1. Introduction and Who Guideline applies to

Trainee Medicines Administration Pharmacy Technicians (MAPT)/ MAPTs are qualified Medicines Management Technicians (MMT) who have completed a Level 3 NVQ in Pharmacy Service Skills and a Level 3 BTEC Diploma in Pharmaceutical Science which allows them to become registered with the General Pharmaceutical Council (GPhC).

- 1.1 This document sets out the role of the MAPT in the administration of medicines and is in line with the Leicestershire Medicines Code, which must be read in conjunction with the document (specifically Chapter 6 but other chapters may apply).
- 1.2 A Quality Impact Risk Proforma was completed, approved and signed off by the Chief Nurse.
- 1.3 This document relates to the administration of medication to ADULT patients only.
- 1.4 This document applies to:
 - a) All MAPTs and trainee MAPTs
 - b) All Registered Nurses supervising or working with MAPTs and trainee MAPTs
 - c) Line Managers of MAPTs and trainees MAPTs
 - d) All pharmacists, MMTs & Medicines Management Assistants working with the MAPTs and trainee MAPTs

2. Guideline Standards and Procedures

- 2.1 Trainee MAPTs will be directly supervised by a registered nurse and/or qualified MAPT at all times when participating in the administration of medicines whilst on the ward area.
- 2.2 Before undertaking any administration of medication, trainee MAPTs must attend the theory sessions that cover the principles of safe and effective optimisation and administration of medications i.e. recognition of signs of allergy, medication errors, the six rights of administration (right patient, right medication, right dose, right time, right route, right documentation).
- 2.3 All trainee MAPTs must complete the MAPT Competency Package and be assessed and signed off as competent to administer medication by the Senior Nurse Medicines Management before undertaking independent medication rounds.
- 2.4 MAPTs can administer medication via the following routes:
 - orally •
 - inhaled, including nebulisers
 - eye
 - ear
 - nose
 - ointment/ topical creams

- sprays
- oral controlled drugs (CD) (note that during the initial observation period trainee MAPTs can act as the third checker for CDs)
- standard transdermal patches (including CDs)
- subcutaneous injections from pre-filled syringes
- MAPTs can act as second checker for subcutaneous insulin/ Enoxaparin & intravenous (IV) medication after the initial training period
- MAPTs can check TTOS and print out the discharge letter. Any other actions required in relation to discharge will be completed by the RN or RM
- 2.5 MAPTs cannot administer medications via the following route:
 - Nasojejunal (NJ) tubes
 - Percutaneous endoscopic gastrostomy (PEG) tubes
 - Radiologically inserted percutaneous gastrostomy (RIG) tubes
 - Intravenous (IV)
 - Intramuscular (IM)
 - Naso-gastric (NG)
 - Per rectum (PR)
 - Per vagina (PV)

3. Education and Training

None

4. Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
Attendance at theory sessions	Review of Competency Booklet	Senior Nurse Medicines Management	As required	To Senior Nurse Medicines Management

5. Supporting References

Leicestershire Medicines Code (latest version found in Insite and the Leicestershire Medicines)

Nursing & Midwifery Council (2015) The Code, NMC London

6. Key Words

MAPT, drugs, administration

CONTACT AND REVIEW DETAILS				
Guideline Lead (Name and Title)	Executive Lead			
Hannah Flint Senior Nurse Medicines Management	Julie Hogg Chief Nurse			
Details of Changes made during review:				
Removal of reference to pilot as now a substantive role				
Inclusion of subcutaneous injection as a permissible route of administration by MAPT				
Removed the triennial assessment				
Addition added in for TTO checking				