Medicinal Product Prescribing
Influencing the Future
The Finnish Experience
Adopting the Irish Approach

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Finland In Europe

Finland's preliminary population figure 5,449,657 at the end of November 2013.

According to Statistics Finland's preliminary data, Finland's population at the end of November was 5,449,657. Over the January to November period, Finland's population increased by 23,000 persons, which is 1,200 persons less than in the corresponding period of the year before. The main reason for the population increase was migration gain from abroad: the number of immigrants was 16,000 higher than that of emigrants. Natural population growth, or excess of births to deaths, was 7,000 persons.
Health Care in Finland

The vision is that Finland in 2020 will be a socially sustainable and vibrant society, in which equality, mental and material wellbeing, gender equality, and economic, social and ecological sustainability contribute to the balanced development of society.

There will be a strong foundation for welfare.

**There will be access to welfare for all where**
- The differentials in welfare and health are reduced
- Services are customer-oriented
- There are new service structures and operating practices
- There is a strong sense of social belonging

There will be a safe and healthy living environment.

Remote and rural areas less than 20 inhabitants/squarechilometer.
We show the value of nurses’ work.

Every nurse’s Association
Influencing health policy
Improving nursing
Member recognition pin
International actor
Since 1925
16 regional associations
51,000 members
The Finnish Nurses Association Group

Fioca Ltd
The Finnish Nurses Association’s training and publishing company
Wholly owned by the Finnish Nurses Association
Educational services
Publishing activities
Marketing of services and products

The Finnish Nurses Association
- Professional lobbying
- Societal influence
- International activities
- Member and organisational services
- Group communications
- General and financial administration of the group

Hotus
Nursing Research Foundation
Established with funds donated by the Finnish Nurses Association
- Evidence-based activities
- Consolidating research data
- Supporting the adoption of information
The Finnish JBI cooperation centre
WHO Collaborating Centre for Nursing

Regional Associations Confederation
- 16 regional associations

Nurse Entrepreneurs Association
- about 300 members

Individual members
- 51,000 members
Nurses in Finland

- 79,600 nurses
- 94% women
- Average age ca. 43 years
- Average income, municipal sector about €3091/month (Statistics Finland, 2012)
Know-how challenges are growing

- The mobility of employees and patients places challenges on know-how
- Harmonisation of education on European level
- Based on the EU directive on the recognition of professional qualifications (2013/55/EC)
- Finland sets national minimum competency requirements for general nurses
The nurse shortage is already a reality

- People over 60 will make up more than 22% of Finland’s population by 2030, and of the world’s population by 2050 (WHO).
- The shortfall in educated caregiving staff has expanded in recent years (STM 2009)
- Nurses’ attrition between the years 2008–25 is estimated to be 41,680 professionals. (Ministry of Education and Culture, 2011).
Expanding job descriptions

• Finland takes steps to further develop advanced practice nursing roles
• In 2012 the right to write prescriptions was opened to specially-trained nurses
• Making use of nursing experts in the future
• The goal: speeding up patients’ access to care and reducing current inequalities
Finnish background limited right to prescribe medicines

- Health Care system in transition since 1990’s: substitution or quality improvement
- Lack of practising medical doctors at remote and rural areas: task shifting in practice. Patient safety.
- RN’s education and competency: 2013/55/EC
- OECD evaluation 2005
- Study visits and international evaluations
  - Irish experience
Interest groups

• Formal: local authorities, employers
  – Ministries (social and health www.stm.fi/english, education and culture www.minedu.fi/english): funding, directives, national legislation,
  – Universities of Applied Sciences, municipalities: curriculum, competencies
  – Central trade union organizations, unions: collective agreements, salaries, working conditions

• Informal: NGO´s
  – Associations, societies: lobbying all above
OECD: Policy context

- Concerns about shortages of health workers and access to care (particularly in primary care)
- Concerns about patient safety and quality of care
- Concerns about growth in health spending (and how to finance it, given the need to reduce budget deficits)
- The “perfect storm” to look at skill mix and a possible re-definition of roles of doctors and nurses
Ireland 2007

- Changing legislation and specifying acts and degrees.
- Wide and evidence based guiding (EBG) framework and guidelines for basic and post-basic education and implementation in nursing practice.
- Patient safety
- Regulation and authorization by national body.
- Standardised formula of agreement. Education fulfilled and accepted performance in practice.
- No lists for medicinal products; prescribing list is based on needs and expert evaluation.

Finland 2010

- Following the Irish Model on basis
- A national list of medicinal products is defined by Government Degree and EBG.
- Nurse prescribing is allowed only at public sector primary health care centers. In hospitals only in centralised emergency units.
Act on Health Care Professionals 1/3

• Section 22 a (46/ 2009) Identification code
• The National Supervisory Authority for Welfare and Health provides the physicians and dentists and the medical and dental students who have completed the studies laid down by Government decree, as well as the nurses, oral hygienists and opticians who are entitled to prescribe medicines with an identification code that the person concerned must use when giving prescriptions. (433/ 2010)
• The identification code is a dataset consisting of numbers and check digits that does not contain identification data relating to the person.

19.2.2014

2nd Nurse and Midwife Medicinal Product Prescribing Conference
Act on Health Care Professionals 2/3

- Section 23 Medicolegal certificates and statements
- Section 23 b (433/2010) Limited right to prescribe medicines

Nurses who have sufficient practical experience and have completed the additional training prescribed by Government decree have a limited right to prescribe from a pharmacy medicines used in the treatment for the patients they are treating at the health centre, if it is question of preventive care or continued medication when a physician has made the diagnosis or the medication is based on the need for treatment as assessed by the nurse (limited right to prescribe medicines).

A requirement for the limited right to prescribe medicines is a written assignment specifying the medicines that the nurse may prescribe, and possible limitations to the right. The written assignment is given by the physician in charge at the health centre where the nurse is employed. If the hospital district is in charge of the emergence services of a health centre within its region, the assignment is given by the chief physician of the hospital district if the nurse is employed by the hospital district.

Provisions on the practical experience required for the limited right to prescribe medicines are laid down by Government decree, as necessary. Further provisions on the medicines and medical conditions that the limited right may apply to are laid down by decree of the Ministry of Social Affairs and Health. The Ministry confirms the format of the written assignment referred to in paragraph 2.
Act on Health Care Professionals

3/3

- Section 23 c (433/2010) Fixed-term right to prescribe medicines
- Nurses may be entitled by Government decree to prescribe the medicines specified in the decree that are used for the prevention and treatment of a communicable disease, when it is question of a widely spread communicable disease and the prescribing is necessary to treat those already infected or to protect the population from the spread of the communicable disease (fixed-term right to prescribe medicines). The fixed-term right to prescribe medicines may apply to nurses employed by both public and private health care units.
- Provisions on the training or knowledge and skills required for the right to prescribe medicines and other requirements posed by patient and medication safety are laid down by Government decree. The decree is issued for a fixed period of time, not exceeding six months.
- The fixed-term right to prescribe medicines is in force at most for the period of validity of the Government decree referred to in paragraph 2 and presupposes, in addition, a written assignment given by the physician in charge of the unit’s operations to the nurse concerned.
Curriculum for Nurse Prescribers

- 45 credits (1 credit = 27 study hours), 1½ years post-basic education, at least 3 yrs practicing experience
- Basic assumptions are based on national legislation and supervision (Ministry of Education and Culture; Valvira)
- At first education was subsided by state budget. Now education fee is 4900 euros/student.
- Theoretical and practical studies; clinical supervision by medical doctor
- Competency test before licencing
- Competency areas:
  - Ethical and juridical competence
  - Competence in clinical examination and assessment of the state of health
  - Competence in evidence-based decision making
  - Competences related to drug therapy
Certificate: Postgraduate certificate in nurse prescribing
Education: Postgraduate education in nurse prescribing

• In Finland nurse prescribing programme is comprised of four compulsory modules.
• 1. Drug therapy ethical and juridical knowledge base in treatment 4-5 credits
• 2. Clinical research, decision making and carrying out of treatment 15 credits
• 3. Pharmacology and prescribing drugs 11-15 credits
• 4. Safe drug therapy in patient situations 10-15 credits
# Education: Examinations, Applicants, Students

<table>
<thead>
<tr>
<th>University Of Applied Sciences (University of Sciences)</th>
<th>Examination passed 5/2012-11/2013</th>
<th>Students passing examination 2014</th>
<th>Applicants 2013</th>
<th>Beginners 2014</th>
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<td>Kajaani</td>
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<td>Tampere, (UT)</td>
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<td>12</td>
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<td>Laurea, (UEF)</td>
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<td>16</td>
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<td>Jyväskylä, (UEF)</td>
<td>38</td>
<td>21</td>
<td>21</td>
<td>18</td>
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<tr>
<td>Oulu, (UO)</td>
<td>14</td>
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<td>4</td>
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<td>Karelia, (UEF)</td>
<td>12</td>
<td></td>
<td>9</td>
<td>9</td>
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<tr>
<td>Altogether</td>
<td>116</td>
<td>63</td>
<td>97</td>
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Follow up experiences

• Sources:
• Finnish Medical Journal 4/ 2014 article (finnish) (1)
• Follow up survey to Nurse Prescribers 11/ 2013 n=54 (not published, Tehy ry) (2)
• Ministerial Councillor, PhD Marjukka Vallimies-Patomäki, lecture 11/ 2013, not published, finnish (3)
First year experiences 1/2 (1)

  - Prescriptions subsided by National Health Insurance approximately 80%
  - Altogether 3 310 Prescriptions, 0.01% of all Prescriptions. In Sweden 0.2% 1997, 0.4% 1999.
  - Nurse Prescriptions/month 12/2012 300; Nurse Prescriptions/month 6/2013 424
  - Nurse Prescribers 12/2012 43, Nurse Prescribers 6/2013 64
  - ePrescribing 11/2012
First year experiences 2/2 (1)

- 70% Nurse prescriptions to women's urine infections (pivmesilliname, trimetoprim) and of the rest 50% other infections (kefalexine, fenokxylmethylpenicillium)
- 20% high blood pressure
- 10% diabetes, skin diseases, asthma, non subsided medication
  - Non subsided medication is estimated
<table>
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<tr>
<th>Medicine</th>
<th>ATC - code</th>
<th>Diagnose</th>
<th>Amount recipes</th>
<th>Amount patients</th>
<th>% women</th>
<th>Age</th>
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<tr>
<td>Pivumesillinam and/or trimetoprim</td>
<td>J01CA08, J01EA01</td>
<td>Urine infection</td>
<td>1 615</td>
<td>1 495</td>
<td>100</td>
<td>14-93</td>
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<td>V-penicillin/kefalexine</td>
<td>J01CE02, J01D801</td>
<td>Laryngitis</td>
<td>596</td>
<td>579</td>
<td>59</td>
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<tr>
<td>Metformine, sulfonylurea</td>
<td>A10BA02, A10BB</td>
<td>Diabetes Type 2</td>
<td>207</td>
<td>127</td>
<td>65</td>
<td>33-87</td>
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<tr>
<td>Varfarine</td>
<td>B01AA03</td>
<td>Chronic flimmer</td>
<td>68</td>
<td>35</td>
<td>49</td>
<td>36-94</td>
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<tr>
<td>ACE -inhibitors</td>
<td>C03,C07, C09A,C09 BA</td>
<td>High blood pressure</td>
<td>307</td>
<td>154</td>
<td>49</td>
<td>35-92</td>
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<tr>
<td>Statine</td>
<td>C10AA</td>
<td>Dyslipidemia</td>
<td>209</td>
<td>127</td>
<td>43</td>
<td>35-85</td>
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<tr>
<td>Beclomethazone</td>
<td>R03BA11,-BA02,-BA03</td>
<td>Asthma</td>
<td>58</td>
<td>34</td>
<td>71</td>
<td>15-83</td>
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<tr>
<td>Salbutamole, terbutamole</td>
<td>R03AC02,-AC03</td>
<td>Asthma</td>
<td>93</td>
<td>67</td>
<td>60</td>
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<td>Basic cremes</td>
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<td>Chronic skin disease</td>
<td>21</td>
<td>14</td>
<td>57</td>
<td>1-90</td>
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<td>ATC-classification</td>
<td>Amount 7/12-12/12</td>
<td>Amount 1/13-6/13</td>
<td>Total amount</td>
<td>Total %</td>
<td>Missfits, amount</td>
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<tr>
<td>-----------------------------</td>
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<tr>
<td>A Diabetes</td>
<td>51</td>
<td>170</td>
<td>221</td>
<td>6,7</td>
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<td>B Chronic flimmer</td>
<td>22</td>
<td>46</td>
<td>68</td>
<td>2,0</td>
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<tr>
<td>C High blood pressure</td>
<td>141</td>
<td>375</td>
<td>516</td>
<td>15,7</td>
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<td>D Skin diseases</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>0,1</td>
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<tr>
<td>E Crema (allround)</td>
<td>7</td>
<td>14</td>
<td>21</td>
<td>0,6</td>
<td></td>
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<td>G Contraception</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0,1</td>
<td>2</td>
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<tr>
<td>J Infections (urine 50%)</td>
<td>828</td>
<td>1 414</td>
<td>2 242</td>
<td>68,1</td>
<td></td>
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<tr>
<td>M Inflammatory pain</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0,1</td>
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<td></td>
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<tr>
<td>N Pain</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0,1</td>
<td>1</td>
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<tr>
<td>R Asthma</td>
<td>50</td>
<td>112</td>
<td>162</td>
<td>4,9</td>
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<td>S Eye</td>
<td>22</td>
<td>23</td>
<td>45</td>
<td>1,4</td>
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<td>Without ACT-code</td>
<td>2</td>
<td>6</td>
<td>8</td>
<td>0,2</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>1 124</strong></td>
<td><strong>2 169</strong></td>
<td><strong>3 293</strong></td>
<td><strong>100,0</strong></td>
<td>6</td>
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</table>
To whom and where? According to Ministry's Goal: 200 NP:s at 120 health centers in remote and rural areas.

- Nurse Prescribers are practising at primary care near University of Applied Sciences and Central Hospital joint outpatient clinic.
- Prescriptions are addressed to women, age groups 15-19 and 65-69.
- NOT males age group 19-64.

Stars: more than 100 Nurse Prescriptions.

Jyväskylä area: 271 patients, 289 prescriptions.
Pieksämäki area: 173 patients, 254 prescriptions.
Seinäjoki area: 171 patients, 282 prescriptions.

19.2.2014
2nd Nurse and Midwife Medicinal Product Prescribing Conference
Experiences of Nurse prescribers (2)

- Survey, n=54
- Education is useful for Nurse Prescribers job satisfaction, career development. Some feel bullying by colleagues.
- 70% is substitution:
  - Services formerly provided by doctors
    Nurse Practitioners
    Main aims: reduce workload of doctors, improve access to care, and reduce cost.
- 30% is quality improvement:
  - New services (e.g., quality improvement)
    Clinical nurse specialists
    Main aims: improve services/quality of care, not reduce cost.
What I picked up from:

- Malcolm Harbour - Policy window of opportunity - Emma McClarkin - Give the sense of a future-oriented DIR 36 - Horizon 2020

- Małgorzata Handzlik - Necessary improvements and investments in education - EU budget revision - funds for nurse education & training projects
Thank You!

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