



COLLEGE OF  
REGISTERED NURSES  
OF BRITISH COLUMBIA

# **Nurse Practitioner Standards, Limits and Conditions**

## Opioid Agonist Treatment Prescribing for Opioid Use Disorder

**NOT YET IN EFFECT**

## Scope of Practice Standards for Nurse Practitioners

*Scope of Practice Standards establish the standards, limits and conditions for nurse practitioner practice. They link with other standards, policies and bylaws of CRNBC and all legislation relevant to nurse practitioner practice.*

### INTRODUCTION

The standards, limits and conditions in this document set out the requirements for both induction and continuation/maintenance prescribing of opioid agonist treatment for opioid use disorder. These standards, limits and conditions do not apply to prescribing opioid agonists for pain and other symptoms.

Opioid agonist drugs used for the treatment of opioid use disorder are controlled drugs under the [Controlled Drugs and Substances Act](#). The [Narcotic Control Regulations](#) require methadone prescribers to hold an exemption from Health Canada under section 56 of the *Controlled Drugs and Substances Act*.

### STANDARDS, LIMITS AND CONDITIONS

#### Standards

1. Nurse practitioners prescribing opioid agonist treatment meet the standards, limits and conditions set out in *C. Prescribing Drugs* in the [Scope of Practice for Nurse Practitioners](#).
2. Nurse practitioners prescribing opioid agonist treatment apply the clinical practice guidelines for the treatment of opioid use disorder established by the [BC Centre on Substance Use](#).
3. Nurse practitioners prescribing opioid agonist treatment apply knowledge about:
  - a. substance use disorders including opioid use disorder,
  - b. treatment strategies for opioid use disorder (e.g. opioid agonist treatment, psychosocial treatment interventions), and
  - c. harm reduction strategies for opioid use disorder.
4. When prescribing opioid agonist treatment, nurse practitioners:
  - a. make or confirm a diagnosis of opioid use disorder using the DSM-5™ diagnostic criteria,
  - b. review the client's medication profile and history through PharmaNet and other sources,
  - c. assess for other substance use disorders and/or concurrent use of substances (e.g. alcohol, benzodiazepines, other sedative-hypnotics), and
  - d. develop a treatment plan that takes into account any risks identified during the client's assessment.
5. Nurse practitioners prescribe opioid agonist treatment in a manner that promotes client and public safety (e.g. prescribe as daily witnessed ingestion until the client has sufficient clinical stability and is able to safely store take-home (carry) doses).

## Limits and Conditions

1. Nurse practitioners who only prescribe buprenorphine-naloxone on a continuation basis for the treatment of opioid use disorder must have completed:
  - a. additional education<sup>1</sup>, and
  - b. a preceptorship, of a minimum of two half-days length, under the guidance of a practitioner who has expertise prescribing opioid agonist treatment and treating clients with opioid use disorder.
2. Nurse practitioners who prescribe opioid agonist treatment for opioid use disorder (other than continuation prescribing of buprenorphine-naloxone) must have completed:
  - a. additional education offered by the British Columbia Centre on Substance Use<sup>2</sup>, and
  - b. a preceptorship that meets the requirements established by the British Columbia Centre on Substance Use.
3. Nurse practitioners obtain an exemption from Health Canada under section 56 of the *Controlled Drugs and Substances Act* before prescribing methadone.

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1. Additional education is structured education (e.g. workshop, course, program of study) designed so that nurse practitioners can attain the competencies required to carry out a specific activity as part of nurse practitioner practice. Additional education builds on the entry-level competencies of nurse practitioners, identifies the competencies expected of learners on completion of the education, includes both theory and application to practice, and includes an objective, external evaluation of learners' competencies on completion of the education. The terms does not refer to a course or program approved by CRNBC for CRNBC certified practice.
  2. Or equivalent as determined by the BC Centre on Substance Use.

## RESOURCES FOR OPIOID AGONIST TREATMENT PRESCRIBING

### Guidelines

#### BC CENTRE ON SUBSTANCE USE

- [\*A Guideline for the Clinical Management of Opioid Use Disorder\*](#)
- [\*Guidance for Injectable Opioid Agonist Treatment for Opioid Use Disorder\*](#)

#### COLLEGE OF PHYSICIANS AND SURGEONS OF BC

- [\*Safe Prescribing of Drugs with Potential for Misuse/Diversion\*](#)

### Education

Courses available from the [BC Centre on Substance Use](#):

- [Provincial Opioid Addiction Treatment Support Program](#) — for prescribers who plan to prescribe opioid agonist treatment for opioid use disorder
- [Online Addiction Medicine Diploma](#) — for health care professionals interested in learning about providing care for all substance use disorders, including opioid addiction

### RACE – Rapid Access to Consultative Expertise

RACE is a program that provides family physicians and nurse practitioners with access to specialist consultation by telephone. The program's goal is to improve communication and knowledge transfer between primary care providers and specialists.

Consultation in the specialty area of addictions medicine is available province-wide. Additional information can be found at [www.raceconnect.ca](http://www.raceconnect.ca).

Tel: (604) 696-2131 or 1-877-696-2131



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