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# **Acacium Group**

# **Controlled Drugs**

**Procedure Reference | SOP MEDS 01**

**Version | V4.3**

<b>Procedure Name</b>	Controlled Drugs
<b>Purpose of Document</b>	To ensure that the correct preparation, procedures & outcomes are achieved by implementing a consistent and systematic approach to controlled drugs management in the community setting
<b>Target Audience</b>	All Nurses & appropriately trained carers
<b>Version</b>	V4.3
<b>Author</b>	Karen Matthews-Shard
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<b>Lead Director</b>	Karen Matthews-Shard
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<b>Last Reviewed</b>	June 2024
<b>Next Review Date</b>	June 2027
<b>Equality Impact Assessment (EIA) Form</b>	Acacium Group is committed to Equality, Diversity and Inclusion and in line with our values, we strive to ensure that everyone that is part of the Acacium community is not disadvantaged or discriminated against given their individual need or characteristics. To support this, an Equality Impact Assessment has been undertaken on this policy/procedure. This information is held centrally and can be requested from the Clinical Governance Team.
<b>About Acacium Group</b>	Details of all Acacium Group trading companies that this policy applies to are detailed within Appendix A

Document History			
Version	Date	Changes made/comments	By whom
V1	Dec 2016	Implementation of document history page	KNF/VM
V1	Apr 2018	Updated front sheet to include new review frequency date.	KMS/VM
V2	Sep 2019	3 yearly review and implementation of new template	Clinical Advisory Group
V2.1	Jun 2020	Colomycin update	TJ
V2.2	Oct 2020	Updated re rebrand	CC
V3	Jul 2022	3 Yearly Review	Clinical Advisory Group
V4	Jan 2024	Rebrand	Clinical Advisory Group
V4.1	Jun 2024	Reviewed and updated	Clinical Advisory Group
V4.2	Aug 2024	'Signing over CDs' section added	Clinical Advisory Group
V4.3	Aug 2024	Transportation of CD's section and Reference updated	Clinical Advisory Group

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## 1. Introduction

Controlled drugs (CDs): safe use and management NICE guideline Published: 12 April 2016 states that any practitioner who is involved in the prescribing, dispensing, or administering of CDs should:

- Confirm any recent opioid dose, formulation, frequency of administration and any other analgesics prescribed for the client.
- Ensure any intended dose increase is safe (not normally more than 50% higher than the previous dose)
- Ensure they are familiar with the medicines e.g. starting dose, frequency, dosing increments, overdose and side effects

In a client's own home, CDs that are administered by a registered nurse/carer must be recorded on the Controlled Drug sheet and if possible, verified by a second person (staff member, Client, or family member). Staff administering medicines including controlled drugs must be trained and competent to do so.

If there are any discrepancies the member of staff must contact the package clinical lead. An incident must be completed on Datix and then escalated appropriately by the demand registered manager must be notified. If the incident occurs out of normal working hours, then the senior manager on call must be notified.

If the incident is moderate or above, this must be escalated to Clinical Governance.

If this is a serious incident, you will need to call the Global Clinical Director or Group Chief Nurse.

Drugs considered to be a Controlled Drug and require specific management, are listed under the misuse of drugs legislation and may be of varying classification. Details of the CD's fall under the Misuse of Drugs Act 1971 (MDA) and the Misuse of Drugs Regulations 2001 (MDR), please refer to <https://www.gov.uk/government/publicationscontrolled-drugs-list--2/list-of-most-commonly-encountered-drugs-currently-controlled-under-the-misuse-of-drugs-legislation> for a specific list.

## 2. Aim

To ensure that controlled drugs are managed and administered in line with this consistent approach and within the legislation of the Medicines Act and good guidance for Controlled drugs 2009.

## 3. General

### Receipt of controlled drugs

Enter CD's as soon as received into the register. Entries must be legible in black ink and permanent and must not be altered, cancelled or obliterated. Erroneous entries should be deleted by scoring through with one line and the correct entry made underneath. The quantity of each Controlled Drug received and the total number present must be checked and recorded by 2 designated people.

On the Controlled Drug Sheet:

- Date received
- Name & designation of person receiving and the person checking
- Name of drug, preparation, strength and quantity
- The running balance of stock reported to account for the delivery

Place CD in appropriate secure place out of the reach of children identified by the client and/or documented in the care plan.

### Drug Schedules.

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Per The Misuse of Drugs (Safe Custody) Regulations 1973 CDs should be stored in a safe and secure manner be that in a cabinet, cupboard or otherwise secure storage solution.

The Acacium Group require all controlled drugs to be stored, documented and recorded.

### **Running balance checks and record keeping.**

Balance checks are an important step in helping to identify the misuse or incorrect administration of controlled drugs. (CQC The safer management of controlled drugs: Annual update 2022).

This is the procedure to follow when checking stocks of CDs should consist of the following steps and detailed in each client's care plan.

Any deviation to this process should be as a result of a Risk Assessment and associated management plan documented by the client's Clinical Lead and detailed within the Medication Management CD Care Plan:

- Running balances should be checked on a shift by shift basis, preferably at handover
- Expiry dates of all CD's should be checked at least once per week Whenever a CD is receivedsupplied or administered the running balance of the CD involved should be checked by two carers, if possible, this could be the client, family member or other designated individual may check.Check the expiry date of all CD's – if any are out of date refer to the SOP MEDS 9 removal of medicines from the home. (**Note the out of date CD remains included in the balance until destroyed/ removed from the premises**)
- Check the actual stock of CD's against the running balance

If stock and running balance match:

Confirm balance by initialling and dating it in the register – both designated people to sign If the stock and running balance do not match:

- Check again – if resolved, confirm balance and sign
- If still not balanced report the discrepancy to the Clinical Lead, who must report it to the Group Clinical Director/ Chief Nurse, Registered Manager as soon as possible via Datix system.
- The Clinical Lead will record the discrepancy on Datix as an incident which must include:
  - Date and time discrepancy was discovered
  - Drug, preparation and strength involved
  - The nature of the discrepancy
  - The names of the staff members involved in the discovery
  - Any other relevant information

The Clinical Lead must then investigate the discrepancy at the earliest possible opportunity by:

- Examining and re-counting the current stock
- Examining current and previous entries in the Stock Check Documentation and Medication Administration Record
- Check the calculation of the running balance
- Any other relevant investigation

If the discrepancy is resolved the appropriate amendment is made on the CD sheet – current balance confirmed as correct, dated and initialled by all members of staff involved. The incident report is updated and closed.

**If the discrepancy is not resolved the Chief Nurse/Head of Clinical Service and Registered manager must be notified immediately** and a decision will be made to instigate disciplinary procedures if applicable and/or externally report the discrepancy in line with the regulations and best practice.

Regulated bodies (CQC, RQI, SCI, CIW) must be informed of a CD discrepancy by the Registered Manager and in line with the Incident Reporting process. All documentation must be saved to the associated Datix.

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## Transportation of CD's

Registered and Non-registered carers involved in the delivery of client care should not routinely transport a client's own CD's to and from that client's home, unless it is necessary for the client's care provision and has been risk assessed as part of the Medication Management Risk Assessment.

However, healthcare professionals, plus formal carers and client's representatives are legally allowed to transport CD's to a client, provided the CD's have been prescribed, by an appropriate prescriber, for that client.

If transportation is required, then:

- Keep the CD's out of view during transit
- Do not transport CD's unaccompanied via mail or taxi services

On receipt, the integrity of the packaging should be examined and if any tampering is evident escalate it immediately to the Clinical Lead/Clinical Manager. A risk assessment should be completed if you are transporting controlled drugs.

Action	Rationale
1. Medication should ideally be picked up by a family member or delivered to the clients home by the pharmacy	To ensure that a consistent delivery of the medication is provided and not impacted by a change in staff or carers
2. Where this cannot occur, Consent from the client, or client's representative, is needed prior to any medications being picked up. The patient or their representative must complete part 1 of the FP10 and the person collecting the medication must complete parts 2 and 3.	This is a requirement by law and is part of dispensing
3. Medication pick up should only be completed during the workers hours of duty.	To ensure that medication is delivered during work time and risks of loss/damage reduced
4. The worker must ensure that they have ID with them when collecting Controlled Medication	This is a requirement by law. CD stocks and their safe custody remain the responsibility of the supplier until the recipient acknowledges receipt
5. Staff to ensure that they are aware of the stock content and confirm that it is as expected	To ensure that there are no missing medications and or changes that they are not aware of. Any changes should be escalated to the manager on call

6	<p>All road vehicles carrying CDs should be in good repair and maintained in accordance with the manufacturer's recommendations. The vehicles should have adequate locking systems and be fitted with anti-theft devices (alarms, immobilisers)</p> <p>Staff should not leave the car unattended except in an emergency and should not carry any unexpected or prior agreed passengers</p>	<p>This is to ensure safety of delivery and reduce the risk of carrying a CD</p>
7	<p>Stock should be checked in and noted on the CD check list on arrival at the clients home</p>	

### **Signing over CDs**

In the event that a client is being transferred to an alternative setting (hospice/hospital) and their CD medications need to be taken with them, the medication should be handed over to the receiving staff. The CD's should then be signed out in the CD log, stating how much was handed over. Upon taken the care of the client back over, the worker should check the quantity of medication and sign it back in to the CD log. Any discrepancies can then be discussed and investigated by the alternative setting

### **Destruction of CD's**

All CD's must be returned to the community pharmacy for disposal/destruction. The carer/nurse must take the CD sheet to the pharmacy and ensure the pharmacy stamps or signs the removal of the CD from the sheet. Under NO circumstances will Acacium Group staff dispose of or destroy CD's in the client's home. Staff returning controlled drugs to pharmacy may be asked to provide personal identification.

## **4. Equipment**

- Drugs to be administered
- Medication administration chart/DNL documentation
- Administration aid, if required

## **5. Procedure**

	Action	Rationale
1.	<p>Consult the Medication Administration Record and ascertain the following:</p> <p>a) Drug</p> <p>b) Dose</p> <p>c) Date and time of administration</p> <p>d) Route and method</p> <p>e) Diluents as appropriate</p> <p>f) Validity of prescription</p> <p>g) Allergies</p>	To ensure the Client is given the correct drug in the prescribed dose using the appropriate diluent and by the correct route (NICE guidelines 2017).This is also in line with Medication Management

	<p>The six rights: Prior to administering any medications it is important to consider the six rights:</p> <ul style="list-style-type: none"> <li>• Right drug</li> <li>• Right time</li> <li>• Right dose</li> <li>• Right route</li> <li>• Right client</li> <li>• Right To refuse</li> </ul> <p>As well as the six rights it is also important to consider the right position of the client for administration of the medication and the right documentation.</p>	
2.	Select the correct drug.	To ensure that the correct drug is administered.
3.	Check the stock against the last entry with a second person (this can be a trained, competent carer or designated individual).	To comply with Acacium Group medicines management policy and DH 2003: NMC 2008 & NPSA 2006 guidance.
4.	Check the appropriate dose against the prescription.	
5.	Return the remaining stock to its container and storage area.	
6.	Where possible, check the client's identity by asking them their full name	To ensure you have the correct patient.
7.	Administer the drug and sign the Medication Administration Record.	
8.	Record the administration on the appropriate charts.	To maintain accurate records, provide a point of reference in the event of any queries and prevent duplication of treatment (DH 2003: NMC 2005 & 2008).

## 6. Associated Policies / SOPs

### Policies

CLIN 03 Medicines Management Policy

CLIN 06 Consent Policy

### SOPs

SOP Meds 02 Oral Administration

SOP Meds 03 Rectal Administration

SOP Meds 04 Subcutaneous Administration of Medicines

SOP Meds 05 Administration via Gastrostomy and Jejunostomy Tubes (PEG, PEJ and JEJ)

SOP Meds 06 Intramuscular Injection Administration

SOP Meds 07 Peripheral Intravenous Administration

SOP Meds 08 Administration via Central Line (Hickman, PIC and Porta Cath)  
SOP Meds 09 Removal of Medicines from Client's Home  
SOP Meds 10 Vaginal Administration  
SOP Meds 11 Topical & Transdermal Application of Medicines  
SOP Meds 12 Administering Ear Drops  
SOP Meds 13 Administration of Eye Drops or Ointments  
SOP Meds 16 Buccal or Sublingual Administration of Medicines  
SOP Meds 17 Administration of Medication via a Metered Dose Inhalers  
SOP Meds 18 Administration of Epi-Pen, Anapen and Emerade  
SOP Meds 19 Self Administration of Medicines  
SOP Meds 20 Oxygen Therapy: Adult and Child

## 7. References

- NMC 2018 Guidelines for records and record keeping (this is updated version) Procedure no 4
- The Royal Marsden 2015 Manual of Clinical Nursing procedures 9th Edition (this is updated version)
- CQC Medicines training and competency in adult social care settings – this relates to appropriate training, support and competencies making care safe, high quality and consistent (Training is referred to in all SOP's)
- NICE Guidance NG67 Managing medicines for adults receiving social care in the community March 2017 – this relates to general medicines management and details all processes
- <https://www.gov.uk/government/publications/controlled-drugs-list--2>
- <https://www.legislation.gov.uk/uksi/2013/373/contents/made>
- <https://www.cqc.org.uk/publications/safer-management-controlled-drugs-annual-update-2021>
- <https://hub.careinspectorate.com/resources/browse-all-resources/professional-guidance-on-the-safe-and-secure-handling-of-medicines/>
- <https://hub.careinspectorate.com/media/1566/notifications-about-controlled-drugs-guidance-for-providers.pdf>
- Oct 2022 Highlighting the importance of Medicine Management  
<https://www.hiw.org.uk/highlighting-importance-medicines-management>
- <https://www.rqia.org.uk/RQIA/files/4b/4bce8672-fabe-4df8-92aa-a112213624c9.pdf>
- <https://www.gov.uk/government/publications/transporting-controlled-drugs-guidance-on-security-measures/accessible-version>
- <https://www.cqc.org.uk/publications/safer-management-controlled-drugs-annual-update-2021#governance-of-controlled-drugs>
- <https://www.nice.org.uk/guidance/ng46/chapter/recommendations#obtaining-and-supplying-controlled-drugs>

## Appendix A: About Acacium Group

Acacium Group consists of a number of trading companies, each providing services within core niche areas of the health and social care industries. Therefore, as this document is a Group Policy, the Policy herein applies to all trading companies detailed below:

 Part of Acacium Group	 Part of Acacium Group
 Part of Acacium Group	 Part of Acacium Group