



Australian Government

Department of Education, Employment and Workplace Relations

HLTEN507C Administer and monitor medications in the work environment

Release: 1

HLTEN507C Administer and monitor medications in the work environment

Modification History

HLT07 Version 4	HLT07 Version 5	Comments
HLTEN507B Administer and monitor medications in the work environment	HLTEN507C Administer and monitor medications in the work environment	ISC upgrade changes to remove references to old OHS legislation and replace with references to new WHS legislation. No change to competency outcome.

Unit Descriptor

Descriptor

This unit of competency describes the skills and knowledge required of Enrolled/Division 2 nurses to administer and monitor medications and evaluate their effectiveness for clients within a health environment

Application of the Unit

Application

The knowledge and skills described in this competency unit are to be applied within jurisdictional nursing and midwifery regulatory authority legislative requirements

Enrolled/Division 2 nursing work is to be carried out in consultation/collaboration with registered nurses and under direct or indirect supervisory arrangements in line with jurisdictional regulatory requirements

Licensing/Regulatory Information

Not Applicable

Pre-Requisites

Pre-requisite units

This unit must be assessed after successful achievement of pre-requisites:

- HLTAP501C Analyse health information
- HLTEN509B Apply legal and ethical parameters to nursing practice
- HLTEN502B Apply effective communication skills in nursing practice

Employability Skills Information

Employability Skills

This unit contains Employability Skills

Elements and Performance Criteria Pre-Content

Elements define the essential outcomes of a unit of competency.

The Performance Criteria specify the level of performance required to demonstrate achievement of the Element.

Elements and Performance Criteria

ELEMENT

PERFORMANCE CRITERIA

ELEMENT

1. Minimise *potential risk* to safe administration of medications

PERFORMANCE CRITERIA

- 1.1 Check client medication chart in relation to timing and route of medication to be administered
- 1.2 Raise issues related to drug and poison administration with appropriate personnel
- 1.3 Check for and identify common contraindications and adverse reactions of prescribed medications and refer to registered nurse
- 1.4 Confirm client identity and check for any known allergies
- 1.5 Refer to drugs and poisons schedules and classifications as determined by law
- 1.6 Ensure infection control methods are applied correctly
- 1.7 Identify pharmacology and substance incompatibilities in relation to specific situations involving medication administration
- 1.8 Check expiry dates of medication prior to administration

ELEMENT**PERFORMANCE CRITERIA**

2. Prepare for medication administration within scope of Enrolled/Division 2 nurse

- 2.1 Explain the process of medication administration to the client and ensure their readiness
- 2.2 Position the client appropriately prior to administration of medication
- 2.3 Correctly identify administration route for each medication to be administered, using appropriate terminology
- 2.4 Consider the effect of commonly used medications on the body prior to medication administration
- 2.5 Accurately calculate dosages for administration of drugs
- 2.6 Prepare medications in accordance with legislative requirements and organisation guidelines
- 2.7 Apply medication administration techniques and precautions specific to each client situation and as per medication orders
- 2.8 Ensure medication is stored and disposed of in accordance with medical instructions and organisation policy and procedures

3. Administer medications within legal parameters

- 3.1 Administer medications within scope of own role in line with the jurisdictional legislative requirements and organisation policy
- 3.2 Store medications in a safe manner according to legislative requirements and organisation policy
- 3.3 Administer PRN medications within legislative requirements and organisation policy
- 3.4 Apply quality management and risk assessment practices relating to administration of medication
- 3.5 Provide client information and education relating to medication requirements

ELEMENT**PERFORMANCE CRITERIA****4. Monitor and evaluate client response to administered medication**

- 4.1 Record *administration of medications* in accordance with relevant policy and procedures
- 4.2 Contribute to information provided to clients and carers on medication administration (including possible side effects) in consultation/collaboration with the registered nurse
- 4.3 Evaluate client understanding of information provided
- 4.4 Recognise acute and delayed adverse reactions to medications and act upon within role responsibility
- 4.5 Implement emergency actions to address acute and delayed adverse reactions within role responsibility
- 4.6 Record and report response to emergency strategies, where appropriate
- 4.7 Assess and manage a client experiencing pain using appropriate medication and non-medication therapies
- 4.8 Record and report effectiveness of pain relieving medication

5. Monitor peripheral intravenous therapy

- 5.1 Identify the purpose and function of intravenous therapy being administered to a client
- 5.2 Check for common fluid and electrolyte imbalances and record and report
- 5.3 Calculate intravenous therapy rates
- 5.4 Recognise and report the risks and complications associated with intravenous therapy
- 5.5 Document observations and monitor peripheral intravenous therapy
- 5.6 Provide nursing care for client with fluid and/or electrolyte imbalance
- 5.7 Monitor action of *drugs commonly used in fluid and/or electrolyte imbalance* through client responses and record and report
- 5.8 Remove intravenous cannula according to organisation policy and procedure

ELEMENT**PERFORMANCE CRITERIA****6. Develop strategies for pain management**

- 6.1 Observe and question client to identify signs of pain and/or discomfort
- 6.2 Clarify the location and nature of pain, taking into account factors which may influence a client's perception of pain
- 6.3 Use the pain assessment scale to ensure consistency of interpretation
- 6.4 Undertake comprehensive observations as required to assess pain experienced by client
- 6.5 Identify and apply a range of medication and complementary strategies which may assist in alleviation of pain and discomfort in consultation/collaboration with registered nurse
- 6.6 Monitor and evaluate the effectiveness of using these strategies in consultation/collaboration with registered nurse
- 6.7 Record observations and evaluation of pain management strategies in consultation/ collaboration with registered nurse

Required Skills and Knowledge**REQUIRED SKILLS AND KNOWLEDGE**

This describes the essential skills and knowledge and their level required for this unit.

Essential knowledge:

The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

This includes knowledge of:

- An awareness of the role of complementary therapies
- An awareness of traditional medicine in the context of health of Aboriginal and Torres Strait Islander people
- Application of guidelines to individual needs of clients(ie. therapeutic interventions,

REQUIRED SKILLS AND KNOWLEDGE

- hygiene, dignity, esteem, physical, cultural and cognitive restrictions)
- Documentation associated with medication administration
- Ethical guidelines including confidentiality, duty of care and public safety
- Factors influencing medication actions
- Legal requirements for practice parameters of Enrolled/Division 2 nurse relating to the administration of medications, including legal requirements of each route of administration
- Major medication groups
- Methods of storage, handling and usage of medications
- Organisation policies and procedures, guidelines and protocols, including workplace health and safety policies to ensure safe practice eg management of sharps
- Relevant medical/medication terminology and approved medication abbreviations
- Relevant pathophysiology
- Role of the health care team in the administration of medications
- State/territory legislative requirements relating to medication administration
- Systems of medication delivery and medication administration devices (eg. pumps and syringe drivers) within the scope of own role
- Scheduling of medications, including:
 - Schedule 2
 - Schedule 3
 - Schedule 4
 - Schedule 8
- Substance incompatibilities, including:
 - anaphylactic reactions
 - adverse reactions
 - contraindications
 - precautions
 - side effects
- An understanding of the pharmacology of medications including:
 - pharmacodynamics
 - pharmacokinetics
 - pharmacotherapeutics
 - toxicology

continued ...

Essential knowledge (contd):

- Own role in medical emergency
- Principles of peripheral intravenous therapy.
- People's perception of pain and principles and strategies to alleviate pain

REQUIRED SKILLS AND KNOWLEDGE

Essential skills:

It is critical that the candidate demonstrate the ability to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

This includes the ability to:

- Apply professional standards of practice:
 - ANMC code of conduct
 - ANMC code of ethics
 - ANMC national Enrolled/Division 2 nurse competency standards
 - state/territory Nurse Regulatory Nurses Act
 - state/territory Nursing and Midwifery Regulatory Authority standards of practice
 - state/Territory Drugs and Poisons Act
 - scope of nursing practice decision making framework
- Apply infection control principles - hand washing, handling of medications, universal precautions
- Calculate volumes for administration of medications
- Demonstrate preparation, administration and recording of medication/s via all routes as per State and Territory Legislation
- Demonstrate professional conduct, skills and knowledge
- Explain and demonstrate emergency management for a client experiencing an adverse medication reaction
- Observe and monitor peripheral intravenous therapy
- Use interpersonal skills including working with others, using sensitivity when dealing with people and relating to persons from differing cultural, social and religious backgrounds
- Use formulae for drug calculation for:
 - adult clients
 - older clients
 - paediatric clients
 - intravenous therapy
- Use language, literacy and numeracy competence required for:
 - comparison of metric measurements
 - drug calculation, administration and documentation
 - estimation
 - SI abbreviations
- Use oral communication skills (language competence) required to fulfil job roles as specified by the organisation/service. Oral communication skills include interviewing techniques, asking questions, active listening, asking for clarification, non-judgement

REQUIRED SKILLS AND KNOWLEDGE

attitudes, non-verbal behaviour

Evidence Guide

EVIDENCE GUIDE

The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

Critical aspects for assessment and evidence required to demonstrate this competency unit:

- The individual being assessed must provide evidence of specified essential knowledge as well as skills
- Observation of performance in a work context is essential for assessment of this unit
- Consistency of performance should be demonstrated over the required range of workplace situations and should occur on more than one occasion and be assessed by a registered nurse
- Assessment must include a written calculation test with 100% mastery

Context of and specific resources for assessment:

- Assessment must be undertaken in a simulated clinical laboratory prior to and replicated, where appropriate, in the clinical setting
- This unit is most appropriately assessed in the clinical workplace or in a simulated clinical work environment and under the normal range of clinical environment conditions
- Where, for reasons of safety, access to equipment and resources and space, assessment takes place away from the workplace, simulations should be used to represent workplace conditions as closely as possible

EVIDENCE GUIDE

Method of assessment

Assessment of competency may occur on more than one occasion. Assessment may include but not be limited to:

- Observation in the work place
- Evidence gathered from clinical work environment
- Written assignments/projects
- Case study and scenario as a basis for discussion of issues and strategies to contribute to best practice
- Questioning - verbal and written
- Role play/simulation

Access and equity considerations:

- All workers in the health industry should be aware of access and equity issues in relation to their own area of work
- All workers should develop their ability to work in a culturally diverse environment
- In recognition of particular health issues facing Aboriginal and Torres Strait Islander communities, workers should be aware of cultural, historical and current issues impacting on health of Aboriginal and Torres Strait Islander people
- Assessors and trainers must take into account relevant access and equity issues, in particular relating to factors impacting on health of Aboriginal and/or Torres Strait Islander clients and communities

Range Statement

RANGE STATEMENT

The Range Statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.

RANGE STATEMENT

Health environments may include:

- Residential aged care facility
- Community settings
- Hospitals
- Clinics
- Short and long stay centres
- Clients home

Potential risks may include but is not limited to:

- Client identification
- Allergic reactions
- Immunisation status
- Medication incompatibilities
- Contraindications for drug administration
- Care of sharps
- Intravenous therapy

Medication administration routes include:

- Oral
- Intranasal (including nebulised medications)
- Topical (including transdermal)
- Ocular
- Aural
- Rectal
- Vaginal administration
- Subcutaneous/Intramuscular routes
- Enteral administration [Percutaneous Gastrostomy (PEG) as well as nasogastric tubes]

RANGE STATEMENT

Terminology associated with medications may include:

- Medication
- Administer
- Side effect/adverse reaction/allergic reaction
- Anaphylaxis
- Allergy
- Suspension/mixture/syrup/linctus/lozenge
- Ointment/cream/lotion
- Tincture/emulsion
- Tablet/pill
- Transdermal patch
- Nebuliser/aerosol/volumetric spacer

Legal and regulatory framework include:

- State/territory Nurses Act
- State/Territory Drugs and Poisons Act
- Health (Drugs and Poisons) Regulations
- State/Territory Nurse Regulatory Authority codes and guidelines
- Legal requirements of documentation

Client history may include:

- Pre-existing conditions
- Admission diagnosis
- Allergies
- Current history
- Current medication
- Behavioural characteristics
- Nutritional status
- Hydration status
- Psychological needs
- Psychosocial needs
- Compliance history

RANGE STATEMENT

Reports can be verbal or written, and may include:

- Individual client records
- Pain management plans
- Fluid status management
- Nutritional status management
- Observational documentation
- Medication charts
- Admission and discharge planning
- Referral documentation (allied health team)
- Diagnostic reports/results
- Clinical progress notes
- Hand-over at end of shift
- Resuscitation documentation
- Medication incident reports

Policies and procedures relating to infection control can include:

- Effective hand washing and hand drying techniques
- Handling of medication

Relevant client information and education may include:

- Medication side effects
- Length of treatment
- Drug interactions
- Consequences of non-compliance
- Anatomical positioning for safe drug administration
- Client controlled analgesia

RANGE STATEMENT

Factors influencing medication actions may include:

- Rate of absorption
- Distribution
- Metabolism
- Drug interactions
- Binding to plasma proteins
- Excretion
- Dosage form
- Route of administration
- Improper storage
- Timing of administration
- Client age, height, weight
- Previous history

RANGE STATEMENT

Major medication groups include:

- Anaesthetics
- Antacids
- Antianginals
- Antiarrhythmics
- Antibiotics
- Anticholinergics
- Anticoagulants
- Anticonvulsants
- Antidepressants
- Antidiarrhoeals
- Antiemetics
- Antifungals
- Antihistamines
- Antihypertensives
- Anti-inflammatory
- Antineoplastics
- Antiparkinsonian
- Antipruritic
- Antipsychotics
- antiseptics
- Antiulcer
- Antivirals
- Anxiolytics
- Beta-blockers
- Bronchodilators
- Contraceptives
- Corticosteroids
- Diuretics
- Electrolyte solutions
- Hormones
- Hypnotics/sedatives
- Laxatives/aperients
- Narcotic analgesia
- Neuroleptics
- Ophthalmic, otic and nasal medications
- Hypoglycaemics
- Analgesia
- Vitamins

RANGE STATEMENT

Methods of storage, handling and usage of medications may include:

- Dry/moist
- Refrigeration
- Away from light/heat
- Separate storage of external use medication from internal use medication
- Locked cupboard/trolley
- Narcotics - locked, attached to wall
- Register for drugs of addiction
- Routine checking of narcotic drugs in storage
- Pharmacist responsibility for containers and labels
- Expiry dates

Administration of oral medications and associated terminology may include:

- Legible medication order
- Preparation of medication by person administering
- 6 "Rights" of administration
- Special precautions
- Medication checking process
- Documentation of drug administration

Administration of subcutaneous or intramuscular injection may include:

- Needle/syringe size
- Angle for insertion
- Cleansing and insertion
- Vastus lateralis muscle
- Gluteus maximus muscle
- Ventro-gluteal muscle
- Deltoid muscle
- Z- track

Common fluid and electrolyte imbalances may include:

- Water deficit/excess syndromes
- Fluid volume imbalance
- Electrolyte deficit/excess

RANGE STATEMENT

Calculation of medication dosages must include:

- Calculation formulae
- Use of 1 mL versus 2 mL syringe
- Calculation of oral drug dosages
- Calculations of dosages of liquid medications
- Calculations of dosages of solid medications
- Calculation of dosages of injectable drugs (liquid, solid, unit dosages)
- Flow rate drops per minute
- Flow rate millilitres per hour
- Paediatric dosage calculations (body weight, surface area, age related dose reduction)
- Frail elderly dosage calculations (body weight, surface area and age)

Drugs commonly used for fluid and/or electrolyte imbalance may include:

- Diuretics
- Electrolytes
- Replacement solutions
- Acidifiers/alkalisers

Common terminology associated with fluid and electrolytes may include:

- Ions
- Intracellular/extracellular
- Osmosis/diffusion
- Active transport
- Fluid shift
- Sodium/potassium chloride
- Fluid balance (positive/negative)
- Fluid balance chart
- Over hydration (overload)/under hydration (dehydration)
- Oedema
- Hypertonic/isotonic/hypotonic
- Intravenous therapy
- Calcium/phosphate

Policies and procedures relating to work health and safety (WHS) include:

- Handling of medication
- Appropriate use and disposal of Personal Protective Equipment (PPE)

Unit Sector(s)

Not Applicable