



# THE BRITISH RACING SCHOOL

## Medical and Administration of Medicines Policy

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<b>Signature of Chief Executive</b>	

## **Introduction**

The British Racing School (BRS) seeks to ensure the safe, and appropriate administration of medication to trainees, Staff and Visitors with special provision for trainees with medical/health needs within the British Racing School.

The BRS is committed to ensuring that all trainees with medical conditions, in terms of both physical and emotional/mental health, are properly supported so that they can have a full and active role in training and learning, remain healthy, and achieve their full potential.

The BRS acknowledges that most trainees will at some time have short-term medical needs, the BRS will manage these inline with this policy.

Some trainees may have longer term medical needs and may require medicines on a long-term basis to keep them well and able to function to the best of their ability.

## **Purpose**

This policy seeks to support trainees with both long-term and short-term health needs.

The BRS will aim to minimise any disruption to the trainees training/learning as far as possible and work with parents/carers and health professionals to ensure this.

## **Scope**

This policy applies to all trainees, staff and those working closely with our trainees. Nurse will also have their own Patient group directions (PGD) to follow as well as the Nursing and midwifery Code of Conduct.

## **Managing medicines whilst at the BRS**

The BRS does not permit trainees to carry medication on them whilst attending yard including riding duties or any other training activity. If there is a need for emergency medication for example, severe anaphylaxis treatment (Jext or Epi pen) or respiratory inhalers, a risk assessment will be carried out to assess risk, health, and safety. Such medication will be held by the instructor on field during riding activities and in the Yard Office during yard duty.

Medicines will only be administered at BRS when it is detrimental to a trainee's health or training attendance not to do so. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside learning hours, early morning-lunch time-after evening stables or during free time.

No trainee under the age of consent (Frazer Gillick Competent) will be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the trainee without the knowledge of the parents an example being the Contraceptive Pill.

A trainee under 16 will never be given medicine containing Aspirin unless prescribed by a doctor.

### **Non-prescription medicines**

Unprescribed medication, e.g. for pain relief such as paracetamol and ibuprofen.

- The BRS empowers and encourages trainees to take responsibility of such medication, and keep it safe in a container with a lid, and stored in the bedside drawer.
- Trainees are informed at induction that they are not permitted to dispense any medication to other trainees.
- If a trainee has a head ache or needs analgesia and they do not hold their own supply they are advised to attend the Hostel Office /or the School Nurse.
- Analgesia will be administered with verbal or written consent of the parent/carer which will be sought at induction meeting.
- Administering medication will be recorded and documented on "Locker" the record system in school.
- All medications stored in the Welfare Managers office or Nurses Room will be signed in and out of the controlled drug record book regardless of this being a controlled medication or not. This log will be kept in a locked drawer.

Staff administering any non-prescription medication will check:

Maximum dosages

Expiry Date

When the previous dose was taken.

Ask any allergies

Staff who administer the medication will document on Locker.

### **Prescription Medicines**

NB Prescription medicines or controlled substances **which have not** been prescribed by a medical practitioner will not be administered at the BRS nor held onsite.

Prescription medicines should only be taken during the day when essential.

BRS will only accept prescribed medicines that are

- In date,
- Labelled and intact,
- Provided in the original container as dispensed by a pharmacist
- Include instructions for administration, dosage, and storage.
- Medicines will only be administered according to the instructions on the pharmacy label and with written parental consent.

Staff may administer a controlled drug to the trainee for whom it has been prescribed.

Any trainee who has been prescribed a controlled drug (ADHD Medication) may legally have it in their possession if they are deemed Fraser Competent to do so, the BRS Welfare team will support and monitor this. Staff will follow the self-administration of medicines algorithm and the Nurse will assess if the student is deemed safe/competent to self-manage their own medications – this will be uploaded on the students Lockers and reviewed as appropriate.

#### **Consent for young people who are 16 or over:**

The Department of Health (2001) Seeking consent- Working with children states that:

*“Once children reach the age of 16, they are presumed in law to be competent to give consent for themselves for their own surgical, medical or dental treatment, and any associated procedures, such as investigations, anaesthesia or nursing care.”*

This means that in many respects they should be treated as adults – for example if a signature on a consent form is necessary, they can sign for themselves.

However, it is still good practice to encourage competent children to involve their families in decision-making.

*“Where a competent child does ask you to keep their confidence, you must do so, unless you can justify disclosure on the grounds that you have reasonable cause to suspect that the child is suffering, or is likely to suffer, significant harm. You should however seek to persuade them to involve their family, unless you believe that it is not in their best interests to do so.”*

- Any medicines such as Concerta (methylphenidate) (ADHD medication) which requires double locking the BRS would advocate that medication is stored securely, in a locked cupboard in the Facilities Office. However, we would never deny the trainees liberty if they declined this.

- Wherever there are specific requirements needed with a controlled medicine, to meet the medical needs of an individual in school, then the BRS will work within the medical and DfE guidance regarding this.

## **Records**

Controlled drugs record book will be updated when the students require any medications and daily checks to be completed by nurse/hostel supervisor.

The BRS will keep a record of all medicines administered to individual trainees, stating what, how and how much was administered, when and by whom.

Any side effects of the medication to be administered at school will be noted (in line with DfE guidance 2014 Template D).

## **Storing Medicines**

The BRS will keep prescribed medicine classified as a **controlled drug** (ADHD Medication) securely stored in a non-portable container and only **named staff** will have access.

If a trainee self-medicates for ADHD, medication can be held in their room, however, we will have open and honest discussion with the trainee to risk assess and determine their understanding of and ability to keep safe. Nurse to complete a self-administration of medication assessment to deem students safe to self-administer medications.

Controlled drugs will be returned to the trainee/parent/carer when no longer required, or out of date. The BRS is not able to take responsibility for discarding or transporting medications.

Trainees are encouraged to bring their own small fridge for medicines to be refrigerated. However there is a fridge in the Nurses Room that may be used if required.

It is the parent's responsibility to collect and dispose of out of date or unused medication. It is the parent/carer's responsibility to ensure that medicines sent to school are 'in date'.

If new supplies are needed it is the responsibility of the parents to supply medication, BRS staff will inform parents when there is 10 days' worth of medication left to allow plenty of time for a repeat prescription to be fulfilled.

Sharps boxes should always be used for the disposal of needles and other sharps.

## **References**

**Understanding ADHD** available online @ <https://www.webmd.com/add-adhd/childhood-adhd/understanding-adhd-basics> accessed January 2017

Stress and Anxiety available online @ <https://www.clinical-partners.co.uk/child-adolescents/a-z-of-issues/teenage-and-child-anxiety-support> accessed January 2018

Department of Education (DfE) **Support for pupils with medication needs** available online @ <https://www.education-ni.gov.uk/articles/support-pupils-medication-needs> accessed January 2018

Department of Education (DfE 2017) **Supporting pupils with medical conditions at school** available online @ <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3> accessed January 2017

Department of Education (DfE) (2017) **Supporting pupils with medical conditions in school templates** <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3> accessed January 2017

Department for Education (DfE) Supporting pupils with medical conditions: **Links to other resources** <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3/supporting-pupils-with-medical-conditions-links-to-other-useful-resources--2>