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| **STANDARD OPERATING PROCEDURES** | Center Name: |
| SOP No.: |
| Effective Date: |
| Page No.: **#** of **#** |
| Approval: |
| PRH reference: **#** |
| Title: Prescribed Non-Controlled Medications |

**This SOP is just an example. Each center must create its own policy to meet its students’ needs that complies with applicable federal and state laws.**

1. **PURPOSE**

To address the prescribing, dispensing, administering, and observing self-administration of prescribed non-controlled medications in a manner that meets the state professional practice laws. The goal of medication management on center is to provide students with prescribed non-controlled medications in a safe manner.

1. **POLICY**

The health and wellness manager (HWM) must determine which center health practitioners are legally authorized to prescribe, dispense, and/or administer a prescription medication according to federal and state laws. The center will also be in compliance with ePRH Section 6.12, R6, Medication Management and Appendix 611.

For long-term medications, the HWM (or designees who are authorized under their state license to administer drugs) must confirm the rationale for the medication prescription at least monthly with the prescribing health professional. Medication rationale and review includes student compliance, side effects, need for dosage adjustment, and whether or not the medication is leading to the desired effect.

If applicable, the HWM will identify and train/certify unlicensed non-health staff to be legally authorized to observe self-administration of doses according to state laws when the Health and Wellness Center (HWC) is closed.

*INSERT COMPLIANCE POLICY The center is in compliance with state pharmacy and nursing practice acts for prescribing, administering, dispensing, packaging, observing, and disposal of medications. Copies of the practice acts are available in Wellness Center for review."*

All prescribed medication will be stored and kept in the medication lockboxes when not in the HWC.

The medication lock boxes should be in a secure location. Job Corps center operators will be responsible for Medication Lockbox units and keys. [NAME] Job Corps center will have additional security of the units in the form of [INSERT] to help prevent and immediately address any unauthorized access.

1. **PROCEDURES**
2. **During HWC Business Hours (example):**
* Verbal and written prescriptions must be documented in the student’s health record (SHR) and include the date, name of medication, how much to take, how to take it, how often, and the prescribing practitioner's name, title, and signature. Medications should be prescribed in accordance with federal and state law.
* Verbal prescriptions obtained when the prescribing practitioner is not on center must be documented in the SHR by the nurse taking the verbal prescription and signed and dated by the prescriber at his/her next center visit.
* Prescriptions must be legible. The prescription order must be capable of being read and understood by the pharmacist filling the prescription or the nurse or other practitioner implementing the medication order on center. Prescriptions can be hand printed, typewritten, or electronically generated.
* Nurses must document in the SHR that a prescription order has been transcribed to a Medication Administration Record (MAR) exactly as the order reads.
* Prescriptions generated for students by health practitioners in the community or at the student’s place of residence, and brought to the center, must be reviewed and approved by the center physician/nurse practitioner/physician assistant and, if approved, transcribed on a MAR.
* Each time a prescription is filled, the student must be provided consumer medicine information in accordance with state pharmacy laws.
* The administering practitioner must use the MAR as the guide to the administration of a drug (See MAR Form Template). Administration includes (**this may vary in accordance with state laws**):
* Administering practitioner matches the student’s name on the MAR against the student’s ID.
* Administering practitioner matches the drug’s label against the MAR.
* Administering practitioner makes available for self-selection the dose as prescribed on the drug label and the MAR.
* Administering practitioner checks that the drug is being given at the correct time and confirms when the last dose was given.
* Administering practitioner documents the time, route, and any other specific information as necessary on the MAR.
* If the medication requires patient monitoring, such as blood pressure or blood sugar measurements, administering practitioner documents this monitoring in the SHR.
* Administering practitioners should offer counsel and educational materials about the medications they are administering upon each refill and anytime the student requests the information.
* Administering practitioners should file the MAR in the SHR at least monthly. If there is additional narrative, document on the Chronological Summary of Medical Care (SF-600).
* All prescription medications shall be disposed of in compliance with federal and state laws.
* When a student leaves the center, prescription medication(s) shall be made available and sent with the student prior to departure. If a student leaves center when the HWC is closed, medications shall be promptly sent to the student in compliance with the sending and receiving state laws.
* Exceptions to managed doses include but not limited to asthma inhalers, insulin (including vials or pens, syringes, and needles), Epi Pens, and oral contraceptives. Additional exceptions at [**Name**] Job Corps Center *includes all other exceptions here such as creams/topicals/eye drops (edit)*. Refills should be documented on the Chronological Summary of Medical Care (SF-600). **See Student Self-Management of Medication section below for handling of exceptions.**
* All medication errors, miscounts, or severe reactions to medications must be reported immediately by the center director to the regional office and nurse specialist per ePRH Appendix 611. A SIR should be completed after the regional office and nurse specialist have been notified as per ePRH, Chapter 5, Section 5.5 Management and Reporting of Significant Incidents.
1. **Observation of Self-Administration of Prescribed Medication After Hours (example):**
* When the HWC is closed, the administering practitioner will place all prescribed medication in the **(Location of Medication Lockboxes)** centrally located prescription medication lockbox and a medication observation record (MOR) and send to Social Development/Residential to be readily accessible to accompany the student to their medication lockbox.
* Medication in the prescription medication lockbox must be properly labeled and packaged in compliance with federal and state laws.
* Depending on state law, students may self-package their medications for the lockbox under the observation of a staff nurse.
* Unlicensed staff **(determined by center)** observe/accompany students to access the student’s medication lockbox in a safe and controlled manner. This is similar to a home “medicine cabinet” or a mailbox system. Staff observing/accompanying must make sure the MOR is signed.
* Student opens lockbox with assigned key.
* Student’s prescribed medication is safely made available to the student via the medication lockbox.
* Accompanying staff person must ensure the correct identity of the student accessing the medication.
* Authorized staff person documents observation on the MOR, signs it, and has the student sign and date the MOR (See MOR Template Form).
* The signed MOR is kept securely locked in \_\_\_\_\_\_\_.
* The observation sheets (MORs) are returned to the HWC each\_\_\_\_\_\_\_\_ (**based on center’s individual policy, example: each morning or each Monday**).
* The MOR will then be filed in the SHR by HWC staff.
* It is the responsibility of the HWC staff (**insert responsible personnel**) to explain and ensure students understand the process for obtaining individually prescribed medications from the assigned staff after hours, on weekends, and holidays.
* HWC staff should explain possible medical and/or behavioral consequences of not taking medications as prescribed and that medication compliance will be monitored closely.
* Students should be informed that they are responsible for obtaining their medications after hours. Residential/Social Development Staff will remind students to take their medication as necessary, and this staff will also notify the HWM about any missed doses.

Compliance will be monitored\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Explain in detail)

1. **Student Self-Management of Medication (example):**
* Four types of medication should always be classified for self-management. These include: inhalers for asthma, insulin for diabetes, Epi Pens for severe allergies, and birth control pills Additional medications for self-management at the [Insert Name] Job Corps Center include: Topicals, creams, eye drops, (edit list)
* For their own health and safety, students should always carry on their person their prescribed inhalers, insulin (including vials or pens, syringes, and needles), and Epi Pens.
* A one-month supply of oral contraceptives may be given to a student each month to self-administer.
* Refills should be documented on the Chronological Summary of Medical Care (SF-600).
* For other prescribed non-controlled medications, once a student demonstrates competence in taking his/her medication, he/she may be eligible to participate in self-medication, where the student’s medication is placed in the medication lock box for secure access on a daily basis. No more than \_\_\_\_ number of days is placed in the medication lock box for student access and accessed daily. Eligibility should be determined at a monthly documented case conference or medication check for psychotropic medications.
* It is the responsibility of the HWC administering practitioner to explain possible consequences of not taking medications as prescribed and note that medication compliance will be monitored closely. It should also be explained to the student the consequences of diversion, using inappropriately, losing, trading, or trying to sell their medications to others. This also includes the safe keeping of their assigned medication lock box keys. **(Add center policy for lost keys)**
* Self-management of medication includes (**this may vary in accordance with state laws**):
* All medication made available for self-management must be properly labeled and packaged. Packaging must meet applicable state’s laws for distribution (**insert applicable laws**).
* Student may self-select and self-package under the observation of a staff nurse if this meets state laws.
* The number of doses made available for self-management will be determined by the administering practitioner based on type of medication and reliability of the student based on past compliance.
* Documentation will be made on the MAR. The MAR should be filed in the SHR at least monthly. If there is additional narrative, document on the Chronological Summary of Medical Care (SF-600).
* Students unwilling or unable to take their prescription medications as ordered shall be required to return the unused portion to the administering practitioner during designated HWC open hour times. Disposal of medications will be in accordance with state and federal laws.
1. **DEFINITIONS**

**Prescription Medications**

Prescription medications are drugs that can only be acquired or purchased through a prescription order written by a physician or other prescribing practitioner. Other prescribing practitioners vary by state and include physician assistants, nurse practitioners, and dentists.

**Administration**

Administration of a medication means the direct application of a prescription medication whether by injection, inhalation, ingestion, or topical application to the body of a patient.

**Dispensing**

Dispensing means the preparing and packaging of a prescription medication, pursuant to a prescription or order, in a container and labeling the container with information required by law. Filling or refilling medication containers with prescriptions for subsequent use by a student is “dispensing.” Providing quantities of unit dose prescription medications for subsequent administration is also “dispensing.”

* The HWM must determine which health staff practitioners are legally authorized to dispense prescription medications.
* If the center physician applies for and receives a pharmacy license for the center, that license must be posted in the HWC.

**Observation by Unlicensed Personnel**

Observation by unlicensed staff means that medication self-administration is monitored or witnessed. Unlicensed staff delegated to observe medication self-administration must meet requirements outlined by state pharmacy laws. Oftentimes, laws require that unlicensed personnel pass a test and be certified before they may conduct this activity. Centers should check the requirements for observation by unlicensed personnel in their respective state.