

## Ask a Practice Consultant... Can a Health Care Attendant (HCA) Administer Medication?

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HETHER the care being provided involves changing a dressing, the assessment of pain, inserting a urinary catheter or the administration of medication, the individual providing the care must be competent to do so. Competence is more than the physical ability to provide the needed care and does not refer to a general understanding of how to perform a particular skill or procedure. Competence involves the integration of the necessary knowledge, skills, judgment and personal attributes to provide the care in a safe, ethical manner. Competence requires the ability to assess a situation, to understand the underlying factors contributing to the situation, to intervene appropriately, to be able to predict the outcome of an intervention, and to be able to respond with alternate interventions in the event of a lack of response or an untoward response to the intervention. Unregulated health care providers, including health care attendants/aides (HCAs), do not possess the combination of knowledge, skills and judgment required to safely and ethically administer medications. This means that it would be inappropriate for an HCA to administer medications.

## What About the Duragesic Patch (fentanyl transdermal system)?

The College of Registered Nurses of Manitoba has received numerous inquiries asking whether it is appropriate for HCAs to administer the Duragesic® Patch (fentanyl transdermal system, also referred to as the "fentanyl patch"). The fentanyl patch uses the transdermal (through the skin) route for medication delivery by way of an adhesive "patch" applied directly on the skin. Although the application of the fentanyl patch may seem harmless and simple to do, it involves the administration of the analgesic medication "fentanyl" — a highly potent opioid and in a formulation that has been misunderstood. Medication errors associated with the fentanyl patch, some causing death, have been reported from both institutional and community settings in Canada (Wichman & U, 2005). This has led to concerns about the competence of some regulated health care professionals in their prescribing, administration, patient teaching and ongoing assessment practices related to the fentanyl patch. What is important to remember is that the application of a medication patch, including the fentanyl patch, involves the administration of medication. Since HCAs do not possess the combination of knowledge, skills and judgment to administer medications, it is inappropriate for an HCA to apply a fentanyl patch.

If you have any questions or comments about this article, wish to suggest another topic for a future article, or have a question about nursing practice, please do not hesitate to contact a Nursing Practice Consultant by calling the College of Registered Nurses of Manitoba at 774-3477 (or Manitoba Toll Free (800) 665-2027), or by email at info@crnm.mb.ca

## Reference:

Wichman, K. & U, D. (2005). Overdose a risk of transdermal patch in diverse settings: problems occur even with discarded patch. Canadian Pharmacists Journal (CPJ/RPC), 138(7), 65-66. Available at: www.pharmacists.ca/content/cpjpdfs/oct05/SafetyFirst.pdf. (accessed June 5, 2007).