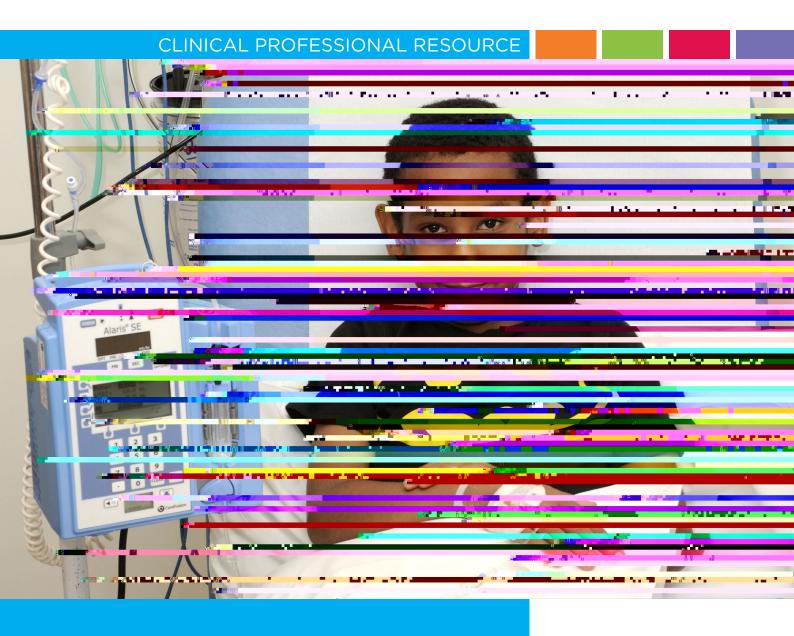
## **Competences:**

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## Introduction

Competence can be defined as: "The state

We recommend that an assessor should be experienced in administering medicines intravenously to children and young people. Their ability to assess others should be determined by a formal assessment process.

We also advise that they receive clear guidance on their role and responsibilities. Regular updating and skills assessment can assist in ensuring ongoing competence.

We suggest that this takes place at least annually and when new equipment is introduced. Many organisations have also introduced an annual maths assessment for all IV drugs givers to reduce calculation errors.

to administer medicines intravenously via peripheral and central venous access. This includes volumetric infusion pumps and pumps with in built drug libraries.

- Demonstrates dexterity and numeracy skills when handling the medical devices and equipment used for giving medicines intravenously.
- Initiates and monitors a care plan for a child receiving medicines intravenously using a medical device.
- Takes appropriate action in relation to faulty medical devices and equipment.

## **Theoretical competences**

At the end of a course of study and period of supervised practice the nurse will be able to:

• outline the care required by children

medicines to children and young people in relation to employer's practice policy and NMC guidance

- identify the commonly prescribed intravenous medicines within his/her area of practice and describe their uses and side-effects
- describe the factors that determine whether an intravenous medicine is given by infusion or as a bolus
- calculate medicine doses and infusion rates safely, using recognised formulae
- discuss medicine compatibility, displacement values and factors that affect the stability of medicines prepared for intravenous administration
- describe the rationale, and demonstrate the technique for flushing a venous access device, or intravenous administration set/extension tubing, before and after the administration of medicine

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## 3. References and further reading

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Notes

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