

## Contents

Policy.....	2
Scope/Audience .....	2
Associated Documents.....	2
Definitions.....	2
Accountability.....	2
Scope of Practice Statement:.....	2
Anaesthetic Technicians .....	3
Registered Health Professional responsibilities Overseeing Unregulated Health Care personnel ....	3
Unregulated Health Care personnel (students, defence force medical assistants, health care assistants, technicians) .....	3
Fluid and Medication Management Safety Requirements .....	4
IV endorsements .....	4
Intravenous Fluid and Medication Administration via a peripheral line .....	4
Intravenous Fluid and Medication Administration via a Central Venous Access Device (CVAD) .....	5
Double Independent Checking – Staff responsibilities.....	6
Fluid and Medications which require Double Independent Checking .....	6
Adults .....	6
And.....	6
Children.....	6
Neonates.....	6
Enrolled Nurse responsibility in double independent checking .....	6
ENs are unable to independently check or administer with another EN: .....	7
Enrolled Nurses and Nursing Students responsibility in double independent checking.....	7
Restricted Scope Enrolled Nurses and Unregulated Health Care personnel.....	7
Fluid and Medication Specific Endorsements.....	8
Roles (table).....	8
Measurement/Evaluation .....	10
References.....	10

## Policy

CDHB and non CDHB personnel will adhere to regulatory requirements and best practice and medication safety principles

## Scope/Audience

CDHB staff or Approved Persons who are responsible for fluid and medication management.

## Associated Documents

[Fluid and Medication Management Manual](#)

[Fluid and Medication Checking Procedure – Fluid and Medication Management Manual](#)

[MedChart Use policy – Fluid and Medication Manual](#)

[Patient Identification Policy – Clinical Manual](#)

[Single Check Medications Child Health Service](#)

[Nursing Direction and Delegation Policy - Nursing/Midwifery Policies and Procedures manual](#)

[Student Nurse/Midwife Responsibilities with Fluid and Medication Management](#)

## Definitions

**Registered Health Professional:** registered under the Health Practitioners Competence Assurance Act (2003) includes: registered nurse (RN), registered midwife (RM), enrolled nurse (EN), medical officer (MO), Pharmacist, Anaesthetic Technician.

**Approved Person:** Non CDHB staff working within the CDHB who, through their contracted role, are responsible for fluid and/or medication management.

**Enrolled Nurse (EN):** Transitioned Enrolled Nurse with CDHB Fluid and Medication Endorsement or a Diploma of Enrolled Nursing graduate with CDHB Fluid and Medication Endorsement.

**Enrolled Nurse Restricted Scope:** Enrolled Nurse who has not transitioned to the new scope of practice, or does not have a Diploma in Enrolled Nursing. Restricted scope ENs do not have a CDHB fluid and medication endorsement.

## Accountability

### Scope of Practice Statement:

- All health professionals registered under the Health Practitioners Competence Assurance Act (2003) will adhere to their own scope of practice and position description, and contractual requirements.

- Each health professional that is regulated by a professional body is accountable for their practice, adherence to their profession's standards and relevant CDHB and workplace policies.
- Enrolled Nurses practice under the direction and delegation of a RN or RM, and in some situations a MO. For further direction and delegation under other health professionals refer to Vol. 11 Direction and Delegation Policy. Health care workers who are not regulated by a professional body but who have some medication responsibilities will adhere to CDHB and workplace policy. They will perform their duties under the direction and oversight of a registered health professional who will maintain overall responsibility for medication management.

**Please Note:** All health professionals who have conditions or restrictions placed on their scope of practice have a responsibility to inform their line manager and colleague(s) if there are parameters or restrictions placed upon their practice which will impact upon, or restrict, medication management practice.

### **Anaesthetic Technicians**

- All IV certified Anaesthetic Technicians must work within the framework laid out in their scope of practice as dictated by the Health Practitioners Competence Assurance Act (2003).
- Each Anaesthetic Technician that is regulated by Medical Sciences Council (NZ) is responsible for their practice, adherence to their profession's standards and relevant CDHB and workplace policies.
- All Anaesthetic Technicians who have restrictions on their scope of practice have a responsibility to inform their line manager which may impact upon their fluid and medication practice.
- All Anaesthetic Technicians understand they are responsible for the practice of trainee Anaesthetic Technicians under their immediate (Level 1) supervision.

### **Registered Health Professional responsibilities Overseeing Unregulated Health Care personnel**

The registered health professional is responsible for understanding the unregulated health care personnel's practice, their limitations and how it can contribute to care in the health care setting (see Direction and Delegation policy, Vol 11).

### **Unregulated Health Care personnel (students, defence force medical assistants, health care assistants, technicians)**

Must only undertake activities delegated to them by a registered health professional if the activity is in accordance with their position description, education/learning and what is best practice and policy in the area where they are working.

Are accountable for their own actions in undertaking the activities delegated to them by the registered health professional. Must inform the registered health professional if an activity delegated to them is not in accordance with their position description, education/learning and what is

best practice and policy in the area where they are working; or if they are uncertain of the requirements or the patient's response at any stage of the fluid/medication management activity.

### Fluid and Medication Management Safety Requirements

To enhance the safe administration of fluid and medications health professionals involved in fluid and medication management are expected to:

- Follow CDHB and workplace policy in prescribing, dispensing, calculating, checking, informing the patient/client/parents/family, administration and documentation of fluid and medications.
- Ensure registered/regulated staff can oversee and direct the practice of the enrolled nurse and/or unregulated health care colleague, e.g. student, defence force medical assistant, health care assistant, technician.
- Minimise environmental distractions.
- Think critically upon every step of their practice.
- Perform medication and/or fluid therapy double independent checking procedure
- Read the label on the container three (3) times;
  - before removing from storage site
  - before opening the container
  - when replacing the container
- Prepare and administer **one** patient's medication/fluid at any one time.
- Use the designated oral syringes for administering liquid medication via syringe
- After independently calculating a medication dose, consider whether your calculation is a "reasonable" dose and within expected dosage.
- Be aware of the intended effect, adverse side effects, usual dose range, and actions required, and monitoring of the fluid and medication to be administered by utilising available resources and guidelines.
- Involve the patient/whanau/parent in their medication management, including confirming patient identification with the patient or parent prior to administration.
- Involve a second or third person with any medication/fluid that the staff member /approved person is unfamiliar with or unsure about.
- Seek clarification, question or challenge colleagues, where a prescription or fluid and medication management is not clear or appropriate; or if the management does not adhere to best practice principles or policy.

### IV endorsements

#### Intravenous Fluid and Medication Administration via a peripheral line

Level 1 endorsement is required to enable the administration of IV medications and fluids via a peripheral line.

Registered Nurses, Enrolled Nurses and Registered Midwives must successfully complete at least one of the following Programmes located on healthLearn. This is dependent on their area of clinical practice:

Your current workplace scope	healthLearn Regional Medication and Fluid Foundation Programme to complete
No IV scope in your workplace	Medication and Fluid Foundation Programme 1
IV scope <u>without</u> the use of IV pumps and Blood or Blood product administration	Medication and Fluid Foundation Programme 2
Full IV scope <u>including</u> Pump use and Blood or Blood product administration	Medication and Fluid Foundation Programme 3
Working with Paediatric patients (separate neonatal package in development)	Complete the appropriate foundation course as above <b>plus</b> the Medication and Fluid Foundation Programme for Paediatrics
Operating Theatre	TBA

Please Note: All Diploma of Enrolled Nurses and ENs who have recently transitioned to the revised scope of practice will be required to complete the appropriate Medication and Fluid Foundation Programme for their clinical area.

### **Intravenous Fluid and Medication Administration via a Central Venous Access Device (CVAD)**

2<sup>nd</sup> Level IV endorsement is required to enable the management of IV medications and fluids via a CVAD.

Registered Nurses and Registered Midwives must successfully complete the following course/s located on the healthLearn, which are dependent on their area of clinical practice:

Your current workplace scope	healthLearn Regional CVAD course to complete
Scope with only <b>Non implanted</b> CVADs required	Central Venous Access Device Non-Implanted Endorsement CV001
Scope with Non implanted <b>OR/AND Implanted</b> CVAD's	Central Venous Access Device Non-Implanted Endorsement CV001 AND Central Venous Access Device Implanted Endorsement (Level 2 IV) (IC001)

### **Medications which don't require a double independent check**

- All Registered Nurses and Midwives, Medical Officers; and Enrolled Nurses with a fluid and medication endorsement may administer medications independently, which do not require a double independent check.
- For all other medications see below.

## Double Independent Checking – Staff responsibilities

### Fluid and Medications which require Double Independent Checking

- Double independent checking will occur as per our CDHB Patient Identification Policy and CDHB Checking Procedure (which includes double independent checking) for the following medication/fluid/routes.

#### Adults

- Any Controlled Drug/Infusion
- Blood or Blood Products
- Anticoagulants
- Cytotoxics

#### And

Any fluid/medication administered by the below routes

- Intra muscular
- Intra dermal
- Sub cutaneous
- Intravenous
- Intrapleural
- Intrathecal
- Epidural route

**Note:** always check for local/area specific policies e.g. SMHS, Rural, where independent community work allows for single checking of certain commonly administered medications.

#### Children

All medications, by all routes, are to be double independently checked

**Exception:** Those drugs listed in the Child Health Service Single Check Medication List.

Child Health nurses who have completed the Child Health Medication safety package and have the approval of their CNM may administer medications from this Single Check Medication list.

**Please note:** At any time a RN may request a double independent check when administering medications from the single check list.

#### Neonates

- All medications, by all routes, are to be double independently checked

**Exception** – oral vitamins may be single checked.

### Enrolled Nurse responsibility in double independent checking

- When their designated registered health professional is not available Enrolled Nurses can double independent check with another RN/RM,

MO or another EN ( who must also hold a relevant fluid and medication endorsement)

- Where two ENs are performing the independent double check it must only be for a medication/fluid they are permitted to administer

### ENs are unable to independently check or administer with another EN:

- Any Fluid or Medication via a Central Venous Access Device (CVAD)
- Any Controlled/Recorded Fluids/Medication (Exception: oral route in Adult areas)
- Any Blood or Blood Products
- Insulin via an IV route (**Exception:** may administer subcutaneous via a prefilled pen)
- Anti-coagulants via an IV route (may administer oral anticoagulant and subcutaneous Low Molecular Weight Heparin where a whole syringe 'dose' is prescribed)
- Cytotoxics via any route: (**Exception:** Oral Cytotoxics after successful completion of Module one CDHB cytotoxic competency)
- Or any medication/fluid via these routes unless local policy stipulates area specific sanction
  - Intra dermal
  - Intra pleural
  - Intrathecal
  - Epidural route
  - **Intravenous Exception**(both EN's are 1st and 2<sup>nd</sup> level endorsed):
    - Peripheral IV or subcutaneous premixed bags i.e. sodium chloride 0.9% or glucose 4% in sodium chloride 0.18% premixed bags which are running 8-12 hourly
    - Sodium chloride 0.9% peripheral IV flushes (adults only) –.

**Note:** always check for local/area specific policies e.g. SMHS, Rural, where independent community work allows for single checking of certain commonly administered medications.

### Enrolled Nurses and Nursing Students responsibility in double independent checking

- Enrolled Nurses **must not** perform any medication or fluid check that requires a **double independent check, with a student nurse.**

### Restricted Scope Enrolled Nurses and Unregulated Health Care personnel

- Will require a double independent check **for all fluid and medication with another RN/RM or MO**
- Restricted scope EN's must not check any fluid or medications with a student.

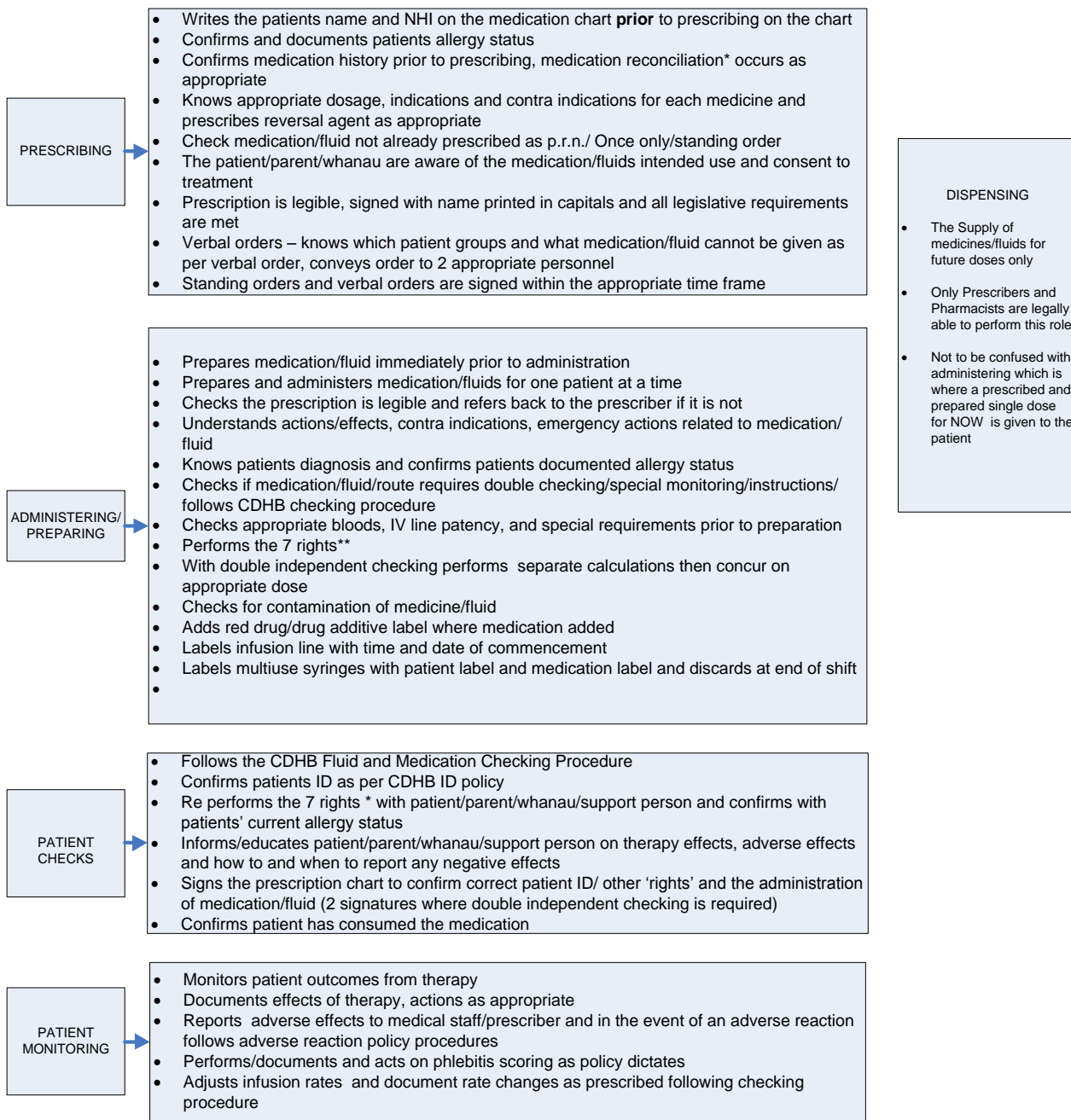
**Fluid and Medication Specific Endorsements**

- Limited Registered and Enrolled Nurse Administration of Nicotine Replacement Therapy
- Peripheral IV Therapy
- Peripheral Cannulation
- Venepuncture Phlebotomy
- Central Venous Access Devices (CVADs)
- Cytotoxic biotherapy
- Acute Pain Management Section Fluid and Medication Management Manual
- Intra pleural Policy (area specific)
- Intrathecal Policy (area specific)

**Roles (table)**

- See next page for Roles table





**\* MEDICATION RECONCILIATION**  
Must be completed by a health practitioner involved in medicines management e.g. medical officer, pharmacist, registered nurse/midwife. Confirms the patients current dose/medications by obtaining information from at least 2 sources, including the patient where possible, within 24 hrs of admission/transfer

**\*\* 7 RIGHTS**  
Right patient: Ensure you use two forms of identifying the patient (as policy stipulates), Right drug, Right dose/rate, Right time, Right route, Right reason, Right documentation

## Measurement/Evaluation

Incident management system

Canterbury and West Coast IV Link Clinical Practice Observations

## References

- Medicines Act 1981 and Regulations 1984, 1990
- Misuse of Drugs Act and Regulations 1987
- Health Act 1956
- Medicines (Standing Orders) Regulations 2002
- Health and Disability Services (Safety) Act 2001
- Health Practitioners Competence Assurance Act 2003
- NZS 8134:2001 Health and Disability Sector Standards
- Guideline: delegation of care by a registered nurse to a health care assistant, NCNZ, 2011
- Guideline: responsibilities for the direction and delegation of care to enrolled nurses,
- Nursing Council of NZ Enrolled Nurse scope of practice 2011
- New Zealand Nurses Organisation Guidelines for nurses on the administration of medicines, 2007
- Health Quality and Safety Commission New Zealand; Safe Medication Management Programme; Medications Reconciliation Standards; Version 2 January 2011

<b>Policy Owner</b>	Directors of Nursing and Midwifery/MAC
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