Medication Practice Standard

An Overview, 2015
Your Questions

- ppd@cnomail.org
- Subject line – “teleconference”
- We will not be taking questions on the telephone for this teleconference
Learner Objectives

- To identify how nursing concepts form the basis for a principle-based document
- To understand your accountability as a nurse, based on the revised Medication Standard
Background

- Rationale for principle-based format
- Implications to client care
  - access to care
  - dispensing
  - health care context
Approach for Revision

- Extensive literature review
- Environmental and jurisdictional review
- Membership engagement
- Key stakeholder engagement
What does Principle-Based Mean?

- Broad statements
- Common nursing principles
- Accountability and responsibility
- Builds upon entry to practice competencies
  - Critical inquiry
  - Evidence-informed practice
Critical Inquiry

- Reflective reasoning
- Spirit of:
  - Inquiry
  - Logical reasoning
- Application of Standards
Evidence-Informed Practice

- Successful strategies to improve client outcome
- Multiple sources of evidence
Responsibility and Accountability

- Use of critical inquiry and critical thinking in relation to new knowledge
- Application of critical thinking in provision of care
- Integration of quality improvement principles
- Policy that guides delivery of care
Supports for Client Care

- Organizational supports
- Legislation
- Client
- Nurse competence
- College documents
Format of the Practice Standard

- Three main principles
  - Authority
  - Competence
  - Safety
- Decision trees
- Use other practice documents to support it
**Authority**

- *Nurses must have the necessary authority to perform medication practices.*
  - Describes when an order is required
  - Controlled substances
  - Outlines that orders must be clear, complete and appropriate
Decision Tree: Is the Order Clear, Complete and Appropriate?

**Is the order clear?**
- **NO**: Do not perform and follow up with a prescriber.
- **YES**: Consider: Do I understand the order?

**Is the order complete?**
- **NO**: Do not perform and follow up with a prescriber.
- **YES**: Consider: Does the order contain all of the information that I need to administer or dispense the medication safely?

**Is the order appropriate?**
- **NO**: Do not perform and follow up with a prescriber.
- **YES**: The order is clear, complete and appropriate.

Consider: Is the order appropriate considering the client, and the client’s current condition, health history, medication history, and other medications that the client is currently taking?
Competence

- *Nurses ensure that they have the knowledge, skill and judgment needed to perform medication practices safely.*
  - Evidence-informed practice
Safety

- **Nurses promote safe care, and contribute to a culture of safety within their practice environments, when involved in medication practices.**
  - Provide client education
  - Collaborate with health care team and experts
  - Advocate for system approaches
Quality Practice Setting Attributes

- Reflective practice
- Collegial relations
- Culture of respect
- Application of nursing knowledge and research
- Atmosphere of inquiry
College Resources

- College documents
  - Advance copy Medication Standard
  - Authorizing Mechanisms
  - Decisions about Procedures and Authority
  - Nurse Practitioner
  - Professional Standards
  - Therapeutic Nurse-Client Relationships
  - Competencies for Entry-Level Registered Nurse Practice
  - Entry-to-Practice Competencies for Ontario RPNs

- College Website: www.cno.org/tools
Contact Us

- Practice support line
  - 416-928-0900 x 6397; Toll-free: 1-800-387-5526
  - Email: **PPD@cnomail.org**

- Outreach Consultants:
  [www.cno.org/praic/outreach](http://www.cno.org/praic/outreach)
WHEN YOU HAVE STANDARDS, YOU HAVE ACCOUNTABILITY.
Questions?