

Direction to Administer forms (Community nursing forms) update  
March 2026

### **Forms for nursing and residential home patients**

Direction to Administer forms are commonly written for patients in residential homes. However, the practice varies for nursing homes, creating inconsistency in the process and on occasion, unnecessary delay in patient care.

It is now advised that a Direction to Administer form is written for **both** nursing and residential home patients as needed. Please kindly implement this practice going forward for safer, consistent and timely care for our patients.

### **Update to Allergy box**

Previously, if a patient had no allergy recorded, then the allergy box in the forms remained blank.

The box in all DA forms will now prepopulate with “No known allergies recorded in medicines allergies section.”

Please note that the responsibility for checking allergies recorded lies with both the prescriber and the nurse administering the medication as per their regulatory requirements.

### **Reminder – save forms as final**

If forms are not saved as final, and open to edit, then...

- There is no audit trail of the first form when written as this will be overridden.
- It may have the GMC/registration number of the first prescriber and then the signature of the new prescriber leading to governance and safety issues.

Therefore, the governance policies for community nurses state that they must not administer from a form that is not ‘saved as final’ which can cause further delay to patient care. A new form needs to be written if any change is made to medication or dosing.

The written ‘How to’ guides for [SystemOne](#) practices and [EMIS practices](#) support with how to ensure the forms are saved as final.

Thank you for supporting us with the safe use of the Direction to Administer forms.  
If you have any queries or concerns please contact us on [nnicb-nn.medsman@nhs.net](mailto:nnicb-nn.medsman@nhs.net).