

Practice Education Guidelines for BC Medication Administration

GL#4-5

Practice Guideline

February 28, 2007

Students may only prepare and/or administer medications when:

- it falls within the policies of **both** the Placing and Receiving Agency (for reference, see also Practice Education Guideline – Student Scope of Practice) the action is within the scope of practice of the profession
- it is permitted within the specific practice setting

Guideline Detail

In order to safely prepare and/or administer medications, all medical students, all categories of nursing students, pharmacy students and other health professional students must have received the requisite pharmacology knowledge and skill from their Placing Agency.

Receiving Agency policies for staff also apply to students unless there is a variation specific to student practice.

Initially, students must be directly supervised* in the calculation, preparation, and administration of a medication by any route. Supervision by on site faculty and/or the staff member caring for the patient is preferred.

Independent preparation and/or administration of medication (indirect supervision*) occurs when:

- the student demonstrates consistent competency as deemed by the student, the faculty and/or supervising staff (refer to [Practice Education Guideline – Supervision of Students by Staff](#))
- the medication does not otherwise require supervision and co-signature

Faculty or the supervising staff member **must supervise** the preparation and administration of all fractional doses, narcotic or controlled drugs, insulin, anticoagulants, and other drugs as per legislation and Receiving Agency policy/protocol. Co-signing may be required and if so, it is done as an indication that the action was supervised and carried out correctly.

If a medication routinely requires a double signature, the faculty or supervising staff member must be the one who co-signs the student's entry (not another student).

Medications dependant on laboratory values (such as anticoagulants and insulin) must have the dose verified with the laboratory results by the faculty or supervising staff member.

Students may not routinely carry the keys to the narcotic cupboard when not directly using them. Keys must be returned to Receiving Agency staff promptly following use.

* indicates term is defined under 'Definitions' section

Students in some disciplines may be allowed to administer *IV medications below the drip chamber* according to the Receiving Agency medication manual **only if all of the following conditions are met:**

- The student has learned the relevant theoretical and practical components of the task in their education program.
- The task is under the direct supervision of the supervising staff member or faculty.
- The task is within the scope of practice of the specific profession.
- The task is within the scope of practice for the supervising staff member.

Roles & Responsibilities

Supervising Faculty and Staff will:

- know the medication policies of both the Placing and Receiving Agency, in particular the restrictions on student practice
- communicate to the team a list of skills related to medication administration that can be done under supervision, independently, and those that are restricted (refer to [Practice Education Guidelines – Supervision of Students by Staff; Practice Education Relationship](#))

Students will:

- know the medication policies of both the Placing and Receiving Agency
- ensure that they are adequately prepared (have knowledge of the drug, dosage, side effects, route, contraindications, compatibilities, etc)
- follow the “Rights” of medication administration
- administer only those medications that they have prepared except when prepared and dispensed by a pharmacist
- in the event of a medication error, report immediately to faculty or supervising staff to seek appropriate medical intervention
- follow Receiving Agency documentation and quality assurance policies and procedures

Placing Agency will:

- have policies in place that define the scope of practice of students related to the process of medication administration in the practice education setting

Receiving Agency will:

- have general and specific policies in place related to medication administration

Consequences of Non-compliance

Students who are inadequately prepared or insufficiently supervised when administering medication put patient health and well-being in jeopardy.

Definitions

Direct Supervision: Where Supervising Staff are present to observe and correct, as needed, the performance of the student. Direct supervision requires that the supervisor be in the room. The

goal of direct supervision is to provide reasonable assurance that concerns related to the performance of activities are identified and corrected before patients are harmed.¹

Indirect Supervision: Where Supervising Staff are not physically present but have assigned or delegated an activity to the student. The degree of supervision is dependant on the judgement of the supervisor, the activity, and the level of competence of the student. Also may be call ‘remote supervision’.

Rationale

Administration of medications is part of a multi-disciplinary process. It involves prescribing, dispensing, and administering medications as well as an ongoing evaluation of the process and results of treatment. Students are involved in the process at all levels and have the same responsibility for the safe and ethical administration of medications as staff.

Professional colleges currently advocate “Seven Rights” regarding medication administration: right patient, right drug, right dose, right time, right route, right reason, right documentation.

For the safety of the patient, it is best to have the on site faculty and/or staff member who is most familiar with the patient be the one who supervises the student in the preparing, administering, and documenting of medication administration.

References

- Andersen, S. & Leclerc, S. (April 2005). Guidelines for Student Utilization – wearing of CHEO ID. Children’s Hospital of Eastern Ontario & University of Ottawa, Ottawa, Ontario.
- College of Registered Nurses of BC. (December, 2005). Practice Standard: Administration of Medications. Vancouver, BC. Pub. No. 408. Retrieved on October 13, 2006 from <http://www.crnbc.ca/downloads/408.pdf>
- College of Physiotherapists of Ontario. (February 2006). B. Standards for Professional Practice: Clinical Education. Toronto, ON. Retrieved June 23, 2006 from <http://www.collegept.org/college/content/pdf/en/guide/B.Clinical%20Education.pdf>
- Learning & Career Development. (February 2006) Student Practice Education Policy and Procedure DRAFT. Vancouver Coastal Health Authority, Vancouver, BC.
- Interior Health Authority. (February 2006). Administrative Policy Manual - AU1000 Student Placements (Clinical & Practice Education). Kelowna, BC.
- Nursing Professional Practice. (Draft September 2005). TOH Guidelines for Students and Faculty members. The Ottawa Hospital. Ottawa, Ontario.

¹ Adapted from College of Physiotherapists of Ontario. (February 2006). B. Standards for Professional Practice: Clinical Education. Toronto, ON.