

Management of Illicit or Unknown Substances belonging to Patients	Policy Register No: 13024 Public
Developed in response to:	Dept of Health Medicines Regulations NHSLA Risk Management standards
Contributes to CQC :	Regulation 13 (Outcome 9)

Consulted With	Post/Committee/Group	Date
	Medicines Optimisation and Safety Group	
Andrew Duthie/Simon Robinson	Head of Portering, management & security	Nov 17
Doug Smale	Local Security Management Specialist	Nov 2017
Lyn Hinton	Director of Nursing	Nov 17
Professionally Approved By	Alison Felton, Deputy Chief Pharmacist	Dec 17

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Author/Contact for Information	Alison Felton, Deputy Chief Pharmacist
Policy to be followed by (target staff)	All Trust staff members and Clinicians
Distribution Method	Trust Intranet and Website
Related Trust Policies (to be read in conjunction with)	08081 – Medicines Management Strategy 06021 – Reporting Medication Errors and Near Misses 08083 - Controlled Drug Policy 08085 – Storage of Medicines in Clinical Areas 09075 – Control of Medicines in Clinical Areas 04031 – Violence and Antisocial Behaviour 04045 – Alcohol Drugs and Substance Misuse Other policies relating to prescribing of and management of medicines Guidance for the surrender of non-prescription controlled substances in patient's possession for ED staff.

Document Review History

Version No	Reviewed by	Issue Date
1.0	Jane Giles Chief Pharmacist	6 th February 2014
2.0	Lesley Stuart	June 2018

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Appendix A Substance Tracking Document

1. Purpose

- 1.1 This policy describes how Trust employees should handle, store, and dispose of suspected or identified illicit substances brought into the hospital by patients or visitors.
- 1.2 It recognises the following fundamental principles:
 - The Trust has a legal obligation to prevent illicit substance use and distribution on its premises.
 - A medical practitioner or authorised non-medical prescriber in accordance with the Trust Medicines policy must prescribe all medication and therapeutic agents.
 - The integrity of the care environment and safety of all those within is of paramount importance.
- 1.3 This Policy underwrites the Trust's duties under 'The Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007
- 1.4 The use of illicit substances does generate unsafe situations and often leads to violence and aggression. Therefore this policy is an integral part of the Trust's approach to the prevention and management of violence and aggression to protect staff, patients and visitors whilst on Trust premises.
- 1.5 This policy deals specifically with known or suspected schedule 1, 2, & 3 drugs and solvents, and unknown substances which are thought to be recreational drugs.

2. Scope

- 2.1 This clinical policy is for implementation by all staff working with patients in the Trust whether directly employed or seconded. It should also be brought to the attention of all bank, locum and agency staff. It is applicable to all patients, visitors, volunteers and contractors working in the Trust.
- 2.2 "A substance refers to a chemical (psychoactive) agent that is used intentionally to alter mood and/or behaviour, or any prescribed medication, poison, toxin, alcohol, industrial solvent or other agents to which one may be exposed and whose effects on the nervous system may lead to behavioural or cognitive disturbances." (Psychiatric Dictionary 7th edition).

Examples include chemical agents classified under the Misuse of Drugs Act (1971) as:

- Schedule 1 – e.g. cannabis, magic mushrooms, and ecstasy – which have no recognised medicinal use
- Schedule 2 & 3 – e.g. cocaine, diamorphine, methadone etc
- Schedule 4 - e.g. benzodiazepines – which may have been prescribed or obtained through unofficial sources but are intentionally being used for purposes other than those for which they were originally prescribed.

- Solvents, psychoactive substances “previously known as legal highs” and other substances of a similar nature are also covered

3. Training

- 3.1 Training is delivered in accordance with the training needs analysis (Mandatory Training Policy).

4. Equality and Diversity

- 4.1 The Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals.

5. Responsibilities

- 5.1 It is the responsibility of the nurse in charge of the area where the illicit substance is found to ensure that it is immediately secured and the paperwork (as detailed below) completed.
- 5.2 It is the responsibility of the on call pharmacist out of hours, or the senior pharmacist on duty to ensure that any illicit substances stored at ward level are collected promptly and returned to the pharmacy department. Once returned to pharmacy it is also their responsibility to ensure that the substance is stored safely and securely and all necessary paperwork is complete and the Trust Accountable Officer, Chief Pharmacist and Trust LSMS are informed.
- 5.3 It is the responsibility of the Chief Pharmacist or deputy to ensure that the incident is reported to the local police force intelligence bureau and that an incident number is obtained and logged onto the paperwork.
- 5.4 It is the responsibility of the pharmacy CD technician to ensure that the substance is logged into the appropriate CD register and the paperwork is properly completed and filed.

6. Required Procedures

- 6.1 All incidents involving suspected or proven illicit substances found on Trust premises must be reported using the Trust DATIX system.
- 6.2 If a patient is believed to have in their possession an illicit substance or a suspected illicit substance, such as class A drugs, staff should ask patients to surrender any substances to them for safe and secure storage in a controlled drugs cupboard pending disposal (see Guidance for the surrender of non-prescription CD substances in patient’s possession for further information).
- 6.3 If the discovery is made during normal pharmacy opening hours the substance should be placed in a sealed clear plastic bag, using gloves and with minimal handling. The sealed bag should be placed in the ward controlled drugs cupboard and pharmacy contacted immediately. A suitably qualified person from pharmacy will attend the ward

and remove the substance for safe storage in pharmacy. If a pharmacy representative is unable to attend the ward immediately an entry should be made in the ward controlled drugs register. Upon collection a registered nurse and the pharmacy representative will sign the substance out of the ward controlled drug register.

- 6.4 If the discovery is made outside normal pharmacy opening hours the nurse in charge should immediately place the substance into a sealed clear plastic bag, using gloves and with minimal handling. Place the sealed bag in the ward controlled drugs cabinet and record in the controlled drugs register. Contact the on-call pharmacist who will make arrangements for the substance to be collected for safe storage as soon as pharmacy re-opens. Upon collection the nurse and the pharmacy representative will sign the substance out of the ward controlled drug register.
- 6.5 If a suspect substance is found in an area that is not a ward area, the finder must immediately arrange for the substance to be taken either to the nearest suitable ward/clinic/unit or to pharmacy for safe storage. This also includes substances that may be found in the grounds of the hospital. In all cases substance should be subject to minimal handling.
- 6.6 In all cases as soon as a substance is discovered Section 1 of the "Tracking of Confiscated Substances" (Appendix A) should be completed as fully as possible. If the substance is to be stored at ward/unit level before collection by pharmacy section 2 should also be completed.
- 6.7 Upon collection of the substance from the ward/unit the pharmacy representative and the nurse will complete section 3 of the Tracking of Confiscated Substances Form.
- 6.8 Once the substance is returned to pharmacy it will be logged into the pharmacy controlled drugs register and section 4 of the Tracking of Confiscated Substances Form will be completed.
- 6.9 The Trust Accountable Officer, Chief Pharmacist and Trust LSMS should be informed of the incident as soon as possible **during working hours** by the pharmacy representative removing the substance for storage. The Incident number will be noted on the Tracking of Confiscated Substances Form. The Chief Pharmacist or deputy will also contact the Police Force Intelligence Bureau (DS Martin Lerner) and inform them of the situation.
- 6.10 Upon collection or destruction of the illicit substance the police officer and the staff witnessing the destruction/collection will complete the final section of the Tracking of Confiscated Substances Form.
- 6.11 The pharmacy department will store the completed Tracking of Confiscated Substances Form in the department until the register containing the entry corresponding to the form is destroyed whereupon the form will also be destroyed.

7. Security

- 7.1 The Trust has a legal obligation to prevent illicit substance use and distribution on its premises, and possession of these substances is illegal.

- 7.2 If a patient refuses to hand over substances believed to be illicit or illegal the nurse should immediately contact the security team who should attend the ward. The security team will manage the situation in accordance with the Trust policy 04031 Violence and Antisocial Behaviour.
- 7.3 Should a nurse in charge of a unit have reasonable suspicion that a visitor to the Trust is in possession of, or distributing illicit substances on the premises the nurse should immediately contact the security team who should attend the ward. The security team will manage the situation in accordance with the Trust policy 04031 Violence and Antisocial Behaviour.
- 7.4 If a member of staff has reasonable suspicion that a contractor, volunteer or other person on the hospital premises is in possession of, or distributing illicit substances on the premises the employee should immediately contact their manager who will contact the security team. The security team will manage the situation in accordance with the Trust policy 04031 Violence and Antisocial Behaviour.
- 7.5 If it is suspected that a member of staff is in possession of an illicit substance Trust policy 04045 Drug, Alcohol and Substance Misuse, will be followed. If the staff member is found to be in possession an illicit substance it will be removed from them and treated as described in this policy to ensure safe and secure custody of the substance prior to any further investigation.

8 Implementation and Communication

- 8.1 Once professionally approved and ratified by DRAG this policy will be placed on the Trust's internet and website.

9. Audit and Monitoring

- 9.1 It is the responsibility of ward managers/sisters to ensure compliance with this procedure and ensure that internal audit systems and checks are in place to maintain this
- 9.2 The Trust Controlled Drugs Accountable Officer will monitor any actions against this policy and these will be reported at the quarterly controlled drugs local intelligence network meeting.

10 Contact Numbers:

On Call Pharmacist – via Hospital Switchboard
LSMS – Doug Smale - ext 4205 / 6147
Security - 6367 or bleep via switchboard
Deputy Chief Pharmacist – Alison Felton ext 4215
CD Accountable Officer – Alison Felton ext 4215
Pharmacy Office – ext 6108 (general enquiries)
Essex Police Force Intelligence Bureau – DS Martin Larner 01245 491491 x489084
martin.larner@essex.pnn.police.uk

11. References

Misuse of Drugs Act 1971

Misuse of Drugs Regulations 2001 (and amendments)

Royal Pharmaceutical Society of GB; Medicines Ethics & Practice No32 July 2008

Safe and secure handling of medicines (Duthie report) March 2005

NEPFT Policy for the Management of Illicit Substances

Appendix A

Tracking of Confiscated Substances
Please complete as fully as possible

Section 1 – General Details	
Date Found:	Ward/Unit/Area:
Location where Substance found (exactly):	
Substance found in the possession of: <i>NOTE : It may not be possible to obtain all of this information but please complete as much as possible of the document.</i> First Name: Surname: Status: (circle as applicable) Patient / Visitor / Staff / Contractor / Volunteer / Other (give details) NHS Number or other identifying details	
Datix Report No :	
Substance found by:	
Name (Print)	Signature
Role:	Time Found:
Description of substance (including measurements, name/type of substance [if known] quantity etc.)	
Section 2 – Ward Storage	
Stored by (PRINT NAME)	Signature:
Witnessed by (PRINT NAME)	Signature:
Date:	Time:

Section 3 - Pharmacy Collection	
Collected by (PRINT NAME)	Signature:
Witnessed by (PRINT NAME)	Signature:
Date:	Signed out of register – Y N N/A

Section 4 - Pharmacy Storage	
Entered into pharmacy register by (PRINT NAME):	
Signature:	
Date	Register Number:
Reported to Police by(PRINT NAME)	Signature:
Reported to Police Force Intelligence bureau by (PRINT)	Signature:
Incident Number	Station reported to

Section 5 - Disposal	
In attendance (delete as appropriate)	
Police Force Intelligence Bureau Officer / Police Officer/LSMS	
Disposal Method (delete as appropriate)	
Destroyed in Pharmacy / Confiscated by police (if confiscated please obtain property receipt and attach to the form)	
Police/LSMS (PRINT NAME)	Signature:
Pharmacy Staff Witness (PRINT)	Signature:
Date	Time
Notes	