

## PRACTICE STANDARD

# Certified Registered Psychiatric Nurses: Prescribing

## Introduction

The *Certified Registered Psychiatric Nurses: Prescribing* standard applies to certified registered psychiatric nurses who have met the BCCNM prescriber requirements<sup>1</sup> set out in their *Certified Registered Psychiatric Nurses: Opioid Use Disorder* practice standard.

The *Certified Registered Psychiatric Nurses: Prescribing* standard applies when **prescribing a medication** to be dispensed by a pharmacist for use by a specific person.

In addition to these *Certified Registered Psychiatric Nurses: Prescribing* standards, certified registered psychiatric nurses who prescribe medications also follow all relevant practice standards for registered psychiatric nurses, including:

- The *Certified Registered Psychiatric Nurses: Opioid Use Disorder* practice standard, and
- The Nurses: [Medication](#) practice standard.

The *Registered Psychiatric Nurses: Acting by Giving Client-specific Orders* practice standard applies when a certified registered psychiatric nurse gives a **client-specific order** for compounding, dispensing or administering a medication to be acted on by another nurse (RN, LPN or RPN) or other health professional, other than a pharmacist.

## Standards

1. Certified registered psychiatric nurses are accountable and responsible for their prescribing decisions.
2. Certified registered psychiatric nurses prescribe only those medications as allowed by:
  - a. The *Nurses and Midwives Regulation*,
  - b. Other relevant provincial or federal legislation or regulations,
  - c. BCCNM ethics standards and practice standards, including any applicable limits and conditions on performing the activity,
  - d. Organizational/employer policies, processes, and restrictions, and
  - e. The nurse's individual **competence**.

<sup>1</sup> Prescriber requirements include the successful completion of the BCCNM-recognized course(s) listed in the limits and conditions of the *Certified Registered Psychiatric Nurses: Opioid Use Disorder* practice standard.

3. Before prescribing, certified registered psychiatric nurses ensure they have the competence to:
  - a. Assess the **client's** health status, including conducting an accurate health history and clinical evaluation,
  - b. Make or confirm a diagnosis of a disease, disorder, or condition that is within the autonomous scope of practice of the nurse's certification program<sup>2</sup> and the nurse's individual competence, and that can be improved or resolved within the context of the client's overall health status and care needs,
  - c. Prescribe the medication safely, including knowing the medication's therapeutic use, indications, dosages, precautions, contraindications, side effects, adverse effects, potential interactions between the medication and foods/medications/substances, medication forms and routes for administration, and
  - d. Manage, monitor, and evaluate the client's response to the prescribed medication.
4. Certified registered psychiatric nurses use current evidence to support decision-making when prescribing medications.
5. When prescribing, certified registered psychiatric nurses:
  - a. Assess the client in person, or, if clinically appropriate, through a virtual health care encounter with a visual assessment. If a visual assessment is not possible, certified registered psychiatric nurses prescribe without a visual assessment only after determining that it is clinically appropriate and only:
    - i. If the client is known to the nurse, and/or
    - ii. The client is being assessed in person by another health care provider.
  - b. Consider the client's health history related to the condition or health concern such as age, sex, past medical and mental health history, family history, social history, risk factors, and the client's understanding, beliefs, and values,
  - c. Undertake and document an appropriate clinical evaluation such as a physical and mental examination, and/or a review of relevant diagnostic or monitoring tests and/or specialist reports,
  - d. Obtain and review the best possible medication history for the client using PharmaNet and/or other sources (including any traditional medicines, natural health products, non-prescription medications, and substance use, in addition to prescribed medications), and take action to address any discrepancies,
  - e. Assess the client's known allergies and ensure allergy information is documented,
  - f. Assess for difficulties in the client's ability to pay for and/or access medications, and the potential need to refer the client to available provincial medication access programs,
  - g. Document the medication prescribed to the client and the indication(s) for the medication,

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<sup>2</sup> BCCNM General Bylaws, Part 7.



12. Certified registered psychiatric nurses who prescribe controlled drugs and substances follow the requirements of the [College of Pharmacists of BC's Controlled Prescription Program](#) including requirements related to securing and disposing of prescription pads; reporting any loss, theft or misuse of the prescription pads; and record retention.

## Glossary

**Client:** person receiving health services.

**Client-specific order:** an instruction or authorization given by a regulated health professional to provide care for a specific client, whether or not the care or service includes a **restricted activity** or a non-restricted activity.

**Competence:** the integration and application of current knowledge, skills, ability, and judgment required to perform ethically, safely and in accordance with all applicable ethics standards and practice standards.

**Medication:** refers to Schedule I, IA, II, III, and unscheduled drugs as defined in the provincial [Drug Schedules Regulation](#) under the [Pharmacy Operations and Drug Scheduling Act](#) (PODSA).

**Prescribing:** the issuance of a prescription for a medication to be dispensed by a pharmacist or pharmacy.

**Restricted Activity:** an activity that is performed in the course of providing a health service and is prescribed by the regulations under the *Health Professions and Occupations Act* as a restricted activity.

## Revision history

Version #	Approved by board	Bylaw in-force	Description
1.0	March 1, 2026	April 1, 2026	Initial publication

Effective April 1, 2026, this practice standard, and any amendments to it, is made a bylaw under the authority of the *Health Professions and Occupations Act, B.C.*

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