

## **Medicines Management**

An overview for nursing





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This publication is due for review in January 2022. To provide feedback on its contents or on your experience of using the publication, please email **publications.feedback@rcn.org.uk** 

### **Publication**

This is an RCN practice guidance. Practice guidance are evidence-based consensus documents, used to guide decisions about appropriate care of an individual, family or population in a specific context.

#### Description

This publication provides an overview to direct nurses to the most appropriate information to support specific needs. It can be used by education and learning facilitators in practice to support robust training and competence development in medicines management.

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### Background and context

Whether or not you are a prescriber, medicines management and the administration of medicines is a key part of the nurse's role.

Following the announcement of the withdrawal of the Nursing and Midwifery Council (NMC) *Standards for Medicines Management* (2007), the Royal College of Nursing (RCN) has been working closely with the NMC and other organisations, including the Royal Pharmaceutical Society (RPS) and other colleges, to review currently available documents and we have developed new multi-professional guidelines.

A web resource has been developed to provide guidance and clinical support for nurses and other health care professionals on all medicines matters including prescribing. This is available at: rcn.org. uk/clinical-topics/medicines-management. It has an extensive professional resources section, which looks at new and existing guidance to support nursing staff in a variety of settings as well as the wider health care team.

This publication provides an overview to direct nurses to the most appropriate information to support specific needs and it can be used by education and learning facilitators in practice to support robust training and competence development in medicines management.

### Who is the resource for?

This resource is intended for any registered nurse working with medicines as part of their role. The principles of medicines management however, apply across all health care settings and for non-registered staff.

The RCN website provides information and resources to support nurses and other health care practitioners in their medicines management. This includes the administration of medicines, a joint publication between the RCN and RPS, safe and secure handling of medicines, along with details of other RCN, RPS, NICE and NMC publications. Further details can be found at: rcn.org.uk/clinical-topics/medicines-management

### What is medicines management?

Medicines management, also referred to as medicines optimisation, has been defined by the Medicines and Healthcare Products Regulatory Agency 2004 as:

"The clinical, cost effective and safe use of medicines to ensure patients get the maximum benefit from the medicines they need, while at the same time minimising potential harm."

This is reiterated by the Department of Health, Northern Ireland, which state that:

"The goal of safe and effective medicines management is to optimise the benefits that treatment offers and attain the best outcome for each patient."

health-ni.gov.uk/articles/medicinesmanagement Effective medicines management places the patient as the primary focus, therefore delivering better targeted care with better informed individuals.

Medicines management seeks to address medicines-related problems and optimise the use of medicines by providing advice on prescribing, medication monitoring, management of repeat prescribing systems and education and training on prescribing and the use of medicines. Further information is available at: nice.org.uk/
Guidance/Service-delivery--organisation-and-staffing/Medicines-management/
Medicines-management--general-and-other

# The right medicine for the right patient at the right time

Activities which promote safe and effective medicines management occur at each stage of the medicines journey and aim to improve outcomes for the patient. The stages of the journey include:

Stages	Definition
Manufacturing and marketing	Ensuring that medicines are manufactured legitimately and safely, and that advertising complies with ABPI standards.
Procurement	Ensuring medicines are purchased from a legitimate source.
Selection	Making a choice about which medicines to use.
Prescribing	Ensuring legal processes are adhered to for medicines particularly prescription only medicines.
Dispensing	Ensuring that medicines are dispensed correctly.
Sale or supply	Medicines that are available over the counter either as over the counter medicines or in pharmacies, pharmacy only medicines. The supply of medicines is medicines that are supplied to a patient in a pre-dispensed form, for example over labelled medicines, and are given to the patient directly by the clinician.
Patient use	How patients engage in medicine management eg, self-administration and adherence.
Disposal	Safe disposal of medicines that have not been used or have been partially used.

# Becoming an independent prescriber

Nurses, AHPs and other non-medical clinicians (as stipulated in legislation) can complete additional education and training to become a non-medical prescriber. The NMC has provided guidance on the standard for prescribing programmes including the entry requirements and supervisory requirements which is available at: nmc.org.uk/globalassets/sitedocuments/education-standards/programme-standards-prescribing.pdf

Part 3 NMC. Standards for prescribing programmes. Part 3 of realising professionalism: Standards for education and training. Further information can be found at: rcn.org.uk/clinical-topics/medicines-management/professional-resources

# Competencies and maintaining competence

The NMC requires nurses to work within their scope of practice and ensure they are up to date with relevant CPD. Revalidation is an essential requirement for nurses and reflections should include medicines management and prescribing, especially if you are a prescriber. Further details are available at: nmc.org.uk/standards/code

The RCN administration of medicines guidance advises the assessment and demonstration of competence prior to administering medicines. Assessment of competence in medicines administration should be assessed ideally by another registered nurse but failing that another registered health care practitioner who themselves are competent in medicines administration. The assessment should be carried out in the context of nursing practice and should draw upon the associated professional values.

Please note - the assessment of competence in medicines administration can only be carried out by a manager or colleague if they are a registered health care professional. Non-registered care staff simply administer or consult with the registered health care professionals if they need any clarification, therefore they cannot assess a registrant who has the autonomy to make decisions such as whether to omit a medication or follow a titration guidance.

The RPS has developed a competency framework which provides a framework for all prescribers to demonstrate and maintenance competence, this is available at: rpharms.com/resources/frameworks/prescribers-competency-framework

### Specialist prescribing

As a registrant working in a specialty, it is your responsibility to ensure that you have the skills and competence to work within that role. You must also demonstrate a good understanding

of the medications that you are prescribing, including side effects, and the possible interactions with other medications that the patient is taking.

### Delegation

Registrants are accountable for their decision to delegate tasks and duties to other people. If a registrant delegates a task to a non-registrant, they must ensure that they have the appropriate skills and competence. Non-registrants should not accept a delegated task if they are not competent to carry it out.

For example, a HCSW or carer can refuse to give a patient their medicines if they have not been trained and assessed as competent to carry out that task. Registered nurses have a duty of care and a legal liability with regard to the patient. If they have delegated an activity they must ensure that it has been appropriately delegated.

For further advice and guidance on the responsibilities of delegation see: rcn.org.uk/professional-development/accountability-and-delegation

## Unregistered staff and social care

See the RCN position in relation to the role of nursing associates and health care support workers and vaccine administration at: rcn.org. uk/professional-development/publications/pub-007565 and rcn.org.uk/professional-development/publications/pub-007441

These resources have been developed specifically for vaccine administration. The legislation supporting this however, would apply to the administration of other prescription only medicines (POMs) by unregistered staff and therefore may be useful in other contexts.

### Administration

The administration of medicines in a health care setting must be done in accordance with a prescription, Patient Specific Direction, Patient Group Direction or other relevant exemption specified in the Human Medicines Regulations 2012 (Schedules 17 and 19, as amended).

Medicines that are not prescription only medicines may be administered according to locally written and agreed policies or a homely remedy protocol. This needs to be supported by organisational policy as it may vary depending on the area that you work in. Further information is available at: sps.nhs.uk/articles/rmocguidance-homely-remedies

The different legal mechanisms that are used for the prescribing, supply and administration of medicines are described in the publication *Medicines Matters*, available at: sps.nhs.uk/articles/medicines-mattersa-guide-to-mechanisms-for-the-prescribing-supply-and-administration-of-medicines-in-england

The majority of medicines can be administered by a single health care professional. Although there are no defined requirements it is considered good practice, with certain higher risk medicines, for there to be a second checker; for example, intravenous medicines and medicines that require a complex drug calculation.

Organisational policy should define who can administer medicines and when a second checker is required and who can be a second checker. It should also consider that there may be situations where a second checker is not available and that the professional administering the medicines may need to second check themselves, following a defined process. This should be risk assessed and audited to ensure compliance with policy and to ensure safe practice.

A nurse administering a medicine must have an overall understanding of the medicine being administered and seek advice if necessary from a prescriber or a pharmacist.

### Prescribing and administration

It is preferable for the actions of prescribing, dispensing/supply and administration to be separated and performed by different health care professionals. Where clinical circumstances make it necessary and in the interests of the

patient, the same health care professional can be responsible for the prescribing and supply/ administration of medicines. Where this occurs, processes should be in place to limit errors along with an audit trail and clinical documentation.

### **Transcribing**

Transcribing can be defined as the act of making an exact copy, usually in writing. Transcribing is the copying of previously prescribed medicines details to enable their administration.

Organisational policies and procedures for transcribing must be underpinned by risk assessment. Such policies are clear about who can transcribe, when it can be used, and the difference between transcribing and prescribing. Transcribing should not be confused with prescribing or badged as transcribing when in fact it is prescribing. Transcribing can only be used to make an exact copy of medicines that have already been prescribed, for example, patients own medicines that have been prescribed and dispensed by a pharmacy can be transcribed onto a Medicines Administration Record (MAR) chart so their administration can be recorded by the health care professional administering them.

In clinical circumstances where transcribing occurs it must be underpinned by training, risk assessment, an audit trail, and have processes in place to limit errors. Organisational safeguards should be in place to ensure that transcribed information is not inadvertently used as a prescription. Transcribing cannot include any changes to the medication, for example the timing of, or titration of dose, as this becomes prescribing.

For further information, please see the guidance on the administration of medicines in health care, available at: rcn.org.uk/clinical-topics/medicines-management/professional-resources

Local policies that support both administration and transcribing should also be referred to.

# Nursing associates and medicines management

Nursing associates need to work to the NMC Code which is available at: nmc.org.uk/standards/code. They need to be trained and competent to administer medicines.

Please see links to both the RCN and NMC guidance on delegation: rcn.org.uk/professional-development/accountability-and-delegation and nmc.org.uk/globalassets/sitedocuments/nmc-publications/delegation-and-accountability-supplementary-information-to-the-nmc-code.pdf

Nursing associates are not able to operate under a Patient Group Direction, they will need a Patient Specific Direction or a signed medication chart in order to administer medicine. See guidance from the specialist pharmacy services at: sps.nhs.uk/articles/can-nursing-associates-and-physician-associates-operate-under-a-patient-group-direction

The NMC standards of proficiency for nursing associates advises that they should:

- understand the principles of safe and effective administration and optimisation of medicines in accordance with local and national policies
- demonstrate the ability to recognise the effects of medicines, allergies, drug sensitivity, side effects, contraindications and adverse reactions
- recognise the different ways by which medicines can be prescribed.

More information is available at: nmc.org.uk/ standards/standards-for-nursing-associates/ standards-of-proficiency-for-nursing-associates

### Summary of available guidance

Following the withdrawal of the NMC Medicines Management Standards there are numerous resources on the RCN Medicines Management web area at: rcn.org.uk/clinical-topics/ medicines-management

### Co-produced guidance

• Professional Guidance on the Administration of Medicines in Healthcare Settings (January 2019) covers the administration of medicines, verbal orders, transcribing and covert administration. This professional guidance has been co-produced by the RPS and RCN and provides principles-based guidance to ensure the safe administration of medicines by health care professionals. It is available at: rpharms.com

## **Guidance endorsed by the RCN**

Safe and Secure Handling of Medicines (SSHM) (December 2018) details the four core governance principles that underpin a framework for the safe and secure handling of medicines and can be used to develop working practices, policies and procedures.

**Principle 1:** Establish assurance arrangements – say what we do and why we do it.

**Principle 2:** Ensure capacity and capability – train people and ensure they have the necessary competencies and resources.

**Principle 3:** Seek assurance – do what we say and prove it.

**Principle 4:** Continually improve – improve what we do.

The guidance is available at: rpharms.com/ recognition/setting-professional-standards/ safe-and-secure-handling-of-medicines

Polypharmacy. Getting our Medicines Right
has been endorsed by the RCN and provides
a summary of the scale and complexity of the
issue of polypharmacy. It outlines how health
care professionals, patients and carers can
find solutions when polypharmacy causes
problems for patients and points to useful
resources that can help.

This guidance is available at: rpharms.com/recognition/setting-professional-standards/polypharmacy-getting-our-medicines-right

## Royal College of Nursing guidance

- RCN advice guide for non-medical prescribers (2018). This guide provides information on non-medical prescribing including types of nurse prescriber, keeping stocks of medication and the RCN Indemnity scheme. It also provides a list of further useful resources and is available at: rcn.org.uk/get-help/rcn-advice/non-medical-prescribers
- Medicines management subject guide link to RCN medicines management page and BNF and BNF for children, available at: rcn.org.uk/library/subject-guides/ medicines-management
- Children and young people: Medicines management subject guide, available at: rcn. org.uk/library/subject-guides/childrenand-young-people-medicines-management

Please see the RCN Immunisation page which has advice on immunisation clinics, the role of nursing associates and health care support workers administering vaccines. Available at: rcn.org.uk/clinical-topics/public-health/immunisation

Royal Pharmaceutical Society guidance

- Practical guide for independent prescribers (2018). This guidance has been endorsed by the RCN.
- Medicines optimisation hub (2016).
- A competency framework for all prescribers (2016).
- Making the most of your medicines.
- Medicines Optimisation.
- Professional Guidance for the Procurement and Supply of Specials.
- Prescribing Specials Guidance for the prescribers of Specials.

RPS guidance is available at: rpharms.com

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