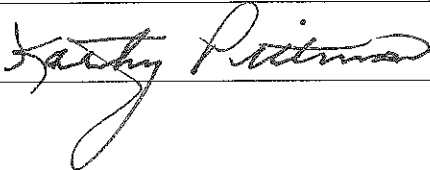


**MISSISSIPPI DEPARTMENT OF HUMAN SERVICES
DIVISION OF YOUTH SERVICES
JUVENILE INSTITUTIONS**

Subject: Pharmaceutical Receipt, Storage, Inventory and Disposal Management		Policy Number: 31
Number of Pages: 5		Section: XI
Attachments	Related Standards & References	
Non-Prescription Pharmaceuticals Control Form XI.31.A Contingency Medication and Controlled Substance Daily Count Sheet XI.31.B Non-Prescription Pharmaceuticals Supply Monitoring Form XI.31.C	ACA Juvenile Health Care Performance Based Standards: 4-JCF-4C-27, 4-JCF-4C-60	
Effective Date: 06/09/06 Revision Date: 05/01/07, 04/25/08, 05/01/11	Approved: 	

I. POLICY

It is the policy of the Mississippi Department of Human Services, Division of Youth Services, that standard procedural guidelines shall be established to ensure management of pharmaceuticals. Instructions delineating specific pharmacy inventory management, as well as, the applicable drug laws of Mississippi. Medical and dental supplies are securely stored, controlled and perpetually inventoried.
(4-JCF-4C-27; 4-JCF-4C-60)

II. DEFINITIONS

As used in this policy and procedure, the following definitions apply:

Controlled Substances: are any “dangerous drugs” that fall in the schedule of I, II, III, IV, or V medication of the Federal Food and Drug Act.

Schedule I Controlled Substance: any medication that requires the highest degree of control. Most drugs in this schedule are illegal for use in the United States, e.g. Phencyclidine, Mescaline, and Marijuana.

Schedule II Controlled Substance: any medication that can be used routinely, but legal controls are extensive, e.g. *narcotics*: Morphine, Methadone, Percodan/Percocet, Levomethorphan, Demerol; *stimulants*: Dexedrine, Ritalin, Adderall; and *depressants*: Seconal, Nembutal, Amytal.

Schedule III & IV: any medication that is a stimulant, depressant, or narcotic, but do not require as much control as Schedule II medications, e.g. Valium, Phenobarbital, Klonopin, Tylenol with Codeine #3, and Cylert.

Schedule V: any medication that has the least control of the scheduled medications, e.g. Terpin Hydrate with Codeine, Novahistine DH.

Subject	Policy Number	Page
Pharmaceutical Receipt, Storage, Inventory and Disposal Management	XI.31	2 of 5

III. PROCEDURE

In accordance with the Drug Laws of Mississippi, the policies and procedures of the Contract Pharmacy Services shall be responsible for accountability of all prescription pharmaceuticals. The Facility Medical, Dental, and Nursing Staff shall adhere to accountability policies and procedures as specified in the following procedure.

- A. Prescription pharmaceuticals received from the Contract Pharmacy shall be delivered to the Medical Department and shall be labeled in accordance with the Mississippi State Board of Pharmacy guidelines. (4-JCF-4C-27)
 1. These prescription medications shall be verified by a nurse with the packing list. The nurse shall sign (first initial, last name), title and date the bottom section of the packing list indicating that the ordered medications are labeled and inventoried. The nurse shall also inspect the packaging of drugs to ensure their integrity.
 2. After signing the packing list, the nurse shall forward a copy to the business office. The Health Services Supervisor shall maintain a copy of the packing list in the Medical Department files.
 3. The Contract Pharmacy shall provide the Health Services Supervisor with a list and cost of the monthly prescription medications that have been issued.

- B. Prescription pharmaceuticals received from sources other than the Contract Pharmacy Services shall be labeled in accordance with the Mississippi State Board of Pharmacy guidelines. (4-JCF-4C-27)
 1. These medications may be delivered to the facility clinic by a variety of facility staff that has been designated by the Facility Administrator/designee to pick up and transport the medication.
 2. Upon receipt the nurse shall cross-reference the medication with the package label or invoice and physician order. The nurse shall sign and date the package label or invoice to verify the correct medication and count was received.
 3. After signing the package label or invoice, the nurse shall forward a copy to the business office. The Health Services Supervisor shall maintain a copy of the packing list in the Medical Department files.
 4. The medication shall be then placed in the appropriate area for storage and the receipt noted on the Medical Department Shift Report Form XI.10.A.

- C. Non-prescription pharmaceuticals may be received through the facility's Receiving Department or directly to the clinic. (4-JCF-4C-27)

Subject	Policy Number	Page
Pharmaceutical Receipt, Storage, Inventory and Disposal Management	XI.31	3 of 5

1. A perpetual inventory shall be maintained for all non-prescription pharmaceuticals. These pharmaceuticals shall be listed on the Non-Prescription Pharmaceuticals Control Form XI.31.A.
 2. Each time a new bottle/package non-prescription pharmaceutical is removed from inventory by the nurse, the nurse shall timely complete the Non-Prescription Pharmaceuticals Control Form XI.31.A to document usage.
 3. Any discrepancies in inventory shall be reported immediately to the Health Services Supervisor for review and investigation as necessary.
- D. Pharmaceuticals shall be stored in accordance with both the Drug Laws of Mississippi, and manufacturer's recommendations of temperature control. (4-JCF-4C-27)
1. Medication storage carts shall be locked at all times, other than during scheduled medication administration times.
 2. Pharmaceutical storage areas shall be key-locked to keys only specific to the medical department and shall be strictly controlled in accordance with the MDYS Policy Key Control, and related procedures. Only health care professionals may have keys to the pharmaceutical storage areas that are within the physical confines of the medication storage room.
 3. Refrigerators for medication storage shall be equipped with a thermometer. The temperature of the medication storage refrigerator shall be checked and recorded daily by clinic personnel. Refer to MDYS Policy XI.4, Medical Facilities and Equipment and Environmental Monitoring.
 4. Annually, the Health Services Supervisor or designated health care professional shall complete an inventory of all non-prescription pharmaceuticals as requested by the Health Services Coordinator.
- E. At every shift change, both the off-going and on-coming nurse shall conduct a reconciliation count of contingency (back-up) medications, controlled substances, syringes, needles, and medical sharps. (4-JCF-4C-27)
1. Contingency (or back-up) medications shall be maintained in a locked cabinet located in the facilities' pharmaceutical storage area and inventoried at every shift change.
 2. The nurse shall utilize the Contingency Medication and Controlled Substance Daily Count Sheets XI.31.B for reconciliation of contingency (back-up) medications.
 - a. After verifying count, the nurse shall sign (first initial, last name) this form.
 - b. Immediate notification of unaccounted loss of any Contingency (or back-up) medications shall be reported to the Health Services Supervisor for review

Subject	Policy Number	Page
Pharmaceutical Receipt, Storage, Inventory and Disposal Management	XI.31	4 of 5

and investigation as necessary.

3. Controlled Substances shall be placed in a double locked cabinet located in the facilities' Medication Room and inventoried at every shift change.
 - a. The nurse shall utilize the Contingency Medication and Controlled Substance Daily Count Sheets XI.31.B for reconciliation of Controlled Substances. After verifying count, the nurse shall sign (first initial, last name) to this form.
 - b. Notification of unaccounted loss of any federally controlled substances shall be immediately reported to the Health Services Supervisor, Health Services Coordinator Facility, Administrator or designee. Theft or unaccounted loss of controlled substances shall be reported whether or not the controlled substances is subsequently recovered and/or the responsible parties are identified and action taken against them.

4. Medical instruments, needles, syringes with needles, and sharps shall be placed in a locked cabinet located in the facilities' locked laboratory area and inventoried at every shift change. The nurse shall utilize the Medical Instrument, Needle and Sharps Inventory Daily Count Sheets for reconciliation of medical instruments, syringes, and syringes with needles. Refer to MDYS Policy XI.7, Medical and Dental Instruments Sharps Management. (4-JCF-4C-60)

- F. Disposal of pharmaceutical shall be in accordance with the Mississippi Drug Laws and Drug Enforcement Administration (DEA). (4-JCF-4C-27)
 1. Pharmaceuticals dispensed by Contract Pharmacy shall not be sent back to the Pharmacy for destruction.
 - a. The 2 licensed nurses destroying prescription, but non-controlled shall fill out the pharmaceutical destruction form provided by the contract pharmacy. The nurse shall provide a copy of this form to the Health Services Supervisor and maintain in the Medical Department files. A copy of this form shall be provided to the contract pharmacy as requested.
 - b. Disposal documentation shall be completed and maintained by the Contract Pharmacy and Health Services Supervisor.
 - c. The methods of disposal are as follows:
 - i. Flushing small amounts up to 30 pills down the toilet. Flushing at least 5 times to make sure that pills are completely gone.
 - ii. Pour a sufficient amount of bleach into a sharps' container to cover the bottom of the container and up the side about one inch (1"). Drop

Subject	Policy Number	Page
Pharmaceutical Receipt, Storage, Inventory and Disposal Management	XI.31	5 of 5

all non narcotic medications to be destroyed in to the container. Pour enough bleach into the container to just cover the medications. This container must be kept in a locked secure location until transported off-site by the contract bio-hazardous waste handler.

A count of the medications destroyed should be done pre disposal and during disposal to ensure that all medications listed on the destruction form are correct.

2. Once a medication has been prepared for administration, the medication shall not be returned to the patient labeled blister package. This single dose may be destroyed at the facility regardless of source utilizing the Certificate of Drug Destruction Form provided by the Contract Pharmacy. Using one of the two methods described above.

G. The Health Services Supervisor or designee shall complete the Non-Prescription Pharmaceuticals Supply Monitoring Form XI.31.C monthly. Any discrepancies shall be reported to the Health Services Supervisor for review and investigation.

H. The Department's Health Services Coordinator shall revise this policy as necessary.