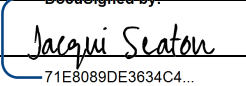




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Ordering of Controlled Drugs (CDs) (Stock and named patient)

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Powys Teaching Health Board is the operational name of Powys
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Engagement & Consultation

Key Individuals/Groups Involved in Developing this Document

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Circulated to the following for Consultation

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1. Introduction

The Controlled Drugs (Supervision of Management and Use) (Wales) Regulations 2008 require designated bodies (and any body or person acting on behalf of, or providing services under arrangements made with the designated body) to have adequate and up to date standard operating procedures (SOPs) in place in relation to the management and use of controlled drugs.

Controlled Drug (CD) SOPs are detailed written instructions that aim to achieve uniformity in the way that CDs are managed across the organisation.

Benefits of CD SOPs include:

- Clarity for staff on what is expected of them
- Practical guidance to support the management of CDs
- Improved CD governance by ensuring consistent safe and legal processes are in place

The Health Board is required to have SOPs covering every applicable aspect of the CD journey. The Regulations specify that the SOPs must, in particular, cover the following matters, as appropriate to the organisation –

- (a) who has access to the controlled drugs;
- (b) where the controlled drugs are stored;
- (c) security in relation to the storage and transportation of controlled drugs as required by the misuse of drugs legislation;
- (d) disposal and destruction of controlled drugs;
- (e) who is to be alerted if complications arise; and
- (f) record keeping, including—
 - a. maintaining relevant controlled drugs registers under the misuse of drugs legislation, and
 - b. maintaining a record of the controlled drugs specified in Schedule 2 to the Misuse of Drugs Regulations 2001 (specified controlled drugs to which certain provisions of the Regulations apply) that have been returned by patients.

The CD SOPs should be used in conjunction with the [Medicines Policy](#)

This SOP covers the ordering of CDs, including stock items and named patient drugs.

2. Objective

This SOP applies to All Powys teaching Health Board staff who are involved in the ordering of controlled drugs.

To ensure all staff work in accordance with the approved procedure when ordering Schedule 2 and 3 CDs and are aware of their individual responsibilities and accountability for this process.

3. Definitions

- PTHB – Powys Teaching Health Board
- SOP- Standard Operating Procedure
- CDAO – Controlled Drugs Accountable Officer
- CDs – controlled drugs
- MMT – Medicines Management Team (pharmacists, pharmacy technicians, nurses and administrative staff working in Medicines Management department)
- NHH – Nevill Hall Hospital
- RODP – Registered Operating Department Practitioners
- Pharmacy Team- Pharmacists, Technicians and Assistants employed by PTHB
- Supplying Pharmacy – the pharmacies which supply CDs to PTHB –Nevill Hall Hospital for all stock and some prescribed items. Bronglais Hospital for prescribed items only
- RHCP- Registered Health Care Professional

4. Role / Responsibilities

- The PTHB pharmacy team will work with the supplying pharmacy to establish reasonable quantities for the bulk requisitions, based on previous usage and any anticipated variance.
- The Head of Community Services Pharmacy is responsible for preparing the annual 'bulk' WP10CDF form for CD stock requisitions for each PTHB ward/department that holds stock CDs. The Head of Community Services Pharmacy will provide the Chief Pharmacist with details of bulk orders before requesting the Medical Director to sign the bulk requisitions.
- Wards and Departments will be able draw on the agreed amounts authorized through the WP10CDF throughout the year to supply CD orders placed in CD requisition books, by the nurse in charge of the ward or department.
- The ordering of CDs, through the CD requisition book, for a ward or department is the responsibility of the Nurse in Charge/ or Assigned Nurse in Charge and should be undertaken by them personally wherever possible. This duty may be delegated to an appropriate nurse, midwife or RODP.

However, the Nurse in Charge retains accountability for ensuring the agreed procedures are followed.

- Only individuals familiar, competent and approved to work to this SOP should order CDs.
- Sample signatures of ward or department staff authorised to order controlled drugs must be supplied to the supplying pharmacy. It is the responsibility of a senior nurse of a PTHB ward/ department to ensure that these lists are kept up to date at all times.

5. Orders-

5.1 Wards and Departments

Stock CDs

- Prior to the beginning of each financial year (i.e. in March), the Head of Community Services Pharmacy will agree with the Chief Pharmacist the annual 'bulk' order requirements for each ward/department to Nevill Hall Pharmacy Department for the coming financial year. The bulk requisitions will be compiled onto WP10CDF forms to be signed by the PTHB Medical Direction. This will allow Nevill Hall to supply PTHB sites with CD stocks "drawn down" from the overarching "bulk" order and placed in CD requisition books.
- CD orders for wards and departments can only be placed by authorised signatories (i.e. individuals authorised to order CDs for their ward/department and the supplying pharmacy is in receipt of confirmation that they are authorised to order CDs and have a copy of their signature)
- All orders for 'stock' CDs must be written in indelible ink in the Ward CD Order Requisition Book, ensuring the order is transposed onto the duplicate page, The order must be placed by an authorised signatory who is the nurse or charge or delegated responsibility.
- Each item (drug, brand, strength or form) must be written on a separate page.

Orders must contain the following details:

- Name of the ward or department ordering the CD
- Drug name, form, strength, ampoule size (if applicable and more than one size available). State brand required if necessary
- Total quantity required in dosage units e.g. number of tablets, ampoules or millilitres
- Signature and printed name of Registered Nurse
- Date that the order was placed

The book containing the order must be sent via PTHB Transport (not in internal mail) to supplying pharmacy securely in the pharmacy box or a pharmacy wallet.

Legislation requires that an original requisition in writing must be obtained by the supplying pharmacy before release and delivery of any Schedule 2 or 3 CDs.

It is recommended that two CD Order Requisition Books per ward or department should normally be in use.

Replacement controlled drug Requisition books can be obtained by contacting NHH Pharmacy Department. The ordering of CD books and usage will be audited.

Named patient CDs

The process is the same as for ordering stock CDs, other than an annual 'bulk' requisition is not required for named patient orders.

Named patient CDs must be ordered using the CD requisition book. The requisition must reference the patient's full name and NHS/hospital number against every CD required. Additionally, proof of prescribing for the patient must be supplied to the supplying pharmacy before the CD can be dispensed. E.g. by emailing a copy of the inpatient medication chart.

5.2 Primary/Community Care

When obtaining any stock CDs for use in the community, health professionals in primary care must use the approved mandatory WP10 CDF form (obtained by sending an email, marked FAO the Business Support team, to nwssp-primarycareservices@wales.nhs.uk or by contacting 01792 860428).

These requisitions for CDs may be computer generated or handwritten. The signature of the recipient (i.e. the person ordering the CDs) must be handwritten.

The requisition form must contain the following:

- The purpose for which the drug is required
- The name, form, strength, quantity and units of measure
- The date on which it was ordered.
- The signature of the recipient.
- The name, address and profession or occupation of the recipient

6. CD Stock lists

Each ward/department will have an agreed controlled drug stocklist and an annual overarching/bulk order, signed by the Medical Director. These will have been submitted to NHH Pharmacy – wards/departments are therefore only able to order stock CDs against the pre-agreed list.

The stocklist will be subject to continuous assessment and evaluation by the PTHB and supplying pharmacy teams in conjunction with the ward/department manager and any clinicians who regularly prescribe for patients attending the ward/department. Stock levels should be set at the minimum possible to meet reasonable foreseeable demands. There will be a formal review and agreement concerning the total stock holding at least twice a year.

Non formulary drugs cannot be added as a stock item and unlicensed drugs can only be added in certain circumstances approved by the Medicines Management team and agreed by Nevill Hall Hospital Pharmacy.

7. Security

- The CD Requisition Book must be stored in a locked drawer / cupboard only accessible to registered staff authorised to manage controlled drugs. They are recommended to be kept near the controlled drug cupboard.
- Loss or theft of the CD Order Book must be reported immediately to the Controlled Drugs Accountable Officer (Powys.cdao@wales.nhs.uk), Pharmacy/ Medicines Management Team and relevant Senior Manager (and Silver On Call OOH).

8. Authenticity:

Only individuals authorised to order CDs on behalf of a ward or department are permitted to place orders. Authorised individuals must have provided the supplying pharmacy with proof of authorisation to order controlled drugs and a specimen signature prior to placing CD orders.

A list of “authorised signatories” must be maintained by the ward / department and any changes notified to supplying pharmacy Services immediately.

The current list should be kept securely in the CD cupboard, not in the CD order book.

The Supplying Pharmacy will keep up to date lists of authorised signatories.

The Nurse in Charge of the ward / department will be asked periodically (at least once per year) to verify that the list of authorised signatories held by pharmacy is current and correct. This work will be coordinated by the PTHB Pharmacy Team.

9. Controlled Drug Not available

It is key that ward and pharmacy teams work together to anticipate the controlled drugs stocks required for a ward/department to ensure that clinical need is met. This is particularly important at weekends and bank holidays, where patients are receiving high or increasing doses and that there is clear handover of any new patients or new prescribing to enable ordering of stock from Nevill Hall Hospital Pharmacy within normal working hours.

A nurse in charge of a clinical area is only permitted to hold a stock of CDs for administration to patients under their care. This means that a nurse/midwife/RODP is not legally permitted, under the Misuse of Drugs Act 1971, to make a stock supply to another practitioner, whether this request comes from another ward/department or is a request from a doctor.

In hours, staff may: -

- (i) Establish if Nevill Hall Pharmacy can make an urgent supply – this may include the use of [Blood Bikes](#) or a [taxi service](#).
- (ii) Establish if relatives or carers can bring in a supply from the patient's home (see section on [patient's own drugs](#) to ensure the controlled drug is suitable to use).
- (iii) Request a WP10 prescription from the patients GP or utilise a ward/department WP10 (HP) to be dispensed at the local community pharmacy.
- (iv) In exceptional and clinically urgent circumstances [Bronglais Hospital](#) (BGH) [pharmacy](#) may be able to supply controlled drugs to a named patient in north Powys hospitals at the discretion of the senior pharmacist on duty. A WP10 (HP) or hospital discharge prescription must be supplied to legally allow the supply. BGH Pharmacy will require the original prescription before releasing the supply.

Any controlled drugs obtained by (ii) or (iii) must only be administered to the patient for whom it is labelled and must **not** be administered to other patients under any circumstances. The drug should be entered on a separate page of the controlled drug register

and should include the patient's name. Any administration of the drug must be entered on that page.

In exceptional circumstances, a single dose of another ward/department's stock CDs (where available) can be administered to another patient on another ward/department, in the same hospital site, if there is no other means of obtaining the controlled drug in a timely manner. The nurse/midwife/RODP from where the CD is stocked must witness and be part of the whole administration process. A record of administration is to be made in the originating ward/department's CD record book and the record must be made or witnessed by the registered Nurse/RODP in the original ward/department who must accompany the CD to its place of administration.

Further supply of CDs must be obtained from the pharmacy when next open or in an emergency contact the [on-call pharmacist](#) for advice or urgent supply.

10. References / Bibliography

PTHB /MMP 001 Medicines Policy [Medicines Policy](#)