

PCP Sample Answers



Poisons Control Plan (PCP) for a **Health Services Permit (HSP)** **Part Five – Sample Answers**

18. Approval of Standing Orders

Drugs and Therapeutics Committee (DTC)

18.1 Indicate where the DTC Charter and related documentation are to be located;

- In Master Files within the Pharmacy Department

18.2 Indicate the position (or role) of the chairperson of the DTC;

- Director of Pharmacy / Nursing
- Medical Director

18.3 Identify the key criteria to be considered before a proposed “standing order” may be approved by the committee;

- Submissions are to be presented in an agreed/standard format.
- Submissions will be required to demonstrate both the need and improved outcome to be anticipated if a Standing Order is approved.
- Submissions are to contain evidence and information that are based on clinical protocol(s)

Staff education, training and authorisation

18.4 Indicate how relevant nurses are to be educated and/or authorised in relation to a specific Standing Order;

- Documented in-house procedures for induction of casual and/or new staff.
- Regular (at least annual) re-training of relevant/authorised staff.
- All nurses will be required to acknowledge (in writing) familiarity and awareness of Standing Orders for which they are authorised.
- Records of acknowledgement, which will also contain dates of re-training and/or revision, are to be retained for at least three years and will be filed in the office of the Director of Nursing.

18.5 Indicate what steps are to be taken to ensure that Standing Orders are not implemented by nurses who are not suitably qualified or authorised;

- Each approved Standing Order document will clearly indicate the level of training or qualification required of a nurse who may initiate the Standing Order.
- A list of authorised nurses will be retained in each ward in which the Standing Order may be implemented.

18.6 Indicate what steps are to be taken to ensure Standing Orders are only implemented in designated areas of the establishment;

- Each approved Standing Order document will clearly indicate the wards/units of the hospital in which the Standing Order may be initiated.
- The Nursing Supervisor will retain a file that contains details of all Standing Orders and the wards to which they apply.

18.7 Indicate the circumstances under which a nurse would not be expected to implement a Standing Order even though all required clinical criteria had been met;

- If the treating practitioner had provided a medical order exempting the patient from commencement of a Standing Order.
- If the nurse were to make a professional judgement that commencement of the Standing Order might be deleterious to the patient.

18.8 Indicate how treating practitioners, whose patients might be subject to Standing Orders, are to be informed about the process of Standing Orders in the establishment;

- All regular practitioners will be required to acknowledge (in writing) that they have been made aware of relevant Standing Orders and of the process required to exempt patients from commencement of a Standing Order.
- All new/visiting practitioners will be required to provide a similar acknowledgement.
- Details of practitioners who have accepted or refused to accept the implementation of Standing Orders will be retained in each relevant ward.

19. Documenting and Recording Standing Orders

19.1 Indicate how Standing Orders are to be validated;

- Each Standing Order must be signed by the Chairperson of the DTC.
- The Master Copy of each Standing Order will be maintained by the hospital's Quality Assurance Office, in a manner consistent with ISO9000 criteria for controlled documents.
- Each Standing Order document must comply with the conditions of the Permit to which this Poisons Control Plan relates

19.2 Indicate how version numbers and related information are to be generated and recorded;

- Each Standing Order document will bear a sequential version number that can be readily related to the identifying number of the Master Copy.
- Each Standing Order will include details of the date of expiry in addition to the date of introduction of the current version.

19.3 Indicate how variations from an earlier version of a Standing Order are to be highlighted or identified;

- Any variation or amendment to a Standing Order will be highlighted in a manner (Please specify) that ensures the variation(s) cannot be overlooked. (Eg. bold font)

19.4 Indicate the measures to be taken to prevent unauthorised amendments to a Standing Order;

- Master Files will be stored on computer in a manner that prevents unauthorised access.
- Each Standing Order document will contain a statement to clearly indicate that any manual amendments will render the document invalid.
- The Quality Assurance Office will implement a periodic, documented review of all Standing Order documents to ensure their integrity and currency as well as the destruction of earlier versions.

19.5 Indicate the position (or role) of the person who is to be responsible for the ongoing management of approved Standing Orders;

- Deputy Director of Pharmacy
- Nursing Supervisor
- Quality Assurance Manager

Administration and review of Standing Orders

19.6 Indicate how the administration of drugs in accordance with a Standing Order is to be recorded;

- Administration is to be recorded in the patient's records in a manner that distinguishes it from drugs administered in accordance with specific instructions of the treating practitioner.
- A copy of the Standing Order, marked in a manner that corresponds to the record of administration, will be inserted in the patient's file.
- A copy of the Standing Order, marked in a manner that contains all relevant details of the administration, will be forwarded to Medical Records.

19.7 Indicate the steps to be taken to ensure that a Standing Order is not commenced for a patient who has been exempted by that person's treating practitioner;

- The patient's medication chart will be prominently marked to alert nurses.
- In any ward where the implementation of Standing Orders is (relatively) common, a prominent marker will be placed on the patient's bed head to alert nurses.

19.8 Indicate how the implementation and effectiveness of Standing Orders is to be reviewed;

- Copies of administration records will be collated (on a monthly basis) from information forwarded to Medical Records.
- The implementation of each Standing Order will be quantified and reviewed for/by the DTC on a periodic basis (please specify) and prior to renewing the approval of a Standing Order.