



# ABSOLUTE SCOOP

## DID YOU KNOW?

All records, including temperature and destruction logs, must be maintained on-site at your facility for 3 years. These records must also be readily retrievable in the event of an inspection.

## MEDICATION STORAGE AND DISPOSAL

*Written by Beth Husted, PharmD, RPh, BCMTMS, Pharmacy Director*

The holiday season is upon us! If you are finding yourself making lists (and checking them twice) or frantically cleaning to ready your home for family and friends to gather, you are not alone. Don't you wish you had a designated Elf to help make sure you were ready to enjoy the holidays? Although we can't help you with traditional holiday planning, *Absolute* can guide your facility in proper medication storage and disposal to make sure your facility is ready for an inspection. This is sure to make your holidays merry and bright!

### Medication Storage

There are a couple of key points that must remain top of mind when ensuring medications are stored properly at your facility.

**The first is access.** Only authorized persons should have access to medication rooms and supplies. Medication carts must be secured and accessible by only one nurse at a time. At every shift change, a reconciliation must occur between the departing and incoming licensed health care professional. The reconciliation must include a physical count of all the controlled substances compared to their respective administration records (i.e. proof of use sheets) to ensure the accountability of all doses. During this shift to shift count, the integrity of foil blisters should also be assessed to be both puncture and tape free. Lids for controlled liquids must be visually inspected for leaks and unused bottles inspected for intact seals. Individuals conducting a shift to shift count must document its completion and positively identify themselves. Any discrepancies or issues noted should be immediately reported to the Director of Nursing or their designee. If controlled substances are included in an emergency kit and are secured using an approved, tamper-evident method, these items do not require individual dose accountability, only confirmation that security has not been breached (i.e. lock tag numbers are still the same). *Absolute* provides a *Shift Change/Controlled Medication Count Sheet Accountability Log* that can be used to ensure all shift change documentation is maintained.

**The second is stability.** Any open stock bottle should be clearly marked and expired medications should be removed from the cart and med room. Designated medication refrigerators and freezers are to be used for ONLY drug storage; these units should be free of food and beverages – including those items often used to administer medications such as apple juice or pudding as well as nutritional supplements. Also, refrigerated, controlled medications must be stored in a permanently affixed, locked box within the refrigerator.

In addition, refrigerator temperature logs should be maintained and checked **TWICE DAILY** to make sure that refrigerated medications are being stored at an appropriate temperature. The log should include:

- Date/time
- Temperature (medication safe range is 36-46°F)
- Initials of the individual checking the unit
- A comment/action section that describes how an excursion was addressed

If for some reason an out of range temperature is found, facility protocol should be followed for notifying facility management and monitoring frequency should be increased to determine if the cause is transient (i.e. fridge door left open) or permanent (i.e. something is wrong with the refrigerator).



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A plan of action should be established for moving medications to an alternate refrigerated storage unit until the temperature issue has been resolved. If manual monitoring proves difficult due to inconsistent staffing, there are also options for electronic monitoring; these units will continuously track the temperature and alert designated individuals when the temperature is not in range. Data can be retrieved and shared from electronic monitoring systems in the same manner as traditional, paper logs if requested during an inspection.

## Medication Disposal

Complete and accurate records must be maintained when destroying both controlled and non-controlled medications.

It is a regulatory requirement in skilled buildings and a best practice in the assisted living environment to remove any controlled medication(s) from the cart within 10 days of an order being discontinued. Until they are removed, shift to shift counts should be performed on all controlled medications in the med cart. Two licensed individuals should always accompany controlled medications as they are removed from the cart; two witnesses should also sign off on the disposal of any controlled substances. Not only should the transfer of controlled substances from the cart to a secure area be documented prior to disposal, destruction must also be recorded. Upon disposition, controlled medications must be destroyed via a method that renders the drug non-retrievable (i.e. Rx Destroyer). A *Controlled Destruction Log Book* is offered to facilities by Absolute to help enforce and document the transfer and destruction of controlled substances.

If your facility is destroying unused, non-controlled substances, it is important to note that records of disposal must include the following:

- Drug name, strength, and dosage form
- Quantity destroyed
- Date of disposal
- Method of disposal
- Positive identification of the individual performing the disposal

A disposal log does NOT need maintained for any waste (i.e. patient refused a dose) associated with medication administration for non-controlled drugs.

No need to get your **tinsel in a tangle!** By implementing these best practices for storing and disposing medications properly, you can now check off “*Get my facility inspection ready*” from your holiday list.

### Resources

- <https://www.pharmacy.ohio.gov/documents/compliance/inspectionguides/inspectionguides/institutional%20pharmacy%20and%20facility%20-%20inspection%20guide.pdf>
- <https://codes.ohio.gov/ohio-administrative-code/rule-4729-5-3-01>
- <https://codes.ohio.gov/ohio-administrative-code/rule-4729-5-9-03.2>

## About the Author



*Outside of work, Beth enjoys spending time with her three kids and husband. You can often find her on the soccer field & basketball court, or enjoying her favorite holidays sweet treats, Little Debbie Christmas trees.*

Beth Husted, PharmD, RPh, is the Director of Pharmacy at Absolute. She joined us in early 2019 and quickly became a respected leader and trusted advisor. She initiated our “Follow Me Home” discharge program and took on leadership of the Consultant Pharmacists and their many clinical initiatives and services. During the pandemic, Beth led our COVID-19 vaccination efforts including acquisition of the vaccine to become a Phase 1A provider - one of nine LTC pharmacies nationally! Due to her success with the COVID-19 vaccine initiative, she quickly earned an honorary Queen of COVID Award. Beth is a graduate of Ohio Northern University.

**What did the gingerbread man put on his bed?**

A cookie sheet.



**What did the salt say to the pepper on Christmas?**

Seasonings Greetings.