

**Drug Error Process**

The drug error process was introduced to ensure administration of medicines incidents are managed proportionately utilising principles such as Honesty and Integrity, Deliberate Harm, Physical and Mental Health, Foresight and Substitute within an algorithm to determine the action required.

**Objective**

The process guides staff on how to consistently manage an administration of medicines incident.

**Teams / Departments involved**

- Professional Issues Team
- Pre-registration Health Course Teams where there is a SOP for the administration of medicines
- Fitness to Practise Board

**Process / Method**

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**Frequency**

AHOC - When the University is notified that an Administrations of Medicines incident has occurred.

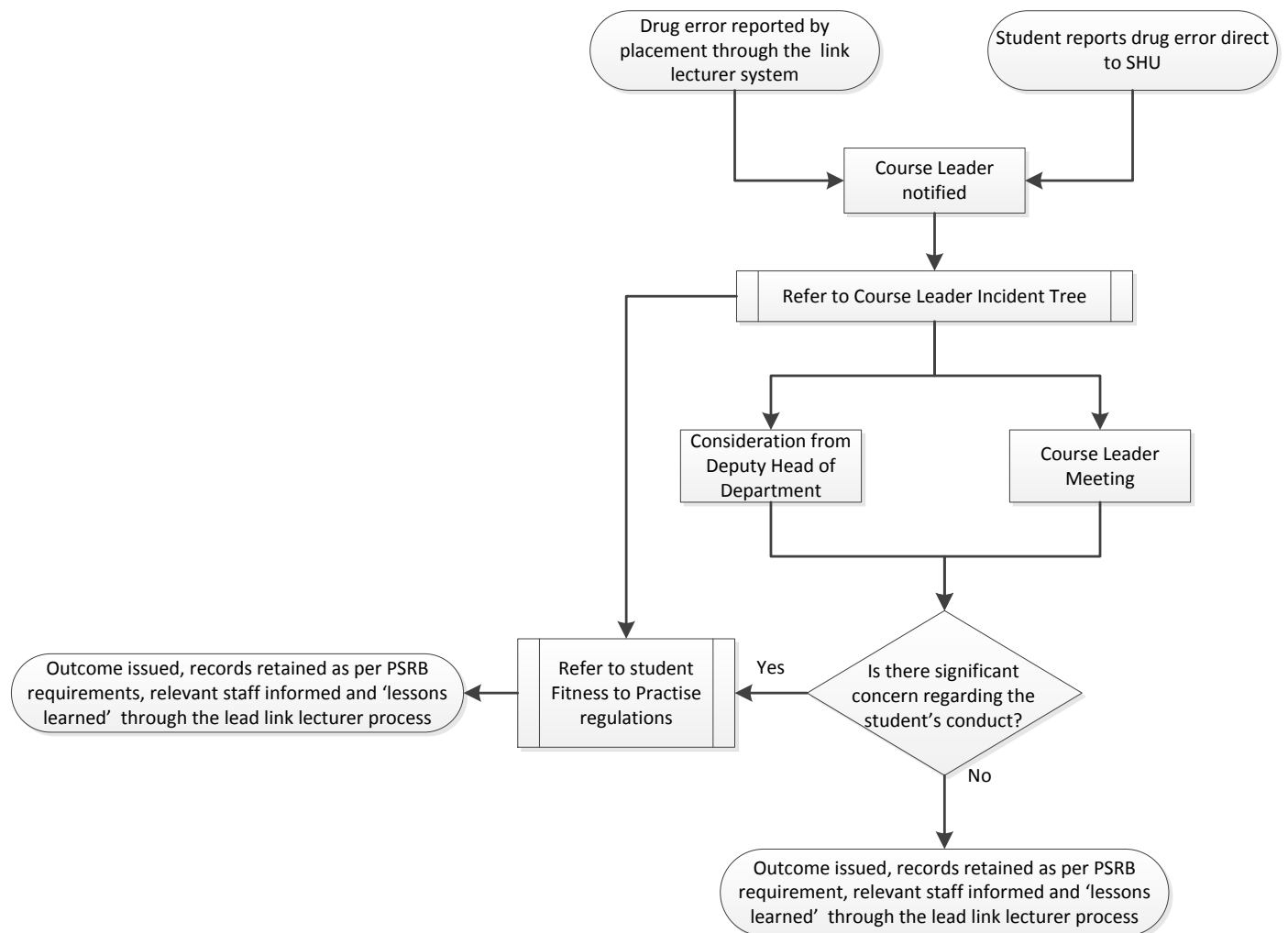
**Responsibility**

Process Owner: Fitness to Practise Steering Group

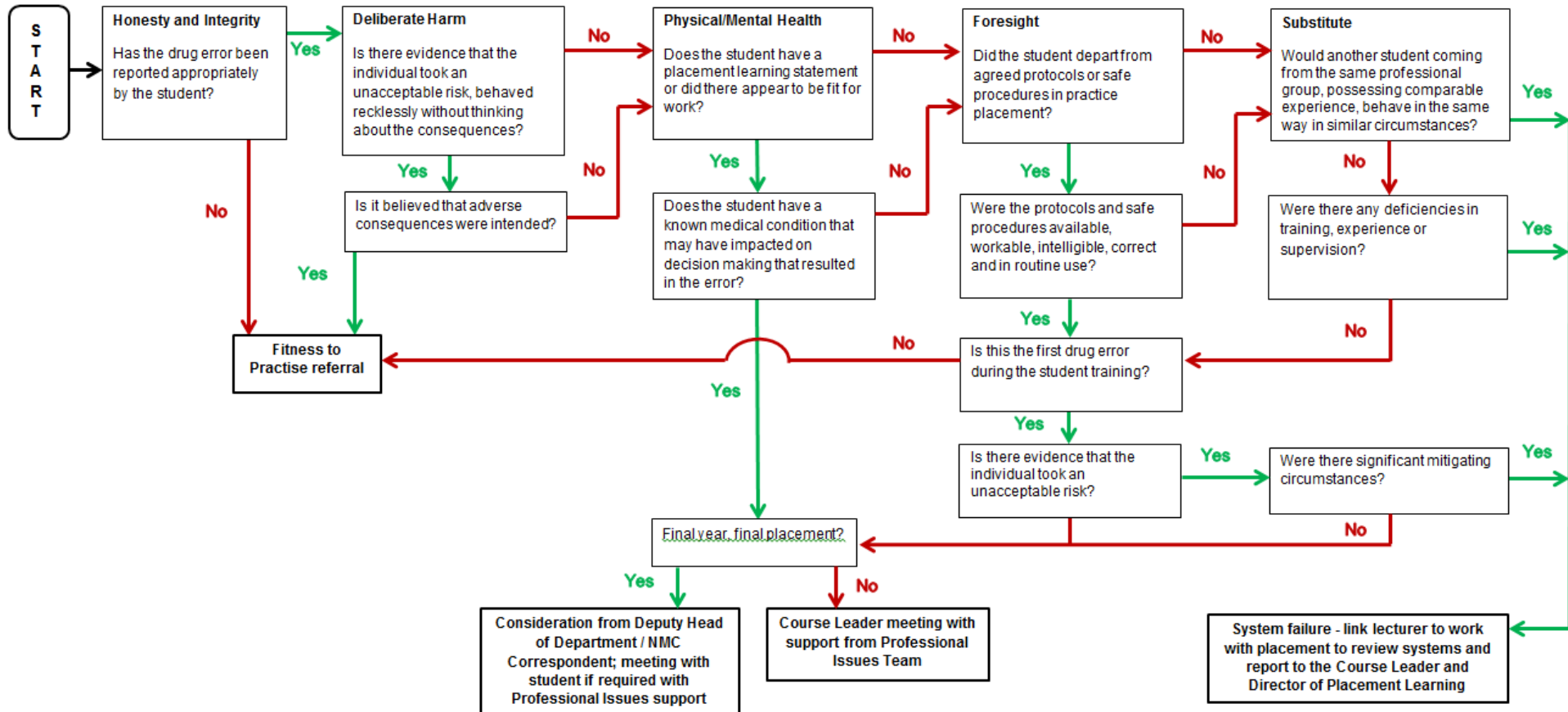
Operational Lead: Professional Issues Officer

<b>Reference Policies:</b>	Student Fitness to Practise Regulations
<b>Responsibility for Process:</b>	Professional Issues Team, Faculty Central Services Team
<b>Date Introduced:</b>	Version 1.0 - June 2018
<b>Dates Modified:</b>	Version 1.1 - March 2019 Changes incorporates additional guidance to the algorithm
<b>Next Review Date:</b>	March 2020

# Process Map



# Course Leader Incident Decision Tree (Drug Error)



Please refer to page 2 for further guidance

# Algorithm Guidance notes

## Process from when an alleged drug error has occurred:

- Due to the different structures, course teams will be responsible for determining how a drug error is escalated through the link lecturer system to the Course Leader/DHoD
- The Course Leader/DHoD will liaise with Professional Issues regarding any drug administration errors to ensure there is a sufficient audit

## Course Leader meetings:

- Utilise the algorithm to explore the circumstances leading to the alleged drug error and the student's reflection of the incident
- Determine whether there is a case to answer
- Ensure the placement documentation has been completed outlining the drug error as a cause for concern
- Consider if an Occupational Health referral would be relevant if there are concerns the drug error is related to ill health or a pre-existing health condition
- Ensure there is sufficient remediation time remaining on placement (4 week assessment period) before the student is permitted to pass as competent in the safe administration of medication. If there is insufficient remediation time then the placement should be referred.
- Consider further education and learning through a referenced reflective piece of work. The student should be given two attempts to provide a satisfactory piece of work. If after two attempts the submission is unsatisfactory in addressing the concerns then the student should be referred to Fitness to Practise
- Additionally, if concerns regarding the student's conduct are significant during the course leader meeting then a Fitness to Practise referral would be relevant

## Fitness to Practise referrals:

- All evidence needs to be collated and submitted to the Professional Issues Team. No further action required by the relevant course leader until the outcome of the Fitness to Practise referral is issued.

## A review by the Deputy Head of Department / NMC Correspondent will follow the above but will additionally:

- Consider the impact of any imminent registration

## Feedback to Practice:

- We do not feedback outcomes to the relevant trust, however, we can feedback 'lessons learned' through the lead link lecturers process and through the Lead Link Lecturer forum at the University.