



Standard Operating Procedure

Endorsed (Authorised) Enrolled Nurse Medication Administration

Purpose

To provide policy direction, within a professional framework, that facilitates a consistent, safe and effective approach for medication administration by **authorised** (medication endorsed) enrolled nurses in the ACT, hereafter in this Standard Operating Procedure (SOP) called Endorsed Enrolled Nurses (EENs).

Scope

This SOP pertains to Enrolled Nurses who have completed an approved medication administration education program and who are authorised by the Nursing and Midwifery Board of Australia for medication administration.

Procedures

There are regulations about both the classes (Schedules) of drugs that an EEN is permitted to administer as well as the routes by which a medication is administered.

1. Classes (Schedules) of drugs

EENs, who are authorised, may administer **Schedule 2, 3, 4 and 8** medications via all routes, **except** intravenous, epidural, intraventricular and intrathecal.

Any medication, which requires checking prior to administration, must be checked with a **Registered Nurse or Midwife**.

In accordance with the Drugs of Dependence Act 1989, ENs may check Schedule 8 medications if they have completed a drug-checking course authorised by the Minister for Health.ⁱ

2. Routes of Administration

2.1 EENs, who are authorised, may administer medications via the following routes only:

- oral*
- eye drops/ointments
- ear drops

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- nasal drops and sprays
- inhalations/nebulisers
- sublingual
- intramuscular *
- subcutaneous *
- rectal
- vaginal
- enteral (i.e. through a nasogastric tube or enteral feeding tube)
- dermal/transdermal
- transurethral

* see **Vaccinations**

2.2 Due to the potential risk to patient safety and the higher level of education required to ensure quality management of medications **EENs are prohibited from administering medications or any other additives/ substances by any other routes to those listed above.**ⁱⁱ

2.3 It is **outside of the scope of practice** for EENs to administer fluids or medications via the following devices:

- Central venous catheters
- PICC lines
- Femoral lines
- Implanted devices
- Arterial lines
- Epidural
- Intrathecal (spinal)
- Intraventricular (i.e. into the ventricles of the brain)

2.4 An EEN may care for a client with these devices, but the EEN is not allowed to interact with the devices; that is, ENs or EENs are not authorised to fill burettes for the devices, change bags of solutions, set or reset fluid administration rates through the devices, or disconnect the devices etc.ⁱⁱⁱ

3. Intravenous Therapy

3.1 Under the supervision of a registered nurse, an EEN who has been endorsed by the Board to administer medications, may check, change and titrate intravenous therapy solutions that have not had any medications/substances added^{iv}

3.2 EENs are not authorised to administer any intravenous medications. This includes ready prepared medications supplied by the manufacturer (e.g. Antibiotics, analgesics). Administration of intravenous medications remains the responsibility of a Registered Nurse or Registered Midwife.^{iv}

3.2 The exception to this directive is an EEN who has completed an accredited cannulation course may flush a cannula once only with Normal Saline (an isotonic solution) following the insertion of a peripheral cannula.

4. Definition of IV Fluids with no additives^v

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- Normal Saline 0.9%
- 3% and 1/3rd Dextrose/Saline
- 4% and 1/5th Dextrose/Saline
- 5% Dextrose
- Hartmann's solution (Lactated Ringers)
- 0.45% Normal Saline and 2.5% Dextrose

5. Definition of IV Fluids with additives[®]

- Any restricted S4 & S8 drug
- Potassium, magnesium or iron etc (including premixed preparations)
- Premixed 100ml antibiotic preparations

6. Cytotoxic Drugs

An EEN is not authorised to administer (commence/connect, replace/change, adjust/reset) any IVT with cytotoxic drugs or add cytotoxic drugs to a solution. Additionally, an EEN is not allowed to prime a line or fill a device with IV fluids containing cytotoxic medication.

7. Blood Transfusions and Blood Products

7.1 ENs and EENs may check a blood transfusion with a Registered Nurse (this includes certain blood products). However, they must not be responsible for commencing the transfusion.

7.2 All ENs involved with the administration of blood products must have had the appropriate education and been assessed for competency.

For further information on the Enrolled Nurse role in blood transfusions and blood products see Blood And Fresh Blood Products Administration Policy

7.3 ENs and EENs may not reinfuse patients with blood from any reinfusion device i.e. Stryker drain.

8. Insulin Administration

Enrolled Nurses should only oversee patient self-administration of insulin if the patient has documented approval of self-administration by a medical officer.

An Endorsed Enrolled Nurse may administer subcutaneous insulin following correct checking procedures^v.

9. Paediatric medications

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Due to the size, unique physiology and differences in metabolism of drugs paediatric patients are at particular risk.^{vi} They are three times more likely to experience potentially dangerous medication errors compared to an adult^{vii} and actual and potential adverse drug events have been observed as common within a hospital environment.^{viii}

To reduce the risk of error or drug misuse, all medications that are administered to paediatric patients/clients must be checked/administered by **2** nurses, at **least one of whom is a Registered Nurse or Midwife.**

10. Centre for Newborn Care

EENs working in the Centre for Newborn Care can administer the following medications:

- Pentavite
- Fergon
- Folic Acid
- Paracetamol

All medications must be checked with a Registered Nurse or Midwife prior to administration (*see Paediatric Medications Section).

11. Operating Theatres

Enrolled Nurses may not instil medications such as cytotoxic drugs or antibiotics into any body cavity.

However, an Enrolled Nurse under the direct supervision of a Registered Nurse may perform installation of Normal Saline irrigation. This includes but is not limited to abdominal cavities and bladder irrigations. Topical gels such as Xylocaine may be instilled per urethra prior to cystoscopy examinations under the direct or indirect supervision of a Registered Nurse.^{ix}

12. PRN (when necessary) medications and variable doses

EENs may only administer PRN medications and variable doses:

- in consultation with and under the supervision of a registered nurse or midwife;
- as delegated by a registered nurse or midwife in accordance with the patient's care plan and medication chart.

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13. Vaccinations*

An Enrolled Nurse, who has been authorised by the Board to administer vaccinations, may only administer vaccinations after training in accordance the Australian Standards for Childhood Vaccination, 2001. Standard 13, states "*Vaccines are administered by properly trained individuals who receive ongoing education and training on current vaccination recommendations.*"^x

Those Enrolled Nurses who are eligible to administer vaccinations by virtue of being trained in accordance with the Standards must also comply with the Immunisation Handbook guidelines and procedures when administering vaccinations.

Training must comply with the above standard and be consistent with ACT Health policy and procedures.

Evaluation

Outcome Measures

Appropriate systems are in place to support Endorsed Enrolled Nurses in this enhanced role.

Method

Review of medication errors and near misses reported on RiskMan conducted by PSQU and Clinical Units and reported to Nursing and Midwifery Leaders Forum.

Related Legislation and Policies

Legislation

- Health Practitioner Regulation National Law Act 2009
- Human Rights Act (2004):
- MC (Australian Nursing and Midwifery Council) (2009) Continuing Competency Framework for Nursing and Midwives
- Health Practitioner Regulation National Law (ACT) Act 2010
- Health Professionals Regulation (ACT) 2004
- Medicines, Poisons and Therapeutic Goods Act (ACT) 2008

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Standards

- ACHS EQuIP 4 1 Clinical 1.5.1 & 4 3 Corporate 3.1.1
- Australian Nursing & Midwifery Council
 - Code of Ethics for Nurses
 - Code of Professional Conduct for Nurses
 - National Competency Standards for Registered Nurses, Enrolled Nurses, Nurse Practitioners and Midwives
 - National Decision Making Framework for Nurses and Midwives
- Australian College of Midwives
 - Code of Ethics
 - Code of Practice

Related Policies

- ACT Health Medication Policy 2006
- ACT Health Blood And Fresh Blood Products Administration (2010)
- ACT Health Immunisation Strategy 2007-2010
- Australian Immunisation Handbook, 9th edition
- ACT Health Nursing and Midwifery Continuing Competence Policy
- National Guidelines for Immunisation Education for Registered Nurses & Midwives (2001)

Definition of Terms

Enrolled Nurse

The **Australian Nursing and Midwifery Council** defines an Enrolled Nurse (EN) as:

“The enrolled nurse is an associate to the registered nurse who demonstrates competence in the provision of patient-centred care as specified by the registering authority’s licence to practise, educational preparation and context of care.

Core as opposed to minimum enrolled nursing practice requires the enrolled nurse to work under the direction and supervision of the registered nurse as stipulated by the relevant nurse registering authority. At all times, the enrolled nurse retains responsibility for his/her actions and remains accountable in providing delegated nursing care.”

Scope of practice of a profession

A profession’s scope of practice is the full spectrum of roles, functions, responsibilities, activities and decision-making capacity that individuals within that profession are educated, competent and authorised to perform.

Scope of practice of an individual

The scope of practice of an individual is that which the individual is educated, authorised and competent to perform. The scope of practice of an individual nurse or midwife may be more specifically defined than the scope of practice of their profession. To practise within the full scope of practice of the profession may require individuals to update or increase their knowledge, skills or competence.

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Decisions about both the individual's and the profession's practice can be guided by the use of decision-making tools. When making these decisions, nurses and midwives need to consider their individual and their respective profession's scope of practice.^{xi}

Delegation

Delegation is the act of conferring or transferring authority to perform a specific role, which the delegate is competent to perform.^{xii} EENs undertaking delegated activities in medication management also have a duty of care, which cannot be delegated.^{xiii} A registered nurse or midwife may delegate appropriate patient/client care activities to an EN or EEN. The registered nurse or midwife is responsible for assessing and lawfully delegating these activities in consultation and planning with a staff member who has the required knowledge, skills and competencies to perform the delegated activities.

EENs are individually accountable for their actions related to medication administration. They are also responsible to the person who has delegated the task to them. Delegation should be made in consultation with the EEN and the person delegating the task, taking into consideration the steps outlined in the attached National Decision Making Framework and Guiding Principles for Delegation among nurses and midwives. For any delegation to be appropriate, all of the Guiding Principles must be met.

An EN or EEN has a responsibility to decline a delegation when they believe it is not within their scope of practice or when safety is compromised.

Supervision

In the ACT, under the Health Professionals Regulation 2004, Schedule 3.3 an EN or EEN may not provide a nursing service unless the service is under the immediate supervision of a registered nurse, this supervision may be **direct** or **indirect**.

Supervision standard ^{xiv}

Supervision incorporates the elements of direction, guidance, oversight and co-ordination of activities. Supervision may be direct or indirect.

Direct supervision is provided when the registered nurse or midwife is present, observes, works with and directs the person who is being supervised.

Indirect supervision is provided when the registered nurse, or midwife is not directly present, however, is employed by the organisation and is easily contactable either by phone or in person.

At all times an EN or EEN must work under the direct or indirect supervision of a registered nurse or midwife and it is the responsibility of the employer to ensure that ENs or EENs have access to an appropriately qualified registered nurse, midwife or medical officer at all times.

Endorsed enrolled nurses may not delegate the administration of medications to other enrolled nurses or to other health care workers.

Accountability

The EEN retains responsibility for his/her own actions when administering medications or when providing care to patients/clients. **Accountability cannot be delegated.**

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Accountability means that nurses must be prepared to answer to others, such as health care consumers, the nursing and midwifery regulatory authority, employers and the public for their decisions, actions, behaviours and the responsibilities that are inherent in their roles.^{xv}

Attachments:

Medication Administration by Medication Endorsed Enrolled Nurses¹

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Medication Administration by Medication Endorsed Enrolled Nurses¹

Enrolled Nurses who have completed a Medication Administration Education Program approved by the ACT Nursing and Midwifery Board may administer medications via the following routes:

1. Oral *
2. eye drops/ointments
3. ear drops
4. nasal drops and sprays
5. inhalations/nebulisers
6. sublingual
7. intramuscular*
8. subcutaneous*
9. rectal
10. vaginal
11. enteral (i.e. through a nasogastric tube or enteral feeding tube)
12. dermal/transdermal
13. transurethral

* see ACT Health Immunisation Strategy 2007-2010

Intravenous Therapy

(under supervision of RN)



Witnessing Administration of Schedule 8 Medications

Enrolled Nurses may check schedule 8 medications if they have completed a drug-checking course or are endorsed to administer medications by the ACT Nursing and Midwifery Board ^{1,2}

PRN Medications only in collaboration with and under supervision of an RN

Accountability ENs retain responsibility and accountability for their own actions

Delegation ENs may NOT delegate the administration of medications to other ENs or to other health care workers

¹ ACT Nursing and Midwifery Board: Regulation Policy 5: Medication Administration by ENs

² Authorised by the Minister for Health or authorised by the Board to administer medications

³ For Enrolled Nurses working Aged Care please refer to ACT Nursing and Midwifery Board: Frequently Asked Questions:

References

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- ⁱ ACT Nursing and Midwifery Board (2007) Regulation Policy 5: Medication Administration by Enrolled Nurses
- ⁱⁱ ACT Nursing and Midwifery Board (2007) Regulation Policy 5: Medication Administration by Enrolled Nurses
- ⁱⁱⁱ Queensland Nursing Council, (2006) Setting the Standards: EN Medication Policy Information Sheet No.3: Enrolled Nurse Practice: Intravenous therapy and blood transfusions
- ^{iv} ACTNMB (2007) Regulation Policy 5: Medication Administration by Enrolled Nurses
- ^v Medicines, Poisons and Therapeutic Goods Regulations (2008) Schedule 1: Part 1.6: Col. 3 Authorisation. p.230
- ^{vi} Leonard, Michael S et al. (2006) Risk Reduction for Adverse Drug Events Through Sequential Implementation of Safety Initiatives in a Children’s Hospital, Paediatrics, 118e1124-e1129 (Cited in Nursing Board of Tasmania (2007) Standards of medication Management for Nurses and Midwives).
- ^{vii} Walsh, K E, Kashual R, and Chessare J B, (2005) How to avoid paediatric medication errors: a user’s guide to the literature. Archives of Disease in Childhood 90:698-702. (Cited in Nursing Board of Tasmania (2007) Standards of medication Management for Nurses and Midwives).
- ^{viii} Holdsworth, Mark T et al. (2003) Incidence and Impact of Adverse Drug Events in paediatric inpatients, Archives of Paediatrics & Adolescent Medicine 157:60-65. (Cited in Nursing Board of Tasmania (2007) Standards of medication Management for Nurses and Midwives).
- ^{ix} Calvary Health Care, ACT (2007) Medication Administration Endorsed Enrolled Nurse (EEN)
- ^x Immunise Australia Program (2001) National Guidelines for Immunisation Education for Registered Nurses & Midwives
- ^{xi} ANMC (2007) National Decision Making Framework
- ^{xii} ANMC (2007) National Decision Making Framework
- ^{xiii} Nursing Board of Tasmania (2007) Standards of Medication Management for Nurses and Midwives
- ^{xiv} Health Professionals Regulations 2004 Section 134 (standards statement)
- ^{xv} ANMC (2007) National Decision Making Framework

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