



ORDER OF THE PROVINCIAL HEALTH OFFICER
(Pursuant to section 13 of the *Health Professions General Regulation*, B.C. Reg 275/2008)

REGISTERED NURSE AND REGISTERED PSYCHIATRIC NURSE
PUBLIC HEALTH PHARMACOTHERAPY

IN THIS ORDER THE FOLLOWING DEFINITIONS APPLY:

“**controlled substance**” has the same meaning as in the *Controlled Drugs and Substances Act*, S.C. 1996, c.19;

“**employee**” means a registered nurse or a registered psychiatric nurse who is employed by:

- a) a regional health board as defined in the *Health Authorities Act*, R.S.B.C. 1996 c.180
- b) the Provincial Health Services Authority,
- c) the First Nations Health Authority, or
- d) a corporation or society approved by a medical health officer to provide the services described in this order.

WHEREAS:

1. On April 14, 2016, provincial health officer Dr. Perry Kendall (as he was then) provided notice under section 52 (2) of the *Public Health Act* S.B.C. 2008 c.28 of a regional event as defined under section 51 of that Act (the “April 14, 2016 Notice Declaring Overdose Public Health Emergency”). The regional event may be summarized as follows:
 - (a) that, at that time in the Province of British Columbia, the availability of highly toxic, illegally produced opioid fentanyl analogues was apparently increasing; and
 - (b) as a result, there were increases in people overdosing and in mortalities associated with the use of these substances, alone or with other drugs including illegally and legally produced opioids.
2. On March 17, 2020 I provided notice under section 52 (2) of the *Public Health Act* that the transmission of the infectious agent SARS-CoV-2, which has caused cases and outbreaks of a serious illness known as COVID-19 among the population of the Province of British Columbia,

constitutes a regional event as defined in section 51 of the *Public Health Act* (the “March 2020 Notice of Emergency”);

3. The number of deaths due to overdose in British Columbia has worsened with the onset of COVID-19 due to a combination of factors including:
 - (a) increased toxicity of the illegally produced drug supply;
 - (b) decreased access to harm reduction services, supervised consumption services and overdose prevention services;
 - (c) barriers in accessing treatment and social services by people who use drugs and who require these services to consume drugs safely;
 - (d) health risks due to withdrawal for persons who must self-isolate or quarantine to prevent the spread of COVID-19.
4. Due to the dual public health emergencies, people who use illegally produced and/or street procured drugs and have a history of ongoing active substance use (opioids, stimulants, benzodiazepines) are at increased risk of overdose, withdrawal, cravings and other harms related to their substance use and are also at risk of transmission of COVID-19;
5. The harms and risks identified in paragraph 4 above can be ameliorated by providing access, through a health professional, to treatment including by providing opioid agonist treatment and by prescribing pharmaceutical alternatives to illegally produced or street procured drugs;
6. At present, some of the pharmaceutical alternatives necessary to reduce the risk to persons who use drugs are prescription drugs regulated pursuant to the *Food and Drugs Act* and the *Controlled Drugs and Substances Act*, and only limited classes of health professionals (medical practitioners, dentists, midwives and nurse practitioners) are authorized to prescribe some of the necessary pharmaceutical alternatives to people;
7. In British Columbia, only certain health professionals who are registrants of a college under the *Health Professions Act* are authorized to prescribe controlled substances, subject to federal laws. Registered nurses (other than RNs who are also nurse practitioners) and registered psychiatric nurses are not within such an authorized category under the *Health Professions Act* and so may not, under provincial laws, prescribe a controlled substance.

I am of the opinion that:

- (i) There are insufficient health human resources available to meet the needs of persons who use illegally produced and/or street procured drugs and who require pharmaceutical alternatives in order to mitigate the risks and harm of the dual public health emergencies, thereby resulting in an intolerable risk to the health and safety of these persons;
- (ii) In view of the worsening situation of overdose deaths arising from the dual public health emergencies, it is necessary and in the public interest to increase access to health professionals who can prescribe pharmaceutical alternatives to the toxic drug supply;
- (iii) A registered nurse or a registered psychiatric nurse who possesses additional educational preparation and experience related to health care may provide the services to persons with a

problem substance use condition or diagnosis of substance use disorder, as authorized by this order, without undue risk to the health or safety of a person who uses drugs, or any other person.

I, Dr. Bonnie Henry, Provincial Health Officer, order that notwithstanding the Nurses (Registered) and Nurse (Practitioners) Regulation or the Nurses (Registered Psychiatric) Regulation, a registered nurse or a registered psychiatric nurse is authorized to autonomously provide the following services (the “Services”):

- A. order and interpret diagnostic tests and undertake other enquiries and examinations as necessary or appropriate to support the nurse to make a diagnosis of a problem substance use condition or substance use disorder;
- B. make a diagnosis of a problem substance use condition or substance use disorder;
- C. prescribe specific drugs, including controlled substances, to manage or ameliorate the effects of substance use by a person who is diagnosed as having a problem substance use condition or substance use disorder;
- D. refer persons with a problem substance use condition or substance use disorder to primary care and specialized health and social services for the treatment of and counselling related to addictions and mental health.


A registered nurse or registered psychiatric nurse may provide the Services, subject to the following conditions:

- 1. The registered nurse or registered psychiatric nurse must be an employee and providing the Services in the course of a program approved by a medical health officer with responsibility for the geographic area in which the activity is performed;
- 2. The prescribing of pharmaceutical alternatives must be conducted in accordance with the standards, limits and conditions of the British Columbia College of Nurses and Midwives established for the purpose of this order.

Unless rescinded earlier, this order will end on the date that I provide notice under section 59 (b) of the *Public Health Act* that the emergency related to the availability of highly toxic, illegally produced opioid fentanyl analogues and increase in people overdosing and dying associated with the use of these substances has passed.

DATE: The 16th day of September 2020

SIGNED:



 Bonnie Henry
 MD, MPH, FRCPC
 Provincial Health Officer