excretion, and the interactions that may occur between drugs.

**SCHEDULE 1 DRUGS** – Means Schedule 1 drug within the meaning of Part 4 of the *Pharmacy and Drug Act* (2000).

**THERAPEUTIC RELATIONSHIP** – A relationship established and maintained with a client by the nurse through the use of professional knowledge, skills, and attitudes in order to provide nursing care expected to contribute to the client’s health outcomes (CRNA, 2022a).

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