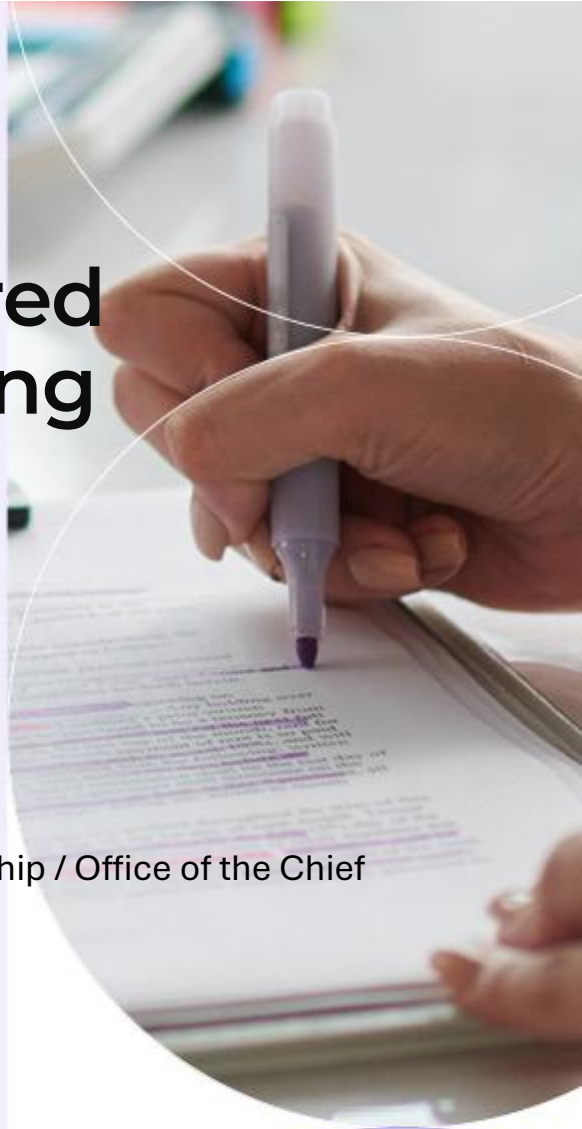
Policy Document

Designated Registered Nurse (RN) Prescribing



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Author Office of Professional Leadership / Office of the Chief Nursing and Midwifery Officer

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ACT Government

Acknowledgement of Country

The Health and Community Services Directorate acknowledges the Ngunnawal people as traditional custodians of the ACT and recognise any other people or families with connection to the lands of the ACT and region.

We respect the Aboriginal and Torres Strait Islander people, particularly our Aboriginal and Torres Strait Islander staff, and their continuing culture and contribution they make to the Canberra region and the life of our city.

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1. Policy Statement

This policy outlines the mandatory requirements and describes the roles, responsibilities and governance related to designated registered nurse (RN) prescribing. It supports the safe, lawful and consistent implementation of designated RN prescribing and applies to all relevant health services, designated RN prescribers, authorised health practitioners and staff involved in the prescribing process.

This policy applies to:

- all RNs with a Nursing and Midwifery Board of Australia (NMBA) endorsement for scheduled medicines under section 94 of the Health Practitioner Regulation National Law 2010 (National Law)
- authorised health practitioners participating in a designated RN prescriber prescribing agreement
- Health and Community Services (HCSD) staff inclusive of Canberra Health Services (CHS).

A designated RN prescriber is endorsed to administer, obtain, possess, prescribe, supply and/or use Schedule 2, 3, 4 and 8 medicines within their defined scope of clinical practice in partnership with an authorised health practitioner(s) and in accordance with the:

- NMBA Registration Standard Endorsement for scheduled medicines – designated registered nurse prescriber
- NMBA Guidelines- For registered nurses applying for and with the endorsement for scheduled medicines – designated registered nurse prescriber for the purposes of the practice of nursing
- Quality Use of Medicines
- Commonwealth and ACT legislation and regulations.

Prior to a designated RN prescriber prescribing in HCSD or CHS:

- The service must determine the need for designated RN prescribing in an approved model of care through consideration of service needs and workforce availability.
- There must be an agreed and active prescribing agreement in place between an authorised health practitioner(s) (a medical practitioner or nurse practitioner approved by the organisation/health service).
- The designated RN prescriber must be undertaking or have completed a six-month period of clinical mentorship with an authorised health practitioner following their initial NMBA endorsement for scheduled medicines. The period of mentorship must be supported by a clinical mentorship agreement between the designated RN prescriber and authorised health practitioner.
- The designated RN prescriber prescribing agreement and clinical mentorship agreement must be approved by the employing health service through the approved credentialling process in line with their scope of clinical practice defined to include prescribing.

Compliance with this policy is mandatory. Health services must ensure designated RN prescribing is supported by an appropriate clinical governance framework and is undertaken in accordance with all relevant Commonwealth and ACT legislation, regulatory requirements and professional standards.

2. Purpose

This policy establishes the governance and regulatory requirements for designated registered nurse prescribing in the ACT. Its aim is to enable NMBA endorsed registered nurses to prescribe medicines safely, lawfully and consistently within a defined scope of practice, in partnership with an authorised health practitioner(s), across ACT public health services. The policy supports high-quality patient care through clear governance, accountability and legislative compliance.

This policy **does not override or replace** any legislative, regulatory, or professional obligations under Commonwealth or ACT legislation, including requirements of the Nursing and Midwifery Board of Australia.

3. Mandatory Requirements

3.1. Clinical Governance Framework

Designated RN prescribing must occur within an established clinical governance framework that supports the safe, lawful and effective prescribing of scheduled medicines and protects the public.

The clinical governance framework must ensure designated RN prescribing is supported by appropriate governance, credentialing, authorisation, prescribing agreement(s), clinical mentorship, oversight, monitoring and professional accountability arrangements, and complies with relevant legislative, regulatory and professional requirements.

All designated RN prescribers must be credentialed and have their Scope of clinical practice defined to include prescribing prior to prescribing medicines. Credentialing and defining scope of clinical practice must be undertaken in accordance with the Canberra Health Services Credentialing and Defining the Scope of Clinical Practice Policy and any associated procedures.

Only medicines, indications and clinical activities approved within the designated RN prescriber's authorised Scope of clinical practice and prescribing agreement may be prescribed.

Prescribing Scheduled Medicines

Designated RN prescribers must prescribe scheduled medicines in accordance with relevant Commonwealth and ACT legislation, professional standards, organisational policies and evidence-based clinical practice.

Digital Health Record (DHR)

Designated RN prescribers must utilise approved digital prescribing and clinical information systems, including the Digital Health Record (DHR), to prescribe, document, communicate and monitor medicines management activities. All prescribing-related assessments, decisions, consultations and outcomes must be documented in the DHR in accordance with organisational requirements.

Prescribing of Schedule 8 and Schedule 4 Monitored Medicines

Designated RN prescribers authorised to prescribe Schedule 8 (controlled) and Schedule 4 monitored medicines must comply with all relevant legislative, regulatory and organisational requirements relating to higher-risk medicines.

Authorised prescribers must be aware of the additional regulatory controls that apply to these medicines and their role in reducing medicine-related harm, diversion and misuse.

Designated RN prescribers must comply with the *Medicines, Poisons and Therapeutic Goods Act 2008* and Medicines, Poisons and Therapeutic Goods Regulation 2008. When prescribing a Schedule 8 medicine for a patient that is not an inpatient, designated RN prescribers must also hold approval under Chapter 13 of the Medicines, Poisons and Therapeutic Goods Regulation 2008. Chief Health Officer (CHO) approval applications to prescribe controlled medicines are issued in accordance with the Controlled Medicines Prescribing Standards.

The prescribing, administration, storage, supply and management of Schedule 8 and Schedule 4 monitored medicines at CHS and must comply with the **CHS Schedule 8 and Declared Schedule 4 Medicines Management Policy** and associated procedures.

Real Time Prescription Monitoring (RTPM)

Canberra Script is the ACT's Real Time Prescription Monitoring (RTPM) system and forms part of the national framework to minimise harms associated with monitored medicines.

All designated RN prescribers must take all reasonable steps to review Canberra Script before prescribing a monitored medicine and must comply with any legislative or organisational requirements relating to RTPM.

Further information regarding Canberra Script is available at:
https://health.act.gov.au/canberrascript and Canberra Script to register or log in.

Vaccines

Designated RN prescribers may only prescribe vaccines that are specifically authorised within their approved scope of clinical practice and prescribing agreement.

Where a vaccine is not included within both the prescriber's authorised Scope of clinical practice and approved prescribing agreement, the designated RN prescriber does not have authority to prescribe that vaccine.

ACT legislation authorises nurses to either administer medicines on prescription or standing order or administer a vaccine without a prescription under the ACT Registered Nurse and Midwife Vaccination Standards provided they comply with the conditions of the Standards.

Off-label Prescribing and Unregistered Medicines

In general, designated RN prescribing is limited to medicines registered by the Therapeutic Goods Administration (TGA) and prescribed for approved indications.

Designated RN prescribers may prescribe medicines for off-label indications where:

- the use is considered accepted clinical practice and supported by evidence;
- the off-label indication is explicitly approved within the designated RN prescribing agreement and authorised Scope of Clinical Practice; and
- prescribing aligns with organisational governance requirements and the principles of Quality Use of Medicines.

Designated RN prescribers must not prescribe unregistered medicines unless specifically authorised through approved organisational and regulatory processes.

Prescribers should refer to the **Council of Australian Therapeutic Advisory Groups (CATAG) Guiding Principles for the Quality Use of Off-label Medicines** and any applicable CHS policies when considering off-label prescribing.

Risk Management and Incident Reporting

The clinical governance framework for designated RN prescribing must include mechanisms to identify, monitor and manage risks associated with prescribing practice. This includes oversight of prescribing activity, monitoring of medication safety outcomes, review of prescribing incidents and implementation of quality improvement initiatives to support safe and effective prescribing.

All incidents, near misses, medication errors, adverse medicine events, consumer complaints and identified risks relating to designated RN prescribing must be reported through RiskMan) and managed in accordance with Canberra Health Services Risk Management policies and procedures. Designated RN prescribers are accountable for reporting prescribing-related incidents and participating in any required review, investigation or corrective actions arising from those incidents.

Clinical governance arrangements for designated RN prescribing must operate across system, organisational, operational, and clinical levels to support safe, quality, and accountable prescribing practice

For the purposes of this policy, the requirements of the clinical governance framework are outlined in sections 3.2-3.5.

3.2. Service Approval and Governance Oversight

Designated RN prescribing must operate within established clinical, professional and medicines governance arrangements.

Prior to implementation, health services must:

- identify and approve a clinical service need for designated RN prescribing
- ensure prescribing is embedded within an approved model of care
- establish governance, accountability and oversight arrangements
- ensure medicines governance systems support safe and effective designated RN prescribing practice

- establish credentialing and authorisation processes
- assess organisational readiness, including workforce capability, systems and service capacity necessary to support implementation, using the ACT Designated Registered Nurse (RN) Prescribing Implementation Readiness Checklist (Appendix 1).

Designated RN prescribers and authorised health practitioners are responsible for practising within approved governance arrangements and complying with legislative, regulatory and professional requirements.

3.3. Eligibility to Prescribe in Partnership with an Authorised Health Practitioner

To undertake designated RN prescribing, a registered nurse must:

- hold current NMBA registration as a registered nurse and have no relevant conditions, restrictions or undertakings
- hold NMBA endorsement for scheduled medicines as a designated RN prescriber
- maintain professional competence relevant to prescribing practice
- maintain appropriate professional indemnity insurance arrangements
- be credentialled and authorised by the health service
- have an approved scope of clinical practice
- maintain an active Prescribing Agreement with an authorised health practitioner.

An authorised health practitioner participating in a Prescribing Agreement must:

- hold current registration as a health practitioner authorised to prescribe scheduled medicines and have no relevant conditions, restrictions or undertakings that would impact their participation in a prescribing partnership
- have a minimum of two years' experience as an autonomous prescriber
- maintain professional indemnity insurance arrangements appropriate to their practice.

3.4. Prescribing Agreement

The NMBA requires the prescribing agreement to be a written document, agreed between the designated RN prescriber and the authorised health practitioner(s) and approved by the health service.

The approved ACT Designated Registered Nurse (RN) Prescriber Prescribing Agreement template set out at Appendix 2 of the Designated RN Prescribing Policy is the approved document and must be used for all designated RN prescribing arrangements.

The prescribing agreement must:

- define the designated RN prescriber's approved scope of clinical practice
- define the clinical conditions, presentations or indications within scope

- identify the medicines and classes of medicines authorised for prescribing
- outline consultation, referral and escalation arrangements
- define roles and responsibilities of the designated RN prescriber and the authorised health practitioner(s)
- include review requirements and monitoring and auditing of the prescribing agreement.

The Prescribing Agreement must be reviewed at least annually.

Prescribing may not commence until there is an active and agreed prescribing agreement in place.

The designated RN prescriber and/or the authorised health practitioner(s) must notify the health service/employer in writing if the prescribing agreement ceases.

3.5. Clinical Mentorship

Clinical mentorship must occur for a minimum of six months following commencement of prescribing practice after initial NMBA endorsement and may be extended where required to support the designated RN prescriber's ongoing development, competence and safe prescribing practice. The clinical mentor and mentee should consider using the Australian Health Practitioner Regulation Agency - National Prescribing Competencies Framework to guide the development of goals and objectives for the clinical mentorship period.

Where a designated RN prescriber changes specialty area, clinical service or model of care, consideration should be given to whether an additional period of clinical mentorship is required. This should be determined collaboratively by the designated RN prescriber, authorised health practitioner and employing health service, taking into account the scope, complexity and prescribing responsibilities of the new role.

Health services must ensure:

- a Clinical Mentorship Agreement is established prior to commencement using the approved ACT Designated Registered Nurse (RN) Prescriber Clinical Mentorship Agreement template (Appendix 3)
- mentorship objectives are documented
- progress is monitored and reviewed
- completion is formally documented and retained in accordance with organisational records management requirements.

4. Roles and Responsibilities

Health Services

Health services implementing designated RN prescribing are responsible for ensuring designated RN prescribing is implemented, maintained and monitored in accordance with this policy and the requirements outlined in the Clinical Governance Framework.

Health Services must:

- determine local service and health needs and associated workforce capacity and capability to ensure designated RN prescribing is appropriate for service need, and supported
- follow a transparent and consistent decision-making process to determine whether a designated RN prescriber is required for a service
- consider any financial impacts of designated RN prescribing, including access to medicines via the Pharmaceutical Benefits Scheme (PBS)
- credential and authorise designated RN prescribers in accordance with organisational requirements
- approve and oversee prescribing agreements and clinical mentorship agreements
- support designated RN prescribers and authorised health practitioners to meet legislative, professional and organisational requirements
- provide access to appropriate prescribing systems, medicines information resources and clinical decision-support tools
- ensure designated RN prescribers have access to required prescribing and clinical information systems to support safe prescribing practice
- ensure sufficient organisational support is available to enable completion of clinical mentorship requirements
- maintain records relating to designated RN prescribing in accordance with legislative and organisational requirements
- facilitate monitoring, audit, evaluation and quality improvement activities relating to designated RN prescribing
- respond to identified risks, incidents and audit findings through appropriate quality improvement and risk management processes
- review designated RN prescribing services periodically to ensure they remain safe, effective and aligned with service needs.

Designated RN Prescribers

Designated RN prescribers are responsible and accountable for prescribing within their approved scope of clinical practice and authorisation.

Designated RN prescribers must also:

- apply for and maintain a prescriber number with Services Australia where prescribing Pharmaceutical Benefits Scheme medicines for eligible consumers (in line with the PBS prescribing authority of the authorised health practitioner with whom the designated RN prescriber holds a prescribing agreement and PBS authorised medicines for designated RN prescribers)
- consider evidence-based clinical guidelines, medicine stewardship principles, local medicine availability and quality use of medicines principles when prescribing
- participate in the development, implementation and review of the prescribing agreement

- comply with the requirements of the clinical mentorship agreement
- consult, escalate and refer where a person's clinical needs fall outside their scope of practice
- maintain accurate, complete and contemporaneous clinical records
- participate in monitoring, audit, review and quality improvement activities relating to prescribing practice
- report incidents, adverse events, medication errors and near misses
- retain required prescribing records in accordance with legislative and organisational requirements
- comply with all relevant legislation, standards, policies and procedures and medicines-specific requirements relating to their authorised prescribing practice.

Authorised Health Practitioners

Authorised health practitioners are responsible for working in partnership with designated RN prescribers to support the safe, lawful and effective prescribing of scheduled medicines.

Authorised health practitioners' responsibilities are to:

- have no conditions or undertakings on their registration
- support the designated RN prescriber as a prescriber of scheduled medicines within their defined and credentialled scope of clinical practice
- work with the designated RN prescriber to establish the prescriber agreement
- work with the designated RN prescriber to develop a clinical mentorship agreement (where required)
- maintain awareness of the clinical conditions, medicines and prescribing arrangements outlined within the Prescribing Agreement
- provide clinical mentorship support, consultation, guidance and advice to enable the designated RN prescriber to consolidate knowledge, gain experience and increase their prescribing confidence in their first six months of prescribing
- effectively collaborate with, and accept referrals from, the designated RN prescriber when the person receiving care presents with needs outside the RN prescriber's approved scope of clinical practice
- participate in monitoring, audit, evaluation and quality improvement activities relating to designated RN prescribing
- comply with all applicable prescribing, medicines and poisons legislation
- comply with the requirements of the Prescribing Agreement.

The authorised health practitioner is responsible for fulfilling their obligations under the Prescribing Agreement and, where applicable, the Clinical Mentorship Agreement, and remains accountable for clinical decisions made within their own scope of practice.

5. Records Management

Records created as a result of this policy must be created, maintained and managed in accordance with the Territory Records Act 2002 and the Canberra Health Services (CHS) and Health and Community Services Directorate (HCSD) Records management policies and procedures.

Health services must ensure systems and processes are in place for the secure creation, storage, access, retention and disposal of records, and that responsibility for records management is clearly assigned.

Records may include:

- credentialing and authorisation documentation
- approved scopes of practice
- prescribing and mentoring agreements
- education and training records
- clinical prescribing records and documentation
- audit, monitoring, and compliance reports
- evaluation and performance data.

6. Evaluation

The implementation and effectiveness of designated RN prescribing must be monitored, evaluated, and reported by organisations through established governance, safety, quality, and assurance mechanisms.

Evaluation will assess:

- safety and quality outcomes associated with prescribing practice
- workforce capability, utilisation, and service impact
- access to care and patient outcomes
- compliance with policy, legislative, and regulatory requirements
- effectiveness of implementation and supporting systems.

Evaluation findings should inform continuous improvement, service planning, risk mitigation, and organisational decision-making.

This Policy must be reviewed **12 months following implementation** and thereafter **every three years**, or earlier where required due to legislative, regulatory, operational, or evidence-based changes.

The policy review will consider the ongoing suitability, currency, and effectiveness of the policy and will be informed by implementation and evaluation findings provided by organisations but will not assess local implementation outcomes.

Outcome Measures	Method	Responsibility
Safe and high-quality prescribing practice	Audit of prescribing activity, incident reporting, clinical review processes	Health service providers, governance committees
Compliance with policy, legislative, and regulatory requirements	Compliance audits, credentialing reviews monitoring against mandatory instruction	Health service providers, clinical governance units
Workforce capability and utilisation	Workforce data analysis, credentialing records, scope of practice reviews	Health service providers
Improves access to care and patient outcomes	Service activity data, patient outcome measures, patient experience feedback	Health service providers, service leads
Effectiveness of implementation and systems	Evaluations of implementation framework, process reviews, stakeholder feedback	Health service providers, systems level oversight bodies
Continuous improvement and risk management	Review of audit findings, risk registers, and quality improvement initiatives	Governance committees and health service providers

7. References and Related Documents

The following documents support this policy and must be read in conjunction with relevant legislation, professional standards, and Canberra Health Services (CHS) and Health and Community Services Directorate (HCSD) policies and procedures.

8. Legislation

ACT Legislation

- Health Practitioner Regulation National Law (ACT) Act 2010 Health Practitioner Regulation National Law (ACT) Act 2010 | Acts
- *Medicines, Poisons and Therapeutic Goods Act 2008* and Medicines, Poisons and Therapeutic Goods Regulation 2008

- Applicable ACT instruments, directions and determinations relating to medicines, poisons, controlled medicines, monitored medicines and real-time prescription monitoring made under the Medicines, Poisons and Therapeutic Goods Act 2008
- ACT Controlled Medicines Prescribing Standards.

Commonwealth Legislation

- Health Insurance Act 1973
- National Health Act 1953 (Cth).
- Therapeutic Goods Act 1989 (Cth).
- Privacy Act 1988 (Cth).
- My Health Records Act 2012 (Cth).
- Poisons Standard for the Uniform Scheduling of Medicines and Poisons (the SUSMP).

Professional and Regulatory Standards

Nursing and Midwifery Board of Australia (NMBA)

- Registration Standard: Endorsement for Scheduled Medicines – Designated RN Prescriber
- Guidelines for Registered Nurses Applying for and Holding the Endorsement for Scheduled Medicines – Designated RN Prescriber
- Registered Nurse Standards for Practice
- Code of Conduct for Nurses

Australia Health Practitioner Regulation Agency (Ahpra)

- Australian Health Practitioner Regulation Agency (Ahpra) requirements under the National Registration and Accreditation Scheme.

Canberra Health Services (CHS) and Health and Community Services Directorate (HCSD) Policies and Instruments

ACT Designated Registered Nurse (RN) Prescribing Policy Appendices:

  - Appendix 1: ACT Designated Registered Nurse (RN) Prescribing Implementation Readiness Checklist
  - Appendix 2: ACT Designated Registered Nurse (RN) Prescriber Prescribing Agreement
  - Appendix 3: ACT Designated Registered Nurse (RN) Prescribing Clinical Mentorship Agreement
- Health Practitioner Credentialing and Scope of Clinical Practice Policy
- Credentialing and Defining the Scope of Clinical Practice for Nurse Practitioners and Endorsed Midwives
- Medication Handling Policy
- Medicines Safety and National Standard
- Risk Management Policy
- North Canberra Hospital (NCH) - Risk Management Procedure

- Other relevant CHS and ACT Health Directorate policies, procedures, guidelines and clinical governance instruments.

9. Definitions

Term	Definitions
Designated registered nurse prescribing (designated RN prescribing)	A model of care that enables registered nurses to prescribe medicines within an approved scope of practice, supported by governance, education, and collaborative arrangements.
Designated registered nurse prescriber (designated RN prescriber)	Means an RN with an NMBA endorsement for scheduled medicines who undertakes prescribing within their level of competence and scope of practice together with an authorised health practitioner. The designated RN prescriber is responsible and accountable for prescribing within their scope of practice and authorisation. The designated RN prescriber has an authorisation to prescribe medicines that is determined by legislation, will meet the requirements of the NMBA related to the endorsement and policies of the jurisdiction, employer or health service.
Digital Prescribing Systems	Approved electronic systems used to prescribe, record, and monitor medicines, including the Digital Health Record (DHR) and RTPM/Canberra Script.
Authorised health practitioner	means a registered health practitioner who is an authorised autonomous prescriber, for example a medical practitioner or a nurse practi tioner. More than one authorised health practitioner may work with the designated RN prescriber.
Authorisation	Formal organisational approval for an NMBA endorsed registered nurse to undertake designated RN prescribing within an agreed scope of practice
Prescribing Agreement	A written agreement between a designated RN prescriber and one or more authorised health practitioners that defines the designated RN prescriber's approved prescribing scope, medicines, clinical conditions, consultation and escalation arrangements, roles and responsibilities, and governance requirements.
Clinical Mentorship Agreement	A documented agreement between a designated RN prescriber and an authorised health practitioner that outlines mentorship objectives, activities, review processes and arrangements for supporting safe prescribing practice during the required mentorship period.
Clinical Governance	The system through which health services are accountable for maintaining and improving the safety, quality, and effectiveness of care.
Credentialing	The formal process used to verify the qualifications, professional awards and statements of competency issued by an authorised and recognised body that attests to a practitioner’s education, training and competence and relevant practical experience

Implementation Readiness	The extent to which a service has governance, workforce capability, systems, and processes in place to safely commence designated RN prescribing.
Scope of clinical practice	The process of determining the extent (scope) of an individual health practitioner's clinical practice within a particular organisation based on the individual's credentials, competence, performance and professional suitability. It includes determining the needs of the organisation and its capability to support the health practitioner's scope of clinical practice.
Endorsed midwife	A midwife who holds the NMBA Endorsement for scheduled medicines for midwives and is qualified to prescribe scheduled medicines and provide associated services required for midwifery practice in accordance with relevant state and territory legislation
Nurse practitioner	A registered nurse endorsed as a nurse practitioner by the Nursing and Midwifery Board of Australia (NMBA). The nurse practitioner practices at an advanced practice level, meets and complies with the NMBA Nurse Practitioner Standards for Practice. The nurse practitioner has direct clinical contact and practices within their scope under the legislatively protected title 'nurse practitioner' under the National Law.
Scope of practice	The roles, functions, responsibilities, activities and decision-making capacity which the registered nurse is educated, experienced, competent and authorised to perform and as determined by legislation and professional standards.
CHS Services	Territory-wide services including Canberra Health Services and other services that fall under the governance of the local health networks

10. Review Date

The next review of this document is due by July 2027.

11. Appendices

Appendix 1. ACT Designated RN Prescribing Implementation Readiness Checklist
Appendix 2. ACT Designated RN Prescriber Prescribing Agreement
Appendix 3. ACT Designated RN Prescribing Clinical Mentorship Agreement

Version Control

Version	Date	Comments
1.0	30 July 2026	Review in 12 months

Appendix 1:

ACT Designated Registered Nurse (RN) Prescribing Implementation Readiness Checklist

ACT Designated Registered Nurse (RN) Prescribing Implementation Readiness Checklist

This checklist is designed to support services in confirming readiness prior to commencing designated registered nurse (RN) prescribing practice. It provides a structured framework for the systematic assessment of key implementation domains, promoting consistency, clinical governance, and the safe and effective integration of designated RN prescribing into practice.

Implementation Readiness Checklist – Designated RN Prescribing (ACT)

Health service / organisation	Click or tap here to enter text.
Division / unit / program	Click or tap here to enter text.
Site / location	Click or tap here to enter text.
Date of completion	Click or tap to enter a date.

Readiness Domain	Readiness Requirement	Status (Yes / Partial / No)	Evidence / Confirmation	Notes / Actions
Clinical Governance	Local clinical governance arrangements for Designated RN Prescribing are documented and aligned with the ACT Designated RN Prescribing Clinical Governance Framework	Choose an item.	Defined governance structure and escalation processes documented and endorsed	Click or tap here to enter text.
Policy Alignment	Relevant ACT policies, mandatory instructions, and legislative frameworks are identified and embedded in practice	Choose an item.	Applicable policies and frameworks are accessible and referenced within local procedures	Click or tap here to enter text.
Education Requirements	Education, training, and endorsement requirements for RN prescribing are defined and met	Choose an item.	Evidence of completed education and compliance with endorsement requirements	Click or tap here to enter text.

Scope of Practice	Designated RN prescribing scope(s) of clinical practice are clearly defined, approved, and aligned to service delivery	Choose an item.	Approved scope of practice documentation outlining inclusions, exclusions, and limitations	Click or tap here to enter text.
Credentialing	Credentialing and privileging processes for designated RN prescribing roles are established and operational	Choose an item.	Documented credentialing pathway, approval process, and records of authorisation	Click or tap here to enter text.
Prescribing Agreements	Prescribing agreement processes are established to support safe, collaborative practice	Choose an item.	Approved templates and documented local processes for prescribing agreements	Click or tap here to enter text.
Mentoring Arrangements	Completed Mentoring Agreement, including an identified mentor and support arrangements for the first six months of prescribing practice.	Choose an item.	Identified mentors and a documented mentoring framework or support model	Click or tap here to enter text.

Clinical Context	Approved clinical contexts, patient cohorts, and models of care for RN prescribing are defined, and the organisation has confirmed its capacity to support implementation within the service.	Choose an item.	Documented description of clinical settings, patient groups, and practice limitations	Click or tap here to enter text.
Medicines Governance	RN prescribing is integrated within existing medicines safety and quality systems	Choose an item.	Alignment with medicines governance frameworks, safety protocols, and formulary controls	Click or tap here to enter text.
Medicines Management and Pharmacy Arrangements	The service has confirmed that designated RN prescriptions can be accepted, processed, and dispensed through relevant pharmacy providers and medication management systems.	Choose an item.	Consultation with local pharmacy services completed, with dispensing arrangements and pathways for RN-issued prescriptions confirmed. Electronic prescribing and medication management systems are configured and support designated RN prescribing requirements.	Click or tap here to enter text.

			Prescriber registration, PBS requirements, and relevant Commonwealth, Territory, and local medication regulations have been addressed and communicated to RN prescribers. Processes are in place to ensure prescribing compliance and manage pharmacy- or prescribing-related issues through an established escalation pathway.	
Digital Prescribing Systems	Approved prescribing and clinical documentation systems are accessible and configured	Choose an item.	Prescriber number issued by Services Australia. Access to DHR, prescribing platforms (e.g. Canberra Script), and system readiness confirmed	Click or tap here to enter text.
Records Management	Recordkeeping requirements for prescribing are defined and compliant with standards	Choose an item.	Documented processes for clinical documentation, storage, and retention	Click or tap here to enter text.

Consumer Safety and Consent	Processes are in place to support informed decision making and the provision of consumer information regarding prescribed medicines	Choose an item.	Alignment with organisational consent policies, consumer information resources, and medication communication processes	Click or tap here to enter text.
Risk Management	Key risks associated with RN prescribing implementation are identified and mitigated	Choose an item.	Documented risk assessment with mitigation strategies and controls	Click or tap here to enter text.
Monitoring and Reporting	Mechanisms for monitoring, audit, and reporting of prescribing activity are established	Choose an item.	Defined audit processes, performance measures, and reporting pathways	Click or tap here to enter text.

Overall Readiness Determination Choose an item.

Action Plan Template for a summary of key risks / conditions

Identified Gap	Action Required	Responsible Officer	Due Date	Status
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.	Click or tap here to enter text.
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Approved by ***Name, Title***	Click or tap here to enter text.
Date of completion	Click or tap to enter a date.
Signature	Click or tap here to enter text.

Use of the Checklist

This checklist can be used:

- Prior to initial implementation
- When expanding designated RN prescribing scope or clinical context
- To support local planning, governance review, and assurance

Completion of this checklist helps assess organisational readiness but does **not replace** credentialing, authorisation, or compliance with mandatory policy requirements.

Appendix 2

Prescribing Agreement

Designated Registered Nurse (RN) Prescriber Prescribing Agreement

This agreement fulfills the requirements of the Nursing and Midwifery Board of Australia (NMBA) Registration Standard: Endorsement for scheduled medicines - designated registered nurse prescriber. It is a key component of the designated RN prescriber role as outlined in the NMBA standard and ACT policy. The agreement must be signed by all parties, including a representative of the authorising organisation.

Completion of the prescribing agreement is to comply with the requirement of the ACT policy.

Key Points

Prescribing Agreement

A designated RN prescriber prescribing agreement is a written agreement between the designated RN prescriber and authorised health practitioner(s) approved by the employer. The agreement clearly documents the role of both parties. A copy of the prescribing agreement is to be retained by the designated RN prescriber, the authorised health practitioner(s) and the employer.

Authorised health practitioner

An authorised health practitioner is a registered health practitioner who is an authorised autonomous prescriber, for example a medical practitioner or a nurse practitioner. More than one authorised health practitioner may work with the designated RN prescriber. One authorised health practitioner may work with more than one designated RN prescriber.

Scope of Practice

The scope of practice of an individual RN is that to which they are educated, competent and authorised to perform within regulatory and organisational frameworks. An individual's scope of practice is also determined by the employer's requirements, the health needs of people and practice context.

The prescribing agreement is informed by and supports the designated RN prescriber's scope of practice. It provides clarity for the designated RN prescriber, the authorised health practitioner, the organisation and other members of the multidisciplinary team.

Accountability

The designated RN prescriber is responsible and accountable for prescribing within their scope of practice and authorisation.

Roles and Responsibilities

Responsibilities of the designated RN prescriber

- Comply with all relevant NMBA standards, codes, and guidelines, as well as relevant statewide and local policies
- Clearly define and work within their scope of clinical practice when prescribing scheduled medicines.
- Work with the authorised health practitioner/s to establish the prescribing agreement.
- Prescribe in accordance with their approved prescribing agreement and its specifications.
- Maintain proficiency in current practices related to the health conditions and medicines in their prescribing agreement.
- Consider their level of knowledge, skills, competence and scope of practice when making clinical decisions, escalating care when necessary.
- Consult with and refer to authorised health practitioner partner/s or other relevant health practitioners if care or prescribing falls outside their competence or scope.
- Maintain collaborative, professional relationships with prescribing partners, including agreed communication and escalation processes.
- Participate in clinical mentorship for 6 months post the commencement of prescribing practice.
- Participate in monitoring and audit related to prescribing practice.
- Engage in the annual review of the prescribing agreement.
- Retain / store the prescribing agreement as per employers' requirements.

Responsibilities of authorised health practitioner prescribing partner

- Understand the scope of practice and competence of the designated RN prescriber.
- Maintain awareness of the approved conditions outlined in the designated RN prescriber's approved prescribing agreement.
- Collaborate to establish and maintain the prescribing agreement, including agreed communication and clinical escalation processes.
- Maintain a professional and collaborative prescribing relationship, accepting referrals and / or providing advice when care is outside the RN's scope of practice.
- Participate in the annual review of the prescribing agreement.
- Notify the designated RN prescriber and employer in writing if ceasing the prescribing agreement.

Responsibilities of the Health Service

- Consider local service and workforce capabilities and capacity to ensure designated RN Prescribing is appropriate for the community's health and service needs.
- Endorse prescribing and clinical mentorship agreements and support designated RN prescribers and authorised health practitioners to fulfil their regulatory and clinical governance obligations.

- Ensure appropriate clinical governance processes and mechanisms are in place to support designated RN prescribing, including annual review and routine audit of designated RN prescribing practice.

For further information

- Guidelines for registered nurses applying for and with the endorsement for scheduled medicines - designated registered nurse prescriber
- Fact Sheet: Registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber
- Canberra Heath Services Medical Handling Policy - Medication Handling Policy

Appendix 2: Prescribing Agreement

Demographic Information	
Designated RN prescriber *(Name and Title)*	Click or tap here to enter text.
NMBA Endorsement Details *(Registration number, initial date of endorsement)*	Click or tap here to enter text.
Employee number	Click or tap here to enter text.
Authorised health practitioner(s) *(Name, title, role, registration number – noting there may be more than one authorised health practitioner prescribing partner)*	Click or tap here to enter text.
Prescribing agreement review date	Click or tap to enter a date.
Name and address of organisation *(Location and facility)*	Click or tap here to enter text.
Clinical service(s) *(e.g. Palliative Care)*	Click or tap here to enter text.
Clinical Service Director (or equivalent) *(Name and title)*	Click or tap here to enter text.

Line manager (optional) *(Name and title)*	Click or tap here to enter text.

Clinical mentorship details	Clinical Mentorship Agreement in place: Choose an item. Start date: Click or tap to enter a date. End date: Click or tap to enter a date.

Scope of Practice	
Postgraduate education and training relevant to designated prescribing role *(e.g. Graduate certificate in Palliative Care)*	Click or tap here to enter text.
Scope of practice *(When, where, how and with whom with the designated RN prescriber provide care and prescribe scheduled medicines?)*	***Outline the role of the designated RN prescriber within the clinical service(s) and as part of the multidisciplinary team, including the model(s) of care in which they will be authorised to prescribe scheduled medicines.*** (Insert relevant link to clinical service information if applicable) Click or tap here to enter text.
Specific Prescribing Conditions	

Prescribing scope	**General Prescribing Guidance** Prescribes medicines in accordance with the Quality Use of Medicines; the National Prescribing Framework Medicines, Poisons and Therapeutic Goods Act 2008 | Acts, Medicines, Poisons and Therapeutic Goods Regulation 2008 | Subordinate laws, The Poisons Standard (the SUSMP) | Therapeutic Goods Administration (TGA) and relevant Designated Registered Nurse (RN) Prescribing Policy and procedures Use current best practice guidelines, medication reference texts and local procedures or protocols to support safe prescribing including but not limited to Therapeutic Guidelines, Australian Medicines Handbook, Australian Injectable Drug Handbook. This includes adherence to opioid and/or antimicrobial stewardship principles and local approval processes.

Authorised Medical Conditions and Indications

The designated RN prescriber may commence, continue or cease medications to manage the following conditions and indications as listed below (can list multiple).

Medical Conditions and Indications
Click or tap here to enter text.
Click or tap here to enter text.
Click or tap here to enter text.
Click or tap here to enter text.
Click or tap here to enter text.

	Authorised Medicines The prescribing of scheduled medicines should be undertaken in accordance with ACT poisons legislation and evidence based clinical practice standards. Designated RN prescribers must only prescribe medicine in accordance with the current Canberra Health Services Medicines Formulary (or approved local formulary), relevant clinical guidelines, policies and procedures of Canberra Health Services. The designated RN prescriber may commence, continue and/or cease medicines within their scope of practice using their clinical judgement in consultation with their authorised health practitioner prescribing partner(s) as listed below. Include adjunct medicines and therapies that support or control known symptoms, side effects or allergic reactions Medicines specified cannot exceed the authorised health practitioner's scope of practice. (* *Please document Schedule 8 medicines in separate section below)* List of medications – Therapeutic Classification

Medicine – Therapeutic Class	New (Yes/No)	Continuing Therapy (Yes/No)	Cease (Yes/No)	Exclusions
Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Choose an item.	Choose an item.	Click or tap here to enter text.

Schedule 8 medicines

The designated RN prescriber is authorised to prescribe Schedule 8 medications in accordance with the Medicines, Poisons and Therapeutic Goods Act 2008 \| Acts, Medicines, Poisons and Therapeutic Goods Regulation 2008 \| Subordinate laws, The Poisons Standard (the SUSMP) \| Therapeutic Goods Administration (TGA) Prescribing controlled and monitored medicines - ACT Government

The designated RN prescriber is authorised to prescribe the listed Schedule 8 (S8) medicines for the following conditions/indications within the specified limitations.

The medicines specified cannot exceed the authorised health practitioner's scope of practice.

S8 Medicine	Conditions/Indications	Exclusions/Limitations
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Prescribing Enablers

Real Time Prescription Monitoring

Canberra Script is the Australian Capital Territory real time prescription monitoring (RTPM) system. Prior to prescribing or supplying monitored medicines, all prescribers and pharmacists working in Canberra Health Services (CHS) should access Real Time Prescription Monitoring (RTPM) systems and review the relevant information about prescribing and dispensing events to ensure it is safe and appropriate to provide monitored medicines.

Further information on Canberra Script is available: Canberra Script

Escalation Processes

Clinical Escalation	In the event of clinical deterioration designated RN prescribers must follow their local escalation processes and ensure all local emergency and clinical policies, procedures and protocols are followed.
Clinical Dispute Resolution	**Non urgent clinical** Where dispute arises regarding the clinical management of a consumer, which is non time critical, escalation should occur to the prescribing partner or responsible treating medical or nurse practitioner. **Urgent clinical** Where dispute arises regarding the management of a consumer which impacts safety, escalation must occur via the organisation's emergency response system. **Consider reporting any disputes via the clinical incident reporting system as per locally agreed processes.**
Professional Dispute Resolution	Where dispute arises regarding the designated RN's scope of practice, prescribing authority or professional responsibility, escalation must occur to the designated RN prescriber's direct manager, employer or agreement holder.
Monitoring	
Safety and Quality Governance Processes	Uses existing safety and quality governance processes to review prescribing practices in alignment with local policy and procedures.

Approvals

All parties	Designated Registered Nurse Prescriber	Authorised Health Practitioner
Have discussed the purpose of the above prescribing agreement in accordance with the designated registered nurse prescriber's scope of practice and requirements of the NMBA registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber	☐	☐
Have discussed and agreed on the designated registered nurse prescriber's scope of practice and their role as a prescriber within this defined scope.	☐	☐
Have discussed, documented and agreed on a partnership framework including expectations and boundaries of the prescribing agreement. Expectation of the prescribing agreement (Optional):	☐	☐
Have discussed and agreed to the process for consultation and escalation of care inclusive of referral to other relevant health practitioners when care requirements are outside the scope of practice of the designated registered nurse prescriber. Processes for consultation and escalation (optional)	☐	☐

Designated Registered Nurse Prescriber	Signature	Date
Name: Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.
Authorised Health Practitioner	**Signature**	**Date**
Name: Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.
Authorised Health Practitioner (Secondary – Optional)	**Signature**	**Date**
Name: Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.

Note: Approvals signatures continue next page

Line Manager (Nursing)	Signature	Date
Name: Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.
Service / Site Director (or equivalent organisational representative)	**Signature**	**Date**
Name: Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.

Copy of the prescribing agreement to be retained by the designated RN prescriber, authorised health practitioner and health service/employer.

Appendix 3

Clinical Mentorship Agreement

Designated Registered Nurse (RN) Prescriber Clinical Mentorship Agreement

This agreement fulfills the requirements of the Nursing and Midwifery Board of Australia (NMBA) Registration Standard Endorsement for scheduled medicines - designated registered nurse (RN) prescriber. It is a key component of the designated registered nurse (RN) prescriber role as outlined in the NMBA standard and the ACT policy. The agreement must be signed by all parties, including a representative of the authorising organisation.

Completion of the clinical mentorship agreement is to comply with the requirement of the ACT policy.

Purpose

Clinical mentorship

The purpose of clinical mentorship is to enable the designated RN prescriber to develop experience and confidence in prescribing within their scope of practice during the first six months of their prescribing practice. The mentorship may be extended or resumed should the designated RN prescriber's scope of practice change, or at the direction of the employer and with the agreement of both mentor and mentee.

The role of the clinical mentor is to provide the designated RN prescriber with support and guidance to assist in the consolidation of knowledge and skills in relation to the prescribing of scheduled medicines. They must be an authorised health practitioner who is able to commit to providing respectful and constructive feedback and guidance through a series of scheduled mentorship sessions.

Roles and Responsibilities

Responsibilities of the designated RN prescriber in relation to clinical mentorship

- Comply with all relevant NMBA standards, codes, and guidelines, as well as relevant statewide and local policies
- Engage in a clinical mentorship with an authorised health practitioner for the first six months of prescribing including scheduling mutually agreed regular mentorship sessions with their allocated mentor.
- Maintain collaborative, professional relationships with prescribing partners, including agreed communication and escalation processes.
- Reflect, respond and record feedback, coaching and advice from the mentor.
- Identify opportunities to improve prescribing practice and build confidence.

Responsibilities of the clinical mentor*

(*noting this may simultaneously be the prescribing partner)

- Commit time to meet regularly with their allocated mentee/s for six months post endorsement and commencement of prescribing.
- Provide feedback, coaching and advice to the designated RN prescriber.
- Assist in identifying and addressing areas for development.

For further information

- Guidelines for registered nurses applying for and with the endorsement for scheduled medicines - designated registered nurse prescriber
- Fact sheet: Registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber

Clinical Mentorship Agreement

All parties	Designated Registered Nurse Prescriber	Authorised Health Practitioner
Have discussed the purpose of the Mentorship relationship in accordance with the mentee's scope of practice, prescribing agreement, and requirements of the NMBA registration standard: Endorsement for scheduled medicines – designated registered nurse prescriber.	☐	☐
Have discussed and agreed on the preferred method and frequency of communication (at least monthly).	☐	☐
Have discussed and agreed on a mentorship framework including expectations and boundaries of our Mentorship relationship.	☐	☐
Have discussed and agreed to the process for consultation and escalation of care, inclusive of referral to other relevant health practitioners when care requirements are outside the scope of practice of the designated registered nurse prescriber.	☐	☐
Agree and commit to respectful, professional, and genuine communication to enhance the Mentorship relationship and to facilitate an opportunity for learning and development.	☐	☐

Clinical Mentorship Commencement Date	Click or tap to enter a date.
Clinical Mentorship Completion Date	Click or tap to enter a date.

Designated Registered Nurse Prescriber (Mentee)	Signature	Date
Name:Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.
Authorised Health Practitioner (Mentor)	**Signature**	**Date**
Name: Click or tap here to enter text. Position: Click or tap here to enter text.	Click or tap here to enter text.	Click or tap to enter a date.