

Delivery and Receipt of Medication Orders

Policy # LTC-101
Date Effective: 02/01/2017
Date Revised:
Approved by: Michael Burns

Purpose: *To ensure proper receipt, delivery, storage, access, records and information of medications in a long term care facility.*

Policy: *The following procedures related to delivery, receipt and storage of medications will be adhered to:*

Procedure:

1. Prescriber Medication Orders - Prescription medications are dispensed only upon the clear, complete, and signed order (hard copy or electronic) of a person lawfully authorized to prescribe. Verbal prescription orders are received only by a licensed pharmacist.
 - a. Medication orders will contain all of the elements required by law.
 - b. Physician orders are required for all prescription and non-prescription (OTC) medications.
 - c. Controlled Substances (Schedules II, III, IV and V) are subject to special ordering, receipt and record keeping requirements in the LTC facility.
 - i. Schedule II controlled substances are only filled by the pharmacy upon a written prescription prior to dispensing.
2. Each resident shall have all medication orders recorded in the resident's Medication Record (Medication Administration Record (MAR)).
3. Medication Labeling - All medications are labeled according to applicable federal and state laws and regulations. Prescription medication label includes:
 - a. Patient's name
 - b. Prescription number
 - c. Physician/prescriber name
 - d. Date medication is dispensed
 - e. Directions for use, including dose, route, frequency and duration
 - f. Medication name
 - g. Dosage form
 - h. Strength of medication

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- i. Quantity dispensed
 - j. Expiration date
 - k. Lot number of medication dispensed
 - l. Accessory labels as required
 - m. Name, address and telephone number of pharmacy
 - n. Initials of dispensing pharmacist
4. The pharmacy must provide the residents and staff of LTC facilities the pharmacies hours of operation along with appropriate delivery schedules of medication orders.
5. The pharmacy must provide for emergency coverage 24 / 7.
6. If applicable, the Pharmacy shall provide Consultant Pharmacy services whereby the Pharmacist visits the LTC facility to provide adherence, review of medications and counseling to staff and residents.
7. Product recalls shall be identified by Medication and Lot numbers. All recalls will be immediately taken off the inventory shelves.

Verbal / Faxed Medication Orders

Policy # LTC - 102
Date Effective: 02/01/2017
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Purpose: *To provide written policies / procedures for verbal and faxed medication orders in a LTC facility.*

Policy: *The following procedures for verbal and faxed medication orders shall be adhered to by the pharmacy:*

Procedure:

1. New medication orders by a prescriber for residents in a LTC facility:
 - a. May be mailed
 - b. Faxed
 - i. If faxed and according to state and federal laws for proof of validity.
 - c. If phoned, by prescriber or agent of the prescriber
 - d. If electronically by the prescriber
2. Receipt of new medication order by the pharmacy:
 - a. If verbally, by a Licensed Pharmacist that indicates by initially the order.
 - b. Faxed medication orders must be verified by a pharmacist if there is no identifying physician origin of the fax.

Long Term Care Pharmacy Policies and Procedures

Storage & Packaging of Medications

Policy # LTC-103
Date Effective: 02/01/2017
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Approved by: Michael Burns

Purpose: *To provide proper storage and packaging of medications to ensure medication compliance and adherence.*

Policy: *Medications are provided in packaging and stored appropriately for the given medication, and facilities proper and accurate administration of the medication to the individual resident.*

Procedure:

1. Patients / residents who self-administer their medications;
 - a. Medications stored in a resident's apartment/room must be packaged in child-resistant containers unless specially waived by the resident.
 - b. Medications dispensed in prescription vials may not be transferred from one container to another except by the pharmacy that dispensed the original prescription.
 - c. A pharmacy may not repackage medications obtained from another pharmacy according to applicable state laws and regulations.
2. Patients / residents who utilize medication reminder / adherence devices;
 - a. Specialized medication reminder/adherence devices are labeled in accordance with applicable federal and state laws and regulations.
 - b. Medication reminder / adherence devices may not be filled with more than specific duration of therapy supply.
 - c. The family / responsible party or facility staff must record the date and time of filling the medication device on a label on the device.
3. Specialized medication packaging provided by the pharmacy may include "blister packs" that contain a 30/31 day supply or 30/31 doses of a single medication.
 - a. Specialized medication packaging is labeled by the pharmacy in accordance with applicable federal and state laws and regulations.
 - b. Multiple medication packaging, either in bingo cards or single-use packages, where all medication doses due at a specific time are packaged together.
 - c. Specialized medication packaging is labeled in accordance with applicable federal and state laws and regulations.
 - d. Labels on specialized medication packaging that contains different medications will include a description of each medication.

4. The following medications will not be packaged with other medications in multiple-dose packaging:
 - a. Warfarin (Coumadin)
 - b. Bisphosphonates, such as alendronate (Fosamax)
 - c. Controlled Substances

Medication Disposal / Destruction

Policy # LTC-104
Date Effective: 02/01/2017
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Purpose: *To ensure proper disposal / destruction of discontinued and expired medications.*

Policy: *Medications that are discontinued or expired shall be removed from the medication storage area and be disposed of by the facility in accordance with the facility policies and procedures.*

Procedure:

1. Discontinued or Expired Medications:
 - a. The facility will notify the pharmacy provider of all discontinued or expired medications.
 - b. Discontinued or expired medications shall be documented in the patients Medication Administration Record.
 - c. Discontinued or expired medications awaiting disposal shall be documented with:
 - i. Date
 - ii. Resident's name
 - iii. Name of Pharmacy and prescription number
 - iv. Name and strength of the medication
 - v. Quantity of the medication
 - vi. Reason for return or disposal
 - d. Discontinued or expired medications are stored in a locked, secure area until properly disposed of.
2. Disposal of Medications:
 - a. Medications awaiting disposal shall be documented (as above in 1.c.) and stored in a secured area.
 - b. Medications for disposal shall follow applicable federal and state laws and regulations.
 - c. A certified disposal service may be utilized.
 - d. Controlled substances shall be documented in the presence of at least two staff members.

Consultant Pharmacist Services

Policy # LTC-105
Date Effective: 02/01/2017
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Purpose: *To provide Medication Management Services, Education and Quality Assurance to Long Term Care facilities and their residents.*

Policy: *The Long Term Care facility (if applicable) shall provide regular and reliable Consultant Pharmacist services to residents.*

Procedure:

1. The Consultant Pharmacist Is responsible for providing pharmaceutical care intended to improve a resident's quality of life.
 - a. The Consultant Pharmacist requires special knowledge and expertise with Long Term Care facility patient population, environment and medication use processes.
 - b. The Consultant Pharmacist shall possess knowledge and expertise regarding federal and state laws and regulations governing pharmacy practice /services in long term care facilities.
 - c. The Consultant Pharmacist shall maintain a written agreement with the LTC facility.
 - d. The Consultant Pharmacist is licensed in the state where the LTC facility is located.
2. The Consultant Pharmacist's services may include:
 - a. Medication Therapy Management (MTM)
 - i. Review medication regimen of each resident at least quarterly
 - ii. Recommend appropriate medication and non-drug therapies
 - iii. Design, implement and monitor a pharmaceutical care plan
 - iv. Communicate with the resident's physician as needed
 - b. Education
 - i. Provide counseling on medications to residents and caregivers
 - ii. Provide information and participate in the education of LTC staff
 - iii. Conduct in-service education programs at least quarterly
 - c. Quality Assurance
 - i. Participate on relevant LTC facility committees

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- ii. Assist In developing and implementing protocols for safe and effective use of medications or therapies
- iii. Report medication and product-related problems to appropriate agencies
- iv. Review Medication Administration Records (MARS) at least quarterly to assure proper documentation of orders and administration to residents.
 - 1. Submit a written report of the review
- v. Inspect medication storage areas at least monthly for proper storage, cleanliness and removal of expired and discontinued medications.

Delivery

Purpose

To describe systems used to deliver medications (prescriptions or OTC medications) to AuBurn Pharmacy customers.

Scope

This document applies to all AuBurn Pharmacy locations that deliver prescription or OTC medications.

Policy

1. It is the policy of AuBurn Pharmacy that receipts for delivery will be completed through WinRx nursing home delivery log or WinScan POS delivery ticketing system.
2. Staff performing delivery duties will be trained by PIC or someone designated by the PIC in proper handling and storage of medications being delivered.
3. Patients receiving new prescriptions will be offered counseling by a pharmacist.
 - 3.1 The pharmacist checking a prescription for delivery will attempt to call the patient at the phone number on file after checking the prescription.
 - 3.2 If no phone number (or an invalid phone number) is on file or the patient does not answer when called by the pharmacist, a note will be placed on the prescription ticket requesting the patient call the pharmacy to speak with the pharmacist.
 - 3.2.1 A current phone number will be requested by the delivery clerk/tech and added to the patient profile in the WinRx software or reported to someone at the store to add to the patient profile.
 - 3.3 The delivery clerk/technician will notify the patient that the pharmacist has requested the patient call the pharmacy if the patient wishes to speak with the pharmacist regarding the new medication.
 - 3.4 The delivery ticket will have the following statement confirming that the patient has been offered counseling and should be signed by the patient at completion of delivery.
 - 3.4.1 Delivery ticket statement: I certify that I have received the medication(s) referenced by this ticket # and that counseling was OFFERED. I certify that I have received any and all REQUESTED counseling. I authorize the release of all related information necessary for payment purposes.
4. Patients receiving refill prescriptions will be notified by the delivery clerk/technician that they may contact the pharmacist at the pharmacy phone number if additional counseling is needed.
 - 4.1 The delivery ticket will have the following statement confirming that the patient has been offered counseling and should be signed by the patient at completion of delivery.
 - 4.1.1 Delivery ticket statement: I certify that I have received the medication(s) referenced by this ticket # and that counseling was OFFERED. I certify that I have received any and all REQUESTED counseling. I authorize the release of all related information necessary for payment purposes.
5. Deliveries involving temperature sensitive products will be packaged for delivery to meet the package insert requirements.
 - 5.1 Items requiring refrigeration/freezing will be delivered first whenever possible depending on delivery route.
 - 5.2 Cold packs, cooler totes or other special packaging will be used for prescriptions whenever necessary to maintain temperature as required by product package insert.
6. Deliveries will require signature of delivery completion by the patient or an authorized representative of the patient.

- 7 If there are any conditions at a patient's requested delivery site that the delivery clerk/tech feels is unsafe, the delivery clerk/tech will return the delivery to the store and report the unsafe condition to the pharmacist on duty. The PIC or pharmacist on duty will be responsible for contacting the patient and determining a safe solution for getting the patient their medication.
- 8 Prescription medication that cannot be securely delivered and signed for will be returned to the pharmacy and properly stored according to package insert for future delivery attempt or pickup by the patient or authorized representative.

Controlled Substances Inventory

Purpose

To describe the process and requirements of purchasing, storing, transferring, maintaining and auditing controlled substances.

Scope

This document applies to all AuBurn Pharmacy locations. AuBurn policies will not contradict any legislation, rules, or statutes enforced by the Kansas Board of Pharmacy, Missouri Board of Pharmacy, Bureau of Narcotics and Dangerous Drugs (BNDD), or the Drug Enforcement Administration (DEA).

Policy

1. It is the policy of AuBurn Pharmacy to purchase all controlled substances from a licensed wholesaler, Distribution Center, or pharmacy or transfer from another AuBurn Pharmacy or AuBurn Distribution Center.
 - 1.1 Orders will be transmitted via EDI or CSOS (see ControlledSubstance.CSOS policy) whenever such electronic ordering systems are available.
 - 1.2 Controlled substance invoices will be signed and dated by the pharmacist on duty verifying inventory was received and immediately entered in the correct wholesaler provided electronic tracking system.
 - 1.3 Invoices will be filed in a 3 file system (for each supplier). One for non-controls, one for CIII-V and one for CII (including paper or electronic 222 form).
2. The PIC will ensure that all controlled substances are stored and secured in accordance with laws of the State of Kansas or State of Missouri pertaining to controlled substances.
 - 2.1 Controlled substances listed in Schedule II shall be stored in a securely locked, substantially constructed cabinet. KS pharmacies may disperse CII controlled substances throughout stock of non-controlled substances in such a manner as to obstruct the theft or diversion of the controlled substances.
 - 2.2 Controlled substances listed in Schedule III, IV and V shall be stored dispersed throughout the stock of non-controlled substances in such a manner as to obstruct the theft or diversion of the controlled substances.
3. Controlled substances may be transferred between stores according to all state, BNDD or DEA regulations.
 - 3.1 Controlled substances will be transferred using the WinRx Inventory Transfer Stock in/Out feature as detailed in Inventory.TransferStock Procedure to create an invoice.
 - 3.2 Controlled substance transfers require a separate transfer for CIII-V and CII.
 - 3.3 CII transfers require the purchasing pharmacy to complete a 222 form.
 - 3.4 Returns, recalls and outdates will be treated and removed from inventory as a transfer stock to the correct supplier or returns provider.
 - 3.5 WinRx generated transfer reports will be filed along with a copy of the completed 222 form as an invoice according to section 1.3.
4. The PIC will ensure that a physical inventory of all controlled substances II-V along with drugs of concern (butabital/APAP/caffeine) will be performed every 6 months and the inventory count will be verified in WinRx.
5. WinRx perpetual inventory will be verified by the pharmacist during the prescription check process of all II-V controlled substance medications.
6. Periodically, the Director of Operations or his/her designee may perform random inventory audits of controlled substances and other "drugs of concern" at each AuBurn location. Additionally, these audits may include reviewing purchase and dispensing records to ensure inventory accuracy.

- 7 Loss, Theft or any other discrepancy in inventory will be properly reported and adjusted by the PIC.
 - 7.1 WinRx inventory will be adjusted by the pharmacist.
 - 7.2 A discrepancy report will be completed and filed if necessary.
 - 7.3 Form DEA-106 will be completed online and submitted to the DEA for any theft or "significant loss" as described in https://www.deadiversion.usdoj.gov/pubs/manuals/pharm2/pharm_manual.htm#5
 - 7.4 DEA, BNDD and local law enforcement shall be notified within 1 business day of any theft or "significant loss" of any controlled substance.
 - 7.4.1 Notification to the DEA should be made by phone and shall be followed up with written notification within 1 business day.
 - 7.5 State Board of Pharmacy shall be notified of any controlled substance theft or "significant loss".
- 8 Any In-Transit Loss is the responsibility of the supplier until the purchaser has signed for or taken custody of the shipment
 - 8.1 After the shipment has been received any In-Transit loss will be handled according to section 7.3 as a theft or "significant loss".
- 9 DEA Form 41 shall be used to report any breakage or spillage of controlled substances to the DEA.

References and Sources

1. www.deadiversion.usdoj.gov/schedules/
2. www.deadiversion.usdoj.gov/pubs/manuals/pharm2/
3. <http://pr.mo.gov/pharmacists-rules-statutes.asp>
4. <https://pharmacy.ks.gov/statutes-regs/statutes-regs>