

Granting Chinese Nurses the Right to Medical Prescription: A Formal Report

For Ministry of Health in People's Republic of China

By Yiyu Li
ENGL 301 Student
University of British Columbia
Vancouver, BC
March 26, 2023

INTRODUCTION

China's healthcare system has undergone significant transformations in recent years, with the country's leaders striving to improve access to high-quality healthcare for all citizens. Nurses play a critical role in the healthcare system, but they currently lack the right to prescribe medication in China. China's healthcare system has undergone significant transformations in recent years, with the country's leaders striving to improve access to high-quality healthcare for all citizens. Nurses play a critical role in the healthcare system, but they currently lack the right to prescribe medication in China.

China's healthcare system is a complex structure with a hierarchical organization that includes primary, secondary, and tertiary care. Nurses play an essential role in the delivery of healthcare services, including providing patient care, education, and support, but they are currently restricted in their scope of practice. The practice of nursing in China is governed by various laws and regulations, including the "Regulations on Nursing Practice" and "Nursing Law," which establish the scope of nursing practice and the qualifications required to practice. Despite the vital role of nurses in the healthcare system, Chinese nurses currently lack the right to prescribe medication, which limits their ability to provide comprehensive patient care. The shortage of healthcare professionals, including nurses, is a significant issue in China, affecting the quality of care provided to patients. In 2020, China had only 3.8 nurses per 1,000 people, compared to an average of 8.8 nurses in OECD countries. By granting Chinese nurses the right to medical prescription, they would be able to provide more efficient and effective care, especially in underserved areas.

Nurses play an essential role in providing high-quality healthcare services. They are often the first point of contact for patients, and their care and support can have a significant impact on patient outcomes. By expanding their role, nurses can help address the shortage of healthcare professionals in China and provide better care to patients.

The nursing profession is regulated differently in various countries, with some granting nurses greater autonomy in their practice. By adopting similar standards to other countries, China's nursing profession could benefit significantly from granting nurses greater medical rights. This would result in improving patient outcomes, reducing healthcare costs, and enhancing the overall quality of care in China.

Therefore, the main purpose of this report is to explore the issue of granting Chinese nurses the right to medical prescription and discusses the importance and necessity of expanding their role. It states the following areas of inquiry:

1. Based on the literature review, what are the current regulations for nurses in China?
2. What are the views on prescribing for Chinese nurses?
3. What are the training requirements for nurses to become prescribers?
4. What are the legal and ethical considerations of nurse prescribing and the potential impact on patient outcomes and healthcare costs?
5. Which countries are successful in granting nurses prescription rights and what is the system and administration in those countries.

By investigating these five areas, this report intends to identify the feasibility of granting Chinese nurses the medication prescription right and to ascertain the plan to realize that. This report could provide evidence-based information for healthcare policy makers to make healthcare policy decisions.

DATA SECTION

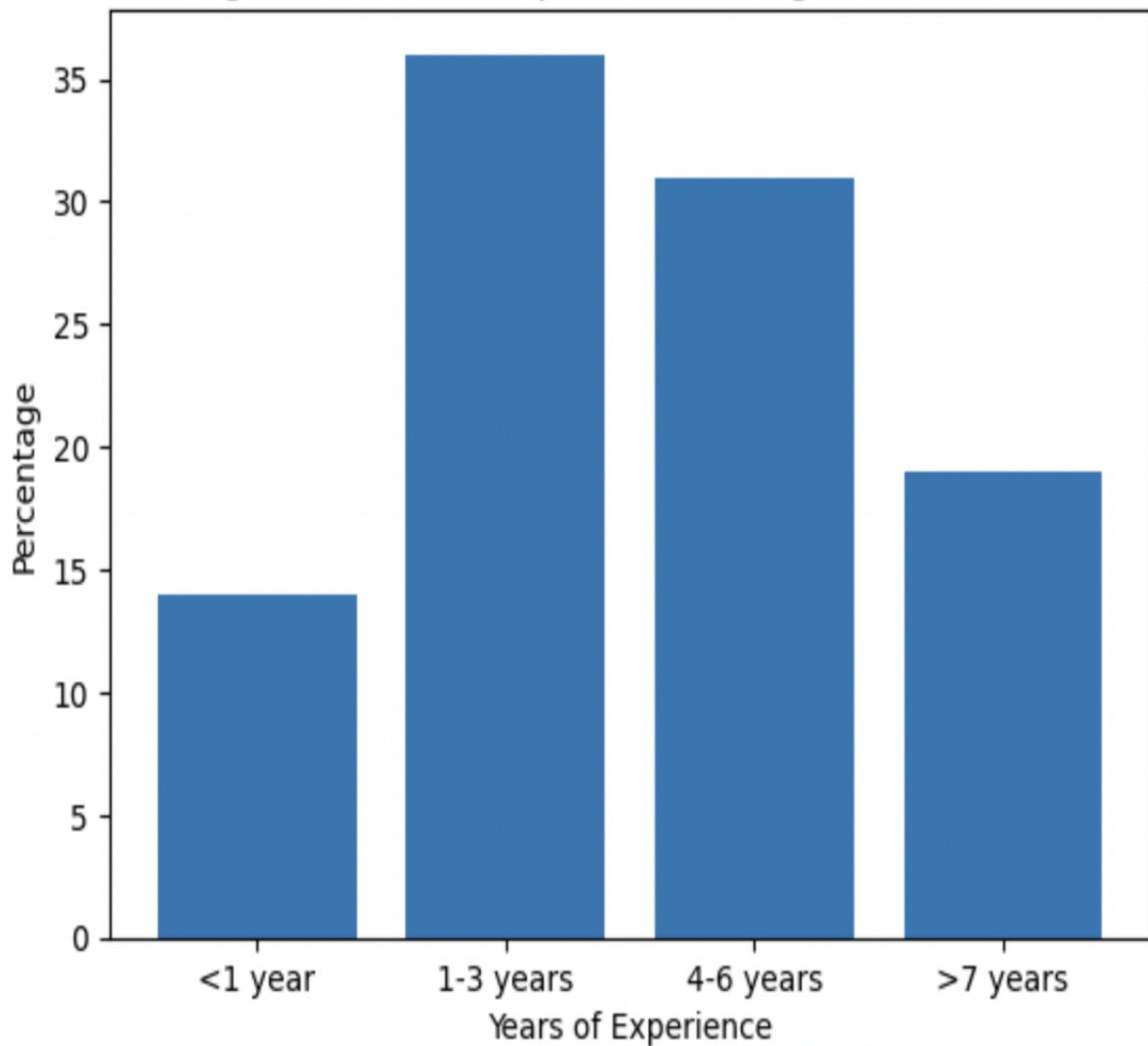
Data Collection Methods: The data for this report was collected through online surveys. The online survey was distributed to registered nurses in No.3 Xiang Ya Hospital and community healthcare center in China. We promise that all the personal information would not be collected and there is a small incentive for completing the survey. The quality of the survey has been recognized by professor Erika Paterson, University of British Columbia.

Participants and Sampling: The online survey was distributed to 50 registered nurses across China, of which 41 responded. The participants were selected based on their professional background and experience in the healthcare industry.

Data Analysis Procedures: The data collected from the online survey was analyzed using both qualitative and quantitative methods. The qualitative data was analyzed using thematic analysis, while the quantitative data was analyzed using descriptive statistics.

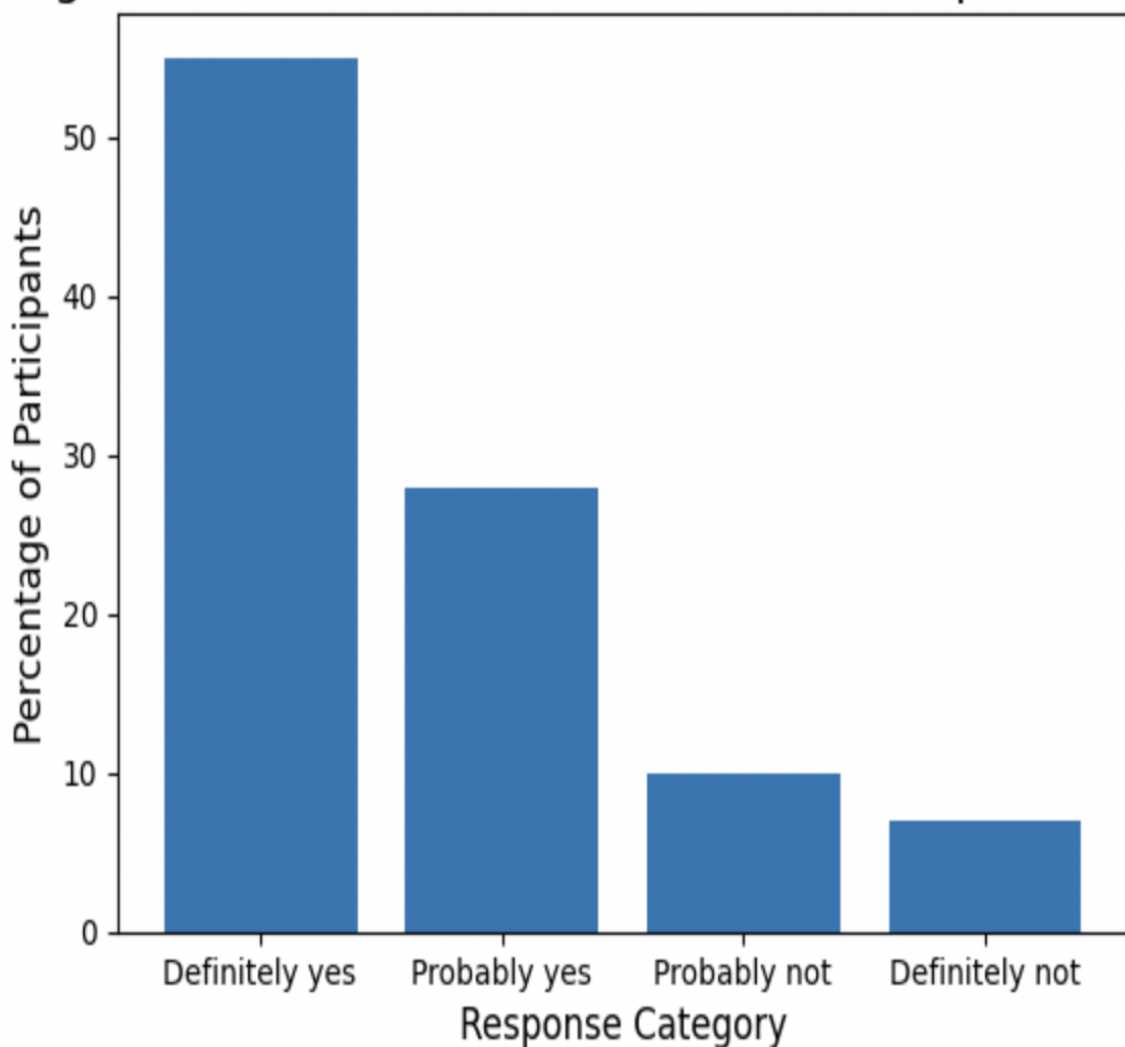
Result of Data Analysis: Demographics of Participants: Of the 41 registered nurses who responded to the survey, 14% have been working less than a year, 36% have been working for 1-3 years, 31% have been working for 4-6 years and 19% have been working for more than 7 years. None of the participants(0%) has the experience with prescribing medication as part of the job duties.

Figure1: Years of Experience of Registered Nurses



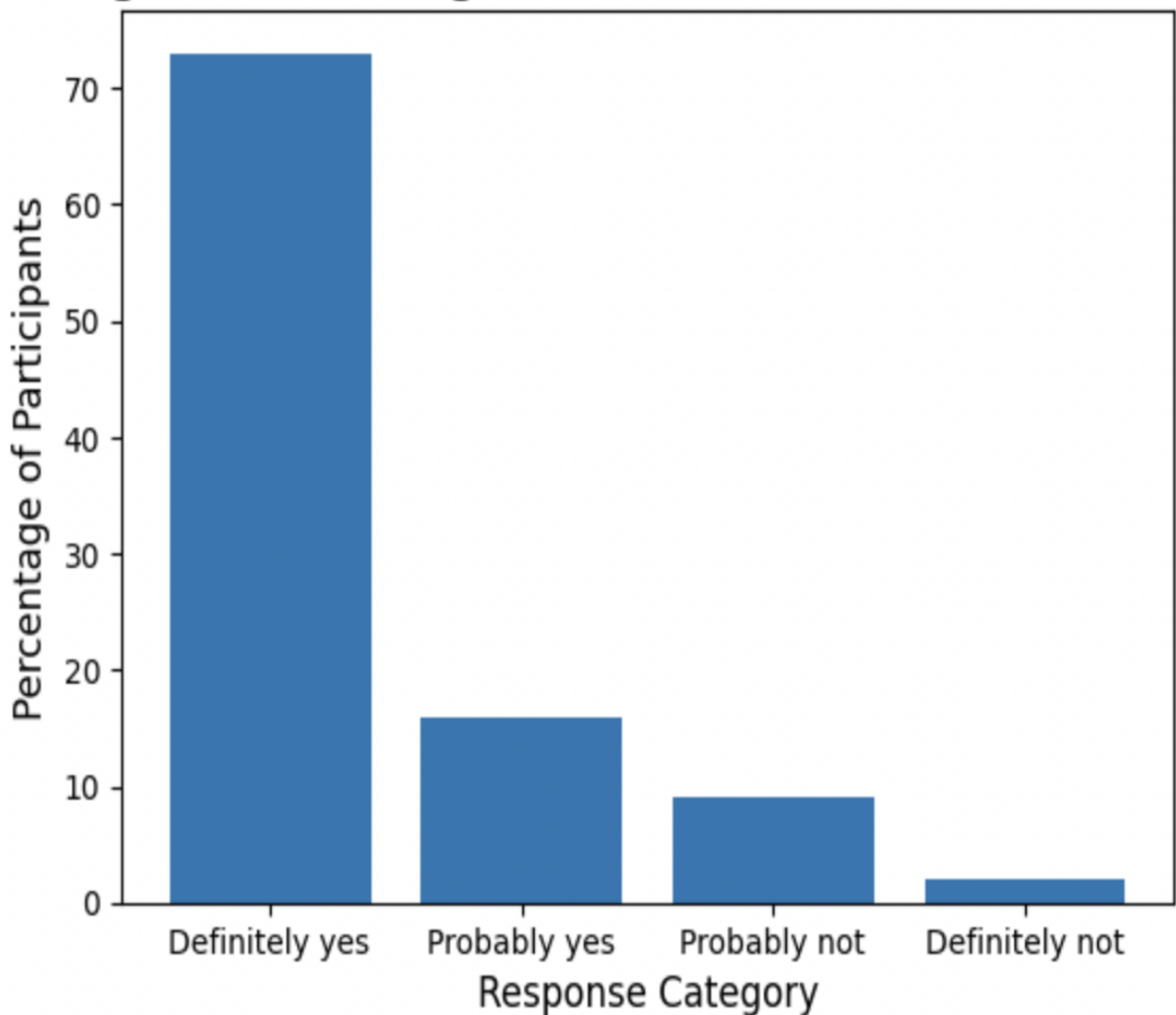
When asked about their confidence in their ability to safely and effectively prescribe medications. The majority of participants(55%) responded definitely yes. 28% of the nurses chose probably yes. 10% and 7% of the participants responded probably not and definitely not.

Figure2: Confidence in Medication Prescription Ability



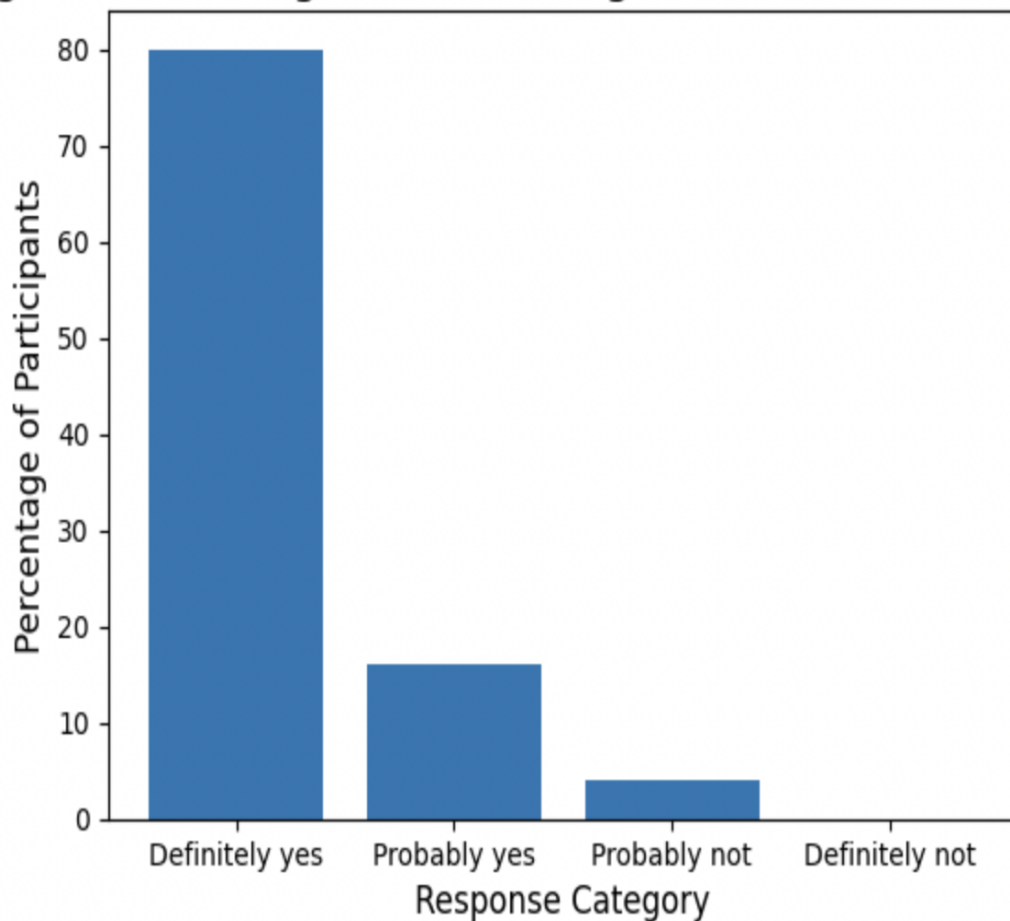
When asked about whether allowing nurses to prescribe medication will improve patient outcomes. The majority of respondents(73%) responded definitely yes. 16% of the nurses were in favor of probably yes. Only 9% and 2% of the participants responded probably not and definitely not.

Figure3: Allowing Nurses to Prescribe Medication



When asked about whether the Chinese government should consider granting nurses the right to prescribe medication. The majority of participants(80%) were in favor of definitely yes. 16% of the nurses responded probably yes. Only 4% and 0% of the participants' answers are probably not and definitely not.

Figure4: Granting Nurses the Right to Prescribe Medication



From the open-ended question that how do you think the role of nurses would change if they were allowed to prescribe medication. Some think that nurses would have greater autonomy and responsibility in patient care, which could lead to increased job satisfaction and professional development, while others expressed concerns about increased liability for nurses and potential risks if medication is not prescribed correctly, which would require clear protocols and guidelines to be established. A few respondents also addressed that patients would have increased access to healthcare, especially in underserved areas where there may be a shortage of doctors. What's more, there could be a reduction in healthcare costs, as nurses generally have lower salaries than doctors and could provide similar services at a lower cost.

For the open-ended question that what kind of training do you want to get before granting a medical prescription. Answers included medical education, understanding of pharmacology, diagnosis and patient history.

Literature Review:

1.Regulations for Nurses in China.

The current regulations for nurses in China can be divided into two main categories: education and licensure. In terms of education, nurses in China must graduate from a nursing school or a university with a nursing program. These programs are regulated by the Chinese government and must meet certain standards. Nurses who wish to advance their education can pursue further studies in nursing or related fields, such as healthcare management(Chen, Huang, & Zhu, 2020).

In terms of licensure, nurses in China must pass a national licensing examination before they can practice. This examination is administered by the National Health Commission of the People's Republic of China. The exam consists of both written and practical components and is designed to test the knowledge and skills necessary for safe and effective nursing practice.

In addition to education and licensure, there are also regulations in place to ensure the ethical practice of nursing in China. The Chinese Nurses Association has established a code of ethics for nurses, which includes guidelines for professional conduct, confidentiality, and respect for patients' rights(Chen et al., 2020).

2. Training Requirements for Nurses to Become Prescribers

The training requirements for nurses to become prescribers vary depending on the country and the level of prescriptive authority. In the United Kingdom, nurses can become independent prescribers, meaning they can prescribe any medication within their scope of practice. The training requirements for independent prescribers in the United Kingdom include completing an accredited prescribing course, meeting certain competencies, and being supervised by a designated medical practitioner (Department of Health, 2012).

In the United States, the requirements for nurse prescribers vary by state. In some states, nurses can prescribe medication under the supervision of a physician or other healthcare provider. In other states, nurses can prescribe medication independently. The training requirements for nurse prescribers in the United States typically include completing an advanced practice nursing program, obtaining a master's degree, and passing a certification exam (American Nurses Association, 2021).

Research has shown that nurses who have undergone prescriber training are more confident in their ability to prescribe medication and are more likely to prescribe medication appropriately (Wilkinson et al., 2019). However, there is a lack of consensus on the optimal training requirements for nurse prescribers. Some researchers argue that a shorter, more focused training program may be sufficient, while others advocate for longer, more comprehensive training programs (Tully et al., 2020).

3. Successful Examples From Other Countries.

Nurse prescribing has been implemented in various countries, including the United States, Canada, Australia, New Zealand, and the United Kingdom. In the United States, advanced practice registered nurses (APRNs) can prescribe medication in all states, with varying levels of autonomy depending on the state's regulations. For example, in some states, APRNs have full independent prescribing rights, while in others, they need to collaborate with physicians. The administration and regulation of nurse prescribing vary depending on the state, but it typically involves obtaining additional education and certification.

In Canada, nurse prescribing is regulated at the provincial level, with some provinces allowing registered nurses (RNs) to prescribe medication for certain conditions under physician supervision. In Australia, nurse prescribing is relatively new, with the first authorized nurse practitioners (NPs) granted

prescribing rights in 2001. NPs in Australia can prescribe medication for a wide range of conditions, and the administration and regulation of nurse prescribing are overseen by the Australian Health Practitioner Regulation Agency.

In New Zealand, NPs have been granted independent prescribing rights since 2003, and they can prescribe medication for any condition within their scope of practice. The administration and regulation of nurse prescribing in New Zealand are overseen by the Nursing Council of New Zealand.

In the United Kingdom, NPs and community practitioners with a prescribing qualification can prescribe medication for any condition within their scope of practice. The administration and regulation of nurse prescribing in the UK are overseen by the Nursing and Midwifery Council.

CONCLUSION

Based on the findings from this report, it can be concluded that there is a strong support among Chinese registered nurses for the right to prescribe medication. The majority of the participants believed that allowing nurses to prescribe medication would improve patient outcomes and increase access to healthcare, especially in underserved areas where there is a shortage of doctors. However, none of the participants had experience in prescribing medication, which suggests that further training and education would be necessary to ensure safe and effective prescribing practices.

In addition, the report highlights the shortage of healthcare professionals in China, including nurses, and the potential benefits of expanding the role of nurses in healthcare. By granting Chinese nurses the right to prescribe medication, they could provide more efficient and effective care, especially in underserved areas. This could also reduce healthcare costs and enhance the overall quality of care in China.

Furthermore, this report identifies the legal and ethical considerations of nurse prescribing, as well as the potential impact on patient outcomes and healthcare costs. It also examines the successful nurse prescribing models in other countries, which could provide valuable insights for the Chinese healthcare system.

Overall, this report provides evidence-based information for healthcare policy makers in China to consider granting nurses the right to prescribe medication. However, further research and discussion are needed to determine the feasibility and implementation plan for expanding the role of nurses in healthcare in China.

REFERENCE

Chen, Y., Huang, J., & Zhu, X. (2020). Regulations for nurses in China: A literature review. *Nursing & Health Sciences*, 22(3), 502-508. doi: 10.1111/nhs.12698

American Nurses Association. (2021). Prescribing. Retrieved from <https://www.nursingworld.org/practice-policy/workforce/what-is-nursing/prescribing/>

Department of Health. (2012). Guidance on the prescribing of medicines by nurse independent prescribers and midwife independent prescribers within the NHS in England. Retrieved from <https://www.gov.uk/government/publications/prescribing-medicines-by-independent-nurse-and-midwife-prescribers>

Tully, M. P., Buchan, I. E., & Smith, M. J. (2020). The need for high-quality, tailored training in nurse prescribing. *The British Journal of General Practice*, 70(696), 55-56.

Wilkinson, J., Carryer, J., Adams, J., & Boyle, M. (2019). Nurse prescribing: Findings from a national survey. *New Zealand Medical Journal*, 132(1506), 32-42.

Bryant-Lukosius, D., DiCenso, A., Browne, G., & Pinelli, J. (2014). Advanced practice nursing roles: development, implementation and evaluation. *Journal of Advanced Nursing*, 70(10), 2227-2240.

Gardner, G., Gardner, A., Middleton, S., & Della, P. (2014). Non-medical prescribing in Australia and the UK: the case of nurses. *International Journal of Nursing Practice*, 20(3), 206-213.

Jennings, N., Clifford, S., & Fox, A. (2015). Nurse prescribing in the United States: an overview of legislative, policy and practice issues. *Journal of Nursing Education and Practice*, 5(9), 1-7.

McDermott, M., Leigh, J., & Williams, J. (2016). The policy and regulatory environment for nurse prescribing. *Nurse Prescribing*, 14(7), 330-336.