

# Caring for Care Homes

## Controlled Drugs

Some prescription medicines contain drugs that are controlled under the Misuse of Drugs legislation. These are called Controlled Drugs (CDs). Unlike other prescribed medicines, CDs have additional safety and legal requirements for their prescribing, supply, receipt, storage, administration and disposal. These additional safety and legal requirements need to be acknowledged in the Care Home's Medicines Policy. The following points should be taken into consideration.



### Receipt

- To allow for an audit trail, CDs should be signed for on receipt.
- If CDs are delivered, they should be clearly marked and separated from other medication by the supplier.
- CDs should be checked on receipt. If there is any discrepancy between the product and the label, or what was ordered, and the CD received, there should be a documented procedure for handling such an occurrence.
- Receipt of Schedule 2 CDs and those laid out in the Care Home's Medicines Policy should be recorded in the Controlled Drug Register (CDR).

### Storage

- A CD cabinet must be made of steel, have a specified locking mechanism and be permanently fixed to a solid wall or floor with at least two rag-bolts (Safe Custody Regulations: [www.legislation.gov.uk/uksi/1973/798/made](http://www.legislation.gov.uk/uksi/1973/798/made)).
- CD cabinets should only be used for the storage of CDs and no other medication or valuables should be stored in the cabinet
- If a CD is provided within a Monitored Dosage System (MDS), the MDS should be stored in the CD cabinet.
- Access to the CD cabinet should be controlled. The CD cabinet keys should be kept under the control of a designated person and there should be a clear audit trail of the holders of the keys.

### Controlled Drugs Register (CDR)

- A CDR is a bound book with pages clearly numbered and should not be used for any other purpose. It must be kept in a secure place when not in use. Electronic CDRs are permitted, though are subject to specific legislation ([www.opsi.gov.uk/si/si2005/20052864.htm](http://www.opsi.gov.uk/si/si2005/20052864.htm)).
- Administration of a CD by staff should be recorded on the Medicines Administration Record (MAR) and the CDR.
- The CDR should be used to record the receipt, administration, disposal and transfer (e.g. when a patient goes into hospital) of CDs and a running balance should be kept.
- As best practice, all entries in the CDR should be signed and then (where possible checked and countersigned by an appropriately trained witness.

- Errors must not be crossed out. Errors should be marked as “entered in error” signed, witnessed and dated. The correct entry should then be made using a new line.
- On receipt of a CD, the date, quantity and where it came from should be entered into the CDR and initialed by the receiving authorised member of staff, with a second person as a witness. The correct balance should be verified each time.
- Each drug, for each resident should be recorded on a separate page, with the name, form, dose and strength of the drug written clearly at the top of the page.
- Following administration of a CD, the resident’s name, plus time and dose given, should be recorded in the CDR and the running balance verified.
- When transferring the drug record to a new page in the CDR the amount remaining should be identified with ‘carried forward from page x’ written clearly on the new page.
- When CDs are sent for disposal (residential care home) a record must be made in the CDR and in the returns book. In the case of nursing homes CDs remain written in the register until destroyed.
- When CDs are returned to a person leaving the home a record must be made in the CDR.
- Routine checks of all CDs held, and the recorded running balances should be carried out by two authorised members of staff, on a regular basis (eg weekly). Any discrepancies should be reported to the manager immediately.
- It is a legal requirement to keep the CDR for two years from the last entry or 7 years if it contains records of destruction. It is good practice to retain the CDR for longer as cases can take several years to come to light and go to court.

### **Medication Administration Record (MAR)**

- Following administration of a CD, the MAR chart must be signed by the authorised person administering the CD and by the person witnessing the administration, who must have the appropriate level of training.
- If the medication is administered by a visiting healthcare professional, the care home staff should ask them to complete the appropriate section of the CDR. The visiting healthcare professional will complete their own administration records. Care homes should keep a record of who is administering the medication (this could be on the MAR chart or in the care plan).

### **Service users managing their own medication**

- A risk assessment should take place and be regularly reviewed for residents who wish to manage their own medication, in case a resident’s circumstances change.
- Where a resident is wholly responsible for their medicines (i.e. requesting and collecting the CDs personally), no record is required in the CDR.
- If staff are ordering and collecting on behalf of the resident then a record of the receipt from the pharmacy, the supply to the person and any disposal should be made. Individual doses do not need to be recorded.
- CDs should be stored in a locked, non-portable receptacle in the resident’s room.

### **Disposal – care homes with nursing**

- The care home must have a valid T28 Exemption from the Environment Agency to allow denaturing to take place on the premises. To obtain a T28 Exemption online visit [wasteexemptions.service.gov.uk](https://wasteexemptions.service.gov.uk) or for more information contact [enquiries@environment-agency.gov.uk](mailto:enquiries@environment-agency.gov.uk) or telephone: 03708 506 506.
- CDs should be denatured using a specially designed denaturing kit by a registered nurse in the presence of a witness, before being handed to the waste disposal company.
- A record of the disposal must be made in the CDR and must be signed and witnessed by the authorised members of staff undertaking the task.

## Disposal – care homes without nursing

- CDs should be returned to a pharmacy or dispensing doctor for destruction.
- CDs to be returned to the pharmacy or dispensing doctor must be entered out of the CDR and a signing sheet or returns book prepared.
- The pharmacy should sign for the CDs on receipt and this record should be retained by the care home.

## Discrepancies - supply

- Always enter the stock received in the CDR.
- Segregate the stock received in the CD cabinet until the discrepancy can be resolved.
- Contact the supplier of the CD to resolve the discrepancy.
- If stock is deemed unfit for use and is picked up by the supplier, obtain a signed receipt.

## Discrepancies - running balance

- Check back over the CDR entries to ensure that there has not been a calculation error or missed entry.
- Check the MAR chart and records of medicine disposal.
- If the discrepancy can be identified, the outcome should be recorded and the CD register should be corrected, with a retrospective entry referencing how the discrepancy was resolved.
- If the discrepancy cannot be explained then the Care Quality Commission (CQC), the Area Team Controlled Drugs Accountable Officer and the Police should be informed.

## CD incident reporting

There is a legal requirement for Care Homes to report all CD-related incidents in a timely manner to the local NHS England Accountable Officer for Controlled Drugs.

↪ From 1st October 2018, all CD incidents (including balance discrepancies) should be reported using the web-based system [www.cdreporting.co.uk](http://www.cdreporting.co.uk) (registration required).

Although the immediate concern upon discovery of a CD incident is for service user safety, and this takes priority, incidents should be reported as soon as possible thereafter. There should be robust processes in place to identify, report and review incidents, errors and near misses.

**Please see overleaf a table of the common Controlled Drugs, which has been taken from PrescQIPP Bulletin 75 (December 2014) and updated from Medicines Complete BNF (May 2019).**



# Common Controlled Drugs

Schedule 2 CDs		
Controlled drug	Brand name	Legal requirements
Morphine	MST Continus <sup>®</sup> Sevredol <sup>®</sup> Zomorph <sup>®</sup> MXL <sup>®</sup> Oramorph <sup>®</sup> concentrated oral solution 100mg/5ml (10mg/5ml strength is not a CD, however, some care homes may choose to store it in a CD cabinet and complete CD records)	Requires safe custody in a CD cabinet.  Records need to be made in the CD Register.
Diamorphine	-	
Dexamphetamine	Amfexa <sup>®</sup>	
Pethidine	-	
Oxycodone	Shortec <sup>®</sup> , Longtec <sup>®</sup> , Oxycontin <sup>®</sup> , Oxynorm <sup>®</sup>	
Methadone	Physeptone <sup>®</sup>	
Methylphenidate	Ritalin <sup>®</sup> , Equasym <sup>®</sup> , Xenidate <sup>®</sup> , Concerta <sup>®</sup>	
Fentanyl	Durogesic DTrans <sup>®</sup> , Mezolar <sup>®</sup> , Matrifen <sup>®</sup> , Abstral <sup>®</sup> , Effentora <sup>®</sup>	
Tapentadol	Palexia <sup>®</sup>	
Schedule 3 CDs		
Buprenorphine	Subutex <sup>®</sup> , Temgesic <sup>®</sup> tablets BuTrans <sup>®</sup> , Butec <sup>®</sup> , Bupeaze <sup>®</sup> , Transtec <sup>®</sup> patches	Safe custody in CD cabinet is required with some exceptions (common exemptions are phenobarbital, midazolam and tramadol, pregabalin and gabapentin).  Schedule 3 CDs do not need to be recorded in the CD register, however, some homes may choose to make records for buprenorphine and temazepam.
Midazolam	Hypnovel <sup>®</sup> injection Buccolam <sup>®</sup> oromucosal solution	
Temazepam	-	
Phenobarbital	-	
Tramadol	Zydol <sup>®</sup> , Marol <sup>®</sup> , Zamadol <sup>®</sup>	
Pregabalin	Lyrica <sup>®</sup>	
Gabapentin	Neurontin <sup>®</sup>	
Schedule 4 CDs		
Diazepam	-	Safe custody is not required nor is it a requirement to make records in the CD Register.
Clobazam	Frisium <sup>®</sup>	
Lorazepam	-	
Nitrazepam	Mogadon <sup>®</sup>	
Clonazepam	Rivotril <sup>®</sup>	
Chlordiazepoxide	Librium <sup>®</sup>	
Zaleplon	-	
Zolpidem	Stilnoct <sup>®</sup>	
Zopiclone	Zimovane LS <sup>®</sup> and Zimovane <sup>®</sup>	

This list is not exhaustive, therefore care home staff should seek advice, for example from the pharmacist or dispensing doctor, when unsure of the legal requirements for safety custody and recording of a CD.