Policy Applies to:
- Credentialed Specialists
- All RNs and ENs employed by Mercy Hospital
- Pharmacist contracted to provide dispensary services to Mercy Hospital

Related Standards:
- EQuIP Standard 1.1.8 Health record
- EQuIP Standard 1.5.1 Medicines are managed to ensure safe and effective consumer / patient outcomes
- Ministry of Health (2012) Standing order guidelines

Rationale:
Mercy Hospital Standing orders facilitate patient care that is credentialed specialist specific. Surgical Preferences facilitate the administration of a number of listed medications in response to patient need in the absence of onsite medical staff.

Definitions:
**Surgical Preference** – a written instruction issued by a Credentialed Specialist that outlines surgeon specific patient care preferences.

**Standing orders**- a written instruction issued by the Credentialed Specialist, that authorises a specified class of persons, who do not hold prescribing rights to supply and administer specified medicines and some controlled drugs to a specified class of persons without a prescription. This pertains to certain medications only and must include information about why the standing order is necessary, the class of persons who may administer the medication, competency requirements for administration/supply, generic drug name, indications, dose, contraindications, route, and requirement for countersigning or other documentation.

A Standing Order applies for 12 months or until it is replaced by a new Standing Order covering the same subject matter, or is cancelled in writing by the issuer. A standing order does NOT allow a person to provide a patient with a prescription that has been pre-signed by the issuer of the Standing Order.

Objectives:
- To ensure continuity of patient care in the absence of onsite medical staff
- To minimise waiting time for symptom relief
- To ensure that all medications are administered in a timely and legally responsible way

Implementation:
Standing Orders are made available to every person permitted to work under the auspices of a Standing Order. This includes those that supply or administer the medicine under the Standing Order, any affected practitioner who is not the issuer,
and any member of the public upon request. The existence of standing orders is introduced to clinical staff at New Staff Orientation.

A written record of RN / EN signature where standing orders are in use will indicate that these staff have read and fully understand their responsibilities in administering from a Standing Order. The list of signatures is located at the front of the Standing Orders folder in each area. Previous years sign off lists will be filed at the back of the folder.

**Please note** - administration of any medication requires the administrator to be aware of the indications and contraindications, expected and unwanted effects of the medication as well as the management of these e.g. respiratory depression, hypotension, altered level of consciousness etc. Administrators are accountable for their practice and are required to hold sufficient knowledge of the medications that they administer as well as any monitoring requirements or special considerations around the medication.

The specific competency required is a current Mercy Hospital IV certificate (RN or EN).

Credentialed Specialists will supply a copy of their Surgical Preferences and/or Standing Orders to Mercy Hospital prior to commencement. Where a surgeon requires change (to a surgical preference) please ensure this change is transcribed onto the existing surgical preference. This change will be captured in the next update. Biannual review, update and sign-off of surgical preferences will be undertaken by Credentialed Specialists. The Director of Clinical Services will circulate updated Standing orders/Surgical Preferences.

Annual review, update and sign off of Standing orders will be undertaken by credentialed specialists and facilitated by the DCS.

**Evaluation:**

*How will the effectiveness of this Policy be reviewed?*

- Standing orders will be reviewed by the issuer (prescriber) at least annually
- Surgical preferences, as they do not involve medications, will be reviewed 2 yearly unless changes are required in a more timely fashion
- The co-signing of a standing order will be audited as part of the annual Medicines Management Audit (the Global Audit cycle)
- A nurse reading and understanding of a standing order will be recorded on an annual Standing Order Surgical Preferences update list. Clinical Coordinators will be responsible for ensuring completeness of this list.
- Any adverse events will be reviewed as part of the Incident reporting system
Associated Documents

**External**
- Ministry of Health (2012) *Standing order guidelines*
- Ministry of Health (2002) Medicines (Standing Orders) Regulations
- The Misuse of Drugs Act 1975
- NZNO Guidelines for nurses on the administration of medicines (2014)

**Internal**
- Incident Management Policy
- IV Manual 2015
- Medicines Management Policy
- By-laws for Credentialed Specialists 201
- Clinical Records Management Policy
- Medication Standing Order templates
- McAuley Ward Opiate Standing Order – Adult
- PACU Opiate Standing Order – Adult
- Indigestion standing order flowchart
- Bowel Protocol
- Standing orders template
Standing Orders
Process for managing new Standing Orders or alterations to existing Standing Orders

Standing Orders For Credentialed Anaesthetists are reviewed annually in February by DoCS to reflect Consultant initiated changes.

- DoCS reviews changes and sends on line to Credentialed Specialist for review.
- If no feedback is received, a final copy is printed.
- If comments are received, the on-line documents are updated and printed off.

Are changes required?

Yes

Executive Assistant sends final copy to PACU.

PACU gets Credentialed Specialist to sign off changes on final copy and returns final copy to Executive Assistant

No

Credentialed Anaesthetists sign off Standing Orders annually

Executive Assistant ensures signed copies of Standing Orders are distributed to:
- PACU
- Coolock DSU
- McAuley

Standing Orders
Process for managing new Standing Orders or alterations to existing Standing Orders

Standing Orders For Credentialed Anaesthetists are reviewed annually in February by DoCS to reflect Consultant initiated changes.
Surgical Preferences
Process for managing new Surgical Preferences or alterations to existing Surgical Preferences

- Surgical Preferences For Credentialed Specialists are reviewed every two years in February by DoCS to reflect Consultant initiated changes.
- Are changes required?
  - Yes: DoCS reviews changes and sends on line to Credentialed Specialist for review.
  - If no feedback is received, a final copy is printed.
  - If comments are received, the on-line documents are updated and printed off.
  - Executive Assistant sends final copy to PACU.
  - PACU gets Credentialed Specialist to sign off changes on final copy and returns final copy to Executive Assistant.
  - Executive Assistant ensures signed copies of Surgical Preferences are distributed to:
    - PACU
    - Coolock DSU
    - McAuley
- No: Credentialed Specialists sign off Surgical Preferences every two years or as required.