

**TITLE: Medication Storage, Destruction, and Transfer**

**Number: 416.00**

**Policy:**

It is the policy of Thrive Behavioral Network, LLC that all medications will be stored under proper conditions, including, but not limited to: correct temperature, lighting, labeling, segregation and security. When medications are discontinued, become outdated (according to expiration date that will be found on the medication container or label) or need to be transferred, the facility nurse or designated staff will dispose of or transfer the medication according to state and federal regulations.

**Procedure:**

**416.10 Storage of Medications**

**Subpart 1 – Facility Designated Area**

All medications will be kept in a designated, locked area within the facility. Schedule II to IV substances must be kept under double-lock separate from other medications with a system in place to document accurate counts of controlled substances according to Policy 417.00 – Controlled Substances.

**Subpart 2 – Medication Separation**

All medications will be separated by physical barriers according to route.

Medications that are prescribed for individual clients will be kept in individual compartments labeled with the client's name and route.

**Subpart 3 – Refrigerated Medications**

Medications that require refrigeration will be kept in a locked, designated medication refrigerator or in a locked, labeled container within the main refrigerator.

**Subpart 4 – Discontinued Medications**

After permanent discontinuance of any medication, the medication will be placed in a separate storage area until client discharges at which time medications will be returned. Medications may be destroyed per a Licensed Independent Practitioner order if it is determined the client is in imminent danger of self-harm or per client's request. (See parts 416.20 and 416.30 of this policy) This container will be provided with a lock or will be kept in the locked medication cabinet or room.

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## Subpart 5 – Labeling of Medication

All prescribed medications will be kept in their original containers with proper pharmacy labeling including:

- Prescription number
- Name of medication
- Strength and quantity
- Expiration date of time-dated medications
- Directions for use
- Client's name
- Licensed Independent Practitioner's name
- Date of original issuance or most recent date refilled
- Address and phone number of the pharmacy issuing medication
- Number of refills remaining

## Subpart 6 – Defective Labels

Whenever a label is found to be excessively soiled, worn, incorrectly labeled or missing necessary information, the staff noting the problem will be responsible to contact the pharmacy immediately for re-labeling as soon as possible. The contents of any drug container having no label or with an illegible label will be returned to client as per 416.10 Subpart 4.

## 416.20 Destruction of Medications (all medications)

### Subpart 1 – Destruction Procedure

The facility nurse will destroy the unused portion of the medication by using a commercial drug disposal system, i.e. "MedBuster". Follow directions for using this method on the label of the container and document the destruction on Form 4013 – Medication Destruction Record.

**CONTROLLED MEDICATIONS:** Follow the above process using a commercial drug disposal system with a second licensed staff present to witness and document the destruction on Form 4013 – Medication Destruction Record.

### Subpart 2 – Destruction Record Contents

Notation of the medication destruction will be made in the Form 4013 – Medication Destruction Record by the facility nurse or designated supervisor. This record will include:

- Date
- Quantity of medication
- Name of client
- Prescription number
- Name of medication
- Legal signature of facility nurse or supervisor
- Legal signature of witness

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## Subpart 3 – Record Maintenance

This record will be maintained in the healthcare section of the client's case file.

## 416.30 Transfer of Medications Upon Discharge from the Facility

### Subpart 1 – Releasing Medications

Program staff must return all property to the client upon service termination or transfer regardless of the client's service termination status, with the exception of medications that have been determined by either the prescribing physician or another physician, after examining the client, to be harmful except when the client's personal physician approves the medication for continued use. Documentation of this exception must be kept in the client's file. Without this exception medications are considered personal property and must be returned to the individual regardless of status at discharge. Regardless of the type of discharge; all property including medications must be retained for a minimum of 30 days if the client does not reclaim property upon service termination.

### Subpart 2 – Record Contents

A record of the medication discharge transfer will be recorded in Form 4015 – Medication Transfer Record. This will include, but not be limited to:

- Date
- Client's name
- Address of new residence
- Names of medications being released
- Prescription number
- Amount of medications
- Releasing staff legal signature
- Client's signature

### Subpart 3 – Record Maintenance

The medication transfer record will be maintained in the healthcare section of the client's case file.