

1. Introduction and who document applies to

- 1.1 Learners on pre-registration programmes must be involved in medicines management in order to achieve the standard required for registration however; learners are prohibited from administering medications **except under direct supervision** of a registered practitioner.
- 1.2 These guidelines provide additional information to learners administering medication and their supervisors. They support existing policies surrounding medicines administration which **must** be referred to in the first instance. (See 1.4 and section 4 for more details)
- 1.3 This document sets out the role of learners in practice with regards to the storage, preparation, checking, administration and disposal of medicines in clinical practice.
- 1.4 This guideline should be read in conjunction with the Leicestershire Medicines Code (available via INsite), Administration of Injectable Medicines Policy (B25/2010) and the Policy and Procedures for the Use of Controlled Drugs (CDs) on Wards, Departments and Theatres (B16/2009). This guideline should also be used alongside NMC Standards of Proficiency for Nurses, Nursing Associates and Midwives, HCPC Standards of Proficiency or any other relevant professional standards.
- 1.5 Learners in practice are defined as student nurses and midwives, trainee nursing associates, student operating department practitioners (ODPs) or any other individuals on pre-registration programmes that require involvement in medicines management to meet the requirements of their programme.
- 1.6 This document applies to:
 - a) All learners in practice who are involved in medicines management.
 - b) All Registered Practitioners supervising or working with learners who are involved in medicines management.

2. Guideline Standards and Procedures

2.1 Accountability

- a) The Registered Practitioner is accountable for all actions made by learners with regards to medicines management.
- b) They have the responsibility to make a professional judgement that they are satisfied that learners participating in the storage, preparation, checking, administration and disposal of medicines in clinical practice have reasonable knowledge (including side effects, indications/contra indications and dosages) of the medications they are checking and administering.
- c) Learners in Practice as listed in 1.5 must not access medications using keys or digilocks except under the direct supervision of a Registered Practitioner during the administration process.

2.2 Direct Supervision

- a) All learners **must** be directly supervised when participating in the preparation and administration of medicines.
- b) This means that the student is directly observed by a registered practitioner throughout the procedure, who must remain present during the whole process to ensure safe administration of the medication.
- c) It is recognised that learners will have different levels of involvement in medicines management depending on their programme, the clinical setting, type of medication and route of administration. Specific information related to each of these is detailed in the appendices.
- d) It is at the discretion of the registered practitioner supervising the learner to what extent the learner is involved in the medicines administration process to ensure they meet their learning outcomes.

2.3 Observation

When a learner is not able to participate in an aspect of administration or preparation of medication they must be given the opportunity to witness the procedure and be involved in discussion related to the prescription and administration including any calculations required.

2.4 Independent Checking

- a) Independent checking is the process where each party in preparing and administering the medication carries out the full patient checks (Six Rights – right dose, right drug, right route, right patient, right time and right documentation) independently to reduce the risk of error.
- b) Learners in practice cannot undertake an independent check of a medicine as they are not registered practitioners
- c) Learners who administer medicines using an electronic system are required to be countersigned by a registered practitioner.

3. Education and Training

- 3.1 Learners must have attended underpinning medicines management and pharmacology theory sessions provided by their Educational Institution prior to participating in the administration of medicines.
- 3.2 Learners must have attended specific training related to intravenous medication administration before they undertake supervised practice of this skill. This training will be provided by their Educational Institution and learners will need to evidence that they have received this training.
- 3.3 The Practice Learning Team must be informed of incidents involving learners related to medication errors

4. Supporting References and Documents

HPCPC (2014) Standards of Proficiency

Leicester Medicines Code (Current Edition) Available on InSite

NMC (2018) NMC: The Code

NMC (2018) Standards of proficiency for registered nursing associates

NMC (2019) Standards of proficiency for midwives

NMC (2018) Standards of proficiency for registered nurses

UHL Policy and Procedures for the Management of Controlled Drugs (CDs) on Wards, Departments and Theatres' (B16/2009)

UHL Administration of Injectable Drugs Policy (Also commonly known as IV policy) B25/2010

5. Key Words

Student Nurse, Student Operating Department Practitioner (ODP), Student Midwife, Trainee Nursing Associate (TNA), Medicines Management, Drug Administration, Learner, Controlled Drug (CD), Injectable Medicine, Intravenous (IV), Midwife Exempt Drug

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Details of Changes made during review: Updated references Updated in line with most recent Injectable Medicines policy and CD Policy Updated in line with most recent NMC Education Standards Further Amendments Made following Review: on 06/04/2022 Blue highlight removed from IV route admin section for Student Nurses Trainee Nurse Associate Route of Admin Box for NG/NJ administration of feeds changed to Under Direct Supervision of Registrant	

Appendix One – Learners Administering Medication to patients aged over 18 years (Adults) being nursed in Adult Areas (Excluding Midwifery)

Routes of Administration		Student Nurse	Trainee Nursing Associate	Student Operating Department Practitioner
Intravenous		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner	Observation Only	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner
Oral		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Nasogastric/Naso-jejunal		Direct supervision of Registered Practitioner	Observation Only	Direct supervision of Registered Practitioner
PEG/PEG(J)		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Subcutaneous/Intramuscular		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner
Inhaled/Nebulised		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Topical		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Transdermal		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Rectal/Vaginal		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Sublingual/Buccal		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Epidural		Observation Only	Observation Only	Observation Only
Other		Student Nurse	Trainee Nursing Associate	Student Operating Department Practitioner
Oxygen Therapy		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Controlled Drugs	Intravenous	Observation Only	Observation Only	Observation Only
	Other Routes	Observation Only		Observation Only
Patient Group Directions		Observation Only	Observation Only	N/A
Cytotoxic Medication		Observation Only	Observation Only	Observation Only
Enteral Feeding (Via NG/NJ)		Direct supervision of Registered Practitioner	Observation only	N/A
Enteral Feeding (Via PEG/Jejunostomy)		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner	N/A
Intravenous Fluids		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner	Observation Only	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner

Appendix Two - Learners Administering Medications to Patients aged under 16 years (Children) and all Patients being nursed in Children's Areas

- a) There is a list of medications that have been agreed can be administered to children under a single check. Student nurses in the child field of practice can administer these under direct supervision of a registered practitioner.
- b) For children aged 16-18 nursed in adult areas please refer to Leicester Medicines Code 13.1.8.

Routes of Administration	Student Nurse	Trainee Nursing Associate
Intravenous	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner	Observation Only
Oral	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Nasogastric/Naso-jejunal	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Observation Only
PEG/PEG(J)	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Subcutaneous / Intramuscular	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner
Inhaled/Nebulised	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Topical	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Transdermal	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Rectal/Vaginal	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Sublingual/Buccal	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.
Epidural	Observation Only	Observation Only

Appendix Two - Learners Administering Medications to Patients aged under 16 years (Children) and all Patients being nursed in Children's Areas (Continued)

- a) There is a list of medications that have been agreed can be administered to children under a single check. Student nurses in the child field of practice can administer these under direct supervision of a registered practitioner.
- b) For children aged 16-18 nursed in adult areas please refer to Leicester Medicines Code 13.1.8.

Other		Student Nurse	Trainee Nursing Associate
Oxygen Therapy		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Controlled Drugs	Intravenous	Observation Only	Observation Only
	Other Routes	Observation Only	
Patient Group Directions		Observation Only	Observation Only
Cytotoxic Medication		Observation Only	Observation Only
Enteral Feeding (Via NG/NJ)		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Enteral Feeding (Via PEG/Jejunostomy)		Direct supervision of Registered Practitioner	Direct supervision of Registered Practitioner
Intravenous Fluids		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner.	Observation Only

Appendix Three - Student Midwives

- Under exemptions to the Medicines Act Registered Midwives can supply all General Sales List and Pharmacy medicines and specified Prescription Only Medicines to women in the course of their professional practice. In addition a Registered Midwife may administer parenterally specified POMs and controlled drugs (CDs). Student midwives can administer all UHL approved midwife exempt medication under the direct supervision of Registered Midwife except for controlled drugs.
- Student midwives working in non-midwifery areas should follow the guidance for that area, e.g. Paediatric (NNU) or Adult (Gynaecological wards).

Route of Medication Administration		Student Midwife
Intravenous		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner
Oral		Direct supervision of Registered Practitioner
Nasogastric/Naso-jejunal		Direct supervision of Registered Practitioner
PEG/PEG(J)		Direct supervision of Registered Practitioner
Subcutaneous/Intramuscular		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner
Inhaled/Nebulised		Direct supervision of Registered Practitioner
Topical		Direct supervision of Registered Practitioner
Transdermal		Direct supervision of Registered Practitioner
Rectal/Vaginal		Direct supervision of Registered Practitioner
Sublingual/Buccal		Direct supervision of Registered Practitioner
Epidural		Observation Only
Other		
Oxygen Therapy		Direct supervision of Registered Practitioner
Controlled Drugs	Intravenous	Observation Only
	Other Routes	Observation Only
Patient Group Directions		Observation Only
Midwife exempt drugs		Can administer under direct supervision of a registered Midwife except for controlled drugs
Intravenous Fluids		Can administer under direct supervision of a registered practitioner, after being independently checked by a second registered practitioner