

For Immediate Release | March 16, 2022

One year in, Interior Health nurse prescriber program continues to expand

IH WIDE – One year ago today, Crystal Head of Vernon was the first registered nurse in B.C. to write an opioid agonist treatment (OAT) prescription for opioid use disorder, as part of the provincial government’s overdose response.

Since that time, the nurse prescriber team in Interior Health has grown to include 16 nurses, working in 11 communities to support people with opioid use disorder, including 100 Mile House, Castlegar, Cranbrook, the Elk Valley, Nelson, Penticton, Lillooet, Revelstoke, Trail, Kelowna and Vernon.

“We are tackling the toxic drug crisis from every angle. British Columbia is first province in Canada to let nurses prescribe medication-assisted treatment for opioid-use disorder,” said Sheila Malcolmson, Minister of Mental Health and Addictions. “On my visit to Vernon and Kelowna this week, I had the privilege of meeting some of the dedicated nurses on the prescriber team and hear first-hand about how their ability to prescribe medication assisted treatment is making an impact in their community. Expansion of nurse prescribing in the Interior is an important part of building the system of substance use care people need.”

“We are really pleased to be providing nurse prescriber services, particularly for rural areas where it can be more difficult to see clients outside of clinic hours and respond to urgent client needs,” said Interior Health president and CEO, Susan Brown.

In the past year, IH nurse prescribers have written more than 450 prescriptions for Suboxone, an important OAT medication to support people with opioid use disorders.

The creation of the nurse prescriber role in early 2021, represented a significant change in B.C.’s health-care system and an important move to better support people in rural and remote areas.

In September 2020, a public health order was issued by Dr. Bonnie Henry to enable nurse prescribing with the goal of increasing access to medication-assisted treatment and safer alternatives to the toxic illicit drug supply. Implementation of the nurse prescriber role in early 2021, beginning with prescribing Suboxone for opioid use disorder, represented a significant change in B.C.’s health-care system and an important move to better support people in rural and remote areas.

Registered nurses (RNs) and registered psychiatric nurses (RPNs) were initially trained to prescribe Suboxone.

We recognize and acknowledge that we are collectively gathered on the traditional, ancestral, and unceded territories of the seven Interior Region First Nations. This region is also home to 15 Chartered Métis Communities. It is with humility that we continue to strengthen our relationships with First Nation, Métis, and Inuit peoples across the Interior.

IH and other health authorities then worked together with the BC Centre on Substance Use (BCCSU), BC College of Nurses and Midwives and the Ministry of Mental Health and Addictions to implement, monitor and expand nursing scope in treating opioid use disorder.

The service expanded in November 2021 when the BCCSU made provincial training available for nurses to prescribe the titration, bridging and continuation of slow release oral morphine (SROM) and Methadone.

Since then, nurse prescribers across B.C. put in many hours to meet the required college standards, limits and conditions to prescribe medication. IH was again the first region to have a nurse prescriber complete this additional skillset.

Vernon RPN Kyle Boulton proudly wrote the first prescription for SROM on Feb 16, 2022 and continues to help clients access treatment in his Okanagan community.

Debi Morris, director, IH MHSU Network, emphasized that the role of the nurse prescriber is much broader than writing prescriptions for opioid agonist therapy.

“Nurse prescribers work in collaboration with fellow prescribers, Mental Health and Substance Use and primary care teams, and community agencies to support retention in treatment and access to a wide range of community services, including housing,” Morris noted.

One client shared his gratitude for his nurse prescriber’s support in a text to her: “I just want to say thank you so much for helping me when I was in need. I would like to update you and tell you I’m totally sober, working full time and moving forward in life and I have to say thank you for being there and doing what you did. I don’t even take the pills anymore. I’ve been sober four months. Thank you again.”

They also receive referrals from a number of sources, including direct patient engagement, Emergency departments, shelters, RCMP and fellow OAT prescribers.

Amanda Lavigne, substance use clinical nurse specialist, is the implementation lead for Interior Health and supports a community of practice for nurse prescribers across the region.

“I am really proud that RNs and RPNs can be a part of the workforce that provides access to treatment for people with an opioid use disorder in a time where the toxic drug supply is devastating our province and communities,” Lavigne said.

“Nurse prescribers across IH are making connections with people, reaching out and following up in efforts to keep people connected to substance use services and treatment. In IH, we continue to expand dedicated nurse prescriber positions in rural communities, recognizing the inherent value they have in increasing access and flexibility to life-saving opioid agonist therapy.”

- 30 -

We recognize and acknowledge that we are collectively gathered on the traditional, ancestral, and unceded territories of the seven Interior Region First Nations. This region is also home to 15 Chartered Métis Communities. It is with humility that we continue to strengthen our relationships with First Nation, Métis, and Inuit peoples across the Interior.