

Safe Medicine Administration Policy



Objectives





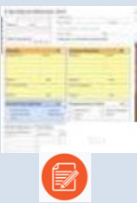
Students under the direction of Nursing & midwifery staff will be able to :

- Identify important practice in the new Safe Medicine Administration policy
- Use critical thinking at each checking step /‘rights of medication administration’ when administering medicines
- Implement practice changes required, including the independent double checking

What's important in the revised policy?

- Defined health care practitioner (HCP) roles and responsibilities
- Risks, precautions and responsibilities before, during and after medication preparation and administration
- Checking steps / 'rights' and practice changes
- Independent double checking
- High risk medications and situations
- Smart Page verbal orders

5 rights plus critical thinking and documentation

<p><u>Two</u> ID checks against NHI in medication chart label</p> <p>One must be NHI on patient wrist ID</p> <p>Ask patient to identify themselves and their DOB</p>	 NHI number	<p>Right patient NHI number</p> <p>has the right to REFUSE (unless a legal mandate)</p>
<p>Check the medication label</p> <p>Check the prescription order and patient history</p> <p>Check the chart & ask the patient if any ALLERGIES & adverse drug reactions (ADR)</p>		<p>Right MEDICATION for the right REASON</p> <p>and</p> <p>no known allergies or ADR that prevent administration</p>
<p>Check the prescription order</p> <p>Confirm CORRECT dose, know expected effect & contraindications using a drug reference resources & patient history</p>		<p>Right DOSE for the Right REASON</p>
<p>Look when last administered</p> <p>Give the drug at right time & over the right time</p>		<p>Right TIME includes right delivery RATE</p>
<p>Again, check order & make sure it is the right drug form for the delivery route</p> <p>Communicate the reason and expected action & ask the patient to report effect</p>	<p>PO IV Subcutaneous IM Epidural</p>	<p>Right ROUTE with the right FORM for administration & monitor response</p>
<p>COMPLETE documentation and sign AFTER giving the medication</p> <p>Chart the actual delivery time, route & why it is withheld or refused/declined or when to restart</p> <p>Document NEW allergy or ADR</p>		<p>WRITE it right in medication chart & write patient response in the progress notes</p> <p>Be sure to document any relevant information</p>

Right patient

Right medication

Right dose

Right time

Right route









Right documentation

Is this the right patient?

Two checks against the patient label in the national medication chart

Check 1: Requires **NHI patient's ID band** against the patients **NHI number on the chart.**

Check 2: Ask patient to identify themselves (name & DOB)

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Right patient

Right medication

Right dose

Right time









Right route

Right documentation

Is the right medication being given for the right reason?

Check the medication label against the prescription

Check for any allergies / ADR and ask the patient if they have any drug allergies / ADR

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Right documentation

Is this the right dose?

Check the prescription

Check drug calculations

Know the drug, it's expected effects & side effects

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Right route

Right documentation

Is it being given at the right time, over the right time?

Check time of last dose

Check dose and delivery rate calculations

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Is the right drug being given via the right route?









Check the prescription & the drug

Is the documentation complete?

Document after giving medication

Document variance to the prescription

Document any new allergy / ADR

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Responsibilities Before

- Discuss the risks, precautions and responsibilities BEFORE medication is prepared
- Interpreting the prescription orders
- Allergies and adverse reactions
- SmartPage®

Responsibilities During

Checking steps/Rights of medication administration

Double checking terminology changes

Independent two person (double) check


A procedure when two health care practitioners independently check (alone and apart from each other, then compare results) the **medicine** (prescription, calculation, preparation).

Independent two person (double) checking may be limited to a **medicine independent two person (double) check** only i.e. the right medicine and form and dosage is prepared, or may require a **FULL** independent two person (double) check.

Responsibilities During

FULL independent two person (double) check

Two HCP use this procedure when there is high risk associated with the medicine, route and its delivery. A FULL independent two person (double) checking procedure includes:

- **Medicine independent two person (double) check** to ensure the **Right** medicine, **Right** dosage and **Right** form is prepared
-  **Patient administration independent two person (double) check** is to ensure the drug is administered correctly to the **Right** patient in the **Right** form by the **Right** route.
- Both HCP **must sign the medication chart** following administration.

HIGH RISK MEDICATION AND RELATED SITUATION LIST

**FULL INDEPENDENT DOUBLE CHECK
(MEDICINE DOUBLE CHECK PLUS PATIENT ADMINISTRATION DOUBLE CHECK)**

Adrenaline IV/IM (excludes local anaesthetic preparations)
All child health parenteral (not Gastrointestinal tract) medication administration
All medication with area specific administration guidelines/policy requiring full double check
All medications via epidural, intrathecal, intraosseous and intra-arterial routes
Blood components/ products
Cardioplegics
Controlled and restricted medicines - all routes continuous or intermittent
Changing the rate of a high risk medication or in related situations
Changing care providers (e.g. change of shift – bedside report, transfer between units) while a patient is on a continuous/intermittent infusion from the high risk medication or related situations list
Enteral and parenteral chemotherapeutic and biologic therapies including methotrexate
Hypertonic dextrose >20% - IV
Hypertonic sodium chloride >0.9% - IV
Insulin IV/SC refer In-patient self medication policy for exceptions
IV anaesthesia agents including ketamine
IV anticoagulants and thrombolytics
IV inotropes and vasoactive medicines
IV radiocontrast agents
IV sedation (moderate)agents
Liposomal formulations
Magnesium sulphate injection
Neuromuscular blocking agents
Potassium preparations (excluding oral)
Syntocinon IV/IM
Total parenteral nutrition(TPN)

Responsibilities After

- Monitoring
- Documentation
- Recognising and managing a suspected or new allergies
- Withholding medications
- Errors

Medication Policy



Adobe Acrobat
Document

Scenario

8 Day National Medication Chart

Chart of

Date Recharted
Day Month Year

Family Name: _____

Given Name: _____ Gender: _____

AFFIX PATIENT LABEL HERE

Date of Birth: _____ NHS: _____

Prescriber to write Patient's name and NHS: _____

Allergies		No
Medication / Other	Reaction	<input type="checkbox"/>
Signature	Date	
New on this admission		
Signature	Date	

Adverse Reactions		No
Medication	Reaction	<input type="checkbox"/>
Signature	Date	
New on this admission		
Signature	Date	

Special Care Required		No
<input type="checkbox"/> Renal impairment	<input type="checkbox"/> Pregnancy	<input type="checkbox"/>
<input type="checkbox"/> Hepatic impairment	<input type="checkbox"/> Breastfeeding	
<input type="checkbox"/> Other: _____		

Supplementary Charts		No
<input type="checkbox"/> Diabetic/Insulin	<input type="checkbox"/> Specialised analysis	<input type="checkbox"/>
<input type="checkbox"/> Heparin	<input type="checkbox"/> Warfarin	
<input type="checkbox"/> Other: _____		

Sample Signature – Prescribers

Sample Initials – Administrators/Others

NAME & DESIGNATION <small>Print & print</small>	SIGNATURE	REG. No.	NAME & DESIGNATION <small>Print & print</small>	INITIAL	REG. No.



Microsoft Word
Document