# Bachelor of Nursing medicine administration and scope of practice guidelines:

A resource for students, clinical facilitators and placement providers



### Preamble:

The University of South Australia, *Bachelor of Nursing Medicine Administration and Scope of Practice Guidelines* are an important resource for students, clinical facilitators and placement providers in safeguarding students in the safe and responsible administration of medicines during clinical placement. This document sets out the University's and the program's procedural requirements for the management of medicines, and is regulated in a manner consistent with legislative requirements to eliminate or control potential health, safety, and security risks pertaining same. Please note the following medicine administration and scope of practice student mandates.

### Direct supervision of a Registered Nurse:

- Bachelor of Nursing students must always be under direct and continuous supervision by a Registered Nurse when administering medicines.
- Bachelor of Nursing students who hold professional registration as a Midwife or Enrolled Nurse, must always be directly supervised by a Registered Nurse when administering medications, and ensure they always work within the scope of practice as a student nurse not as a Midwife or Enrolled Nurse.
- Bachelor of Nursing students must always practice in accordance with each specific placement provider's medication policy and procedures.

### Paediatric medications:

- Bachelor of Nursing students are not authorised to perform the role of medication checking (not as double checker) where two nurses are required to perform a medication check for paediatric medication order.
- Bachelor of Nursing students may however undertake the role of a supernumerary third person who can check medicines for children.
- Bachelor of Nursing students are permitted to administer medications provided they undertook the role of third check and were present during the complete preparation. During administration Bachelor of Nursing students must be under direct supervision of a Registered Nurse.

### Standing medication orders:

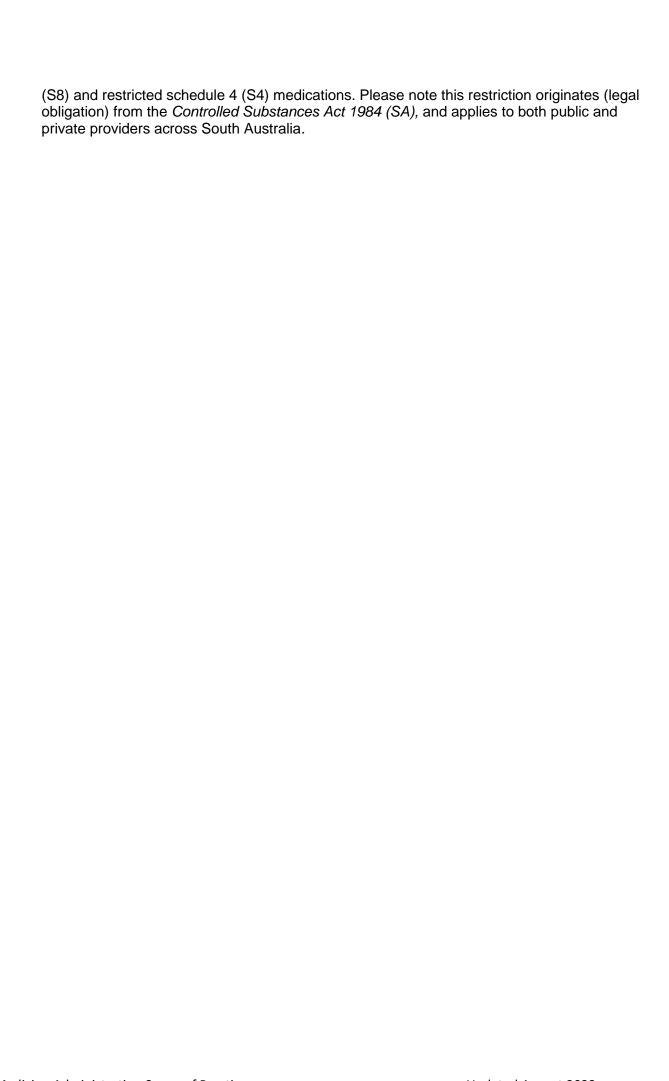
- Bachelor of Nursing students are authorised to administer medicines from standing orders only when:
  - The placement provider policy allows students to administer medicines from standing medication orders.
  - The medication is not a drug of dependence (see below) or a high-risk medicine.
  - The Registered Nurse writes the order on the medication chart and both the Registered Nurse and the student are familiar with the requirements of the standing order (i.e. aware of dosing schedule, exclusions and or special requirements).
  - Once the medicine order has been documented on the medication chart, the student may prepare and administer the medicine under the direct and continuous supervision of the Registered Nurse and counter sign same following administration.

### Registered Nurse or Midwife initiated medication orders:

• Bachelor of Nursing students are not authorised to administer medication orders that are initiated by a registered Nurse and or Registered Midwife.

### Administration of controlled substances (drugs of dependence):

 In accordance with the <u>Controlled Substances Act 1984 (SA)</u>, Bachelor of Nursing students are <u>not authorised</u> to prepare or administer Drugs of Dependence, this includes; schedule 8



The following Tables (Tables 1-5) outline the Bachelor of Nursing program clinical course psychomotor and assessment skills mapping relative to scope of practice.

**Table 1:** NURS 1061 Experiential Learning Activity: Preparation for Clinical Practice Practicum 1

	Scope of Practice relev	vant to Program STAGE			
Course details	Within scope of practice	Outside scope of practice	Observation/ monitoring only	Course delivery of skills	Course assessment of skills
Experiential Learning Activity: Preparation for Clinical Practice Practicum 1 (NURS 1061)	Students are authorised to observe medicine administration Students are not authorised	Checking and administration of any medicines		Experiential Learning Activity: Preparation for Clinical Practice Practicum 1	Experiential Learning Activity: Preparation for Clinical Practice Practicum 1
STAGE 1, Study Period 2	to second check or administer medicines			8 'Rights' Medication Safety	Health questionnaire Temperature
On-Campus simulation and Practicum (Community Activity)				National Inpatient Medication Chart (NIMC)	Pulse Respiration
40 hours equivalent				Oral administration	Blood pressure
duration (1 week)  Co-requisite theory				Oral medication calculations	Oxygen saturations
course:				Practice and observation within HHHS;	Blood Glucose monitoring
Foundations of Nursing Practice (NURS 1072)				8 rights medicine safety,	
				Oral medications	
				NIMC	
				Foundations of Nursing Practice (NURS 1072):	
				Mathematical literacy	
				Medication calculations: Tablet/ Liquid	

 Table 2: NURS 1071 Experiential Learning Activity: Aged Care Practicum 2

	Scope of Practice relev	ant to Program STAGE			
Course details	Within scope of practice	Outside scope of practice	Observation/ monitoring only	Course delivery of skills	Course assessment of skills
Experiential Learning Activity: Aged Care Practicum 2 (NURS 1071)  STAGE 1, Study Period 5  Person-centered nursing care to older people practicum  16O hours duration (4 weeks)  Requisite theory course: Health of Older People (NURS 1073), STAGE 1, SP5	Under direct supervision of a Registered Nurse (not an Enrolled Nurse or personal care worker)  Students are authorised to check and administer medicines via the following routes:  Oral  Enteral  Nebulised  Metered Dose Inhaler (MDI)  Topical including eye and ear  Oxygen	Students are not authorised to administer sublingual (SL) medications Intravenous medicines All high risk medicines (HRMs)		Pre-clinical HHHS workshop focus on manual handling Health of Older People (NURS 1073): Oxygen delivery Oral medication administration Eye drops/ointments Enteral feeding MDI Nebuliser  Practicing skills in HHHS only: Nasogastric/PEG  Practice for placement: Oral medications	Health of Older People (NURS 1073): Health assessment Respiratory assessment (limited) Neurological assessment Neurovascular assessment Blood glucose monitoring Nutrition assessment Falls risk assessment Pressure injury risk assessment Pain assessment Basic wound assessment/ management

**Table 3:** NURS 2033 Experiential Learning Activity: Acute Care Practicum 3

	Scope of Practice relev	vant to Program STAGE			
Course details	Within scope of practice	Outside scope of practice	Observation/ monitoring only	Course delivery of skills	Course assessment of skills
Experiential Learning Activity: Acute Care Practicum 3 (NURS 2033)  STAGE 2, Study Period 2  Acute nursing care practicum  160 hours duration (4 weeks)  Requisite theory courses: Health of Older People (NURS 1073)  Scientific Basis of Clinical Practice (BIOL 2058)	Under direct and continuous supervision of a Registered Nurse.  As per NURS 1071 and includes the following:  Sublingual (SL)  Subcutaneous (SC) injections and fluids  Intramuscular (IM)  Intravenous (IV) fluid infusions  Paediatric or Neonatal medicines  Students are authorised to check and administer the following high risk medicines (HRMs):  Insulin (SC only)  Anticoagulants (SC only)	Students are not authorised to administer:  Injectable medicine infusions  Students are not authorised to check and administer the following HRMs:  Controlled and or restricted substances  Potassium or high dose electrolyte infusions  Cytotoxic  Neuromuscular blockers  Epidural infusions	N/A	Pre-clinical HHHS workshop focus on medication administration  Health of Adults (NURS 2023): Blood administration Parenteral medicines including; Intravenous (IV) Peripherally inserted central catheter (PICC) Central Venous Cather (CVC) Subcutaneous injections Oral/enteral medicines Rectal medications  Practice for placement: parenteral medicines	Health of Adults (NURS 2023): Physical Assessment Neurological assessment Cardiovascular assessment including ECG Respiratory assessment Asthma assessment Abdominal assessment Pain assessment Alcohol withdrawal Complex wound assessment

**Table 4:** Experiential Learning Activity: Extension to Practice Practicum 4

	Scope of Practice relev	ant to Program STAGE			
Course details	Within scope of practice	Outside scope of practice	Observation/ monitoring only	Course delivery of skills	Course assessment of skills
Experiential Learning Activity: Extension to Practice Practicum 4 (NURS 3042)  STAGE 3, Study Period 2  Nursing across all contexts of nursing practicum 320 hours duration (8 weeks)  Requisite theory courses: All STAGES 1 and 2 courses  Nursing Context of Practice: Primary Health Care (NURS 3045)	Under direct and continuous supervision of a Registered Nurse.  As per NURS 2033 and includes the following:  Subcutaneous (SC) infusions  Intravenous (IV) fluid infusions  Premixed Potassium solution infusions  Anti-infective medicines	Students are not authorised to administer the following HRM agents:  All controlled/restricted medicines  Cytotoxic medicines  Potassium bolus dose or preparation of Potassium infusions from ampoules  Neuromuscular blocker agents  Epidural infusions	Students are permitted to observe and monitor the following HRM agents:  Cytotoxic medicines  Epidural infusions  High dose electrolyte infusions including Potassium  Insulin infusions  Anticoagulant infusions	Comprehensive provision of nursing care and deteriorating patient  Health of Infants Children and Adolescents (NURS 2022)  8 Rights for safe medicine administration in paediatrics Paediatric medication calculations NIMC – Paediatric Enteral feeds Diabetic Ketoacidosis (DKA) management Anaphylaxis  Assessment, Diagnostics & Pharmacotherapeutics (NURS 2040)  Management of PICC, CVC, Midlines and Ports Patient Controlled Analgesia (PCA) Epidural medicines Venipuncture Underwater sealed drains (UWSD)	Pre-clinical HHHS workshop focus on deteriorating patient  Health of Infants Children and Adolescents (NURS 2022)  Pain assessment Physical Assessment Neurological assessment Neurovascular assessment Respiratory assessment Nutrition assessment Assessment, Diagnostics & Pharmacotherapeutics (NURS 2040)  Neurological assessment Cardiovascular assessment Respiratory assessment Respiratory assessment; Pulse oximetry Neurovascular assessment Abdominal assessment Pain assessment Venipuncture Complex wound assessment

**Table 5:** NURS 3O43 Experiential Learning Activity: Transition to Practice Practicum 5

## Scope of Practice relevant to Program STAGE

Course details	Within scope of practice	Outside scope of practice	Observation/ monitoring only	Course delivery of skills	Course assessment of skills
Experiential Learning Activity: Transition to Practice Practicum 5 (NURS 3043)	As per NURS 3042	As per NURS 3042	As per NURS 3042	As per NURS 3042	As per NURS 3042
STAGE 3, Study Period 5					
Nursing across all contexts of nursing practicum					
320 hours duration (8 weeks)					
Requisite theory courses:					
Transition to Professional Practice (NURS 3056)					

**Table 6:** Bachelor of Nursing medicine administration scope of practice summary

Under direct and continuous supervision of a Registered Nurse	STAGE 1		STAGE 2		STAGE 3	
	NURS 1061	NURS 1071	NURS 2033	NURS 3042	NURS 3043	
Blood products via IV infusion	-	-	✓	✓	✓	
Controlled (S8) and restricted medicines (S4)	-	-	-	-	-	
Cytotoxic medicines	-	-	-	-	-	
Ear drops	-	✓	✓	✓	✓	
Enteral medicines	-	✓	✓	✓	✓	
Epidural infusions/ bolus doses	-	-	-	-	-	
Eye drops/ ointment	-	✓	✓	✓	✓	
Intramuscular injections	-	-	✓	✓	✓	
Intrathecal medicines	-	-	-	-	-	
Intravenous fluids	-	-	✓	✓	✓	
Intravenous infusion (Premixed Potassium solution)	-	-	-	✓	✓	
Intravenous bolus (non high risk medications)	-	-	✓	✓	✓	
Intravenous infusion (non high risk medications)	-	-	✓	✓	✓	
Metered Dose Inhalers (MDIs)	-	✓	✓	✓	✓	
Nebulised medications	-	✓	✓	✓	✓	
Neuromuscular blocking medications	-	-	-	-	-	
Oral medications (excluding sublingual)	-	✓	✓	✓	✓	
Oxygen Therapy	-	✓	✓	✓	✓	
Paediatric medication	-	-	✓	✓	✓	
Rectal medication	-	-	✓	✓	✓	
Subcutaneous fluids	-	-	✓	✓	✓	
Subcutaneous injections (anticoagulants)	=	-	✓	✓	✓	
Subcutaneous injections (insulin)	-	-	✓	✓	✓	
Subcutaneous injections (non high risk medications)	-	-	<b>√</b>	<b>√</b>	✓	
Sublingual medication	-	-	<b>√</b>	✓	✓	
Topical medications (not including controlled medications)	-	✓	✓	✓	✓	

Glossary	
Controlled Medicines	Controlled medicines are listed under Schedule 8 of the Commonwealth Poisons Standard. The ACT adopts the Poisons Standard under the Medicines, Poisons and Therapeutic Goods Act 2008.
	Restricted Schedule 4 (S4) Medicines are also considered as controlled medicines.
High Risk Medicines (HRMs)	High risk medicines (HRMs) are those medicines that have a high risk of causing significant patient harm or death when used in error. Although errors may or may not be more common than with other medicines, the consequences of errors with these medicines can be more devastating.
	Special safeguards to minimise opportunities for errors are integral to patient – see High Risk medicines – SA Health below
Nurse/Midwife Initiated Orders	A non-prescription medicine that may be initiated by a registered nurse or a midwife, without prior written or telephone instruction from an authorised prescriber.
	https://www.sahealth.sa.gov.au/wps/wcm/connect/63a754b8-2c33-4538-b754-c8310b4c8617/Nurse_Midwife+Initiated+Medicines+Clinical+Guideline_V2.1.pdf?MOD=AJPERES&CACHEID=ROOTWORKSPACE-63a754b8-2c33-4538-b754-c8310b4c8617-oqgIACz
Links to Bachelor	Experiential Learning Activity:
of Nursing	Experiential Learning Activity: Preparation for Clinical Practice Practicum 1 (NURS 1061)
clinical courses	Experiential Learning Activity: Aged Care Practicum 2 (NURS 1071)
	Experiential Learning Activity: Acute Care Practicum 3 (NURS 2033)
	Experiential Learning Activity: Extension to Practice Practicum 4 (NURS 3042)
	Experiential Learning Activity: Transition to Practice Practicum 5 (NURS 3043)
Standing Medication Orders (SMOs)	A written instruction issued by a medical practitioner, in accordance with the regulations, authorising any specified health practitioners (within their scope of practice) to document and administer (not prescribe) a specified medication in circumstances specified within the instruction, without a medication order or prescription (also known as: Standing Order, Standing Drug Order (SDO), Medication Standing Order (MSO). <a href="https://www.sahealth.sa.gov.au/wps/wcm/connect/1c77de8049d6e0d293b8df9b6ca12d15/">https://www.sahealth.sa.gov.au/wps/wcm/connect/1c77de8049d6e0d293b8df9b6ca12d15/</a>
	Clinical+Guideline+- +Standing+Medication+Orders+%28SMO%29+2020+final.pdf?MOD=AJPERES&CA CHEID=ROOTWORKSPACE-1c77de8049d6e0d293b8df9b6ca12d15-nKQj.LD

### High Risk Medicines – SA Health

High risk medicines are those medicines that have a high risk of causing significant patient harm or death when used in error. Although errors may or may not be more common than with other medicines, the consequences of errors with these medicines can be more devastating. To assist in preventing errors.

Special safeguards to minimise opportunities for errors are integral to patient safety.

Organisations are required to implement systems to reduce the occurrence of medication incidents and improve the safety and quality of medicines use in accordance with National Safety and Quality Health Service (NSQHS) Standard 4 – Medication Safety.

### High Risk Medicines Management

To assist organisations to meet the NSQHS Standards, SA Health has developed a High Risk Medicines Management Policy Directive (PDF 493KB) (opens in a new window). This directive and its associated High Risk Medicines Management Guideline (PDF 629KB)(opens in a new window) aim to improve patient safety and reduce harm within the domains of storage, prescribing, dispensing and administration of identified high risk medicines and assist organisations achieve these goals.

Compliance with this policy is mandatory and will ensure a standard approach to high risk medicines and support clinical staff in their safe management.

### APINCH and high-risk medicines

The acronym APINCH is often used to classify high risk medicines however the list is not exhaustive and other individual medicines or groups can be included. The Horizon Hospital and Health Service within the Nursing and Midwifery School has extended the list to include Epidural/Intrathecal agents along with neuromuscular blocking agents. The most common high risk medicines reported are included in the ISMP 'High Alert Medications' (opens in a new window) and A PINCH lists (opens in a new window).

Further Information regarding High Risk medicines can be found:

- Australian Commission on Safety and Quality in HealthCare; High Risk medicines:
- https://www.safetyandquality.gov.au/our-work/medication-safety/high-risk-medicines/
- SA Health High Risk Medicines Website:
   <a href="https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/clinical+resources/clinical+programs+and+practice+guidelines/medicines+and+drugs/high+risk+medicines/high+risk+medicines</a>
   ams+and+practice+guidelines/medicines+and+drugs/high+risk+medicines/high+risk+medicines
- NSW Clinical Excellence Commission High Risk Medicines: http://www.cec.health.nsw.gov.au/patient-safety-programs/medication-safety/high-risk-medicines
- Institute for Safe Medicine Practices USA. List of High Alert Medications http://www.ismp.org/Tools/highAlertMedicationLists.asp



# HIGH RISK MEDICINES GUIDELINE



Author/s D.Freer RN	Reviewed October 2022
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High risk medicines are those medicines that have a high risk of causing significant patient harm or death when used in error. Although errors may or may not be more common than with other medicines, the consequences of errors with these medicines can be more devastating.

### Independent Double Checking is required for all High-Risk Medicines

Α	Anti-infectives	Amphotericin, Vancomycin, and aminoglycosides (gentamicin, tobramycin, amikacin)
Ар	Psychotropics	Clozapine, Lithium, and depot injections
P	Potassium and concentrated electrolytes	Injectable electrolyte preparations. For example, potassium chloride, magnesium sulphate, and potassium dehydrogenate phosphate.
ı	Insulin	All insulins
N	Narcotics and sedatives	All opioids and sedatives including benzodiazepines
С	Chemotherapy agents	All Cytotoxics and chemotherapy – including oral medications
Н	Heparin and other anticoagulants	Heparins and all anticoagulants, including the New Oral Anticoagulants such as Rivaroxaban and Apixaban
E	Epidural and intrathecal agents	All medicines administered via the epidural/intrathecal route
Ne	Neuromuscular blocking agents	All neuromuscular blocking drugs (paralysing agents). For example, Suxamethonium, rocuronium, vecuronium.

### References

Government of South Australia - SA Health. (2022). High risk medicines [online]. Available at: https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/clinical+resources/clinical+programs+and+practice+guidelines/medicines+and+drugs/high+risk+medicines/high+risk+medicines [Accessed 12 Oct 2022].

Institute for Safe Medication Practices (ISMP) (2018). ISMP List of High-Alert Medications in Acute Care Settings.



Cirical Covernance	Partnering with Consumers	Preventing and Controlling Healthcare Associated Infections	Medication Balaty	Conspensive Cane	Communicating for Salisty	Blood Managament	Recognising and Responding to Acate Deterioration
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Page 1 of 1

### Version

Review date	Content changes	Author	Approved by
October 2018	Major review including addition of midwifery program:	Carolyn Field,	Teaching &
		Naomi Rooney,	Learning group
		Angela Brown	October 2018
May 2019	Addition of:	Carolyn Field	PD – BN program
	<ul> <li>Blood products within ELA 3 – nursing</li> </ul>		(ELA) May 2019
	High Risk Anti – infectives within ELA 4 - nursing		
March 2023	Major review and update to align with new accredited	Dr Colin Ireland	Document
	program prescribed structure	Dr Lyn Gum	approved by the T
	Removal of references to Bachelor of Midwifery program	AsProf Lemuel	& L Quality Group
	specific medication scope of practice	Pelentsov	April 2023.
	Note: at time of approval all links and information were		
	accurate and working.		
August 2023	Minor updates:	Dr Colin Ireland	AsProf Lemuel
	<ul> <li>Inclusion of Paediatric medications to NURS 2033</li> </ul>		Pelentsov
	<ul> <li>Inclusion of rectal medications from NURS 2033</li> </ul>		