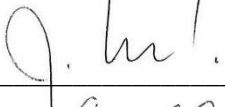



Leamington Mennonite Home
Long Term Care

POLICY AND PROCEDURE

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|---|---|----------------------|
| CATEGORY: Nursing | SUBJECT: Medication Storage & Destruction | SECTION: M |
| DATE: December 2004 | Administrator:  | POLICY: 7 |
| REVISION DATES: December 2023 | Director of Care:  | |

MEDICATION STORAGE & DESTRUCTION

POLICY:

To ensure that all medications are stored and disposed of in a safe and controlled manner as regulated by MOH guidelines. The method of destruction used will ensure resident privacy and confidentiality.

PROCEDURE:

1. All medications are received from Pharmacy in properly labeled multidose paks, boxes, containers or bottles if the medication is in liquid form. The label will provide the resident's name, drug name, route, dose, and frequency.
 - a. Narcotics are received in a blister pack cards and/or boxes and the count is located on the card.
 - b. All stock medications are received from the government pharmacy in a labeled bottle.
 - c. Each resident's multidose pak will be kept in the medication cart drawer in individually labeled cubicles - identified by name and room number. All medications not in the multidose paks also are stored in the cubicle unless they do not fit, then they are stored in the larger bottom drawer in the medication cart.
 - d. Any additional medications not stored in the medication cart are kept in the locked medication room.
 - e. Any medications requiring refrigeration will be stored in the refrigerator located in the medication room.
2. All narcotics are to be locked in a separate box that is permanently affixed within the medication cart. The Registered Staff have the only keys to the boxes. A narcotic count will be done at every shift change for the narcotics located in the medication cart. The number of pills in the card will match the count on the back of the narcotic card and the narcotic count sheet. Both Registered Staff members sign the narcotic count sheet for accuracy of the count. **To prevent medication errors with oral antibiotics and Coumadin, all oral antibiotics and Coumadin will be added to the narcotic count sheet and counted each shift.**
 - a. **A discrepancy in narcotic counts, Coumadin and antibiotics must be accounted for or resolved before the staff begin/leave their shift. Any unresolved/unexplained discrepancies will be reported immediately to the DNPC or delegate.** There will be a monthly audit of the control substances count sheets by the DNPC or delegate. Immediate action will be taken if there are any discrepancies.
3. When narcotics are received, they are signed for by the Registered Staff along with their LMH specific ID number. The signed copy is returned to the Pharmacy. The midnight Registered Staff member will attach a count card to the back of every narcotic card. The card is to be signed when a narcotic is given. **When oral antibiotics and Coumadin are**

received, the pills in the bottle are to be counted and a check mark placed beside the quantity on the label. This is to ensure the proper number of pills were sent from Pharmacy.

4. The Med Room is locked at all times unless Registered Staff are in the room. The medication cart is locked at all times unless Registered Staff are using it. See Medication Cart Policy and Procedure.
5. To provide privacy for all residents, the resident name will be blacked out using a china marker on all empty medication cards/vials and bottles prior to disposing into the garbage. The empty individual resident multidose paks are to be disposed of into the med cart garbage, when the garbage bag is removed for discarding, a small amount of water and a bit of friction is to be applied to the bag; this will dissolve the ink of the paks and protect resident privacy.
6. All discontinued narcotics are to be removed immediately from the locked box from the medication cart and put in the locked safe on 1st floor. The safe on first floor is mounted and only can be opened by the DNPC and or Administrator. Two registered staff must be present to put the discontinued narcotics in the locked box. Both Registered Staff must complete and sign off on the Discontinuation of Narcotics Sheet. The Pharmacist and the DNPC will destroy the narcotics on a quarterly basis or more often if required.
7. All discontinued medications (non-narcotic) and expired medication are to be destroyed as soon as they are discontinued or expired. The drug must be made unusable and placed in the Stericycle pail on the first floor. The medication can be made unusable by pouring liquid over pills, cutting up patches and pouring out liquid medication, breaking a vial and emptying the medication in the pail or drawing the medication out of a vial with a syringe and emptying the syringe in the pail. Two Registered Staff members must destroy the medication together and complete the Medication Destruction of Non-narcotic and Uncontrolled Medication Sheet. The resident names on the empty medication cards will be blacked out using a china marker prior to disposing in the garbage.
8. All medications with incomplete, missing, illegible or damaged labels will be removed from current stock and disposed of accordingly.

