

Nurse Practitioner Integration

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Background

Nurse practitioners were first regulated in British Columbia in 2005, and are regulated by the College of Registered Nurses of BC (CRNBC). According to the CRNBC (2010), “Nurse practitioners (NPs) are health professionals who have achieved the advanced nursing practice competencies at the graduate level of nursing education that are required for registration as a nurse practitioner with CRNBC. Nurse practitioners provide healthcare services from a holistic nursing perspective, integrated with the autonomous diagnosis and treatment of acute and chronic illnesses, including prescribing medications.”

There are slightly more than 300 NPs registered in B.C, many of whom are not yet fully deployed in the community-based primary care roles for which they are qualified. At the same time, B.C. is lacking in sustainable funding for NPs, and there continue to be challenges for the role despite evidence that overwhelmingly indicates NPs can significantly increase efficiencies in primary care delivery.

Legislation and a number of regulations at the federal level contain clauses which identify the need for a medical examination or consultation with a physician, but do not allow for a NP, although the work is well within the NP scope of practice. Examples include completion of the medical assessment forms for the purposes of EI (Employment Insurance Act); the Canadian Pension Plan Disability (CPPD) form (Canada Pension Plan Act and Canada Pension Plan Regulations) and the Disability Tax Credit form or the Disability Tax Credit Certificate (Income Tax Act). These acts and regulations were initially formulated at a time when NP practice was uncommon except for rural remote areas where Health Canada had established nursing stations.

NPs are now well-established healthcare providers who work in a wide variety of diverse settings, ranging from rural remote to urban nationwide, and legislation must be updated to reflect their expanded role.

Key Messages:

- Nurse Practitioners practice autonomously and collaboratively to provide healthcare services that contribute to the health and well-being of British Columbians.
- The Health Council of Canada, Institute of Medicine and multiple other researchers support the need for teams that optimize the practice scope of healthcare providers like NPs.
- Clauses that identify physicians as the only medical practitioner who can provide medical examinations, consultations or sign forms act as a significant barrier to full scope of practice for NPs.
- Removing legislative and regulatory barriers to NP practice will increase access to services for Canadians and decrease unnecessary referrals.



Issues Brief

Questions for Nurses

1. What are some examples across the country that demonstrate success in utilizing NPs to their full scope?
2. What are the enablers, and how has this impacted patient outcomes?
3. What can ARNBC continue to do to ensure NPs across B.C are able to practice without legislative and regulatory barriers?

Further Reading:

- [BCNPA Nurse Practitioner Frequently Asked Questions](#)
- CRNBC: [Competencies Required for Nurse Practitioners in British Columbia](#)
- [CNA's NP Now Campaign](#)

