

Faculty of Health Sciences' Guidelines for student podiatrists on the management of medicines

Scope and Purpose

This Guideline summarises the Faculty of Health Science's advice regarding medicines management in the United Kingdom at the time of writing (December 2014) and takes account of legal and professional guidance available at that time.

All return to practice students, student nurses, student midwives and allied healthcare professional (AHP) occupational therapy students, physiotherapy students and podiatry students must observe and/or participate in the administration of medicines during their programme of education.

Students are accountable to society, their employer, the professional regulatory body (the Nursing and Midwifery Council (NMC) or the Health and Care Professions Council (HCPC)), and ultimately to individuals.

The supervising practitioner is a registrant of the regulatory bodies NMC or HCPC.

The student and the supervising practitioner should both understand how these guidelines and local medicine administration policies apply to each area of practice.

Regulatory body standards must be adhered to at all times. Professional Standards ALWAYS take precedence over these guidelines.

In practice placements the 'employer' is the organisation hosting the placement and with whom the student has an honorary contract. The student's roles and responsibilities are determined in local policy published by the employer; local policies ALWAYS take precedence over these guidelines.

The student must act within the scope of practice of the profession for which they are training (not the supervisor's scope of practice).

Local policy should not contravene regulatory standards and should comply with legal frameworks such as the Medicines Act (1968) and Mental Capacity Act (2005).

Statement of Intent

The Faculty of Health Sciences confirms its commitment to partnership working with placement providers. The aim of the guideline is to ensure that professional regulations are upheld and that adverse events are avoided during learning experiences; the guideline does not supersede or replace local policies.

Stakeholder Involvement

Practice partners will be invited to contribute and comment on all versions of this guidance. The guidance has been developed by a multi-disciplinary group, which includes professionals involved in day-to-day delivery of health-care.

Guidance about supervision

Students must never administer or supply medicinal products without appropriate supervision.

Appropriate supervision requires that:

The supervising practitioner must be attentive and cognisant of the activities & tasks the student is undertaking and work sufficiently closely with them to be monitored. This is in accordance HCPC (2012) requirements and Faculty guidelines on medicines management for podiatrists.

Examples where appropriate supervision is required:

Students may be involved in administration of medicines via ankle nerve block or intra-articular injection techniques

Parenteral administration of relevant medicines for subcutaneous digital nerve block

Delegation:

Supervising practitioners from all disciplines have commensurate guidance from regulatory bodies about delegation. Students must NEVER administer or supply medicinal products without appropriate supervision. The HCPC (2012) requires registrants [supervising practitioner] to “effectively supervise tasks that you have asked other people to carry out” (standard 8, Standards of Conduct, Performance and Ethics, HCPC 2012), and to ensure that those undertaking such tasks “have the knowledge, skills and experience to carry out the tasks safely and effectively”.

Faculty guidance therefore recommends that the supervising practitioner should remain in the clinical environment during any period in which students may be supplying or administering medicines

Faculty guidance considers community placements to be a special situation; for podiatry students, this is the norm, and competent students may be delegated tasks such as applying wound dressings.

Some tasks may be delegated to the student. Faculty guidance requires supervising practitioners to consider the ability of those who have been delegated tasks. This means that supervising practitioners must only delegate to those whom they deem competent to carry out the task safely and effectively (see HCPC as above 2012).

Students must know their limitations and when to seek advice from the appropriate professional in the event that circumstances change. Students must not perform medicine management tasks without supervision or without explicit delegation.

Following the usual checks in the process of medicines administration, the supervising practitioner may then delegate the student to assist the patient in the ingestion or application of the medicinal product.

A student may be delegated the task of helping a person to swallow medicines with food or drink

A student may be delegated the task of applying prescribed products as direct application to the skin, wounds, nail, or nail bed/matrix

Responsibility of the student: To develop an increasing level of proficiency in all aspects of medicines supply and administration.

Students will identify the limitations of their scope of practice and act in accordance with local policy of the employer, standards of the HCPC and associated legal frameworks.

The programme of study ensures that student podiatrists who qualify and register with the HCPC are eligible via two annotations ("prescription only medicines" and "local anaesthetics") to access, administer or supply certain drugs on their own initiative from the "exemptions lists". These are available to view at:

<http://webarchive.nationalarchives.gov.uk/20141205150130/http://www.mhra.gov.uk/Howweregulate/Medicines/Availabilityprescribingandsupplyingofmedicines/ExemptionsfromMedicinesActrestrictions/Chiropodists/index.htm>

Student podiatrists who qualify and register with the HCPC are required to be able to conduct appropriate treatments safely and skilfully, including the requirement to "administer relevant prescription only medicine, interpret any relevant pharmacological history and recognise potential consequences for patient treatment" and to "apply local anaesthesia techniques" (HCPC Standards of Proficiency 2012, 2b4).

Under the direct supervision of the registered practitioner, the student will follow the 6 "rights" of administration (right person, right drug, right dose, right route, right time, and right documentation) and demonstrate this by:

1. Recognising limitations to their practice
2. Identifying the correct service user / patient group
3. Selecting the prescribed medicine
4. Calculating the required dosage
5. Identifying the correct timing of the prescribed medicine
6. Preparing and administering medicine
7. Recording the administration appropriately
8. Challenging incorrect/ambiguous documentation

The student will demonstrate medicines management competence in the development of the 6 "rights" of their own knowledge base (action, side effects, and contraindications, interactions, patient education and a person's right to refuse) and will demonstrate this to the supervising practitioner by:

1. Gaining informed consent from the person being administered medication
2. Identifying the reason for prescribing, supplying and administering the medicine
3. Understanding the action of the medicine
4. Having an awareness of possible adverse effects & contraindications and interactions
contraindications & identifying those who should not be treated under a direction.
5. The ability to recognise adverse effects, contraindications & interactions
6. Discussing medication appropriately with patient and families
7. Identifying when to refer to another professional

Responsibility of the Supervising practitioner/Clinical Educator: to assist a student in and assess the development of an increasing level of proficiency in all aspects of medicines administration.

Podiatrists who are appropriately qualified and can administer and supply certain prescription only medicines in the course of their practice should assess the student's proficiency in medicines management that includes both safe administration of medicines and products (e.g. wound dressings) and the knowledge required to act safely. The student's level of proficiency must be recorded in their assessment document.

Medicines management is more than administration of medicines. Students should be assessed on their ability to assess the effect of medicines and their ability to discuss medication with those taking or administering it.

The student should increase their level of proficiency in all aspects of medicines administration, under the appropriate supervision of the qualified practitioner. The supervising practitioner/clinical educator must countersign student signatures.

Guidelines for specific situations

Medicines can be administered by a podiatrist who has the appropriate HCPC annotations. This may comprise the “local anaesthesia” and/or “prescription only medicines” annotations (exemptions), the “supplementary prescribing” annotation, or the “independent prescribing” annotation, or via the use of patient group directions (PGDs).

The legislation currently permits the following professionals on the HCPC register to administer or supply medicines under a patient group direction: podiatrists, paramedics, dietitians, occupational therapists, orthoptists, paramedics, physiotherapists, prosthetists and orthotists, radiographers, speech and language therapists.

Student podiatrists, under the appropriate supervision of a registered podiatrist, may be involved in the supply or sale of medicines under statutory exemptions

Oxygen: Oxygen must be prescribed and students may be involved in the administration of oxygen in accordance with local policy.

Keys: Under no circumstances are students permitted to be responsible for the practice placement’s medicines keys.

Cytotoxic medicine administration: student podiatrists should not administer oral chemotherapy medication.

Other local policies to be read in conjunction with these guidelines

- Medical devices (related to infusion devices)
- Vena-section
- Central venous line monitoring
- Blood transfusions
- Complementary medicines/therapies

References

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