

### **DCYF Standard Operating Procedure**

#### 2274.1 STORAGE AND PROCUREMENT PROCEDURES

Policy Directive: 20-16

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Approved:

eph E. Ribsam, Jr., DCYF Director

This SOP defines the procedures for the storage and procurement of pharmaceuticals within the SYSC Medical Department.

#### **Procedure**

The following information is to support the implementation of the above referenced policy. This document shall not preclude staff from using their professional judgement based on individual circumstances, consistent with the requirements of the policy.

- I. The medical preparation room is to be locked at all times when not in use.
- II. All medications, syringes, and needles are kept in a locked container, cabinet, medication cart, or medication room for the purposes of staff/youth safety and pharmaceutical security.
  - A. All controlled drugs are stored in a locked compartment within the locked medication container, cabinet, cart, and room.
  - B. Exceptions to this are:
    - 1. Epi-pens;
    - 2. Inhalers; and
    - 3. Furlough/discharge medications, which may accompany the youth when out of the building.
- III. Medications for external use are stored separately from those administered orally or injected. OTC and Ophthalmic medications shall be stored separately.
- IV. Medications are kept at their recommended temperature ranges.
  - A. Medications requiring refrigeration are stored in the Medical Department refrigerator.
- V. Any possible discrepancy in the contents of a medication container are to be reported to the pharmacy (e.g., change in color, precipitate, mislabeling, wrong dose) as soon as possible to prevent the disruption of a youth receiving their medication in a timely manner.

- VI. If a dose appears to be missing from the multi-dose bubble pack, the packet does not look right, or if there is a question that the medication is not labeled correctly, the original new medication order needs to be checked.
  - Α. The Pharmacy is notified of any errors, to correct the situation.
- VII. A prepared dose of medication that is not administered (e.g., spilled, dropped, etc.) is to be discarded appropriately. It shall never be returned to a stock container.
  - The nurse shall prepare another dose and arrange for replacement, depending on Α. the need.
  - Controlled drugs require the signature of 2 registered nurses on the Narcotic Sheet B. as witnessing the drug's disposal.
- VIII. Outdated medications shall be returned to the Pharmacy for disposal.
- IX. All controlled drugs require the prescribing physician, dentist, or psychiatrist's Drug Enforcement Administration registration number. The Medical Department shall ensure that all prescribing doctors file their number with the Pharmacy.
- Χ. Medications prescribed for youth committed or detained at SYSC are filled by the contracted Pharmacy or local back up Pharmacy:
  - A copy of the Physician's Order Sheet (Form 2261) is faxed to the pharmacy; A.
  - After the prescription is filled, the pharmacy will send the medications to the SYSC B. Medical Department;
  - The nurse will verify that the correct medications have been received; C.
    - If medication has been incorrectly dispensed from the Pharmacy, this shall be 1. reported immediately and the medication shall be returned; and
  - D. The nurse will stock the medications in the med room.
- The pharmacy will fill orders for stock, over-the-counter (OTC), and controlled drugs, (a XI. signed order/prescription is required) in the same manner.
  - A nurse shall order stock medications (e.g., aspirin, Tylenol, cold medicine, etc.) on Α. an as-needed basis.
- XII. Controlled drugs are inventoried at the change of each shift by the on-coming and offgoing nurses.

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- The inventory sheet shall include the date and time the medication is inventoried Α. and logged in, and be initialed by both nurses completing the inventory.
- B. Each nurse shall sign the legend with their initials, full signature, and professional credential.
- XIII. It is common for new admissions to SYSC to arrive with medications. The following procedure is to be followed to ensure safe storage and continued treatment:
  - A. Upon a youth's admission, any medications accompanying the youth are to be turned over to the nurse immediately;
  - The nurse will verify that any prescription is current by verifying the prescribing B. information on the label with the prescribing physician, and if unavailable, then with the dispensing pharmacy or last placement through telephone contact;
  - C. Any community-acquired medication is kept in a labeled bag, and stored in the med room. The disposition of the medication is recorded by marking "in storage" on the Nursing Kardex (Form 2255); and
  - D. The prescription of a community-acquired medication will need to be continued with a physician's order from the SYSC physician.
- XIV. The following circumstances warrant the use of prescription drugs filled by community pharmacies/agencies:
  - The drug cannot initially be procured through the SYSC Pharmacy and the delay A. would cause missed doses: or
  - B. The drug is not available from the SYSC pharmacy.
- XV. Prior to using prescription medication filled by a community pharmacy:
  - A. The nurse will inspect the contents and visually ascertain that the drugs are consistent with labeling. Suspicious contents necessitate rejection for use;
  - After the medications are inspected, permission is obtained from the SYSC physician B. to use the community-acquired medication; and
  - C. This is noted on the Physician's Order Sheet (Form 2261) as part of the order as "may use personal medication supply."

#### Applicable Forms Nursing Kardex 2255 Physician's Order Sheet 2261

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## **Glossary and Document Specific Definitions**

A-B C-D E-F G-I J-L M-N O-Q R-S T-V W-Z

# For the Purpose of this Document:

"Controlled drug" means any drug or substance, or immediate precursor, which is scheduled pursuant to RSA 318-B:1-a.

"OTC" or "Over-the-counter" means a medicine that may be sold without a doctor's prescription.

Document Change Log		
PD	Modification Made	Approved Date

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