

- ✓ If a mistake is made, then it should be bracketed, or a single straight line should be put through the entry. Under no circumstances should entries in controlled drug registers be erased or obliterated.
- ✓ Controlled drug registers must be kept for a minimum of two years by the ward or department after the last entry has been made. After two years, they should be destroyed as confidential waste.
- ✓ It is good practice to check stock balances of all schedule 2 and 3 Controlled Drugs, with every shift change involving a change of Assigned NIC, for more info on these see pg. 28 of the policy.
- ✓ The audit minimum standard is that the stock balance of all Controlled Drugs entered in the Register must be checked once a week against the actual stock held in the ward/department. Two Practitioners, one of whom must be the Nurse in charge, must perform the check.
- ✓ A record indicating this check has been carried out must be kept in the CD Register and must confirm the stock is correct. The record must be dated and signed by both Practitioners. The NIC must ensure that these checks are carried out.
- ✓ The Nurse in Charge must undertake a random check of all Controlled Drugs cupboards at least once a month and record it in the ward register.

Borrowing Controlled Drugs

Controlled Drugs must not be borrowed except in an extreme emergency, following contact with the Pharmacy or on-call pharmacist. For more information on borrowing controlled drugs please see pg. 17 of the policy.

Losses or Discrepancies of Controlled Drugs

In the event of a discrepancy between the stock balance and register for CDs, the NIC must immediately and thoroughly investigate the loss, checking the CD register against prescription administration records and brief interviews with staff. For more information regarding loss or discrepancies of Controlled Drugs please see pg. 41 of the policy.

What happens to Controlled Drugs if a ward/clinic is closed?



If a ward, clinic, or team is to close, the controlled drugs must be handed over by the NIC to an Authorised member of Pharmacy Staff who will sign the appropriate section of the register and return the Controlled Drugs to the Pharmacy.

FURTHER INFORMATION
C06 - Medicines Code Policy



NHS

**Birmingham and Solihull
Mental Health**
NHS Foundation Trust

Controlled Drugs

KEY POLICY FLASHCARD

January 2021

Controlled Drug Prescriptions

Community prescriptions and discharge prescriptions for CDs should comply with the prescription requirements under the misuse of drugs regulations. Full details can be found in the BNF. Such prescriptions should include:

- ✓ The signature of the prescriber
- ✓ the date
- ✓ written or printed indelibly.
- ✓ the prescriber's address.
- ✓ the name, form and strength of the preparation
- ✓ the dose and frequency.
- ✓ the total quantity in word and figures.
- ✓ the name and address of the service user.
- ✓ for instalment prescriptions, directions specifying the amount of instalments and the intervals.

Controlled drug prescriptions are only valid for 28 days by law. It is good professional practice that they cover a maximum of 30 days supply unless there are exceptional reasons to extend this.

Taking Out Controlled Drugs

Schedule 2 and 3 CDs to take out should be ordered on the CD prescription form that has been written by a prescriber in accordance with current legal requirements. This prescription must be sent to pharmacy for dispensing. A supply can only be made against an original prescription. Photocopies or faxes are not acceptable.

Delivery and receipt of CDs for TTO purposes should be as for other medicines, but storage on the ward/department should be in the CD cupboard, except for TTOs containing benzodiazepines or hypnotics (NB temazepam must be kept in the CD cupboard). TTOs containing Controlled Drugs should be segregated from other 'stock' controlled drugs.



N.B. CDs cannot be supplied to a service user until the original prescription has been received by the Pharmacy.

N.B. It is not necessary to enter the TTO into the CD Register

Ordering Controlled Drugs

The responsibility for the ordering, receipt and storage of Controlled Drugs is that of the NIC of the ward/department.

The order for controlled drugs must include:

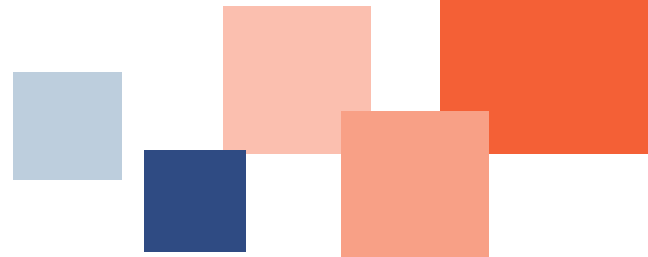
- ✓ Name of ward or team
- ✓ Drug name (approved name), form and strength
- ✓ Total quantity
- ✓ Signature and printed name of the nurse ordering the controlled drugs.
- ✓ Date
- ✓ Signature of pharmacy staff issuing item from pharmacy.

Receipt of Controlled Drugs

Upon receipt, a nurse must check the contents of the package containing CDs against the requisition. Any discrepancy must be reported to the Pharmacy immediately. If correct, the nurse must sign the Receipt. The nurse must enter the new stock into the CD register on the appropriate page, witnessed by another nurse, nursing associate, an authorised member of the Pharmacy Staff or an Authorised Employee who must verify the stock level and sign the register. The Controlled Drug must then be immediately locked away in the Controlled Drug Cupboard.

Storage of Controlled Drugs

- ✓ Controlled drugs including benzodiazepines and hypnotics must be stored in a separate designated controlled drugs cupboard that is compliant with the Misuse of Drugs Regulations.
- ✓ These cupboards may be separate from others or be inside other locked medicines cupboards used to store internal medicines.
- ✓ The lock must not be the same as any other lock in the hospital.



- ✓ Each ward and team will keep an up-to-date Register of Controlled drugs including benzodiazepines and hypnotics. This must include controlled drugs received, controlled drugs administered, a running balance and details of any controlled drugs returned to pharmacy for re-use or destruction.
- ✓ No ward, clinic or team must store Controlled Drugs unless there is an appointed NIC responsible for their storage and administration.

The Controlled Drug Cupboard Key

- ✓ On wards → the key must be kept on the person of the NIC or Designated Nurse nominated by them. The key must be kept on a separate key ring that can be readily identified. Responsibility remains with the NIC.
- ✓ On community teams → the key will be kept in the teams safe. Only qualified nursing staff will have access to this safe.
- ✓ No practitioner can have access to the CD cupboard except with the agreement of the NIC, officially holding the key. The key must not be handed over to medical staff.
- ✓ Authorised Pharmacy Staff may have access to the CD cupboard key for the purpose of performing statutory checks.



Checking of Stock Balances

- ✓ Controlled drug registers are available from the Trust Pharmacy service. A separate page should be used for each supply of CDs. For each preparation, entries should be in chronological order, in indelible ink and with a running balance. If the end of the page is reached, then the balance should be transferred clearly to a new page. This transfer should be witnessed.