First aiders, medicines and the law.

WARNING: I'm not a lawyer. This article is my best attempt to find out what the UK law actually says about what first aiders can and can't do with medicines as distinct from rumours and opinions. I encourage you to click on the links, read the legislation and form your own opinions.

A lot of the previous legislation which had built up over the years has been tidied away into the Human Medicines Regulations 2012 [http://www.legislation.gov.uk/uksi/2012/1916/contents/made](http://www.legislation.gov.uk/uksi/2012/1916/contents/made).

This is mostly concerned with the manufacture, marketing, prescription, sale and supply of medicines. The following relates to administration:

Section 214(2) [http://www.legislation.gov.uk/uksi/2012/1916/part/12/chapter/2/crossheading/prescription-only-medicines/made](http://www.legislation.gov.uk/uksi/2012/1916/part/12/chapter/2/crossheading/prescription-only-medicines/made)

> (2) A person may not parenterally administer (otherwise than to himself or herself) a prescription only medicine unless the person is—
> (a) an appropriate practitioner other than an EEA health professional; or
> (b) acting in accordance with the directions of such an appropriate practitioner.

i.e. it restricts the parenteral (i.e. not by mouth) administration of medicines, but I can't find anywhere that it restricts the administration of non-parenteral medicines. This is essentially the same as the legal position prior to these regulations coming into force.

For parenteral medicines there's an exception found at section 238; [http://www.legislation.gov.uk/uksi/2012/1916/regulation/238/made](http://www.legislation.gov.uk/uksi/2012/1916/regulation/238/made)

> Regulation 214(2) does not apply to the administration of a prescription only medicine specified in Schedule 19 where this is for the purpose of saving life in an emergency.

Schedule 19 [http://www.legislation.gov.uk/uksi/2012/1916/schedule/19/made](http://www.legislation.gov.uk/uksi/2012/1916/schedule/19/made) includes (amongst other medicines)

- Adrenaline 1:1000 up to 1mg for intramuscular use in anaphylaxis
- Glucagon injection
- Glucose injection
- Hydrocortisone injection
- Naloxone hydrochloride
That’s administration, now for supply. Section 255 (4) states;


(4) A person (“P”) is guilty of an offence if—

(a) P has in P’s possession a medicinal product to which regulation 214(1) applies; and

(b) P intends to supply it otherwise than in accordance with a prescription of an appropriate practitioner.

So possessing a prescription only medicine with intent to supply it other than accordance with the prescription is breaking the law. This would include asthma inhalers. It's a moot point as to whether the CPS / Procurator Fiscal would decide to take action against you, but you would be breaking the law.

To summarise the Human Medicines Regulations 2012 as they affect the administration of medicines by first aiders;

1.) If it’s there, there’s no regulation saying you can’t administer medicines by mouth (irrespective of whether they’re prescription only, or to whom they’ve been prescribed).

2.) If you want to stick needles into people, then there are restrictions, but if it’s an emergency (and frankly whenever else would a first aider be injecting people) then there’s a list of drugs that anyone can administer to anyone. This includes adrenaline at the concentration that it’s found epi-pens.

3.) If you've brought a prescription only medicine with you, with the intention to use it on somebody else you’re probably breaking the law.

In October 2014, the Human Medicines Regulations were modified to allow a school to supply and administer Salbutamol (blue asthma) inhalers for emergency use.

You can find this at http://www.legislation.gov.uk/uksi/2014/1878/regulation/27/made

EVEN IF YOU CAN IT DOESN'T MEAN YOU SHOULD

We are, as in the rest of our lives, potentially liable for anything we do or fail to do. If I have no idea how to use a chainsaw, I probably shouldn't use it. Likewise, if I have no idea about the contraindication and side-effects of a particular drug I probably shouldn't use it.

Undoubtedly the best option is for me not to be involved – someone self-administers their own medication, or it’s administered under the guidance of someone who knows what they're doing. If someone needs a medicine, it would be a good idea for me to make sure they've got it with them at the start of the day.

If I do end up administering medication, common sense suggests I should have a reasonable understanding of what I'm doing, I should obtain informed consent and it would probably make sense to record what I've done.
There is another bit of legislation that could affect us;

Some medicines are also covered under the the Misuse of Drugs Regulations 2001, http://www.legislation.gov.uk/uksi/2001/3998/contents/made which set up a load of restrictions on drugs that could be misused. Unsurprisingly these regulations are amended several time per year. You can see the latest amendments at; http://www.legislation.gov.uk/all?title=The%20Misuse%20of%20Drugs%20Regulations

Schedule 5 includes codeine at the concentration found in over the counter codeine/paracetamol tablets.

Schedule 2,3,4 drugs include diazepam, midazolam, oxycodone, morphine, codeine (at higher concentrations) and many, many more, but strangely not tramadol (as of March 2013).

7.—(1) Any person may administer to another any drug specified in Schedule 5.
(2) A doctor or dentist may administer to a patient any drug specified in Schedule 2, 3 or 4.
(3) Any person other than a doctor or dentist may administer to a patient, in accordance with the directions of a doctor or dentist, any drug specified in Schedule 2, 3 or 4.

To summarise the Misuse of Drugs Regulations 2001 as it affects the administration of medicines by first aiders;

1.) There's no restriction on the administration of over the counter codeine/paracetamol tablets, but there are restrictions on supply.

2.) If you have schedule 2,3,4 drugs, there are significant restrictions, which you should have been made aware of when you were supplied with them.

The source of the belief that first aiders can't administer medication is the HSE's Approved Code of Practice (ACOP) for First Aid at Work http://www.hse.gov.uk/pubns/priced/l74.pdf section 42 of which says;

First aid at work does not include giving tablets or medicines to treat illness. The only exception to this is where aspirin is used when giving first aid to a casualty with a suspected heart attack in accordance with currently accepted first-aid practice

The ACOP provides practical advice to help employers conform with the Health and safety (first aid) regulations 1981 http://www.legislation.gov.uk/uksi/1981/917/contents/made (which themselves don't mention medicines). These do not apply to you when you're not at work. Even within the workplace it is not a legal requirement to conform with the ACOP, but if your employer was prosecuted for a breach of H&S legislation and was operating outside the ACOP, your employer would need to demonstrate that it had complied with the law.

Often the most restrictive requirements are not the legal ones, but those of our employers. If we're at work, we minimise our individual liability by remaining within our
employers protocols.

If you're taking medicines abroad, be aware that drugs legislation varies from country to country. Also transporting some medicines (I'm thinking particularly of opiate painkillers) through some countries could potentially get you into big trouble!

To summarise;

1.) There's no law that says first aiders can never administer medications
2.) It is an offence to possess prescription only medicines with intent to supply contrary to the prescription
3.) There are rules that apply to injections and medicines which could be misused
4.) **Even if you can, it doesn't mean you should**
5.) If you're working for an organisation, find out what their rules are and stick to them
6.) If you're taking medicines abroad find out what the laws are in the country you're going to (and in other countries en-route)

If you've got any corrections or queries feel free to contact me at mail@georgefell.co.uk

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