

Medicines Management Guidance

BSc (Hons) Midwifery

2021/2022

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Introduction

For brevity, the terms woman/women and the pronouns she/her/hers will be used throughout this programme guidance to represent anyone who is pregnant or giving birth, regardless of their gender identity. It is assumed that the care of a transgender or non-binary person would involve a discussion about preferred pronouns and terminology and that this would be communicated to all of the healthcare team.

During the three-year programme of pre-registration midwifery education student midwives are required to develop a comprehensive level of knowledge and understanding and to demonstrate competence in clinical skills to enable them to practice safely in relation to medicines management. Student midwives at the University of the West of England are not required to be registered nurses and therefore they will need active involvement in drug administration from their first clinical placement in order for them to gain the experience and competence required to safely administer medication to women and babies in the course of their future midwifery practice.

This guidance supports the learning and assessment of student midwives in relation to medicines management in practice. The scope of this guidance encompasses the selection, preparation, administration, observation and recording of medicines in midwifery practice and the responsibilities of the student, the practice supervisor, practice assessor and of the University within this process.

This medicines management guidance is NOT intended to replace local trust policy, which must always take precedence. It is the responsibility of the student midwife to ensure that they are in full understanding of the policies determined by the Trust in which they are undertaking their placement.

Scope of medicines administration by student midwives

Curriculum 14: Standard 17 of the Standards for Pre-registration Midwifery Education (NMC a, 2009) defines the standards in which student midwives must demonstrate competence to enter the register as a midwife at the completion of their training. In relation to medicines management, the NMC standard (NMC a, 2009 pg. 29) requires that student midwives must be able to “select, acquire and administer safely a range of permitted drugs consistent with legislation, applying knowledge and skills to the situation which pertains at the time.”

Curriculum 21: The Standards for Pre-registration Midwifery Programmes (NMC c, 2020) set out the requirements which student midwives must successfully complete via an NMC approved pre-registration midwifery programme in order to meet the Standards of proficiency for midwives and be eligible to apply for entry to the NMC register. In relation to medicines management, standard 4.5 requires “all programmes include a specific focus on

numeracy assessment related to the midwifery proficiencies and the calculation of medicines, which must be passed with a score of 100 percent". The Standards of Proficiency for Midwives (NMC b, 2019) set out what midwives need to know and be able to do, by the time they register with the NMC. The required standards of proficiencies are set out in six interrelated domains, which should not be seen separately. In relation to medicines management, domain six (The midwife as skilled practitioner) includes 'Evidence-based medicines administration and optimisation: shared skills for Domains 3 and 4'.

The NMC document 'Practicing as a Midwife in the UK' (NMC d, 2021) provides useful guidance with regards to the law in relation to midwives and medicines (section 4) and Annexe A: List of Midwives Exemptions.

Methods of drug administration

These will include:

- Oral
- Intravenous*
- Intramuscular
- Topical
- Inhalation

Students will not be able to achieve the standards or skills required unless they are provided with opportunities to actively participate within drug preparation and administration in the clinical practice setting.

* see further guidance below

To support theoretical learning and the development of a comprehensive body of knowledge in relation to medicines management, students are required to complete mandatory pharmacology and medicines management theory elements, to sit and pass an annual online numeracy assessment and to be assessed in clinical practice by practice assessors in relation to their ability to apply theoretical knowledge and perform safe clinical skills when preparing and administering medicines. The NMC requirement for safe application of medicines knowledge and the demonstration of competency is clearly defined within Assessment of Practice Document (eORA / MORA).

Over the course of the three-year programme it is expected that all student midwives will gain a substantial level of experience, under the supervision of practice supervisors, administering drugs from the following groups of medicines:

- Analgesics administered orally
- Analgesics administered via intramuscular route

- Anti-D
- Controlled drugs (unless administered under the Midwives Exemptions, see below)
- Active management of the third stage of labour drugs
- Inhalational drugs
- Neonatal Vitamin K (phytomenadione)
- Oral iron therapy
- Rectal medication
- Anti-hypertensive medications
- Anti-coagulant drugs

PROPESS: When a student enters **Year 3** of their training they may begin to participate in the administration of PROPESS via a vaginal delivery system but this must only be undertaken where the practice supervisor has been satisfied that the student midwife is knowledgeable and competent in performing vaginal examinations and where the student has demonstrated a sound underlying knowledge of the drug and its safe use within midwifery practice. **The exception to this will be where local policy precludes student midwives from administering this medication.**

Two-person check

The expectation that students will participate in the preparation, checking and administration of drugs extends to situations where two trained persons are required to check the drug prior to administration. In these circumstances, students will act as observers for the checking process. However, they should be encouraged to be the administrator of the drug, under direct supervision, provided they have received the appropriate training as to use, dosage and methods of administration (RPS and RCN 2019). **The exception to this is where the prescription of a controlled drug is undertaken as a Midwives Exemption (as below).**

Exclusions

Medicines that are **always excluded** for administration by students are:

- Epidural top-up
- Any medication administered via the intravenous (IV) route

Under **no** circumstances will student midwives directly administer these medicines. To gain experience student midwives may, under the direct supervision of a practice supervisor, participate within the preparation of intravenous drugs.

Normal Saline Flush - Intravenous Cannula

Students are not permitted to administer any intravenous medication.

Students who have received appropriate theoretical training may, under direct supervision,

participate in the administration of a normal saline flush following intravenous cannulation, but this must only be undertaken where the practice supervisor has been satisfied that the student midwife has demonstrated sound underlying knowledge of the safe process of administration of normal saline via this route. This includes the use of Posiflush (or similar normal saline flush devices) where these are administered under Midwives Exemptions.

Midwives Exemptions Legislation

Where students are under the direct supervision of a practice supervisor they may administer medicines that are supplied by the supervising midwife under Midwives Exemptions but **this does not include controlled drugs** (The Human Medicines Regulations, 2012). Prior to administering any medication under the midwives exemption list the student must have demonstrated a level of knowledge and understanding that assures the supervising midwife of his/her ability to apply principles of safe practice in relation to medicines management. It is the students' and the midwives' responsibility to access and understand the scope of midwifery exemptions. The NMC (b, 2019) is clear that midwives must have proficiency with evidence based medicines administration and optimization which includes recognising "the various procedural routes under which medicines can be prescribed, supplied, dispensed and administered; and the laws, policies, regulations and guidance that underpin them" (NMC b, 2019, 6.50.2).

Controlled Drugs

Student midwives should actively participate in the preparation and administration of controlled drugs but **only** where these are prescribed by a doctor or an appropriate practitioner according to their directions for administration, under the direct supervision of a midwife (The Human Medicines Regulations, 2012). Student midwives are **not permitted** to administer controlled drugs supplied under the midwives exemptions list.

Patient Group Directives (PGDs)

The National Institute for Health and Care Excellence (NICE) states that health professionals must not delegate the administration of drugs via a PGD (NICE 2013). As such, the responsibility of administering medication under PGD **cannot be delegated to a student midwife**. It is expected however that the student midwife would become actively involved in the process of observation and checking to ensure that they develop the knowledge and skills required to understand the process of administration under PGDs.

The role and responsibility of the student midwife in relation to medicines management

It is the responsibility of the student to ensure that they have met the mandatory pharmacology and medicines requirements set by the University and that they can evidence this learning to their practice supervisor as required. Student midwives must not administer a medicine until they have received the theoretical input for administration via the identified route. This may occur in the university or practice setting.

Throughout their training it is expected that student midwives will become increasingly conversant with the legislation and evidence that underpins safe administration of medicines within midwifery practice. It is the student midwife's own responsibility to recognise areas of strength and development within their own practice and only work within their current level of competence, understanding and sphere of practice. Where a student feels that they have not developed the knowledge and skills to safely administer medication then they must refrain from doing so. In this instance it would be expected that the student, with the practice supervisor, would formulate a plan to support their learning and develop their skills in practice. Students are expected to record their learning in relation to medicines management within the On-going Record of Achievement which will support them to identify the aspects of safe drug preparation and administration.

The student must ensure that they are being supervised at all times when administering medication and that they have followed the principles of safe drug administration, to include checking the prescription, preparing the drug and gaining consent for the administration. It is the registered midwife who remains accountable for the correct administration of the drug as it is prescribed or supplied but this does not absolve the student of the responsibility to ensure that they are supervised and follow due process when doing so.

In the event of a drug error occurring or the witnessing of unsafe practice, student midwives are required to raise this via the UWE Raising and Escalating Concerns policy. Failure to do so will invoke professional suitability policy and procedure.

The role and responsibility of the practice supervisor in relation to medicines management

Practice supervisors maintain responsibility for assuring the readiness of students to safely participate in the preparation and administration of medicines. Where the practice supervisor concludes that the student is not yet ready to undertake administration in whatever form, this should be delayed until such time that the student is ready.

Throughout the preparation and administration of medication the practice supervisor must ensure that the student is being directly supervised at all times. **Under no circumstance will a student be permitted to administer drugs without direct supervision** (NMC d, 2011; The Human Medicines Regulations, 2012). Direct supervision is supervision of the

student by the registrant which is close enough to directly monitor their activities. Practice supervisors who supervise the administration of a medicine by a student midwife must clearly countersign the signature of the student.

Practice supervisors should facilitate opportunities for students to observe and participate with the preparation and administration of medications and should ensure that they are supporting the student to develop their knowledge and skills in relation to medicines management.

Practice supervisors must ensure that they are familiar with this guidance, local trust policy, NMC guidance and national legislation that underpins administration of medicines and the programme requirements that facilitate students learning in relation to medicines management.

The role and responsibility of the practice assessor in relation to medicines management

Practice assessors are responsible for assessing student progress and achievement in relation to medicines management. As part of the assessment process practice assessors will review available evidence, provided by practice supervisors and the student in the form of medicines management records, to determine and confirm student competence.

The role and responsibility of the university

The university will ensure that opportunities for learning and assessment in relation to medicines management are facilitated throughout the three-year midwifery programme. The university will ensure that guidance in relation to medicines management for student midwives is available to practice supervisors, practice assessors and students in the clinical practice placement areas.

The university will ensure that any medicines management for student midwives' guidance is updated regularly and in accordance with national legislative changes and that any changes are disseminated to students and clinical practice placement areas in a timely manner.

References

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