

I am the Medical Director of a Family Medicine Clinic. How can I employ an RN Prescriber? How do I go about their training?

Thank you for your interest in hiring an RN Prescriber at your facility. If your clinic is part of the SCPCN, you must have received an email mentioning the “Innovation Grant”. Under Stream II of the Innovation Grant, you may “purchase” FTEs for specific needs, among which the services of an RN Prescriber. This means that the government will provide you with the funds to pay the RN Prescriber that you will employ at your clinic. RN Prescribers quickly reduce your waiting times without decreasing the amount of patients you see and bill for daily. They simply offer quick access to patients who come in with acute ailments, prescribe schedule 1 medications independently, request appropriate tests and investigations, and follow-up on the care they provide including communication of results for the tests they requested. This allows you to concentrate more on your chronic illness patients and less on things like UTIs, upper or lower respiratory tract infections, fractures, dislocations, shingles, skin infections, just to name a few. CRMC offers training to the nurses you employ as RN Prescribers directly at your facility. We offer two trainings/internships, one of 6 and one of 12 months. If you are interested in hiring an RN Prescriber through the Innovation Grant, please contact our Clinical Manager via [email](#) for information.

I am the Medical Director of a PCN other than South Calgary PCN. I am interested in hiring an RN prescriber who completed one of your internships. How do I go about it?

Thank you for your interest in hiring an RN who completed one of our internships to become a prescriber in the Family Medicine setting. All you would have to do is to contact our Clinical Manager via [email](#) and ask to have a meeting to formalize the agreement. The agreement is free of charge and does not envisage any transfer of funds between the two organizations. It only allows the CRNA to acknowledge that the Medical Director of the final destination clinic is happy to have the RN prescriber train for and utilize the Clinical Support Tools of CRMC and is happy to provide help in the unlikely event that the RN require it. RNs who train at CRMC and move onto a new Family Medicine clinic or PCN clinic do not need to complete 750 hours of RN practice at the destination clinic. The CRNA will agree to transfer their prescribing licence directly to the new and final destination clinic.

I am the Medical Director of a PCN other than South Calgary PCN. Why should I hire an RN Prescriber?

RN prescribers who have completed one of our internships are the highest-trained registered nurses you will be able to hire in Alberta. They are only one step below nurse practitioners and will be able to fulfill both all RN duties as well as manage the majority of acute ailments that patients present with at a walk-in centre. They will be able to independently take history, perform a focused physical assessment, prescribe appropriate pharmacotherapy, and request tests and investigations for the patient they consult. They will be able to reduce your physicians and nurse practitioners backlog allowing them to concentrate on their patients

with chronic disease while the RN will take care of other more urgent but simpler issues like UTIs, cough/cold/flu, other acute respiratory diseases, skin bacterial and fungal infections, otitis media, MSK injuries, etc.

An RN who works at our organization has completed the CRMC Internship for the RN Prescriber; how does this help the clients of my organization?

If your RN has finished either one of our RN Prescriber Internships, and you have an authorized prescriber employed or working for your organization (physician or nurse practitioner), and the authorized prescriber agrees to let the RN use some or all the Clinical Support Tools (CST) of CRMC (they fit the criteria also for your clientele), provided that the RN prescriber has completed 750 hours at your organization, he/she will be able to diagnose, prescribe, and request tests and investigations at your organization for the CSTs that your authorized prescriber has agreed to have your RN utilize. If your RN and your authorized prescriber enter a partnership, they must request the CRNA to issue prescribing rights to your RN before they can start to prescribe. The process is not automatic.

An example is a Family Medicine clinic whose medical director wishes to use all the CSTs of CRMC to let patients who need urgent appointments be seen on a walk-in basis by the RN prescriber.

Another example would be an RN in a nursing home who may be authorized to use the CRMC's Urinary Tract Infection CST. If a resident of the nursing home is experiencing symptoms of UTI, the RN Prescriber will be able to make a guided diagnosis and prescribe the medications needed to treat the patient in the most appropriate way.

What is the role of RN Prescribers?

RN Prescribers increase access to health care services in the community and reduce waiting times. They DO NOT replace physicians and nurse practitioners and DO NOT replicate their roles. RN Prescribers, instead, help to relieve backlogs, and long waiting times. This way, patients can access treatment faster without having to wait for days or weeks on end.

Are RN Prescribers safe?

All RN prescribers trained by CRMC through our internship have undergone a very rigorous training that by far exceeds the requirements of the College of Registered Nurses of Alberta. All our interns complete an initial review of basic entry-level RN skills. Then, they move onto advanced practice RN skills, and complete several CPD-certified courses to further their

knowledge of anatomy, pathophysiology, and pharmacology in addition to the statutory requirements to complete modules 1 and 2 of the RN Prescriber certification from Athabasca University. In order to be admitted to the internship, they must possess post-graduate education on top of having completed at least 3,000 hours of RN practice. Moreover, all our interns have completed at least 468 hours or 1,326 hours of supervised diagnosing and prescribing practice for the 6-month and the 12-month internships respectively where they have been supervised by a physician or nurse practitioner while learning how to make guided diagnosis, issuing prescriptions and requisitions for tests and investigations. Those who have completed the 12-month internship will not need to complete 750 hours of RN practice when transferring to another Family Medicine clinic.

Are RN Prescribers knowledgeable enough to issue prescriptions and request tests and investigations?

All RN prescribers must have at least 3,000 hours of full-time RN experience. This means that they cannot be newly-qualified nurses. The College of Registered Nurses of Alberta does not issue prescriber licences unless the nurse has successfully passed the Athabasca University modules 1 and 2 for the certification of RN Prescribers in Alberta.

In addition to the above, CRMC only accepts nurses who have completed post-graduate education, and directly supervises RN prescribers for several months to make sure that they are indeed competent to utilize the Clinical Support Tools available to them, make correct guided diagnoses, refer patients to a physician or nurse practitioner when this is advised, and prescribe medications correctly and according to professional and legal standards. Each pathway they utilize must have been used by the RN prescriber at least three times without any input from the supervisor for the nurse to be signed off for its use. This means that they must have already utilized it several times before they are deemed competent to use it.

CRMC RN interns must follow a very rigorous process to obtain their certification, which is reported back to the College of Registered Nurses of Alberta for any update.

Are RN Prescribers Advanced Practice Nurses?

This depends on two circumstances. If the RN registered with the CRNA has worked in a specific clinical practice area and possess a graduate degree applicable to that area where they use their expertise to provide professional services, they are considered Clinical Nurse Specialists (CNP), which is one of the two recognized Advanced Practice Nurses (APNs) in Canada together with Nurse Practitioners. For more information you may check the relevant policy from the [CRNA](#).