



**Te Ao Māramatanga**  
New Zealand College of Mental Health Nurses (Inc.)  
**Partnership, Voice, Excellence in Mental Health Nursing**

28.2.2014

Dear Mr Holding

I am providing this written submission on behalf of Te Ao Māramatanga NZ College of Mental Health Nurses in conjunction with the submission of Nurse Practitioners NZ, in relation to the Medsafe consultation document on the changes to prescribing restrictions for Clozapine.

The current wording in the Medicines Act 1981 states:

The medicine may only be prescribed by:

- Registered medical practitioners as defined in the Health Practitioners Competence Assurance Act 2003 who are certified by the Medical Council of New Zealand as competent in the scope of practice of psychiatry.
- Medical practitioners employed as registrars in the branch of psychiatry who are under the supervision of the persons referred to above.
- Medical officers of special scale who:
  - work solely in the field of psychiatry;
  - are in the employment of a district health board; and
  - are under the supervision of persons who are registered medical practitioners as defined in the Health Practitioners Competence Assurance Act 2003 who are certified by the Medical Council of New Zealand as competent in the scope of practice of psychiatry.
- Registered medical practitioners as defined in the Health Practitioners Competence Assurance Act 2003 who are registered with the Medical Council of New Zealand within the vocational scope of practice of general practice. The general practitioner must be continuing the prescribing of clozapine for a specific patient whose illness is well-controlled in collaboration, or following consultation, with a Community Mental Health Team.

However, as part of the Medicines regulations 2005, nurse practitioners are currently allowed to prescribe Clozapine. This legislation and the Medicines Act 1981 will be superseded/amended when the Medicines Amendment Act comes into force later this year, when nurse practitioners become “authorised prescribers”.

We note that Medsafe propose to change the statements:

- “Medical officers of Special scale” be changed to “Medical Officers”
- “work solely in the field of psychiatry” be removed.

We would ask that nurse practitioners working collaboratively with a supervising medical practitioner (including general practitioners) also be identified as persons who are able to continue prescribing Clozapine for those people whose illness is well-controlled. This would align nurse practitioners with registrar and general practitioner colleagues. Nurse practitioners have the advanced health assessment skills to be able to monitor the ongoing physical health risks of Clozapine, namely cardiomyopathy, agranulocytosis and toxic megacolon.

The College supports continuing initiation of Clozapine therapy by consultant psychiatrists.

Given the forthcoming changes to the prescribing status for nurse practitioners from “designated” to “authorised prescribers” under the Medicines Act amendments, we raise the question of whether the definition of nurse prescriber needs to change i.e. as nurse practitioners (in comparison with Diabetes Nurse Prescribers) will not be limited to the prescribing of specific drugs (which is the current situation under the Nurse Practitioner (designated prescribers) regulations 2005).

Yours sincerely



Daryle Deering PhD RN  
President  
On behalf of Te Ao Māramatanga NZ College of Mental Health Nurses