

## Standard Operating Procedure 012

### MANAGEMENT OF CONTROLLED DRUGS

*The Misuse of Drugs Act (MDA) 1971 and subsequent Regulations laid down the rules for safe custody of Controlled Drugs (CDs). Schedule 2 and Schedule 3 CDs, must be stored according to safe custody requirements.*

The following procedure applies to schedule 2 and 3 controlled drugs carried by SAVES practitioners for their pre-hospital practice.

SAVES members who are also GP principals may have Standard Operating Procedures in their own practices for the procurement and prescription of controlled drugs. Where this is the case, they may proceed using those Standard Operating Procedures.

Other members will use this Standard Operating Procedure to obtain and manage the record keeping of relevant Controlled Drugs used in their immediate care practice.

#### **Requisition Of Controlled Drugs**

- GP principals may order Controlled Drugs from a wholesaler to supply their business. In these cases, the practice standard operating procedure should be followed ordering the drugs using the CD requisition form FP10CDF
- All SAVES members may also obtain Controlled Drugs from South West Ambulance Service NHS Foundation Trust. Such Controlled Drugs will remain the property of the ambulance Trust.
- When obtaining controlled drugs from South West Ambulance Service, the SWASFT Standard Operating Procedure must be followed. (*SWAST Policy M41: Supply of Medicines to BASICS Medical Responders*).

#### **Documentation**

This Standard Operating Procedure outlines the use of a CD register to ensure that all transactions involving Schedule 2 Controlled Drugs (CDs) comply with the relevant regulations regarding record keeping. Records must be kept when:

- New Stock is obtained for the SAVES doctor's bag
- CDs are administered to patients
- Stock is destroyed. (Must be witnessed by an approved authorised witness as per NHS England guidelines)

#### **The Register**

- Each doctor (or practice) must keep a register for all Schedule 2 CDs. The register must be a recognised controlled drugs register and will need to comply with Practice or SWASFT protocols. This register should not be used for any other purpose
- Dispensing practices may hold the formal central CD register in the practice dispensary. In this case the doctor should keep a separate log of drugs signed out from the dispensary and those used which should also be recorded in the practice's CD register.
- The CD register or log must be kept in a secure place (NOT in the CD receptacle). When not in use, it will be kept in the glove compartment of the member's car
- Entries must be made in chronological order
- Details should be entered immediately after the transaction or as soon as practical afterwards. This must not be more than 24 hours after of transaction
- Entries should be made in ink
- Any corrections must be in the form of marginal notes or footnotes, which must be signed and dated. An erroneous entry should be scored through with a single line and countersigned.

### **Recording of Receipt of CDs into Stock**

- When CDs are received they should be checked against a copy of the requisition
- If the stock received is correct the details of the CDs received should be entered into the CD register including; date obtained, supplier from which obtained, quantity and the running balance of drug remaining.
- If the stock that has been received is 'unfit' for use (damaged or incorrect) it should be returned immediately to the supplier.

### **Recording of Administration of CDs to Patients**

- The following details must be entered into the CD register when a CD is administered to a patient: Date of administration; Patients name (where known) and Ambulance Service Incident Number. Because of the emergency nature of SAVES' work, it is accepted that there will be circumstances when a name is unavailable, in which case the patient's sex and estimated age should be recorded; Name, form and strength of drug supplied/administered; Quantity "supplied" (may be more than dose administered, if, for example, only a part ampoule is used); Record any difference as 'wasted' The running balance of drug remaining.
- The entry must be made as soon as possible and no more than 24hrs afterwards

### **Storage of CDS as part of SAVES equipment**

- All CD's in the SAVES doctor's possession should be kept in a locked bag.
- Keys to the Drug bag must be kept separately at all times. A combination lock is recommended as it negates the need for keys.
- The bag should be designed for the storage of drugs.
- If the drug's bag is left unattended at any time in a car, the bag must be locked, kept out of sight and the car also locked (the car alarm activated)  
The stock in the doctor's bag should be kept to the minimum required for day-to-day practice.
- Ensure that stock is in date and checked regularly
- Keep only one strength of each CD in the doctor's bag in order to minimise the risk of error, confusion and inappropriate administration (See SAVES SOP 009: "Carriage of Drugs Available in Multiple Strength Preparations)
- Review required stock levels on an annual basis
- If the CD Bag is removed from the vehicle, in the interests of security it should be kept in a safe place, ideally a locked cupboard within a locked house
- Any out of date, or otherwise unusable CD's should be segregated and kept in a separate, locked container in a secure place, awaiting destruction by an authorised person.
- All reasonable precautions should be taken by the individual SAVES member to maintain security of CD Bags.

Dr Ed Ford 2016

Approved by SAVES Medical Committee May 2017.