



WRITTEN CONTROL DOCUMENT

Guidance on Students' Role in Medicine Administration within Betsi Cadwaladr University Health Board

Date to be reviewed:	January 2017	No of pages:	6
Author(s):	<ul style="list-style-type: none"> • Julie Birrell, Bangor University • Lynne Grundy, BCUHB • Debbie Allen, BCUHB • Sheila Brown, Bangor University • Barry Carver, Bangor University 		
Responsible Dept / Director:	Pharmacy and Medicines Management Clinical Division		
Approved by:	BCUHB Policies, Procedures and PGD Group (Sub Group of the BCUHB Drugs and Therapeutics Group)		
Date approved:	24 th August 2015		
Endorsed by:	BCUHB Drugs and Therapeutics Group		
Date endorsed:	2 nd September 2015		
Date activated (live):	1 st January 2016		

Date EQIA completed:					
Documents to be read alongside this policy:	<ul style="list-style-type: none"> • NMC Standards for Medicines Management (2010) • NMC Code – Standards of conduct, performance and ethics for nurses and midwives. (2015) • BCUHB Medicines Code (2015) • Nursing & Midwifery Council (2011) Changes to Midwives exemptions • HCPC Standards of Proficiency (2014) Operating Department Practitioners • HCPC Guidance on Conduct & Ethics for Students (201 				
Legal and statutory duties and responsibilities to the following general statutory duties apply:					
Review	Purpose of Issue/Description of current changes:				
First operational:	Date the procedure/guideline was first operational:1/1/16				
Previously reviewed:	Date:	Date:	Date:	Date:	Date:
Changes made? yes/no:	yes/no	yes/no	yes/no	yes/no	yes/no

Contents

	Page No
1 Professional standards – medicine administration by students	3
2 Medicines administration by students – BCUHB general principles	4
3 Controlled drug administration – students' role	4
4 Intravenous and epidural drug administration – students' role	5
5 Parenteral drug administration (SC and IM injection) – students' role	6

Guidance on students' role in medicine administration within Betsi Cadwaladr University Health Board

1 Professional standards – medicines administration by students

The guidance below is aimed at student nurses, student midwives, student operating department practitioners (ODPs) and student radiographers and is to be considered in conjunction with:

- Betsi Cadwaladr University Health Board (2015) Medicines Code
- HCPC Guidance on Conduct & Ethics for Students (2012)
- HCPC Standards of Proficiency (2014) Operating Department Practitioners
- Nursing & Midwifery Council (2009) Standards for pre-registration midwifery education
- Nursing & Midwifery Council (2010) Standards for Medicines Management
- Nursing & Midwifery Council (2010) Standards for pre-registration nursing education
- Nursing & Midwifery Council (2011) Changes to Midwives exemptions
- Nursing & Midwifery Council (2015) The Code; Professional standards of practice and behaviour for nurses and midwives

When administering medication, student nurses should consider that the NMC (2010) clearly states that **“Students must never administer or supply medicinal products without direct supervision.”** (Standard 18, Standards for Medicines Management, NMC 2010).

The NMC circular 07/2011 “Changes to Midwives Exemptions” allows student midwives to **administer medicines on the midwives exemptions list, except controlled drugs, under the direct supervision of a midwife.**

Student ODPs and student radiographers should consider that HCPC (2012) clearly states **“You should act within the limits of your knowledge and skills, ensure that you are appropriately supervised for any task that you are asked to carry out.”** (Standard 7: Guidance on Conduct & Ethics for Students, HCPC 2012)

“Be able to practice in accordance with relevant medicines legislation” (Standard 2.6 Standards of Proficiency, HCPC 2014)

Therefore, appropriate sources to support the demonstration of the required level of knowledge and skill are identified below. These should be regarded as a minimum requirement and evidence of competency and achievement included within your clinical portfolio (student nurses and student midwives); Practice Clinical Module Learning Outcomes / portfolio (ODP students); equivalent (radiography students).

For further guidance on other elements of medicines administration within BCUHB, please refer to the appropriate section of the BCUHB (2015) Medicines Code.

2 Medicines administration by students – BCUHB general principles

See section 7.2.5 BCUHB (2015) Medicines Code

Whilst in placement training, student nurses/midwives/ODPs must be given practical training in the clinical area in the skills necessary for the administration of medicines and the requirements for independent second checking and witnessed administration, except for epidural and intravenous infusions (see Chapter 8)

*Once trained in these tasks student nurse/midwives/ODPs may act as lead or second checker in the above processes but they must have **direct supervision** and also be witnessed by a registered nurse/midwife.*

Supportive evidence – drug numeracy assessment results, reflective accounts, documentation supporting professional knowledge development

3 Controlled drug administration – students’ role

See section 9.8 BCUHB (2015) Medicines Code, Administration of controlled drugs in hospitals

For all in-patients, CDs must be administered by two persons who must witness the whole procedure from the identification of the medicine and its preparation until it is administered to the patient. Of the two persons who administer, check and witness the procedure, one shall be a registered nurse, midwife or ODP and the other shall be a doctor, registered nurse, midwife or ODP. In clinical areas where no second registered practitioner is available, a health care support worker may act as a witness following planned formal preparation for the task.

Whilst in placement training, student nurse/midwife/ODP must be given practical training on the ward in the skills necessary for ordering, receipt, checking and administration of CDs.

Once trained in these tasks student nurse/midwife/ODPs may act as lead or second checker in the above processes but they must have direct supervision and witnessed by a registered nurse, midwife or ODP.

See Section 9.14 BCUHB (2015) Medicines Code, Administration of Controlled Drugs in patients’ homes

There must be written instructions by a medical practitioner for the individual patient. These written instructions are normally printed on the dispensed medicine label by the dispensing pharmacy. A designated nurse will be responsible for the administration of the CD.

It is essential that the registered nurse is accompanied by a second person for the purpose of stock control of the CD (witnessing the administration of the CD as

described 9.8).In the absence of a second person the medication (CD) may be administered by one person provided that it is a first level registered nurse/midwife (as described in 9.14).

Supportive evidence – drug numeracy assessment results, reflective accounts, documentation supporting professional knowledge development

4 Intravenous and epidural drug administration – students’ role

See section 8.2.1 BCUHB (2015) Medicines Code

Student Nurses, Student Midwives & Student ODPs

*Student nurses, student midwives & student ODPs may, **under direct supervision of a registrant**, administer pre-prepared infusion bags providing they have been given practical training in the clinical area in the skills necessary for the administration. They **may not** administer or set up fluids that have had any other medication added.*

*Student Nurses, student midwives & student ODPs **must not** use any infusion devices unless they have received formal training and then only under direct supervision of a registrant.*

Supportive evidence – drug numeracy assessment results, reflective accounts, documentation supporting professional knowledge development, IV infusion device approved training.

5 Parenteral drug administration (IM and SC injection) - students’ role

See section 7.2 BCUHB (2015) Medicines Code medication requiring an independent second check and/or witnessed administration

7.2 Medication requiring an independent second check and/or witnessed administration by 2nd registered healthcare professional

It is recognised that all healthcare professionals can make human errors. For the following types of medicinal products independent second checks or witnessed administration are recommended practice to reduce the risk of adverse drug events:

- *All medicines administered to a child under 16 years of age – independent second check and witnessed administration*
- *Controlled Drugs see 9.8 – independent second check and witnessed administration*
- *The selection and mixing of medicines in syringes or infusion bags – independent second check and witnessed administration*
- *The administration of all intravenous, epidural injections and infusions – independent second check and witnessed administration **N.B.** Student nurses cannot act as a second checker for IV preparation and administration, but should be given opportunity to participate under direct supervision. (i.e. third checker) See Section 8.2.1 for additional guidance on student participation*

- *Administration of Insulin Injections to in-patients – independent second check and witnessed administration*
- *Any medicine with which the primary administrator is unfamiliar e.g. dosage, side effects, precautions and contraindications, in particular those medicines that are to be administered parenterally – independent second check and witnessed administration*
- *Where a calculation is involved – independent second check*
- *The reconstitution of sterile dry powders into a solution for injection/or for oral administration e.g. antibiotic liquids – independent second check*

7.2.1 BCUHB (2015) Medicines Code Independent second check

By definition the independent second check must not be controlled or influenced by any other person. The independent second check must include that:

- *The medicine matches the prescription*
- *The correct strength, dose and form has been selected, including any calculations that must be clearly documented*
- *All of the products are fit for use and have not expired*
- *The patient is not allergic to the particular medicine.*

7.2.3 BCUHB (2015) Medicines Code Witnessed administration

For all in-patients, the above medications where witnessed administration is required, the medication must be administered by two persons who must witness the whole procedure from the identification of the medicine until it is administered to the patient for whom it is prescribed.

It is recommended that both persons shall be registered practitioners. See 7.2.5 for guidance on student participation.

Supportive evidence – NHS Wales Insulin e-learning package (or equivalent), injection technique training, drug numeracy assessment results, reflective accounts, documentation supporting professional knowledge development.