



**Australian Government**

# **Assessment Requirements for HLTAMED003 Administer medications**

**Release: 1**

# Assessment Requirements for HLTAMED003 Administer medications

## Modification History

Not applicable.

## Performance Evidence

Evidence of the ability to complete tasks outlined in elements and performance criteria of this unit in the context of the job role, and:

- safely administer medication to five different Aboriginal and/or Torres Strait Islander clients including:
  - babies
  - children
  - adults
  - the elderly
- for each client check medication orders and instructions, identify issues to be referred to an authorised practitioner and, across the five clients collectively, query:
  - contraindications for use of medications
  - potential drug interactions
  - adverse drug reactions
- across the five clients collectively, administer medication by each of the following routes and methods on three occasions (51 administrations in total, noting that not all types of medications must be administered to all types of clients):
  - oral
  - sublingual/buccal
  - eye drops
  - ear drops
  - nasal medications
  - dry powder inhaler
  - metered dose/spacer inhaler
  - nebuliser
  - oxygen therapy
  - topical medication
  - transdermal medication
  - vaginal medication
  - rectal medication
  - subcutaneous injection
  - intramuscular injection
  - intravenous injection

- Z-track injection
- instruct and monitor a further two clients to self-administer medication, each by different routes or methods
- for each client interaction:
  - observe and apply the Rights of Medication Administration
  - document the administration of medication in client records
- according to actual client interactions or case studies:
  - recognise two adverse effects from medications
  - provide response
  - accurately record details of the event in client records.

## Knowledge Evidence

Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit:

- local state or territory, and federal legal requirements, and associated organisational policies and procedures for:
  - access to medications by authorised personnel
  - obtaining informed consent
  - infection control
  - disposing of medical waste
- legal responsibilities and boundaries of medicines authority applicable in the local state or territory for:
  - Aboriginal and/or Torres Strait Islander health practitioners in general, and how scope of practice impacts
  - own job role and scope of practice
  - other authorised primary health care team members
- sources of information used to identify required details for medication administration:
  - medication orders and care protocols and types used by primary health care organisations including Standard Treatment Manuals (STM)
  - medicines books produced for Aboriginal and/or Torres Strait Islander health practitioners
  - current authoritative medications publications used by health practitioners:
    - how to access
    - purpose, format and inclusions
    - how to use to identify details about medications including what they are used for, how they work, contraindications, common side effects and adverse drug reactions, drug interactions, doses and routes of administration
- documents used for client medication management, and their purpose, format, inclusions and secure storage requirements:
  - medication records
  - medication charts

- how to use medication management documents and technology to:
  - identify client allergies and adverse drug reactions (ADR)
  - find instructions for client medications, including dose, route of administration, frequency and time
  - record medications taken or refused by clients
  - record adverse effects/events
- main reasons for errors in the use of medications management documents, potential impacts and reporting requirements
- common terms and abbreviations used for medications and dosages
- the Rights ('Rs') of Medication Administration, what each means and when each is used during the medications preparation and administration process
- key aspects of medication groups and categories, and their general physiological effect on major body systems and associated organs:
  - cardiovascular system including heart, arteries and veins
  - respiratory system including lungs, nose, mouth and throat
  - senses including sight, hearing, smell, touch, taste and equilibrium
  - skin and integumentary system including skin layers, hair and nails
  - digestive and gastro-intestinal system including stomach, intestines and bowel
  - nervous system including brain and nerves
  - circulatory system including arteries and veins
  - genitourinary system including male and female genital and reproductive systems
  - endocrine system including glands and hormones
  - musculoskeletal system including skull, skeleton, muscles and body tissue
- commonly used prescribed and over the counter medications:
  - indications
  - contraindications
  - potential drug interactions
  - purpose and therapeutic effects
  - consequences of incorrect use
  - consequences of administering via incorrect route
  - common side effects
  - potential adverse effects and events including common allergic and anaphylactic reactions
  - storage requirements
  - handling requirements and disposal methods
- differences between generic and trade names for medication
- types of locally available traditional bush medications and their uses, benefits, side effects and interaction with other medications
- complementary roles of traditional and bush healers
- special considerations for use of medications:

- complicating factors of chronic illness, including those that relate to renal and liver impairment and the impacts on the efficacy of medications
- ways of administering medications to babies, children, and the elderly
- different types of infection control precautions and when these would be used for the administration of medications via different routes and methods:
  - universal
  - standard
  - sterile environment procedures
- how to safely handle and dispose of sharps
- presenting symptoms and signs that may impact on medication administration:
  - bruising, swelling, cuts and abrasions
  - appearance of eyes, ears, mouth and gums
  - blood pressure, respirations and temperature
  - emotional and mental state
- techniques used to prepare and administer medications for adults and children using the following routes and methods:
  - oral medication, including use of dose administration aids (DAAs), counting tablets, dividing and cutting tablets, preparing syrups using graduated measure and syringes
  - sublingual/buccal, including usage of unopened and dated medication
  - eye and ear ointments and drops
  - nasal medications including sprays and ointments
  - dry powder, metered dose and spacer inhalers, including operation of accuhalers and aerolisers
  - nebulisers and oxygen therapy, including selection of appropriate equipment including oxygen cylinder and air pump
  - topical and transdermal medications, including prevention of self-absorption
  - vaginal and rectal medication, including use of lubricant and client positioning
  - subcutaneous injections, including preparation of syringe and angle degree for insertion
  - intramuscular and Z-track injections, including correct injection sites for babies, children and adults, and preparation of syringe and angle degree for insertion
  - intravenous injections, including required equipment, inspection of cannula site, and follow-up observation
- for anaphylaxis:
  - signs of moderate and severe anaphylaxis
  - how to manage.

## Assessment Conditions

Unless current state or territory medicines legislation prevents practice in the workplace, skills must be demonstrated in a health service workplace within a multidisciplinary primary health care team, and under the supervision of an authorised member of the primary health care team.

Where practice in the workplace is allowed under current state or territory medicines legislation:

- evidence of workplace performance must be gathered:
  - during on-the-job assessments in the workplace under live conditions while interacting with Aboriginal and/or Torres Strait Islander people, or
  - during off-the-job assessments in the workplace, not under live conditions, using simulated activities while interacting with Aboriginal and/or Torres Strait Islander people
- evidence of workplace performance can be gathered and reported through third party report processes. (Refer to the Companion Volume Implementation Guide for information on third party reporting.)
- evidence of workplace performance can be supplemented by assessments in a simulated workplace environment using simulated activities, scenarios or case studies only when:
  - the full range of situations covered by the unit cannot be provided in the individual's workplace, or
  - situations covered by the unit occur only rarely in the individual's workplace.

Only where current state or territory medicines legislation prevents practice in the workplace, can workplace assessments be fully replaced by simulated activities in a simulated environment.

Assessment must ensure the use of:

- medications which are delivered by the following routes and methods, and equipment used to administer (placebo medications can be used for any simulated activities):
  - oral
  - sublingual/buccal
  - eye drops
  - nasal medications
  - dry powder inhalers
  - metered dose/spacer inhalers
  - nebulisers
  - oxygen therapy
  - topical medication
  - transdermal medication
  - vaginal medication
  - rectal medication
  - subcutaneous injection
  - intramuscular injection

- intravenous injection
- Z-track injection
- clinical waste and sharps disposal bins
- client records:
  - medication records
  - medication charts
- medications standing orders and care protocols used by the organisation, which can include Standard Treatment Manuals
- current authoritative medications publications used by health practitioners
- organisational policies and procedures for safely administering medications.

Assessors must satisfy the Standards for Registered Training Organisations requirements for assessors, and:

- be an Aboriginal and/or Torres Strait Islander person who has applied the skills and knowledge covered in this unit of competency through experience working as an Aboriginal and/or Torres Strait Islander health practitioner, or
- be a registered health practitioner with experience relevant to this unit of competency and be accompanied by, or have assessments validated by, an Aboriginal and/or Torres Strait Islander person.

## Links

Companion Volume implementation guides are found in VETNet -

<https://vetnet.gov.au/Pages/TrainingDocs.aspx?q=ced1390f-48d9-4ab0-bd50-b015e5485705>