



## **GBS Physiotherapists Medication Management Policy**

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## Definitions

“Appointed Doctor”	means any doctor appointed by GBS to travel with the GBS Team;
“EIS”	means the English Institute of Sport;
“GBS”	means GB Snowsport Ltd.;
“GBS Athlete”	means an athlete who is part of a GBS Team/GBS Squad;
“GBS CMO”	means the GBS Chief Medical Officer;
“GBS Employee”	means staff who are employed by GBS;
“GBS Lead Physiotherapist”	means the individual who leads the GBS physiotherapy team and strategy within the organisation;
“GBS Physiotherapist”	means a physiotherapist working with GBS as either a GBS Employee or as a contractor;
“GDPR”	means the General Data Protection Regulation (EU) 2016/679;
“HPIC”	means Health Professional in Charge;
“PDMS”	means the Performance Data Management System;
“PGD”	means a Patient Group Direction;
“POM”	means Prescription Only Medicine;
“PSD”	means a Patient Specific Direction;
“OTC”	means Over the Counter Medicines.

## 1. Introduction

- 1.1. This document contains the GB Snowsport (GBS) Physiotherapists Medication Management Policy (the “Policy”). There is a statutory requirement for GBS to have written policies and procedures in place to ensure the safe and secure handling of medicines. It is essential that all GBS Physiotherapists read and understand this guidance information.
- 1.2. The Medicines Act 1968 does not permit practitioners who are not qualified prescribers to administer or supply prescription only medicines (POMs) unless one of three types of instruction is in place:
  - 1.2.1. A signed prescription.
  - 1.2.2. A signed Patient Specific Direction (PSD).
  - 1.2.3. A Patient Group Direction (PGD).
- 1.3. If non-prescribing health care professionals are to administer a medicine on the instruction of a doctor, the doctor must be able to show that they have appropriate mechanisms in place to ensure that their practice meets statutory requirements. Since these mechanisms for supply and administration are statutory, the fact that a practitioner has followed them is mitigation to any ensuing liability.
- 1.4. As a breach of the Medicines Act 1968 would result in a criminal action, it is vital that GBS Physiotherapists always adhere to the procedures outlined in the Policy. The clinical accountability for the appropriateness of the medicine rests entirely with the prescriber.

### Aims

- 1.5. To provide guidance on the correct management of medication to ensure safety and security.

### Scope

- 1.6. The Policy applies to all GBS Physiotherapists, the GBS CMO, and Appointed Doctors.
- 1.7. Failure to comply with the Policy will lead to disciplinary action in line with the GBS Disciplinary Policy. If your conduct is unlawful or illegal you may be personally or criminally liable with respect to civil and/or criminal proceedings, claims, or actions.
- 1.8. The Policy adopts the legal framework outlined in the Medicines Act 1968 and the Misuse of Drugs Act 1971. Full details concerning legislation can be found at <https://www.legislation.gov.uk>.

- 1.9. The Policy is designed to be read in conjunction with the GBS Medical Record Keeping Policy, the GBS Physiotherapy Standards Policy, and the GBS PCTO Standard Operating Procedure that are published by GBS. These documents may receive revisions and updates occasionally, with the most up to date versions being available on the GBS Website.

## 2. Dispensing and Administering Medicines

- 2.1. When a GBS Physiotherapist is the only medical practitioner travelling with a GBS Team, then they will be acting as the Health Professional in Charge (HPIC). POM and Over the Counter Medicines (OTC) e.g. paracetamol, ibuprofen, loratadine, loperamide, can only be issued according to a PSD (which is an instruction for medicines to be supplied to a named patient). There are two types of situation where this may be applicable; medicines dispensed for a pre-existing medical condition and medicines dispensed in response to an acute onset single event.

### For Pre-Existing Medical Conditions

- 2.2. If a HPIC carries and dispenses medicines, they must have a pre-prepared and individual PSD for each GBS Athlete. The PSD issued must be created within the GBS Athlete's EIS PDMS notes by the GBS CMO.
- 2.3. Before a HPIC can issue medications according to the GBS CMO's PSD, the GBS CMO must be satisfied that that person has the skills, knowledge, and experience necessary to undertake the task safely and competently.
- 2.4. Each GBS Athlete's PSD should be reviewed regularly to ensure that it remains within the validity period as set by the GBS CMO. It should ideally be reviewed prior to every episode of travel.
- 2.5. In situations where a GBS Athlete requires regular medication for a known complaint or if the GBS Athlete experiences symptoms appropriate for treatment by medicines documented on their PSD, the GBS Athlete must request a supply of the medicine from the HPIC. **It is important that the HPIC does not make the medication selection decision.** The appropriateness of the medicine supplied should not rely on any form of patient assessment made by the HPIC.
- 2.6. The HPIC should check the expiry date, batch number, and issue the medicine according to the PSD instructions. Where possible, a second check should be made by another person.
- 2.7. The HPIC must ensure that the GBS Athlete is given all necessary information about the medicine supplied and where possible, the GBS Athlete should be given a drug information leaflet.

- 2.8. The HPIC must record the supply of the medicine via the EIS PDMS by selecting 'Dispense PSD' under 'Manage Interventions', and selecting the appropriate PSD prepared by the GBS CMO. The HPIC cannot edit any drug or usage information, but they must record the batch number and expiry date before saving. This will provide a formal record of the dispensing in accordance with the PSD.

### **In Response to an Acute Onset Single Event**

- 2.9. These events require a direct consultation. In an emergency, this should be with a local doctor. In a non-emergency situation, this should be with the GBS CMO.
- 2.10. The non-emergency situation procedure is as follows:
- 2.10.1. The HPIC contacts the GBS CMO to inform them of the GBS Athlete's ailment.
  - 2.10.2. The GBS CMO speaks directly with the GBS Athlete to assess their condition and then decides on the medicine required.
  - 2.10.3. The GBS CMO completes a PSD within the GBS Athlete's EIS PDMS notes.
  - 2.10.4. If for any reason, either the GBS CMO or the HPIC are unable to access the EIS PDMS at this time to allow completion/viewing of the information; PSD details can be emailed or texted to the HPIC. It is then the responsibility of the GBS CMO to complete the PSD within the EIS PDMS as soon as possible and for the HPIC to ensure this is done. As soon as the formal record is completed within the EIS PDMS, the email or text should then be deleted from the phone for confidentiality reasons.
  - 2.10.5. The HPIC should check the expiry date and batch number, then issue the medicine according to the PSD instructions. Where possible, a second check should be made by another person.
  - 2.10.6. The HPIC must ensure that the GBS Athlete is given all necessary information about the medicine supplied. Where possible, the GBS Athlete should be given a drug information leaflet.
  - 2.10.7. The HPIC must record the supply of the medicine within the GBS Athlete's EIS PDMS notes. On completion, there will be a prompt to export the details to a printable form, which should be signed.
  - 2.10.8. On return to an EIS centre, the signed form should be scanned and attached to the intervention on EIS PDMS. The GBS stock list must also be updated.

### 3. Secure Storage of Medicines

- 3.1. The GBS medicine stock should be stored according to policy guidelines within the GBS facility.

#### **Storage When Travelling Away from a GBS Site**

- 3.2. When an Appointed Doctor is not travelling with the GBS Team, the HPIC always needs to ensure the security of all medicines.
- 3.3. A stock list of the quantities of all medicines being carried must always be available. GBS Physiotherapists and Appointed Doctors are also advised to carry or have online access to a drugs formulary.
- 3.4. POMs should be carried in a lockable hard case container that remains in the HPIC's possession during travel.
- 3.5. For travel in a car, the locked container should be locked in the boot where it cannot be viewed. Medicines should not be left overnight in unattended vehicles.
- 3.6. For air travel, the locked container should be checked into the hold.
- 3.7. When staying in a hotel, the locked container should be secured in the HPIC's room.
- 3.8. **In order to comply with current Department of Health and Government legislation and Misuse of Drugs regulations; under no circumstances will a GBS Physiotherapist procure, transport, store, or supply any type of Controlled Drug.**

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