



Control, Access and Accountability of Medications and Medical Supplies Procedure

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Purpose To provide guidelines to Department of Behavioral Health (DBH) staff to ensure medications and medical supplies, designated for the treatment of DBH clients only, are appropriately logged in/out, stored, administered/dispensed, disposed of when expired/abandoned/deteriorated, and restrict access from persons who are not duly authorized to handle medication(s).

Medication Room Responsibilities The DBH Medical Director requires authorized medical staff ensure compliance with state and federal laws regarding the storage and maintenance of medications as follows:

Responsible Party	Required Action
Registered Nurse (RN), Licensed Vocational Nurse (LVN) or Licensed Psychiatric Technician (PT)	<ul style="list-style-type: none"> • Record the temperature of the medication refrigerator on the <u>Refrigerator Temperature Log (NUR009)</u> once daily, and twice at the beginning and end of the day if electricity and/or refrigerator problems are occurring, to ensure temperature compliance of 36° - 46° F. <ul style="list-style-type: none"> ○ Report any temperature discrepancies above or below the required temperature to the Clinic Medical Director or designee and the Clinic Supervisor with the following information: <ul style="list-style-type: none"> ▪ Number of medications in the refrigerator. ▪ When client last received medication. • Record the temperature of the medication room on the <u>Medication Room Temperature Log (NUR010)</u> once daily, and twice daily at the beginning and end of the day when there is excessively hot temperatures or problems with air conditioning in the building or room, to ensure temperature compliance of 59° - 86° F.

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Medication Room Responsibilities (continued)

Responsible Party	Required Action
Registered Nurse (RN), Licensed Vocational Nurse (LVN) or Licensed Psychiatric Technician (PT), continued	<ul style="list-style-type: none"> ○ Report any temperature discrepancies above or below the required temperature to the Clinic Medical Director or designee and the Clinic Supervisor with the following information: <ul style="list-style-type: none"> ▪ Number of sample and Patient Assistance Program (PAP) medications in the room. ▪ Advisement when PAP clients last received medication. ○ Verify if room temperature variance affected refrigerator temperature and report accordingly. ● Record all incoming and outgoing medications on the appropriate log as indicated in the Recordkeeping section of this procedure.
Clinic Medical Director or designee, Clinic Supervisor, or Program Manager	<ul style="list-style-type: none"> ● Report any temperature discrepancies or anomalies to Nursing Manager, appropriate Deputy Director, and DBH Clinic Medical Director to obtain direction or approval regarding any of the following: <ul style="list-style-type: none"> ○ Returning medication(s) in the refrigerator to pharmacy. ○ Disposing of medication(s) stored in the Medication Room. ○ Procuring new refrigerator and/or thermometer. ● Provide notification to appropriate chain of command if DBH Facilities or building landlord needs to be contacted to correct temperature of Medication Room.

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Recordkeeping It is the responsibility of DBH authorized medical staff to record medications on the appropriate log. The following table indicates all the logs that authorized medical staff of each DBH clinic with a Medication Room shall utilize:

If...	Then DBH authorized medical staff shall...
sample medication is received in the clinic,	<ul style="list-style-type: none"> • enter the information in the incoming section of the <u>Sample Medication Log (NUR004)</u>
sample medication is being administered (or dispensed in Needles Clinic),	<ul style="list-style-type: none"> • enter the information in the outgoing section of the <u>Sample Medication Log (NUR004)</u> • enter medication information in the appropriate DBH client chart
PAP medication is being administered/dispensed to specific client,	<ul style="list-style-type: none"> • enter medication information in the appropriate DBH client chart
medication such as, but not limited to Risperdal Consta, Haldol Decanoate, Prolixin Decanoate, Abilify Maintena, etc. is received from the pharmacy in the clinic for a specific client,	<ul style="list-style-type: none"> • enter the information in the incoming section of the <u>Medication from Pharmacy Log (MDS016)</u>
medication from the pharmacy is being administered to the specified client,	<ul style="list-style-type: none"> • enter the information in the outgoing section of the <u>Medication from Pharmacy Log (MDS016)</u> • enter medication information in the appropriate DBH client chart
medication from the pharmacy is being returned to the pharmacy,	<ul style="list-style-type: none"> • enter the information in the <u>Return Medication to Pharmacy Log (MDS020)</u>. • obtain the signature of another authorized medical staff member as a witness <ul style="list-style-type: none"> ○ obtain the signature of another classification of DBH staff, such as Clinic Supervisor or Clinical Therapist, if the clinic does not have another authorized medical staff • obtain signature of pharmacy courier who retrieved returned medication, if applicable

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Recordkeeping (continued)

If...	Then DBH authorized medical staff shall...
medication from the pharmacy is being returned to the pharmacy, (continued)	Note: If pharmacy refuses to accept medication, DBH medical staff may dispose of medication according to <u>Medication Disposal Procedure (MDS2023)</u>
client brings in medication that needs to be destroyed,	<ul style="list-style-type: none"> • do not accept the medication • refer the client to his/her local pharmacy or fire department to inquire about medication disposal or provide Deterra Drug Disposal Pouch for client's use at home. • accept medication if client safety may be impacted based on the discretion and direction of DBH psychiatrist/physician • enter in the medication on the <u>Client Pharmaceutical Log (MDS019)</u> then follow <u>Medication Disposal Procedure (MDS2023)</u>
medication needs to be destroyed,	<ul style="list-style-type: none"> • enter the information on the <u>Pharmaceutical Waste Log (NUR006)</u> • obtain the signature of another authorized medical staff member as a witness. <ul style="list-style-type: none"> ○ obtain the signature of another classification of DBH staff, such as Clinic Supervisor or Clinical Therapist, if the clinic does not have another authorized medical staff

Note: All logs shall be retained in the appropriate binder within the Medication Room for three (3) years. Medication delivery packing slips are to be kept in a designated binder and shall be verified for accuracy.

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Inspection

The following lists the responsibilities of DBH authorized medical staff regarding inspection of the medication room:

Responsible Party	Required Action
Authorized Medical Staff	<ul style="list-style-type: none"> Inspect the Medication Room, medication cabinets, medication logs, and refrigerator on a monthly basis utilizing the <u>Monthly Medication Inspection Checklist (NUR007)</u> Sign and send the report to the DBH Clinic Medical Director or designee.
DBH Clinic Medical Director or designee	<ul style="list-style-type: none"> Review the report for accuracy Sign and send the report to Medical Services with a carbon copy (cc) to the Clinic Supervisor.

Drug Disposal

The following lists the responsibilities of DBH authorized medical staff regarding disposal of illicit substances or controlled substance medications.

Responsible Party	Required Action
Authorized Medical Staff	<ul style="list-style-type: none"> Dispose of illicit substances if surrendered to staff or found at a DBH site using an approved drug disposal method by rendering the illicit substance non-retrievable which may include use of a drug disposal pouch. Do NOT put illicit substances down sinks or flush down toilets. Dispose of controlled substance medications if expired, damaged, surrendered or found outside of an authorized storage location at a DBH site using an approved drug disposal method by rendering the controlled substance medication non-retrievable which may include use of a drug disposal pouch. Do NOT put controlled substance medications down sinks or flush down toilets.
Designated Staff Witness	<ul style="list-style-type: none"> Directly observe the collection, handling and disposal of illicit substances or controlled substance medications and document the responsible staff name, date, time and location of illicit substance or controlled substance medication disposal.

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Drug Disposal,
continued

Supervisory Staff	<ul style="list-style-type: none"> • If irregularities, deviations or suspicious behaviors occur during the collection, handling or disposal of illicit substances or controlled substance medications, complete an incident report.
Client/Consumer	<ul style="list-style-type: none"> • Clients can dispose of their own illicit substances or controlled substance medications through the use of Detera. • Detera is a disposable and biodegradable pouch that disposes illicit substances or controlled substance medications in a safe and environmentally safe way. • Detera will be made available to clients and consumers through the clinics and outreach events. • DBH Program Mangers will be responsible for ordering and tracking the Detera pouches using the <u>Non-Medication Resource Log (MDS032)</u>. • Detera Pouches can be ordered by contacting Office of Equity and Inclusion at cultural_competancy@dbh.sbounty.gov.

Referenced Forms, Policies, and Procedures

DBH Departmental Forms and Standard Practice Manual:

- Control, Access and Accountability of Medications and Medical Supplies Policy (MDS2008)
- Sample Injectable Medication Policy (MDS2012)
- Prescription Policy (MDS2015)
- Patient Assistance Program Policy (MDS2022)
- Patient Assistance Program Procedure (MDS2022-1)
- Medication Disposal Procedure (MDS2023)

DBH Intranet

- Sample Medication Log (NUR004)
- Pharmaceutical Waste Log (NUR006)
- Monthly Medication Inspection Checklist (NUR007)
- Refrigerator Temperature Log (NUR009)
- Medication Room Temperature Log (NUR010)
- Medication From Pharmacy Log (MDS016)
- Client Pharmaceutical Log (MDS019)
- Return to Medication Pharmacy Log (MDS020)
- Non-Medication Resource Log (MDS032)

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Reference(s) [CA Code of Regulations, Title 9, §1810.435\(b\)\(3\)](#)
[CA Health and Safety Code, §1406 \(o\)](#)
[CA Welfare and Institutions Code, §5667 \(a\)\(b\)\(1\)](#)
[Mental Health Plan Contract, Exhibit A, Attachment 1, §4. L.10](#)
[Disposal Q&A \(usdoj.gov\)](#)
[\(21 CFR 1317.90\(a\)\)](#)
