

SAFER MANAGEMENT OF CONTROLLED DRUGS:

GUIDANCE ON STANDARD OPERATING PROCEDURES FOR CONTROLLED DRUGS

Department of Health Gateway Reference: 7585

January 2007

DH INFORMATION READER BOX

Policy	Estates
HR / Workforce	Performance
Management	IM & T
Planning	Finance
Clinical	Partnership Working

Document Purpose	Best Practice Guidance			
ROCR Ref:	Gateway Ref: 7585			
Title	Safer management of controlled drugs: Guidance on standard operating procedures for controlled drugs			
Author	Department of Health			
Publication Date	January 2007			
Target Audience	PCT CEs, NHS Trust CEs, SHA CEs, Care Trust CEs, Foundation Trust CEs, Medical Directors, Directors of Nursing, Allied Health Professionals, GPs			
Circulation List				
Description	Best practice guidance on standard operating procedures for the use and management of controlled drugs			
Cross Ref	n/a			
Superseded Docs	n/a			
Action Required	n/a			
Timing	n/a			
Contact Details	Department of Health Controlled Drugs Team 406A Skipton House 80 London Road SE1 6LH 020 7972 3113 www.dh.gov.uk/controlleddrugs			
For Recipient's Use				

Guidance on Standard Operating Procedures (SOPs) for Controlled Drugs (CDs)

INTRODUCTION

- The purpose of this guidance is to promote the safe, secure and effective use of all controlled drugs. Controlled drugs (CDs) are subject to special legislative controls because there is a potential for them to be abused or diverted, causing possible harm. The Government has introduced strengthened measures to make sure controlled drugs are managed safely. These governance arrangements need to be implemented in a way that supports professionals, and encourages good practice around the management and use of these important medicines when clinically required by patients.
- The Government has introduced new monitoring and inspection arrangements for controlled drugs in the Health Act 2006. These will work within and alongside existing governance systems and should be seen as an integral part of the overall drive to improve quality in healthcare. Regulations made under the Health Act 2006 will require each healthcare organisation to appoint an Accountable Officer, responsible for the safe and effective use of controlled drugs in their organisation. The Regulations also introduce standard operating procedures (SOPs) for the use and management of controlled drugs. These are one of the practical measures that will help to ensure good practice throughout the health and social care system.
- The regulations require Accountable Officers to ensure that his or her organisation, or a body or person acting on behalf of, or providing services under contract with his or her organisation, has adequate and up-to-date SOPs in relation to the use of controlled drugs.
- The standard operating procedures must in particular cover the following matters:
 - ordering and receipt of CDs;
 - assigning responsibilities;
 - where the controlled drugs are stored;
 - who has access to the controlled drugs;
 - record keeping;
 - who should be alerted if complications arise.

Definition

- An SOP is an unambiguous document, describing the responsibilities and the procedures, including audit, necessary to safely and accountably manage any set of processes, in this case around the total management of CDs. An SOP is a working document detailing the current agreed working practice that takes account of all the areas that are applicable to the management of CDs in an individual setting.
- This guidance is intended to provide base line advice on the areas that might be considered for inclusion in the SOP. Different health and social care settings may have practice areas in addition to those outlined below.

PRINCIPLES

7 Why are SOPs needed for CDs?

- To improve governance of controlled drugs within the organisation
- To provide clarity and consistency for all staff handling controlled drugs
- To define accountability and responsibilities and clarify where responsibility can be delegated
- To ensure practice is in line with the regulatory frameworks
- · As a training tool for new and existing staff.

Validation within the organisation

- A large organisation will require an overarching policy for SOPs, and smaller organisations such as GP practices will need to have an appropriate process in place to agree and adopt SOPs for use.
- 9 SOPs will need to be agreed at a senior level on behalf of the organisation, usually through the
 - Accountable Officer for designated organisations (as defined in the Heath Act Regulations but likely to include PCTs, NHS Trusts, NHS Foundation Trusts and independent hospitals)
 - And/or involve other relevant stakeholders such as Senior Practitioner, senior partner, senior pharmacists, superintendent pharmacist, Clinical Governance Lead as appropriate to the organisation
- 10 The SOP policy should take account of:
 - Training considerations for new and existing staff including ownership and awareness training
 - The review criteria, for example:
 - after a given time period
 - following a critical incident, to include the learning from such incidents, significant change in legislation or best practice
 - where a specific named person is included in a SOP then the SOP will need to be changed if personnel circumstances change.
 - Cascade mechanism of changes to all staff
 - Staff responsibilities requirement to notify variation / inability to follow SOP.
 Opportunity to comment and be part of review process

11 A common template needs to consider inclusion of the following:

Organisation / Area/ Service to which the SOP applies

Objective / purpose

Scope

Stages of the process for example other committees that need to agree such a document

Responsibilities

Other useful information such as interaction with other SOPs, what to do if circumstances change

Validation by organisation and Date

Review period, e.g. one, two or three years.

Lead author and named people contributing to the SOP

SOPs should cover every aspect of the controlled drugs journey – from procurement, administration or dispensing to disposal

- SOPs are needed for every stage of the CD journey from procurement (ordering, receipt, transport), safe storage, supply, administration, destruction and guidance for dealing with an incident.

 Most will require multidisciplinary collaboration.
- The organisation will need to decide how much to include in a single SOP and may need specific SOPs for specific areas.
- The following table is to assist in identifying the steps in handling CDs that need to be considered in the SOP and what is appropriate for each organisation
- 15 SOPs need to be accessible to staff at all times.

AREAS TO CONSIDER

Receiving Into	Receiving Into organisation / unit Comment						
Ordering	Ordering Is a Home Office licence needed to hold stock?						
	Record Keeping of order including descriptions of forms and other stationery to be used						
	Named person(s) (consider deputy / locum) with Authority to order						
	Organisational tendering processes – purchasing for safety						
Transport Particularly if not from wholesaler / manufacturer							
Receipt	Personnel authorised to receive						
Record keeping of receipt							
Security on receipt							
Storage	Security and key/code security Personnel with access						
	Appropriateness for product e.g. temperature						
	Out of hours access						
	Contingency for extended closure						
Register entry	Register entry						
Arrangements t	for Controlled Stationery						
Action to take it	fany discrepancies						
	to specify when) check / audit						
Process for reconciliation when necessary							

Transfer within organisation						
Request	Prescription (need to expand)					
	Signed order (correct stationery) by known signatory					
	Checking authority to order	Supplier able to check against specimen signature				
Assembly and supply	Who					
	Responsible person					
	Label					
	Register entry					
Hand over	Record Keeping					
Transport	Authorised personnel					
	Audit trail on leaving department					
	Security					
Audit trail by	handing over to persons authorised to receive					
receiving unit	record keeping					
	(back to 'receipt' as for receiving into organisation)					

<u>Transport</u> Some organisations may require specific SOPs relating to transport arrangements

Prescribing	Link to legal position of who can prescribe which CDs
Authority to prescribe	supplementary prescriber status, existing and new independent prescribers, private or NHS
Prescription stationery	Hospital charts
	FP10 types
Private prescribing	
Local restrictions	

Administratio	<u>Administration</u>					
Authority to	supplementary prescriber status,					
prescribe	existing and new independent prescribers					
Authority to administer	Authority to PGD considerations, Legal and clinical check					
Assembly Removal from cupboard/store						
	Manipulation					
Patient	Patient Checking right patient, etc					
Register entry	Register entry					
Patient specific documentation						
Disposal / reco	ording arrangements for any unused portion					

<u>Register</u> Some organisations may want to consider specific SOPs relating to register keeping

Record document management
Retention of hard copies/back-up of e-records

Individual pati	Individual patient supplies				
	Legal and clinical check of prescription				
Assembly	Removal from cupboard				
	Manipulation				
Patient /	Checking right patient, etc				
representative	representative				
ID arrangements					
Register entry					
Prescription	Prescription Arrangements for sending to relevant NHS				
forms	Authority eg NHSBSA				

Disposal – need	<u>Disposal – needs to include agreed Record keeping</u>			
requirements				
Unused portions	Unused portions			
Out of date stock	Out of date stock			
Excess	xcess Disposal			
	Legal return to main store			
Individually prescribed				
Patient Own				

Denaturing	
Authorised	
witnesses if	
required	
Disposal	

								ta			
	•	•	•	•	•	~	•		 •	•	_

Local guidance on removal, storage, recording, reporting

<u>Incidents</u>		
Reporting mechanisms		
Review procedures		

<u>Audit</u>	
By whom	
Format	
Frequency	
Reporting route	
Record Management	

Sharing best practice:
The following people played a key part in developing the SOP guidance and have good practice in their fields. You may wish to share examples of good practice or experience with your peers.

Sector	Name	Title	E-mail	Address	Telephone
Acute	Liz Mellor	Clinical Governance Lead Pharmacist	Liz.Mellor@leedsth.nhs.uk	Leeds Teaching Hospitals Trust St James' University Hospital, Beckett Street, Leeds, LS9 7TF	0113 206 6492 or 0113 206 5149
Acute Care	Pippa Roberts	Director of Pharmacy and Medicines Management	pippa.roberts@whnt.nhs.uk PA : Debra.Jones@whnt.nhs.uk	Wirral Hospital NHS Trust, Arrowe Park Road, upton, Wirral CH49 5PE	0151 604 7476 Internal ext 2058
Primary Care	Alastair Rutherford	Chief Pharmacist	Alastair.Rutherford@Bristolnorth-pct.nhs.uk	Bristol North PCT	0117 9766600
Primary Care	Heather Gray	Primary Care Contracting	heather.gray@seherts-pct.nhs.uk	South East Herts PCT , 1-4 Limes Court, conduit Lane, Hoddesdon, Herts, EN11 8EP	01992 706120
Primary Care	Iben Altman	Community Health Services Pharmacist	lben.altman@esbh.nhs.uk	Sussex Downs and Weald PCT, PCT headquarters, 36-28 Frairs Wlak, lewes, East sussex BN7 2PB	01273403523

Sector	Name	Title	E-mail	Address	Telephone
Mental Health	Graham Newton	Principal Clinical Pharmacist – Mental Health Services	graham.newton@nch.nhs.uk	Pharmacy department, North Cheshire Hospital NHS Trust, Halton General Hospital, Hospital Way, Runcorn, Cheshire, WA7 2DA	01928 753 400, Fax 01928 753 191, Pager 07623 617 778
UK Psychiatric Pharmacy group	Andrea Nunney	Clinical Pharmacist	andrea.nunney@nwmhp.nhs.uk	UK Psychiatric Pharmacy group, Norfolk and Waveney Mental Health Partnership NHS Trust Hellesdon Hospital Norwich NR6 5BE	01603 421317
Prisons	Stella Simpson	Principle Pharmacist HMP Holloway	stella.simpson@hmps.gsi.gov.uk	Holloway Prisons	0207 979 4589
NTA	Marion Walker	Pharmacist, Clinical Team	Marion.walker@nta-nhs.org.uk	National Treatment Agency, 8th Floor, Hercules House, Hercules Rd, London SE1 7DU	020 7261 8971
Social care	Hazel Sommerville	Head Pharmacist	Hazel.sommerville@csci.gsi.gov.uk	Head Pharmacist, Commission for Social Care Inspection	07789876026

Sector	Name	Title	E-mail	Address	Telephone
Hospice	Vicky Robinson	Hospice Nurse	v.robinson@stchristophers.org.uk	St Christopher's Hospice, 51-59 Lawrie Lane, Sydenham, London, SE26 6DZ	020 8768 4500
Private Sector - Acute	Anne Iveson,	Superintendent Pharmacist, BMI	Alveson@generalhealthcare.co.uk	Independent Healthcare Forum, General Healthcare Group, South East Regional Office, 6 Mount Ephrain, Tunbridge wells	077148 44910
Private Sector - Dr	Anita Gundecha	Consultant Pharmacist	anita@docapoth.co.uk	106 Wallace Building, 65 Penfold Street, London, NW8 8PQ	020 7224 9908 Mob:0791 9118060
RPSGB	Heidi Wright	Head of Quality Improvement, Practice and Quality Improvement Directorate	Heidi.Wright@rpsgb.org	The Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN	Tel: 0207 572 2602 Fax: 0207 572 2501
NPC	Clive Jackson	Chief Executive	Clive.Jackson@npc.nhs.uk	National Prescribing Centre, 2nd Floor, Home 4 Nell Lane, West Didsbury, Manchester, M20 ZLR	0161 611 3269

Sector	Name	Title	E-mail	Address	Telephone
GP	Professor	National Clinical Advisor	David.Haslam@healthcarecommission.org.	Healthcare	020 7448
(dispensing doctor)	David Haslam,		<u>uk</u>	Commission 15th floor Finsbury	9236
	CBE			Tower, London	