



Review Sheet

Last Reviewed
05 May '20Last Amended
05 May '20Next Planned Review in 12 months, or
sooner as required.

Business impact

**MEDIUM IMPACT**Changes are important, but urgent implementation is not
required, incorporate into your existing workflow.

Reason for this review

Scheduled review

Were changes made?

Yes

Summary:

Policy reviewed and updated with some addition to the Procedure section in relation to best
practice with keeping CD keys separate. Additional references added to reflect CQC
guidance for storage of medication.

Relevant legislation:

- The Care Act 2014
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Medicines Act 1968
- The Human Medicines Regulations 2012
- Misuse of Drugs Act 1971
- The Misuse of Drugs (Safe Custody) Regulations 1973
- The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007

Underpinning
knowledge - What have
we used to ensure that
the policy is current:

- Author: NICE, (2014), *Managing medicines in care homes*. [Online] Available from:
<https://www.nice.org.uk/guidance/sc1/chapter/1-recommendations> [Accessed: 5/5/2020]
- Author: Royal Pharmaceutical Society, (2018), *Professional guidance on the safe and
secure handling of medicines*. [Online] Available from:
[https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-
handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of-
medicines](https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of-medicines) [Accessed: 5/5/2020]
- Author: CQC, (2020), *Storing medicines in residential services*. [Online] Available from:
[https://www.cqc.org.uk/guidance-providers/adult-social-care/storing-medicines-
residential-services](https://www.cqc.org.uk/guidance-providers/adult-social-care/storing-medicines-residential-services) [Accessed: 5/5/2020]
- Author: CQC, (2020), *Storing medicines in fridges*. [Online] Available from:
<https://www.cqc.org.uk/guidance-providers/adult-social-care/storing-medicines-fridges>
[Accessed: 5/5/2020]
- Author: CQC, (2020), *Storing controlled drugs in care homes*. [Online] Available from:
[https://www.cqc.org.uk/guidance-providers/adult-social-care/storing-controlled-drugs-
care-homes](https://www.cqc.org.uk/guidance-providers/adult-social-care/storing-controlled-drugs-care-homes) [Accessed: 5/5/2020]

Suggested action:

- Encourage sharing the policy through the use of the QCS App
- Share 'Key Facts' with all staff
- Ensure relevant staff are aware of the content of the whole policy



1. Purpose

1.1 To support the storage of medicines in a safe and secure location in order to prevent unauthorised access and reduce risks to Service Users.

1.2 To support HWCGS Care (T/A Segal Gardens) in meeting the following Key Lines of Enquiry:

Key Question	Key Lines of Enquiry
SAFE	S4: How does the provider ensure the proper and safe use of medicines?
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?

1.3 To meet the legal requirements of the regulated activities that HWCGS Care (T/A Segal Gardens) is registered to provide:

- | The Care Act 2014
- | The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- | Medicines Act 1968
- | The Human Medicines Regulations 2012
- | Misuse of Drugs Act 1971
- | The Misuse of Drugs (Safe Custody) Regulations 1973
- | The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007



2. Scope

2.1 The following roles may be affected by this policy:

- | Registered Manager
- | Other management
- | Care staff

2.2 The following Service Users may be affected by this policy:

- | Service Users

2.3 The following stakeholders may be affected by this policy:

- | Commissioners
- | External health professionals
- | Local Authority



3. Objectives

3.1 Medication is stored safely and securely in an appropriate location in HWCGS Care (T/A Segal Gardens).



4. Policy

4.1 The decision of where to store the medicines at HWCGS Care (T/A Segal Gardens) will take into account legislative requirements, the size of HWCGS Care (T/A Segal Gardens) and the nature of the medicines supplied.

4.2 HWCGS Care (T/A Segal Gardens) will follow NICE and Royal Pharmaceutical Society guidance on the storage of medicines and ensure that procedures are cascaded to staff that include:

- | How and where medicines are stored, medicines to be taken and looked after by Service Users themselves, controlled drugs, medicines to be stored in the refrigerator, skin creams and oral nutritional supplements
- | Secure storage with only authorised staff of HWCGS Care (T/A Segal Gardens) having access
- | The temperatures for storing medicines and how the storage conditions must be monitored

4.3 HWCGS Care (T/A Segal Gardens) will assess each Service User's needs with regards to the storing of their medicines and will aim to provide storage that meets the Service User's needs and choices, having considered the risk assessment and type of medicines system they are using.



5. Procedure

5.1 Key Holders

Mr Damian Cummings Gillian Gilmore will prepare and have in place a list of named staff at HWCGS Care (T/A Segal Gardens) who are authorised to have the keys to the medicines room/cupboard/trolley in their possession.

It is seen as good practice to keep the CD cupboard key kept separate to the other keys.

5.2 Room Temperatures

Staff will ensure that the temperature of the rooms where medication is stored is checked and recorded on a daily basis. This must not exceed 25 degrees Centigrade.

Where it is found that the temperature is above 25 degrees Centigrade, this must be immediately reported to the Registered Manager who will decide on the action to take by getting advice from a Community Pharmacist or the manufacturer and completing a risk assessment.

It must be noted that individual medicines may have a different storage range which must be adhered to. Staff must seek the advice of the pharmacist if in any doubt.

5.3 Shelf Life and Expiry Dates

Dates of opening or starting to use the medication must be recorded on such items that have a short shelf life once opened, e.g. liquids, creams, eye drops.

Monthly checking of expiry dates of all stored medication and dressings must be carried out by trained staff and appropriate records kept.

Medications beyond their expiry date must not be used and be disposed of appropriately.

New supplies of medication must be placed behind older supplies when medication is received so that the older supplies are used first.

5.4 Self-Administering Service Users

- | All medicines for Service Users who wish to self-administer, or have been assessed as having capacity, must be stored in the Service User's own room in a locked cupboard
- | The keys must be kept in the Service User's possession at all times

5.5 Non-Self-Administering Service Users

- | Where appropriate, all Service Users' medicines are stored in a locked medicine trolley which, when not in use, must be securely fixed to the wall or stored securely in a locked room if access to the room is restricted to authorised persons
- | The keys to this trolley or room must be kept secure at all times, in the Care Worker's or Registered Manager's possession
- | All medicines must be kept in the packaging in which they were obtained from the pharmacy
- | Spare medication will be kept in locked cupboards in a locked room
- | Medicines with differing routes or methods of administration, or which look/sound alike, will be stored separately or segregated to minimise selection errors e.g. internal medicines, such as tablets, must be stored separately from external medicines, such as creams
- | Nutritional supplements and dressings must be stored in a lockable room
- | Medicines supplied in monitored dosage systems, needing more storage space to cover the changeover period each month, must be locked away until needed in a locked cupboard in a locked room
- | The keys to the stock drug cupboards and room must be kept secure at all times in the possession of the Care Worker or Registered Manager

5.6 Medication Requiring Refrigeration

- | Medication requiring refrigeration must be kept in a locked medication fridge, with a calibrated maximum and minimum thermometer, within a locked room
- | The Registered Manager for the home has overall responsibility for maintaining the cold chain of refrigerated products. The senior member of staff on duty must be responsible in the Registered Manager's absence
- | The medicine fridge must not store anything other than medication and no food or samples must be stored in it



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- | Ensure that there is a daily record of internal fridge temperatures; this must include current temperature and the maximum and minimum over the previous 24 hours. A maximum and minimum thermometer should be used for this purpose
- | The fridge must be adjusted so that readings remain between 2 and 8 degrees Centigrade
- | Any temperature that falls outside the 2 to 8 degrees Centigrade range must be reported immediately to the Registered Manager who will decide on the action to take by getting advice from a Community Pharmacist or the manufacturer. If necessary, an engineer must be called. Until instruction has been given regarding medicines in the fridge, stock within that fridge must not be used. A notice must be attached to the fridge stating, 'stock in quarantine - do not use until further notice'. The notice must be dated and will direct enquiries to the Registered Manager or the senior member of staff on duty

5.7 Care of the Refrigerator

- | The refrigerator requires defrosting and cleaning in accordance with the manufacturer's recommendations or sooner in the case of spillages, etc.
- | A log must be made of when the fridge has been defrosted and a diary date made for the next defrost
- | Ensure that the thermometer probe cable does not interfere with the door seal. This could cause the temperature to fall outside the recommended temperature range

5.8 Storage of Controlled Drugs

- | Controlled drugs (CDs), Schedule 2 and those Schedule 3 CDs that require secure storage, must be stored in a locked CD cabinet which complies with the relevant standards, is bolted to a solid wall and only used for the storage of CDs
- | If CDs are incorporated into a monitored dosage system, then the whole system which contains the CD must be kept in the CD cabinet
- | The keys for this cupboard must be kept secure at all times in the possession of a nominated, suitably trained and qualified member of staff
- | HWCGS Care (T/A Segal Gardens) cannot purchase and keep stocks of Schedule 2, 3 and 4 CDs without the appropriate Home Office CD licence
- | A weekly check of Service Users' own CDs is to be carried out
- | Service Users who are self-administering their prescribed CDs can hold their own individually dispensed supply of controlled drugs in their personal lockable, non-portable cupboard/drawer in their room
- | If any medicine cupboard keys become lost, including the keys to the controlled drugs cupboard, the Registered Manager should be informed immediately
- | The Registered Manager is responsible for investigating this incident fully. The appropriate incident report should be completed and provided to the CQC and possibly the Police
- | Any incident involving a controlled drug (including stock shortage) must be reported to the CQC and the Accountable Officer for Controlled Drugs within the region

5.9 Storage of Oxygen

- | If a Service User is prescribed oxygen, HWCGS Care (T/A Segal Gardens) must discuss storage and administration with the engineer from the company who supplies the oxygen. Their advice must be documented and followed
- | A risk assessment must be completed for the storage and use of oxygen, in line with health and safety procedures
- | Oxygen cylinders must be stored safely, under cover and not subject to extreme temperatures. This should be in a dry, clean, well-ventilated area away from highly flammable liquids, combustibles and sources of heat and ignition
- | A statutory warning notice must be displayed in any room/area where oxygen is stored or used, stating "Compressed gas. Oxygen: No Smoking. No naked lights"
- | Cylinders must be handled with care, never knocked violently or allowed to fall over. They must be switched off when not in use. Cylinders must only be moved with a trolley specifically designed for the cylinder size unless it is a small portable cylinder



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- | Oxygen concentrators must be stored upright and plugged directly into the mains socket. Adequate ventilation must be provided around the concentrator. They must always be switched off when not in use
- | In the case of fire, it is the responsibility of staff to inform the fire brigade that oxygen cylinders and/or concentrators are present and where they are located. When evacuating people from HWCGS Care (T/A Segal Gardens), oxygen concentrators or cylinders left in the premises must be switched off, where it is safe to do so, as part of the evacuation process

5.10 General Principles

- | Medicine storage cabinets, wherever possible, must be sited away from sources of heat, moisture or direct sunlight as any of these elements can cause medicines to deteriorate
- | All cupboards, trolleys and areas used to store or prepare medication must be kept clean and tidy and must be in good condition
- | Spills must be cleared up immediately. Any equipment used in the administration of medicines must be clean and in good condition
- | Adequate lockable storage must be provided at all times for all medication, including those supplied in a monitored dosage systems (MDS). This also applies to the new medication received at the change over period
- | Medicines must be stored tidily so that it is easy to locate each Service User's medication and to reduce the chances of it being mixed up with other people's medication
- | The security of medicines must not be compromised by cabinets being used for non-clinical purposes, for example, storing money or valuables
- | Pharmaceutical advice must be taken before any changes to storage arrangements are made
- | Staff must not leave the premises with the medicines room/cupboard keys and in the event that this happens, an incident form must be completed
- | Medication must not be left exposed and unattended at any time
- | If an emergency situation arises when medication is being administered and which requires the attention of the staff member administering the medication, the cupboard/trolley must be locked until the responsible person is able to return



6. Definitions

6.1 Controlled Drugs (CDs)

- | Some prescription medicines are controlled under the Misuse of Drugs legislation (and subsequent amendments). These medicines are called controlled medicines or controlled drugs. Examples include: morphine, tramadol



Key Facts - Professionals

Professionals providing this service should be aware of the following:

- | HWCGS Care (T/A Segal Gardens) will assess each Service User's needs for storing their medicines and provide storage that meets the Service User's needs and choices, having considered the risk assessment and type of medicines system they are using
- | All medicines must be stored in a locked room or cupboard in line with the policy
- | People who are self-administering their prescribed CDs can hold their own individually dispensed supply of controlled drugs in their personal lockable, non-portable cupboard/drawer in their room
- | Staff are required to monitor both room temperatures and fridge temperatures where medicines are stored
- | Only those staff who have been identified by Mr Damian Cummings Gillian Gilmore as a keyholder have access to medication or medication storage areas



Key Facts - People affected by the service

People affected by this service should be aware of the following:

- 1 You can safely store your own medicines in a locked cupboard in your room if you are self-managing your own medication



Further Reading

There is no further reading for this policy, but we recommend the 'underpinning knowledge' section of the review sheet to increase your knowledge and understanding.



Outstanding Practice

To be 'outstanding' in this policy area you could provide evidence that:

- 1 'Opened on' dates are annotated on medication that have a short shelf life on opening, e.g. drops, liquids, external preparations
- 1 Daily medicine storage room temperature and, where appropriate, fridge temperature (Maximum, Minimum and Actual) records are kept and there are no gaps on the record sheets
- 1 All medication storage facilities are very well maintained, clean and regularly updated
- 1 Suitable storage facilities are provided for all people using the service who want to manage their own medication
- 1 The wide understanding of the policy is enabled by proactive use of the QCS App



Forms

The following forms are included as part of this policy:

Title of form	When would the form be used?	Created by
Medicine Fridge Temperature Recording Form - CM07	To record the fridge temperature daily.	QCS
Room Temperature Recording Sheet - CM07	To record daily the temperature of the room where medication is stored. This could be within a treatment room or if a drug trolley is attached to a wall. One form to be used per location.	QCS
Medical Stock Sheet - CM07	To record the stock take of particular items, for example, homely remedies.	QCS

