

BC College of Nurses and Midwives (BCCNM) – Registered Nursing Certified Practice (RN[C]) in Clinical and Outreach Settings in Fraser Health

*Fraser Health Sexual Health and Blood Borne Infections Program
Presentation October 26, 2024*

Angela Matson, Project Lead Angela.Matson@fraserhealth.ca

Cheryl Prescott, Clinical Nurse Specialist Cheryl.Prescott@fraserhealth.ca



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Better health.
Best in health care.

Indigenous Land Acknowledgement



We recognize that Fraser Health provides care on the traditional, ancestral and unceded lands of the Coast Salish and Nlaka'pamux Nations and is home to 32 First Nations within the Fraser Salish region



None of the planners or presenters of this session have an affiliation (financial or otherwise) with a pharmaceutical, medical device, or communications organization, or other for-profit funder.



We have no involvement with industry and cannot identify any conflict of interest.

Session Objectives



1. Describe BCCNM RN(C) scope of practice including historical rationale for implementation
2. Identify provincial decision support tools (DSTs) utilized by RN(C) for treatment: administration, dispensing and prescribing
3. Identify unique clinical and outreach-based settings in Fraser Health where RN(C) practice is utilized to lower barriers



Nurse (Registered) and Nurse Practitioners Regulation

- Registered nurse
- Licensed graduate nurse
- Nurse
- Nurse Practitioner



Exceptions to Practicing within Scope and Regulation

- Imminent risk of death or serious harm
- Formal delegation

Controls on Nursing Practice



There are four controls on nursing practice limiting activities nurses can perform. Each level narrows nurses' scope of practice.

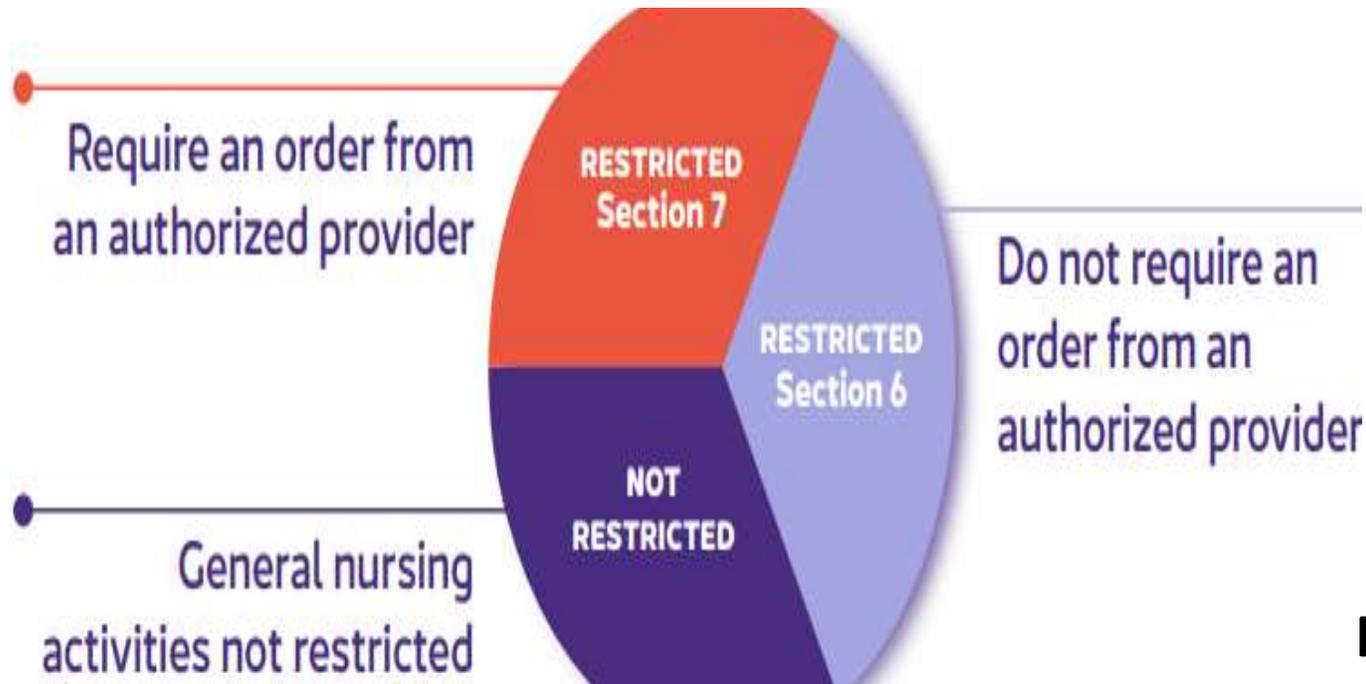
Controls on Practice



Registered Nursing Scope of Practice



Registered Nurse Scope of Practice (non-certified) General Practice



[RN Scope of Practice \(bccnm.ca\)](http://bccnm.ca)

Not Restricted

- Pronouncing death
- Blood glucose screening
- Recommendation/administering some medications (schedule III drugs)

Restricted – Section 6 (no order)

- Some diagnosis
- Wound care
- Blood collection – IV therapy
- TB Skin testing
- Pelvic exam, cervical cancer screening

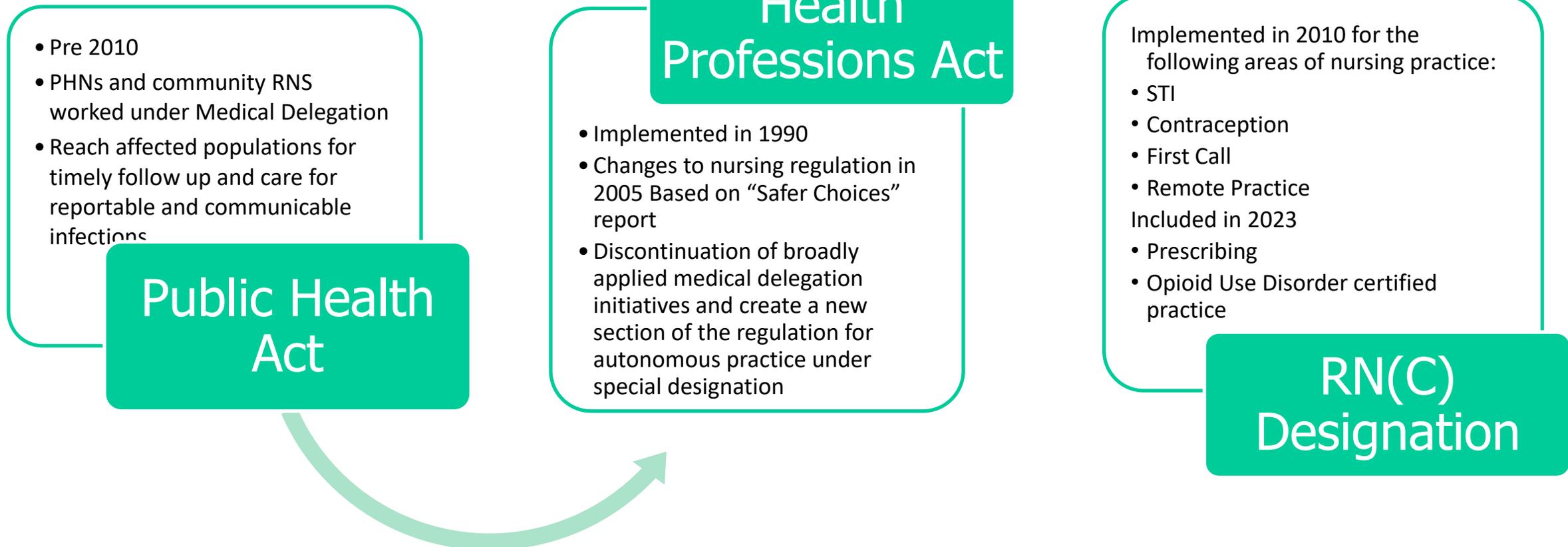
Restricted – Section 7 (order required)

- Administering medications, hazardous energy

Restricted Activities for Certified Practice Section 8



Evolution of RN Certified Practice



Certified Practice Decision Support Tools: NNPBC, BCCDC and BCCSU



BCCDC

- Communicable Disease Control Manual – Chapter 5 – STI Practice
- 24 DSTs
- Competencies

NNPBC

- Certified Practice DSTs and Competencies
- First Call
- Remote Nursing
- Contraception
- 22 DSTs

BCCSU

- Certified Practice DSTs and Competencies- OUD
- 3 DSTs

RN(C) Prescribing and Providing Client Specific Orders



RN(C) Provision of Client Specific Orders for RNs and LPNS

- Nurses Accept accountability and responsibility for the orders they give
- Orders for activities that are within the nurse's competence and consistent with relevant standards, organization policy and restrictions
- Piloting in FH as part of the regional syphilis outbreak response: RN(C) provision of orders to RNs and LPNs for treatment of contacts to infectious syphilis



Questions to consider for patient centered care...



- How do we simplify the system and ensure equitable access, safety and best practice standards are met?
- How do ensure privacy for our clients?
- E.g. Free contraception for youth? Medical abortion?
 - Think about 3rd party insurance issues? Patients with no ID or home address?

Pan-Canadian Framework for Action: Reducing the Health Impact of Sexually Transmitted and Blood-Borne Infections in Canada by 2030



CORE PILLARS



What is an “Enabling Environment”?

- Creates conditions to ensure equitable access
- Establishes conditions to overcome barriers

Where do we fit into opportunities for action?:

- #3: *Review and revise laws, policies, and programs that affect determinants of health leading to an increased risk of STBBI transmission and/or limit the implementation and operation of effective STBBI-related programs and services*

Factors Impacting Vulnerability to HIV and other STBBI



Provision of Contraception and STI medications at the point of care aligns with the Canadian Public Health Agency framework to address situations that put people at greater risk for STBBI:

- **Systemic:** Political, economic and social environment, health systems and services (health care/system navigation)
- **Community:** Cultural context, social context and participation (judgement, shame, confidentiality, geographical barriers)
- **Individual:** Individual characteristics and circumstances, health literacy and practices (financial barriers, language)

Canadian Public Health Agency: [Factoring Impacting Vulnerability to HIV and Other STBBIs](#)

Key populations disproportionately affected by STBBI:



- People living with HIV or hepatitis C and related conditions
- Indigenous Peoples
- Gay and bisexual men
- People who use drugs
- Transgender persons
- People with experience in the prison environment
- People from countries where HIV, HBV and HCV are endemic
- People engaged in the sale, or the purchase of sex
- Youth and young adults

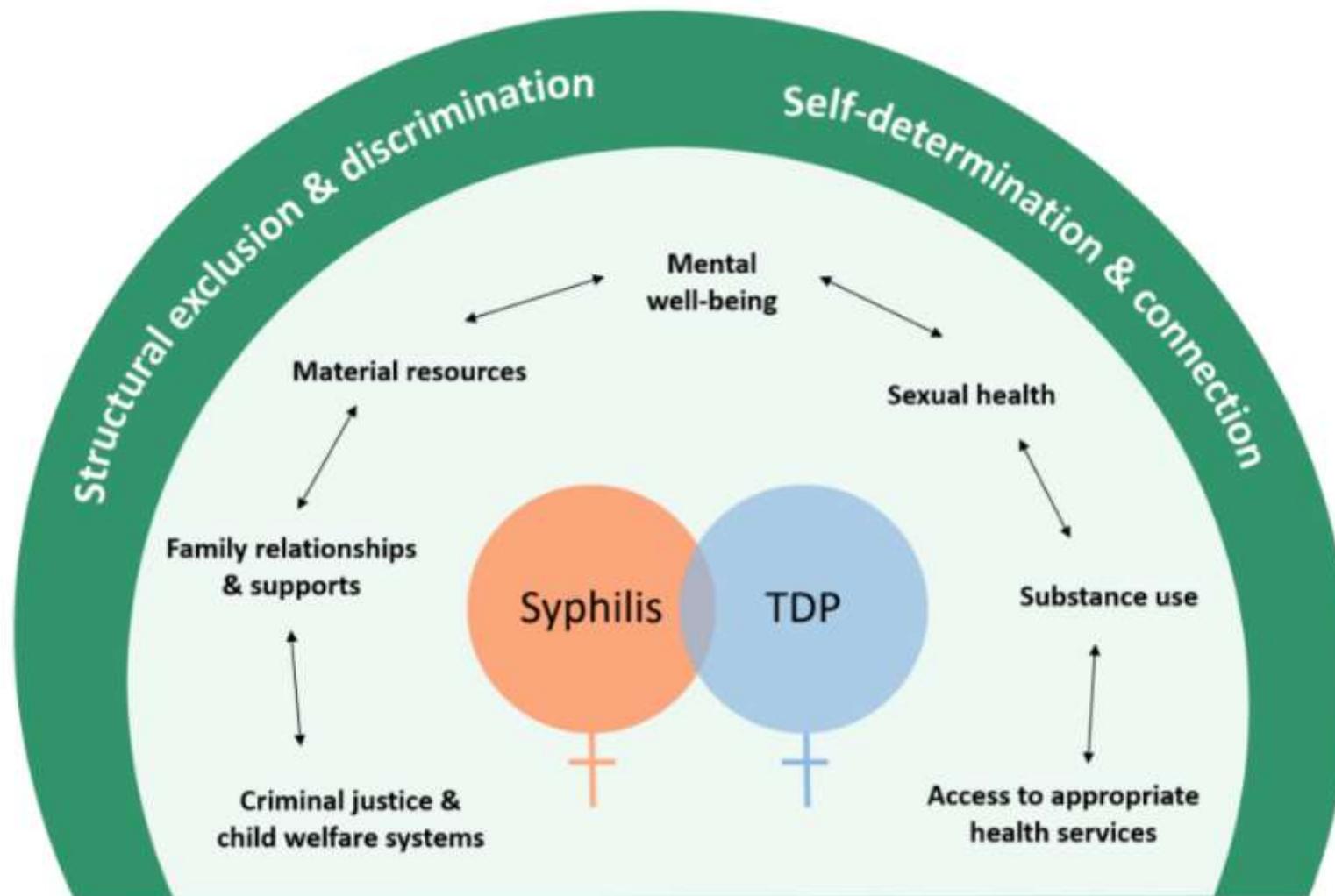


[This Photo](#) by Unknown Author is licensed under [CC BY](#)

- [Canadian Sexually Transmitted and Blood Borne Infections Prevention Guide](#)
- [Reducing the health impact of sexually transmitted and blood-borne infections in Canada by 2030: A pan-Canadian STBBI framework for action - Canada.ca](#)

Key Populations – Enhanced Fraser Health Surveillance

Syndemic – Women Affected by Infectious Syphilis and Toxic Drug poisoning events



A client's journey

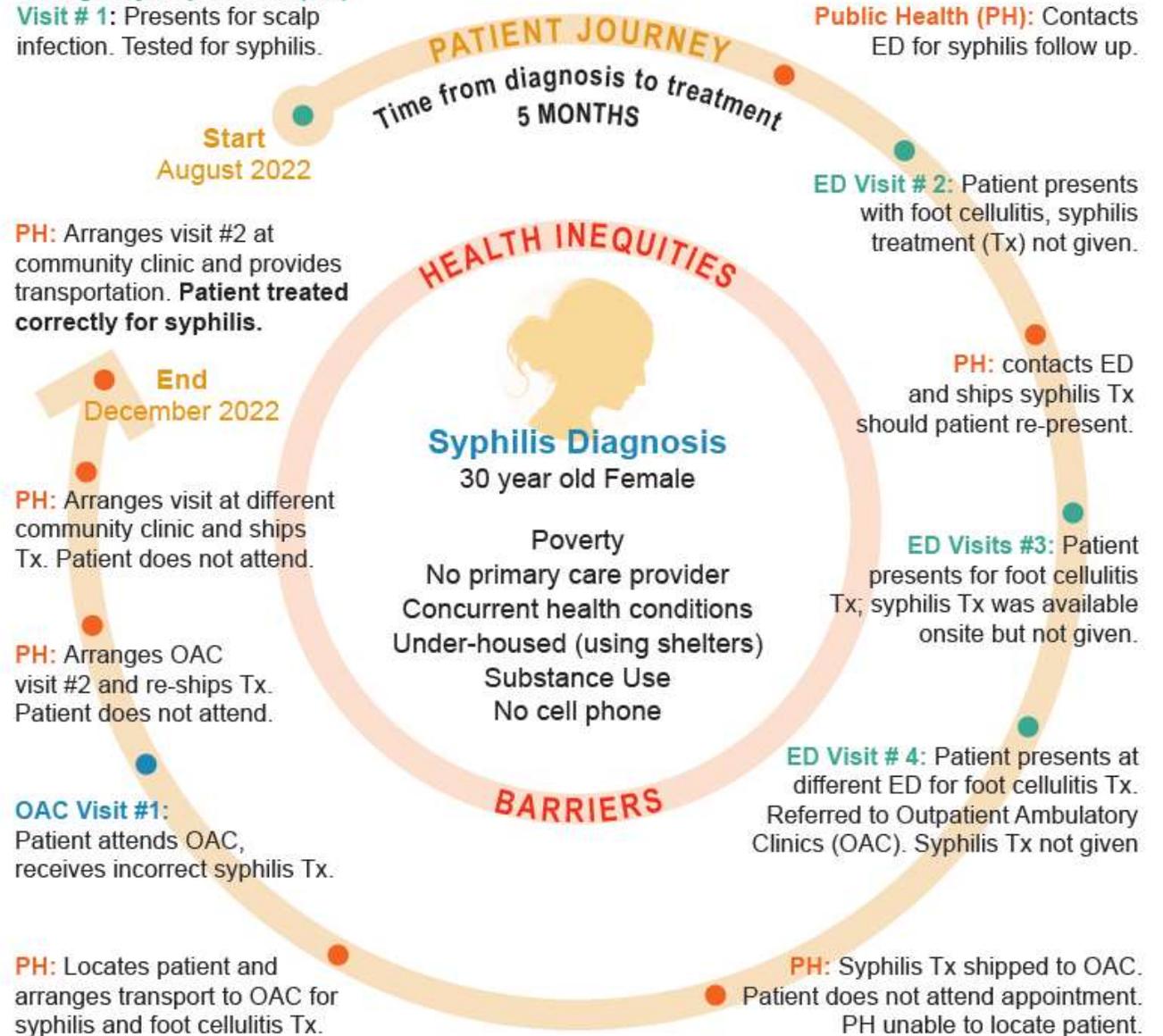
Barriers to accessing treatment:

- systemic,
- community
- individual barriers

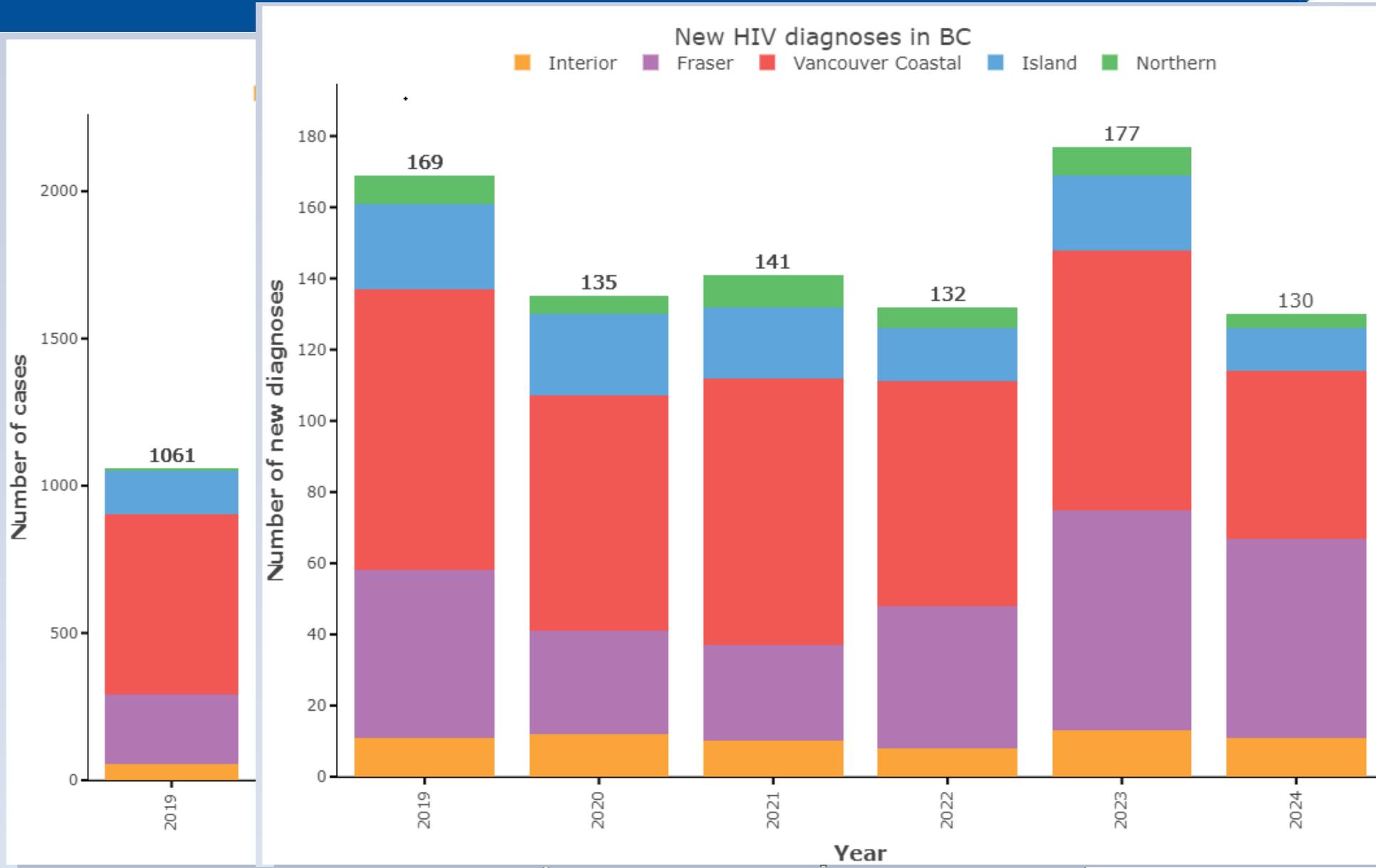
Problem- Client Perspective (Delayed/Incorrect Treatment)

Emergency Department (ED)

Visit # 1: Presents for scalp infection. Tested for syphilis.



Epidemiology for HIV / Infectious Syphilis



Data and subject to change
 missing and unknown
 to potential reporting
 hic trends should be
 caution.

Contraception and STI Certified RN's in Practice in Fraser Health



Sexual Health Clinics:

- Options for Sexual Health
- SHBBI STI and Youth Clinics
- Foundry Clinics

Primary Care Clinics

- Primary Care Networks
- Indigenous Primary Care Clinics (Fraser West)
- Urgent Primary Care Centre's
- SHOP

Outreach:

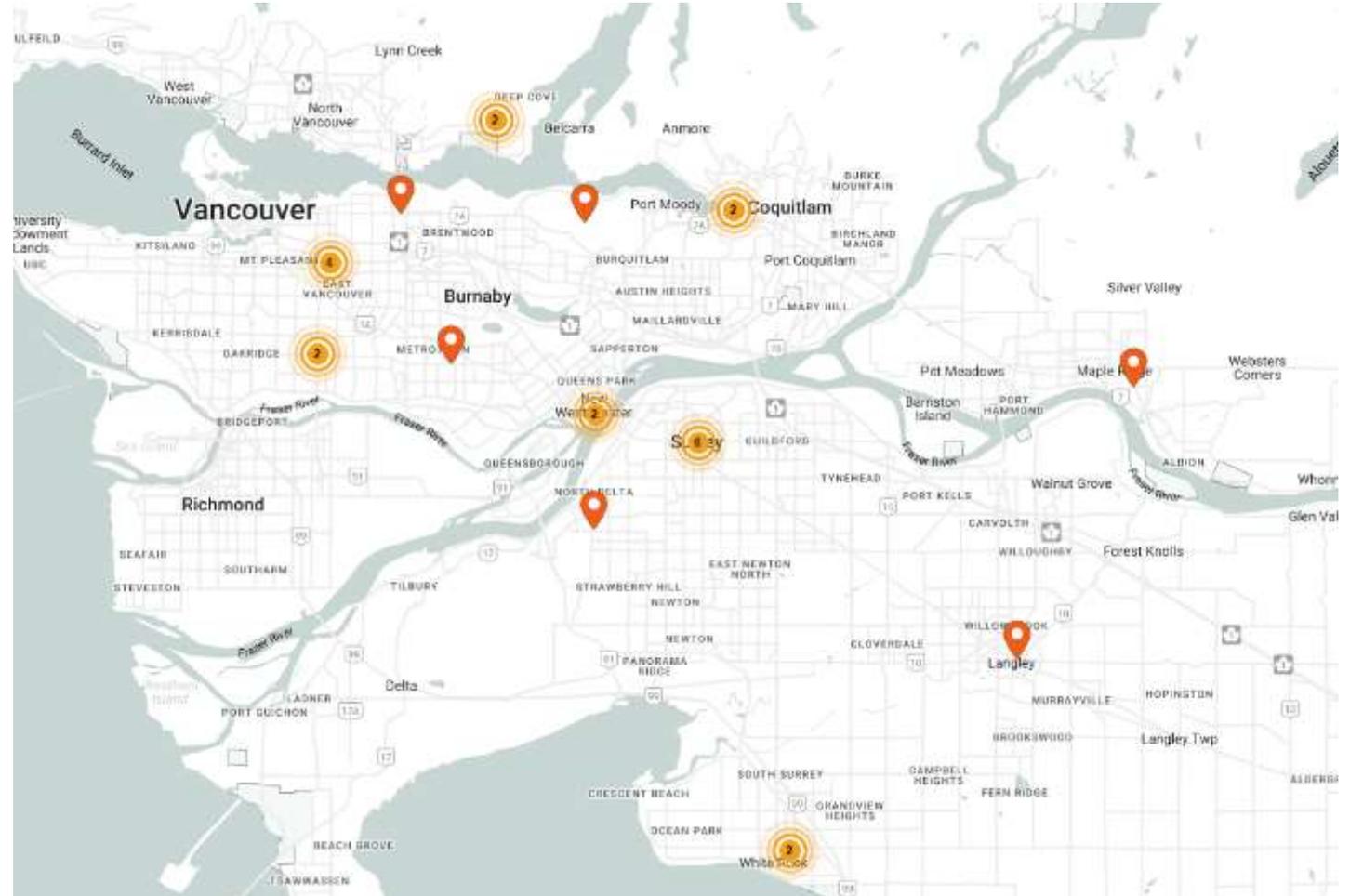
- Integrated Homeless Action Response Team (IHART)
- SHBBI team testing and treatment on outreach
- Maxxine Wright

Where are Sexual Health Clinics?



Check out:

- Clinic Finder: smartsexresource.com
- Visit: Fraserhealth.ca/gettested
 - Fraser Health – Sexual Health Clinics
 - Fraser Health – Youth Clinics



Medication Provision at FH Sexual Health clinics:



- Sexual Health clinics are staffed by physicians and RN's with Certified Practice in STI and Contraception Management
- Medication provision aligns with:
 - [Decision Support Tools – List – NNPBC](#)
 - [Non-certified Practice Decision Support Tools for STI-BCCDC](#)
 - FH statement 1.5 of "[Stock Medication – Community Clinics](#)" policy
 - [Medication-Dispensing by Nurses- Clinical Protocol](#)

Medication Access for Certified Practice RNs in Fraser Health



BC CENTRE FOR DISEASE CONTROL STI DRUG ORDER REQUEST

SUPPLY TO: MAIL ORIGINAL WHITE and YELLOW COPIES OF COMPLETED FORM TO:
 BCCDC Pharmacy
 BC Centre for Disease Control
 655 West 12th Avenue, Room 1100
 Vancouver, BC V5Z 4R4
 Phone: 604-767-2580
 (Have PMS COPY FOR YOUR RECORDS. WE LOW COPY WILL BE RETURNED WITH YOUR ORDER.)

Address: _____
 Postal Code: _____
 Opening Hours (include closure periods): _____
 Telephone No.: () _____ Date Ordered: _____

If urgent, fax original to 604-767-2583. Please do not mail in this form if faxed.

IMPORTANT: ALLOW 14 DAYS FOR DELIVERY

| PRODUCT LIST | | SUPPLIER AS | NUMBER OF UNITS REQUESTED FOR 30 DAYS | NUMBER OF UNITS SUPPLIED | REPLACEMENT CODE (see back instructions) |
|---------------------------|--|---------------------|---------------------------------------|--------------------------|--|
| AMOXICILLIN | Amoxicillin Capsules 500 mg <i>Treatment of chlamydia in pregnancy and nursing individuals</i> | 21 capsules | | | |
| AZITHROMYCN | Azithromycin Tablets 250 mg | 4 tablets | | | |
| | Azithromycin Tablets 250 mg | 4 tablets | | | |
| CEFIXIME | Cefixime Tablets 400 mg <i>Preferred treatment for gonorrhoea cases and their sexual contacts and treatment for pelvic inflammatory disease and oocystosis only</i> | 2 tablets | | | |
| CEFTRIAXONE | Ceftriaxone Injection 250 mg <i>Preferred treatment for gonorrhoea cases and their sexual contacts in specific populations</i> | 250 mg vial | | | |
| DOXYCYCLINE | Doxycycline Capsules 100 mg <i>Preferred treatment for chlamydia cases and their sexual contacts</i> | 14 capsules | | | |
| | Doxycycline Capsules 100 mg <i>Treatment of pelvic inflammatory disease and oocystosis</i> | 20 capsules | | | |
| METRONIDAZOLE | Metronidazole Tablets 250 mg | 8 tablets | | | |
| | Metronidazole Tablets 250 mg | 28 tablets | | | |
| PENICILLIN "G" BENZATHINE | 2 mL penicillin G benzathine 1.2 million unit syringe <i>Do not stock this item unless authorized</i> | two x 2 mL syringes | | | |
| OTHER (Please specify): | <i>Specify drug and treatment product</i> | | | | |

I, the undersigned physician / nurse practitioner / pharmacist / midwife, confirm the release of medications requested, and agree these medications are for use ONLY for Sexually Transmitted Infection treatments as indicated in the STI Treatment Guidelines. Forms without the above practitioner's signature will be returned to sender. Medical Health Officers must sign for Public Health Units or Departments.

PRACTITIONER'S SIGNATURE (Print name only - NO stamped or electronic signatures): _____ PRACTITIONER'S NAME (Print name): _____ COLLEGE REGISTRATION NUMBER: _____

NUMBER CODES - PHARMACY USE ONLY (CODES INDICATE CHANGES MADE TO YOUR ORDER BY THE PHARMACY)

CODE DEFINITIONS

| | | |
|--|----------------------------|-----------|
| 1 = in short supply - please reorder | 4 = use enclosed documents | 7 = _____ |
| 2 = item out of stock - please reorder | 5 = add a stock item | 8 = _____ |
| 3 = reduced quantity supplied | 6 = 2 stocks supplied | |

Download additional copies of the STI Drug Order Form at:
http://www.bccdc.ca/health_professionals/professionals/resources/Pharmacy

- BCCDC- STI treatment medication
- MOU with Lower Mainland Pharmacy Services (LMPS)
 - Standardized Contraception list
 - UTI treatment medication
 - Yeast
 - Genital Herpes
- Vendor Contract – Copper IUDs

Excerpt from: FH statement 1.5 of "[Stock Medication – Community Clinics](#)" policy



1.5 The following criteria is applied when selecting stock medication to be available in a Health Authority community clinic:

1.5.1 The medication is commonly utilized in the patient care setting. Such medication may be:

- Administered during the clinic visit
- [Dispensed](#) to the patient during the clinic visit when:
 - the activity and medication(s) dispensed are within the nurse' scope of practice, AND
 - the employer requires the nurse to dispense, AND
 - the activity and medication(s) have been authorized by the Health Authority for the specific program, AND
 - it has been deemed necessary to dispense the medication understanding the risks inherent with the medication(s) not appearing on PharmaNet

OR

- the registered nurse (RN) is certified by the British Columbia College of Nurses and Midwives (BCCNM) to independently diagnose and treat specific diseases and disorders as outlined in the [decision support tools](#) ¹, AND
- the decision support tool has been implemented in the Health Authority community clinic

¹Decision support tools (DSTs) set out the activities that are included in the [certified practice guidelines](#) provided by Nurses and Nurse Practitioners of B.C. (NNPBC).

Program Priority: Increasing access to STI testing, Treatment and Prevention



Syphilis Outbreak Response:

Providing testing and treatment through outreach collaborations (ex. Integrated Homeless Action Response Team)

Partner with existing services ex. Urgent Primary Care Centres

Community Partnerships for targeted sexual health clinics (HIM)

Increasing access through drop-in clinics and outreach

Rising rates of HIV

Increase access to condoms, safer injection supplies

Increase HIV testing

Increase access to HIV Pre-Exposure Prophylaxis

Questions

Angela.matson@fraserhealth.ca; Cheryl.Prescott@fraserhealth.ca



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