

Controlled Drugs: Getting it Right First Time, Every Time

Alastair Carmichael
Dispensing Doctor Experts

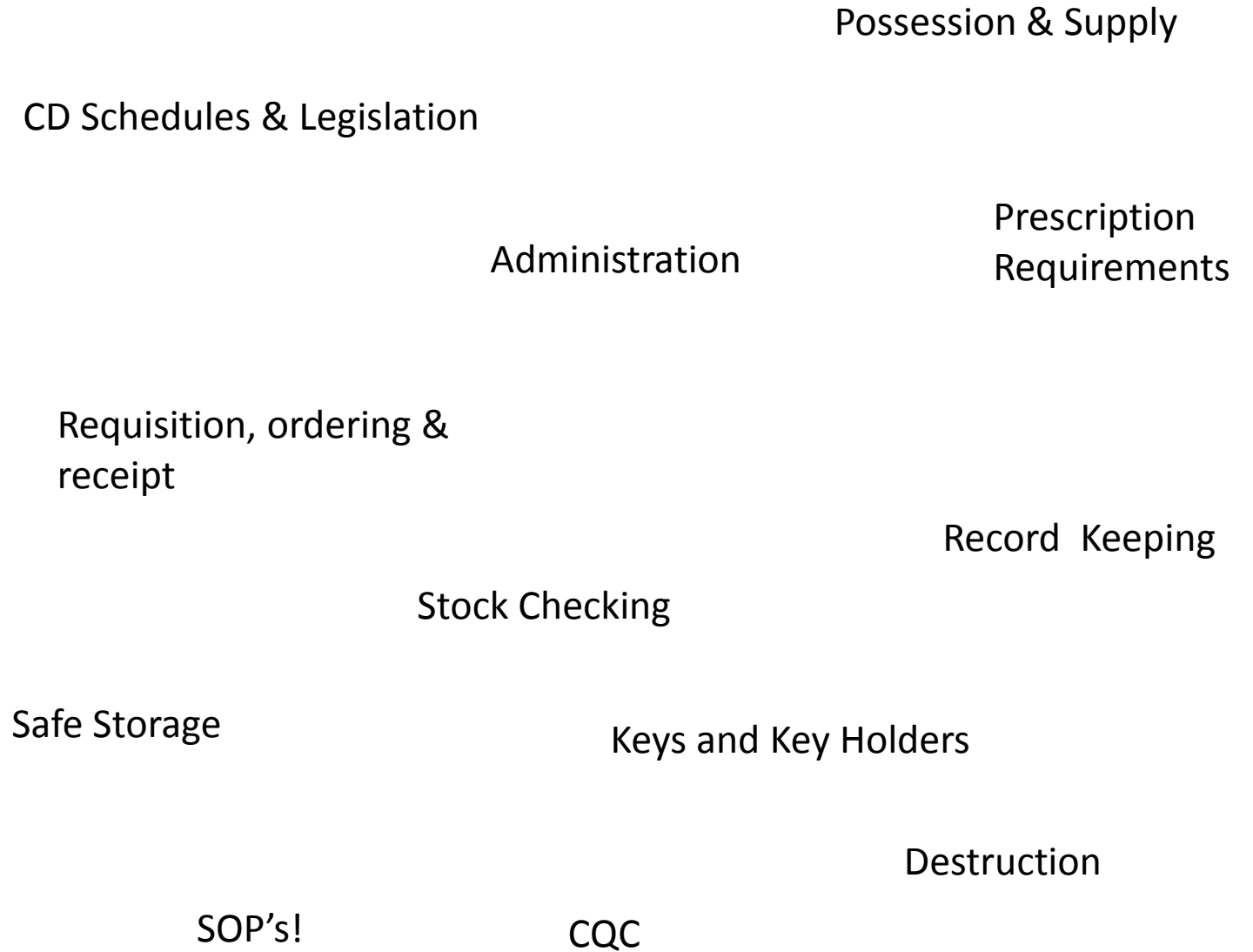


Preparation for Today's Session:

- Get a pen and paper ready
 - There will questions along the way!
 - Answers at the end
 - Acceptable Pass Mark = 100% only!
-
- These are Controlled Drugs and we must be accurate and legal with everything we do.



What do we need
to look at in order
to understand fully
Controlled Drugs:
the legislation,
their prescribing &
administration etc
etc?



Focus: The Journey of a Controlled Drugs Prescription Schedule 2



- Schedule 2 = Fully controlled medicine that requires all prescription details, safe custody storage and record keeping

Pharmacy Stamp	Age D.o.B	Title, Forename, Surname & Address
<small>Please don't stamp over age box</small>		
Number of days' treatment N.B. Ensure dose is stated		
Endorsements	Office use	
FP10 S 0901		
Signature of Doctor		Date
For dispenser No. of Prescs. on form		
NHS PATIENTS— please read the notes overleaf		
16427931879		

Focus: The Journey of a Controlled Drugs Prescription Schedule 2



- IT systems provide the necessary details on the script – Full description including form of medicines, full dosage requirement, quantity in words & figures

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<small>Please don't stamp over age box</small>		
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Question 1 & 2:

- Script for a regular dispensing patient arrives in the dispensary with following item:
 - Oxycontin 20mg MR Tablets x 112
 - One to be taken twice a day
- Can this be dispensed, legally?
- What would be the best course of action to take?



Labelling & Dispensing a Controlled Drug Script

- Signed script arrives in the dispensary
- Whilst labelling, realised stock requires ordering
- Completion of a mandatory CD requisition form – FP10 CDF

Home Office | Department of Health

CD Requisition Form (Schedules 2 & 3)

A Supplier Details

Invoice No.: NHS Account Number / Wholesale Dealer Licence / HO CD Licence No.:

Supplier's Stamp: Name of Business: Telephone:
Address Line 1:
Address Line 2:
Address Line 3: Postcode:

B Controlled Drugs Requisitioned and Purpose

Drug Name	Strength and Unit of Measure	Form	Quantity
Example: Buprenorphine	10mg / 100ml	Suspension	75 x 100ml

Purpose for which drugs are required (tick in box provided)

1 <input type="checkbox"/> For use within Pharmacy	4 <input type="checkbox"/> For Paramedic use
2 <input type="checkbox"/> For use within Practice / Surgery	5 <input type="checkbox"/> For Doctor's bag
3 <input type="checkbox"/> For use in independent hospital	6 <input type="checkbox"/> Other (please state reason briefly below)

C Customer Details

* See overleaf (Part D, point 1(iii)) for guidance on completion

* Individual Prescriber code / pharmacy's NHS account number / CQC / HES / HW Number:

* Practice, NHS Trust or NHS Provider Code:

Name of Practice:

Individual practitioner's name (printed):

Professional qualification / occupation:

Address line 1:

Address line 2:

Telephone: Postcode:

Signature: Date of Order / Supply:

(NB: This must be the signature of the practitioner named above)

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Labelling & Dispensing a Controlled Drug Script

- Who signs the FP10 CDF?
 - Ideally the named prescriber but one of the clinical team who has legal right to do so – that can include Nurse Practitioner or Prescribing Pharmacist
- What process does your SOP follow to ensure that the CDF's are always ready for the delivery driver at the next delivery?
 - Best practice would be to make sure whoever is completing the labelling and ordering of the item, completes the CDF, and makes sure that this is available for signing with the relevant script attached
 - Task priority for one or all of the prescribing team could be to visit the dispensary at the end or start of their session
 - NB – These dispensing activities should only be taking place with a prescriber present on the premises!



Recording the receipt of a Controlled Drug

- SOP for receipt of goods should include reinforcement of the need to check CD stock straight away before your delivery is accepted – Open the bag!
- Make entry in your CD Register (Paper or Electronic version) as soon as possible on receipt
- Include invoice number if possible
- Check stock running balance at the point of storing the new stock.
- Ideally have 2 initials for each entry in the CD register



Receipt of CD Stock – Balance Check Discrepancy

Question 3:

- All activities carried out according to your SOP
- When checking the stock figure on paper/ electronically, you appear to have less stock than recorded
- What should you do? 4 key steps

Note: It is not a legal requirement to maintain a running balance.....however failure to do so would be looked upon very poorly by CQC, Police and the Home Office!



Dispensing the CD medication to the patient

- Labelling the CD stock for the individual patient can be done as soon as the stock arrives and clearly segregated and labelled for the patient
- Make sure this stock is included in any stock checks
- When patient arrives to collect CD:
 - Make record of who actually collects the medication
 - Can they sign the prescription form?
 - Make entry in CD register as soon as possible after the medication has been collected



Supply of a CD – Making an accurate record

Question 4



- On the day of the collection of the CD – make your CD register entry
- Legally have 24 hours to complete the register of supply
- In the register one of your dispensary team members has entered details for a supply for another regular patient – In section of “Who collected the medication” – the entry has been made:
“Husband”
- Is this legally sufficient?

Stock Checks for Controlled Drugs

- Good Practice to check all Schedule 2 CD stock regularly
 - What is regularly?
 - Each entry of receipt & supply – check the stock
 - Time allowing – do weekly
 - Minimum check cycle – Monthly
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- Check ALL pages in CD Register – Go through the register step by step – NOT the CD cabinet
 - Check the expiry dates each month
 - Vary the team member who carries out the checks each month



Stock Checks for Controlled Drugs

Question 5

- During your regular monthly CD stock check, a low usage item is found to be out of date.
- What should you do?



Patient Returned CD Medication

- Ideally, when medication is returned, establish if there are CD's included in the bag
- Do not expose yourself to unnecessary risk by going through a bag of waste.
- Record who is returning the medication
- Any Schedule 2 CD's (eg Morphine, Diamorphine, Oxycodone etc) **MUST** be stored in your CD cabinet if they are not being destroyed the same day
- Schedule 3 CD's (Safe Custody) should be destroyed / denatured in the same manner as Schedule 2's
- Schedule 3 CD's such as Tramadol, Gabapentin, Pregabalin – Good practice to denature but not legally essential
- Use DOOP bins as soon as possible – don't leave bags hanging around your dispensary!



Controlled Drugs Policy & SOP's

- Practice should have a Medicines / Prescribing Policy
- Good (if not excellent) Practice would be to also have a “Controlled Drugs Policy”
 - Covers Practice statement of intentions in respect of the highest risk area of prescribing and dispensing
 - Covers issues such as prescribing quantities; authorised repeats for CD's; GP “bag stock”
- CD SOP's should be sub-divided into easily readable “chunks” – e.g.
 - Dispensing
 - Recording of receipt & supply
 - Stock checking
 - Disposal
 - Transport and delivering



Answers to the 5 Questions

- Some questions may have more than 1 correct answer!
- Any queries – drop your question into the Chat box and we'll pick them up at the end



Question 1 & 2:

- Script for a regular dispensing patient arrives in the dispensary with following item:
 - Oxycontin 20mg MR Tablets x 112
 - One to be taken twice a day
- Can this be dispensed, legally?
 - Yes it can be dispensed legally but is NOT good practice
 - CD scripts are valid for 28 days from the printed date – prescribing more than 28 days will lead to problems (unless in a 30 day pack!)
 - Recommended to prescribe a maximum of 30 days
- What would be the best course of action to take?
 - Check with the prescriber that this was their intention and establish a reason why?
 - Does this conform with your Practice CD Policy??
 - Should only be really in exceptional circumstances such as holiday/ respite with relatives



Receipt of CD Stock – Balance Check Discrepancy

Question 3:

- All activities carried out according to your SOP
 - When checking the stock figure on paper/electronically, you appear to have less stock than recorded
 - What should you do? 4 key steps
- Act straight away / promptly:
- Tell someone else in your team/practice about what you have found
 - Check the cabinet for “ready to collect” bagged stock
 - Complete a full stock check
 - Record all your findings



Supply of a CD – Making accurate record

Question 4

- In the register one of your dispensary team members has entered details for a supply for another regular patient – In section of “Who collected the medication” – the entry has been made:

“Husband”

- Is this legally sufficient?
 - No – the name and address of the person collecting is legally required
 - It can be “Mr A Smith – same address” – as long as it is clearly identifiable
 - Other BIG mistakes: “Carer” or “Dad”
 - Do not have to have seen ID but to have taken reasonable steps

Stock Checks for Controlled Drugs

Question 5



- During your regular monthly CD stock check, a low usage item is found to be out of date.
- What should you do?
 - Tell everyone in the team about it & perhaps identify the cost?!
 - Segregate the stock from other in date stock – label/bag with red writing?
 - Record in register what has been found e.g. “Monthly stock check carried out by... - found 56 x Oxynorm 10mg Capsules out of date”
 - Stock quantity should state the combined total stock level but highlighting what is OOD e.g. “112 (including 56 OOD)”
 - Always keep stock in CD cabinet and recorded in CD register until destruction is possible

Short Question Time

- Specific questions can be sent to:
 - contact@dispensingdoctorexerts.co.uk

