Course Descriptor

Medication Administration for Enrolled Nurses · OBA-MAE-2026

DOCUMENT CONTROL

- Programme: Medication Administration for Enrolled Nurses (OBA-MAE-2026)
- Audience: Student and Facilitator · public-facing
- Version 1.0 | Issued 19/09/2026 | Review due 19/09/2027
- Provider: OBA Nursing Academy

Medication Administration for Enrolled Nurses

A fully self-directed, entirely online professional development programme for enrolled nurses, for the registered nurses who supervise them, and for the managers and educators who verify their scope. 8.5 CPD hours.

TWO THINGS TO SETTLE BEFORE YOU ENROL

- THIS IS NOT THE HIGH-RISK MEDICINES COURSE. OBA's High-Risk Medicines: the APINCHS Classification is about WHICH medicines carry disproportionate risk. This course is about the ACT of administration and the scope of one role.
- AND THIS IS NOT A MEDICINES REFERENCE. There is no dose, strength, rate, frequency or drug-specific clinical information anywhere in it, and there is not going to be. The Australian Medicines Handbook, the product information, your service's guidelines and your pharmacist are the references. This is about the process around them.

Course code	OBA-MAE-2026
Provider	OBA Nursing Academy
Duration	8.5 CPD hours, self-paced
Delivery	Entirely online, self-directed, through the OBA learning management system
Modules	11, plus a case study assessment and a summative assessment
Assessment	60 single-best-answer items, 80% pass mark, 2 attempts
Entry requirements	None. Written for enrolled nurses, and usable by anyone who supervises or rosters them
Content note	No dose, strength, rate or frequency for any medicine anywhere in the programme
What it is not	Not HLTENN040. It removes no notation and expands nobody's scope of practice
Outcome	Certificate of completion with a unique certificate identifier

Version	1.0, issued 19/09/2026, review due 19/09/2027

Who should enrol

- Enrolled nurses administering medicines in any setting - the cohort this was written for, and the one most often given RN-oriented medication training and left to translate it
- Enrolled nurses returning to practice, or moving between an acute ward, aged care, disability and community, where the authority to administer is the same and almost everything around it changes
- Enrolled nurses who hold the notation and cannot currently administer medicines, who need to know precisely what that means and exactly what removes it
- Diploma of Nursing students approaching HLTENN040, and new graduate ENs in their first year
- Registered nurses who supervise enrolled nurses, and who are frequently unclear about what direct and indirect supervision actually require of them
- Nurse unit managers, educators and aged care clinical leads responsible for verifying scope under NSQHS Action 4.04 - including the part of it that is not on the national register
- Internationally qualified nurses working as ENs, for whom the Australian notation system, the state and territory drugs and poisons framework and the RN relationship are usually entirely new

What you will cover

Module	Title	Hours
00	Orientation: What an EN May Do, and Who Decides	0.50
01	The Four Layers of Your Authority	0.75
02	The Rights, and Why They Are Not Enough	0.50
03	The Chart Is the Order	0.50
04	The Check, and What It Actually Catches	0.50
05	If It Is Not Right, You Do Not Give It	0.50
06	What Actually Causes Medication Errors	0.50
07	Storage, Schedules and Controlled Drugs	0.50
08	Documentation, Omissions and the Signature	0.50
09	The Person: Consent, Refusal and Swallowing	0.50
10	After an Error	0.50

How you will learn

1. Watch the narrated module video.
2. Read the Student Learner Guide for that module.
3. Complete the reflective workbook activity.
4. Complete the knowledge check and read the rationales.
5. Move to the next module when the system unlocks it.

The ten questions you will finish with

This course deliberately does not answer the questions that differ between states, services and employers. It tells you which they are, and the workbook has a page for the actual answers.

- Do I have a notation on my registration - and when did I last actually look?
- Have I completed IV medicines administration education, and where is the evidence of it?
- Has my employer ever verified my scope for administering medicines, and how?
- Which chart does my service use, and have I read the user guide for it?
- What is my service's second-checking policy, and may an EN be the second checker here?

…and five more, in Module 00.

A note on the content

SOME OF THE PEOPLE TAKING THIS COURSE HAVE MADE A MEDICATION ERROR. Some of them are in a process about one right now, and some are doing this course because they were told to after one.

That shapes how the programme is written. Module 06 establishes early that none of the best-documented causes of medication error is a person being careless, and Module 10 says plainly that the distress after an error is usually out of all proportion to the harm caused. Neither of those is a reassurance written to be kind. They are both findings, and they are here because a learner who believes the subject is about blame will not report the next thing.

So the programme carries no worked example of a catastrophic outcome written for effect, no named real case, and nothing that invites a learner to identify a colleague. Where a case study involves an error, the error is described in order to find the condition behind it.

Every module carries the support lines. You may stop at any point and come back; nothing is timed and there is no penalty. If this subject is heavier than you expected, that is information about what the subject carries rather than about you.

SUPPORT - FOR YOU, NOT FOR A PATIENT

• Nurse & Midwife Support - 1800 667 877. 24 hours, seven days. Free and confidential, for nurses, midwives and students - including after a medication error, which is one of the most common reasons people ring it.

• Lifeline - 13 11 14. 24 hours, seven days. National crisis support.

• Your employee assistance programme - your service's number. Free, confidential and usually available to family members as well. Find the number before you need it - it is one of the ten local questions in Module 00.

• You may stop this programme at any point and come back. Nothing is timed and there is no penalty.

What this course is, and is not

SCOPE OF PRACTICE AND CURRENCY

- This programme is professional development. It is not a qualification, it is not HLTENN040, and completing it does not remove a notation, authorise any learner to administer any medicine, or expand anybody's scope of practice. Authority to administer comes from four things at once: your registration and any notation on it, your education and demonstrated competence, your employer's authorisation, and your state or territory's drugs and poisons legislation. This course is not a medicines reference and contains no dose, strength, rate, frequency or drug-specific clinical information - for those, use the Australian Medicines Handbook or equivalent, the product information, your service's guidelines and your pharmacist. It is not clinical advice about any individual patient. Where your service's policy or your jurisdiction's legislation differs from anything in this course, those apply.
- Sources and their versions, retrieved 19/09/2026. Enrolled nurse scope and the notation: NMBA Fact sheet: Enrolled nurses and medicines administration, VERSION 3.1 APPROVED JULY 2023, next review due May 2027. Supervision definitions and the three key features: NMBA Fact sheet: Enrolled nurse standards for practice, version 3.0 approved March 2023 - CURRENCY NOTE: its stated next review date of February 2025 has passed, and it remains the current published fact sheet. Standards themselves: NMBA Enrolled nurse standards for practice, commenced January 2016. Medication safety: NSQHS Standards second edition, updated May 2021 - Medication Safety Standard, 15 actions across 4 criteria. Medication charts: ACSQHC National Inpatient Medication Chart family.

NOT stated in this course, because they belong to a prescriber, a pharmacist, a legislature or your workplace: any dose, strength, rate, frequency, concentration or duration for any medicine; any drug-specific indication, contraindication or interaction; any advice on whether a named medicine may be crushed, opened or altered; your state or territory's Schedule 8 storage, witnessing, register and discrepancy requirements; your jurisdiction's rules on verbal and telephone orders; your service's second-checking policy and who may be a checker; and any injection or intravenous technique.