

SPECIAL PROGRAMS FOR YOUTH	Policy Number: 1.1438
Policy Title: Pharmaceutical Management Corresponds to: Title 15, Article 8, Section 1438	Written: 3/4/2013 Revised: 1/22/2019

I. POLICY

For all juvenile facilities, the health administrator, in consultation with a pharmacist and in cooperation with the facility administrator, shall develop written policy, establish procedures, and provide space and accessories for the secure storage, controlled administration, and disposal of all legally obtained drugs.

- (a) Such policies, procedures, space and accessories shall include, but not be limited to, the following:
- (1) securely lockable cabinets, closets, and refrigeration units;
 - (2) a means for the positive identification of the recipient of the prescribed medication;
 - (3) administration/delivery of medicines to youth as prescribed;
 - (4) confirmation that the recipient has ingested the medication;
 - (5) documenting that prescribed medications have or have not been administered, by whom, and if not, for what reason;
 - (6) prohibition of the delivery of medication from one youth to another;
 - (7) limitation to the length of time medication may be administered without further medical evaluation;
 - (8) the length of time allowable for a physician's signature on verbal orders not to exceed seven (7) days;
 - (9) training by medical staff for non-licensed personnel which includes, but is not limited to: delivery procedures and documentation; recognizing common symptoms and side-effects that should result in contacting health care staff for evaluation; procedures for consultation for confirming ingestion of medication; and, consultation with health care staff for monitoring the youth's response to medication; and,
 - (10) a written report shall be prepared by a pharmacist, no less than annually, on the status of pharmacy services in the institution. The pharmacist shall provide the report to the health authority and the facility administrator and.
 - (11) transition planning, including plan for uninterrupted continuation of medication.
- (b) Consistent with pharmacy laws and regulations, the health administrator shall establish written protocols that limit the following functions to being performed by the identified personnel:
- (1) Procurement shall be done only by a physician, dentist, pharmacist, or other persons authorized by law.
 - (2) Storage of medications shall assure that stock supplies of legend medications shall only be accessed by licensed health personnel. Supplies of legend medications that have been properly dispensed and supplies of over-the-counter medications may be accessed by both licensed and trained non-licensed personnel.
 - (3) Repackaging shall only be done by a physician, dentist, pharmacist, or other persons authorized by law.
 - (4) Preparation of labels can be done by a licensed physician, dentist, pharmacist or other personnel, provided the label is checked and affixed to the medication container by the physician, dentist, or pharmacist before administration or delivery to the youth. Labels shall be prepared in accordance with Section 4076 and 4076.5 of the Business and Professions Code.

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- (5) Dispensing shall only be done by a physician, dentist, pharmacist, or other person authorized by law.
 - (6) Administration of medication shall only be done by licensed health personnel who are authorized to administer medication and acting on the order of a prescriber.
 - (7) Licensed health care personnel and trained non-licensed personnel may deliver medication acting on the order of a prescriber.
 - (8) Disposal of legend medication shall be done in accordance with pharmacy laws and regulations and requires any combination of two of the following classifications: physician, dentist, pharmacist, or registered nurse. Controlled substances shall be disposed of in accordance with Drug Enforcement Administration disposal procedures.
- (c) The responsible physician shall establish policies and procedures for managing and providing over-the-counter medications to youth.

DEFINITIONS:

“Administering medication,” as it relates to pharmaceutical management, means the act by which a single dose of medication is given to a patient by licensed health care staff. The single dose of medication may be taken either from stock (undispensed) or dispensed supplies.

“Child supervision staff” means a juvenile facility employee, whose duty is primarily the supervision of youth. Administrative, supervisory, food services, janitorial or other auxiliary staff is not considered child supervision staff.

“Delivering medication,” as it relates to pharmaceutical management, means the act of providing one or more doses of a prescribed and dispensed medication to a patient.

“Dispensing,” as it relates to pharmaceutical management, means the interpretation of the prescription order, the preparation, repackaging, and labeling of the drug based upon a prescription from a physician, dentist, or other prescriber authorized by law.

“Disposal,” as it relates to pharmaceutical management, means the destruction of medication or its return to the manufacturer or supplier.

“Labeling,” as it relates to pharmaceutical management, means the act of preparing and affixing an appropriate label to a medication container.

“Legend drugs” are any drugs defined as “dangerous drugs” under Chapter 9, Division 2, Section 4211 of the California Business and Professions Code. These drugs bear the legend, “Caution Federal Law Prohibits Dispensing Without a Prescription.” The Food and Drug Administration (FDA) has determined, because of toxicity or other potentially harmful effects that these drugs are not safe for use except under the supervision of a health care practitioner licensed by law to prescribe legend drugs.

“Over-the-counter (OTC) drugs,” as it relates to pharmaceutical management, are medications which do not require a prescription (non-legend).

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“Procurement,” as it relates to pharmaceutical management, means the system for ordering and obtaining medications for facility stock.

“Repackaging,” as it relates to pharmaceutical management, means transferring medications from the original manufacturers' container to another properly labeled container.

“Storage,” as it relates to pharmaceutical management, means the controlled physical environment used for the safekeeping and accounting of medications.

II. PROCEDURES

A. Pharmacy Management

1. All pharmacy procedures shall adhere to applicable California and Federal laws and regulations.
2. Expired, contaminated, and unused medication shall be disposed of in accordance with Drug Enforcement Agency disposal procedures.
3. Medication repackaging is done only by pharmacist, physician or dentist.
4. The contract pharmaceutical service will be responsible for quarterly inspection and report of all medication storage areas in compliance with state medication storage areas in compliance with state and federal regulations. Any irregularities shall be reported to the Special Programs for Youth (SPY) Director.
5. When prescriptions are generated by contract or consultant health care providers, substitutions may be in accordance with approved guidelines contained in the designated drug formulary and approved by the responsible prescriber.

B. Prescriptions Practices

1. All pharmaceuticals shall be prescribed in accordance with the designated drug formulary which governs approved prescription and non-prescription medications.
2. Only physicians, Dentists, Nurse Practitioners and/or Physician Assistants licensed to procure or furnish medications in the state of California and employed by the San Francisco Department of Public Health may write medication orders.
3. All medications administered at SPY, will have a medication order, including over-the-counter (OTC) medications.
4. All prescriptions will include patient name, DOB, Medical record number, date and time of prescription, name of medication, strength, dosage, route, frequency, length of prescription (stop orders), and provider signature.
5. Drug “stop-order” time periods shall be specified by the clinician for all medications.

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6. A re-evaluation shall be performed by the clinician at least every thirty (30) days prior to renewal of all orders including controlled substances, psychotropic drugs, drugs with the potential for abuse, and those drugs requiring evaluation of the juvenile's compliance.
7. Medications ordered verbally shall be signed by the clinician within 72 working hours of such authorization.
8. All prescriptions shall be signed by a qualified health professional licensed to prescribe/furnish medications as authorized by the State of California.
9. Youth on medications prescribed in the community will be continued on medication by provider order only.
 - a. SPY Medical staff will attempt verify the prescription(s) with parent, community provider or pharmacy
 - b. SPY Provider will order for medication as necessary and appropriate.
 - c. Medication ordered for urgent/emergent use will be followed by SPY provider assessment within 72 working hours of medication order.
 - d. Medications brought by or with a juvenile on admission to the facility will not be administered.

C. Medication Procurement

1. Medical staff will FAX copies of medication orders to pharmacy and then place in pharmacy order book.
2. Contracted pharmacy packages medication and affixes label with patient name, patient DOB, name and dosage of medication and expiration date of medication.
3. When medications arrive from pharmacy, they are sorted by unit and cross-referenced with original medication order sheet.
4. Monthly and as needed, a SPY Nurse will order stock medications from pre-printed Stock medication orders sheet to ensure proper par of stock medication is maintained in clinic.

D. Medication Administration

1. Medication records and orders will be transcribed per Policy 6.3 Transcription of Provider Orders
2. SPY staff at JJC shall follow Policy 6.3.2 Medication Administration on the Units.
3. All dispensed medications shall be labeled with the juvenile's name, the name and strength of medication dispensed, directions for use, quantity dispensed, name of ordering clinician, date dispensed, expiration date of effectiveness of medication dispensed, and if appropriate, name and address of pharmacy, and prescription number

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or other means of identifying the prescription. The exception to the above is in the case of the use of stock medications, which are dispensed at time of use.

4. Stock medications – only licensed staff may administer single doses of stock medication from bulk bottles. This is done so in accordance with a standing order or provider order.

E. Medications transferred from other facilities

1. Medications transferred from other facilities within or under the sponsorship of the City and County of San Francisco Department of Public Health (SFDPH) may be used provided there is a secure method for insuring that medications are not tampered with between facilities and a medical summary accompanies the juvenile to explain usage of the medications
2. Medications accompanying juveniles on inter-system transfer may be used provided the containers are properly labeled, there is a secure method for insuring that medications are not tampered with between facilities, and a medical summary accompanies the juvenile to explain the usage of the medication.






F. Security and Storage of Medications

1. All medications prescribed for detained juveniles as well as necessary equipment and supplies shall be stored in individually labeled bins in a locked cabinet in each living unit.
2. All stock medication, syringes, needles, and other related equipment and supplies shall be stored by the medical staff in the health clinic/office in locked cabinets that are inaccessible to juveniles and unauthorized staff. Access to these locked cabinets is only for physicians, dentists, Nurse practitioners, physician assistants, and nurses.
3. All controlled substances shall be stored by medical staff in an area inaccessible to juveniles and unauthorized staff. Access shall be limited to pharmacy and medical staff.
4. All stat boxes, emergency medication boxes, and general stock shall be maintained and kept current by the contract pharmaceuticals services.

G. Storage, Inventory, and Wasting

1. Schedule II-IV medications shall be stored and inventoried and Wasted per *Policy 6.3.5 Storage of Schedule II-IV Medications at JJC and LCR*.
2. Stock medications: SPY nurse will inventory medication once monthly to check appropriate amount, check for upcoming expiration dates and to rotate stock so soon to be expiring medications are noted and moved to front of the stock.
 - a. Expired medications or medications no longer used by a youth shall be wasted in medication waste bins located in the health clinic/office in a locked room, accessible only to medical and pharmaceutical staff. Any identifying information on containers including names and the Prescription # shall be rendered unreadable and placed in regular trash after medication has been dumped in the waste bin
3. Contracted pharmacy will conduct quarterly audits on proper storage and expired medications and give quarterly reports and a yearly summary to SPY Director of Operations.

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Policy# 1438	Approved by:
Review date:	
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