School of Health and Social Work
Pre-Registration Nursing
Administration of Medicines by Student Nurses

The MEDICINES ACT OF 1968 & MISUSE OF DRUGS ACT OF 1971, the trust and the Local Hospital policies must all be followed regarding medications (use, ordering, storage and administration).

The Nursing and Midwifery Council (NMC) Standards for Medicine Management (NMC 2008, reformatted 2010) provides a framework to be followed.

The University offers guidelines that must be adhered to. These are as follows

The Involvement of Pre-Registration Nursing Students with the Management of Medicines in Clinical Practice.

The management of medicines is an important part of the professional practice and therefore it is essential that student nurses, within their educational programme, are provided with relevant experiences of this activity in preparation for professional practice. In addition student nurses are required to demonstrate competencies relating to medicine management in line with the NMC (2010) Essential Skills Clusters. The skills and experience required are identified in the student’s practice assessment documentation.

The principles of good practice are laid down in the NMC document ‘Standards for Medicines Management (2008) and these guidelines have been drawn up accordingly. Where local Trust (or other) Policy is more stringent with respect to the involvement of students with medicine administration then the local policy must be followed.

1. General

1.1 Student nurses must never administer or supply medicinal products without supervision.

1.2 Throughout their time in clinical practice, all students need to be involved with registered practitioners when administering medicines in a way which provides them with an understanding of the full range of processes involved.

1.3 Students may administer and supply any prescribed medication (this excludes intravenous drug therapy – see 4.1) under the direct supervision of a first level practitioner.

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Effective 1st September 2014
1.4 In all cases where a student is involved with the administration of medicines the registered practitioner must remain with the student throughout the whole process.

1.5 At all times the responsibility and accountability to maintain all aspects of Section 4: Standard of the NMC Standards for Medicines Management remains with the registered practitioner.

1.6 Registered practitioners supervising students are responsible for the delegation of all aspects of drug administration and accountable to ensure that the student nurse is competent to carry out drug administration under supervision.

1.7 When the registered practitioner recognises that the student is not yet ready to undertake administration, they should delay until such time that the student is deemed ready.

1.8 Students may decline to undertake medicines administration if they do not feel confident enough to do so.

2. Signatures

2.1 Students can sign relevant documentation to record medicine administration (prescription chart/controlled drug register) – however their signature must be clearly countersigned by the supervising registered practitioner.

2.2 Accountability for patient/client safety and adherence to local trust policies remains with the supervising registered practitioner at all times in all drug administration situations.

3. Drug Calculations

3.1 Drug calculations, to ensure the correct dose is administered, are an important component of medicine management. Basic drug calculations by a student must be checked by a registered practitioner prior to administration.

3.2 For complex calculations, where local policy indicates that a second practitioner would independently check the calculations in order to minimize the risk of error, the student cannot act as the second practitioner – the student would, however, be expected to demonstrate understanding of the arithmetical processes and be involved in the process.

4. Intravenous Therapies

4.1 Students must not administer intravenous drugs – however they are expected to demonstrate an understanding of the principles of intravenous drug therapy and be involved in the process as a participant observer.

4.2 Students should be involved in all aspects of colloid and crystalloid infusions with no drug additives when this is the prescribed route of administration to patients.
5. **Controlled drugs**

5.1 Students can check and administer controlled drugs under direct supervision.

5.2 Students **cannot** act as a signatory on any documentation relating to the administration or storage of controlled drugs unless their signature is clearly countersigned by the 2nd Registered Practitioner who is checking the controlled drug.

6. **Patient Group Directives and Patient Specific Directions**

6.1 Students cannot supply or administer under a Patient Group Directive (PGD) – However they would be expected to understand the principles of PGD’s and be involved in the process as a participant observer.

6.2 Students can check and administer under supervision medicines prescribed under patient specific direction (PSD) i.e. administration of routine vaccines to patients identified on a list.

7. **Transport of medicines**

7.1 A student cannot, under any circumstances transport medication to a patient or carer/representative on their own – i.e. from a pharmacy to a patient’s home.

**NB:** If any doubt exists about whether a proposed involvement in administration of medicines is appropriate, the University Link Lecturer should be contacted for advice

**References:**

