Management of Controlled Drugs

Presented At CDLIN Meeting - Tuesday 22nd September 2020

Presented By:

Alexander Zarneh - PhD – Director of Governance &

Joanne Anderson-Scade – Director of Nursing

Contributors:

Professor Kaveh Shakib - Consultant Oral & Maxillofacial Surgeon PhD, FRCS(OMFS), MRCS(Eng), FDSRCS(Eng), MBBS, BDS.

Natalie Balmain – Chief Operating Officer Graham Allen - Procurement Manager

Background Information

- The New Foscote Hospital was acquired in April 2019 by Professor Kaveh ShakibConsultant Oral & Maxillofacial Surgeon
- Following its acquisition, £2.5M has been invested in the hospital to ensure it meets up to date and modern and safe health care delivery requirements.
- The New Foscote Hospital is a private hospital facility in Banbury, Oxfordshire, which can accommodate up to 22 inpatient beds, 4 outpatient rooms, a fully equipped operating theatre, Physiotherapy suite, One Endoscopy room, one Radiology X-Ray Room including one dedicated Ultrasound Imaging room.

Regulated Activities

The hospital is registered with Care Quality Commission (CQC) to deliver the following regulated activities:

- 1. Treatment of Diseases, Disorder or Injury
- 2. Diagnostic and screening procedures
- 3. Surgical Procedures
- 4. Family Planning Services

Care Quality Commission (CQC) at its last inspection rated the hospitals as:

- Safe
 The service is performing well and meeting our expectations.
- Caring
 The service is performing well and meeting our expectations.
- Responsive
 The service is performing well and meeting our expectations.
- The service is performing well and meeting our expectations.
- Well Led
 The service is performing well and meeting our expectations.

New Services Introduced

Weekly visit of MRI Van



- Collaboration with Oxford University Hospitals
- Greenlight laser for Prostate Cancer Treatment



• Children Services 4-17 has been approved by Care Quality Commission

Back to Work – COVID-19

- As a result of COVID-19, the hospital has been selected by Oxford University Hospitals as a Hub and is used for enabling reduction of NHS waiting lists.
- Rest of the capacity is used to meet the demands of private patients.
- Whilst the hospital is COVID swabbing pre surgery patients, this is done in a separate facility and using separate patient Pathway.
- The main hospital site, therefore, stays a green site.

Management of Controlled Drugs

■ The hospital has robust operational policies for management of CDs.

Policy Number	PH - CD01					
Version	1.0					
Owner	Director of Nursing					
Approved By	Alex Zarneh – Director of Governance	Date Approved: 04.08.2020				
	Natalie Balmain – Chief Operating Officer Professor Kaveh Shakib – Medical Director	Date Approved:04.08.2020				
Ratified By	Medical Advisory Committee (MAC)	Date Ratified: Pending				
Review Date	July 2022					

Management of Controlled Drugs Policy and Procedures

Management of Controlled Drugs Policy and Procedures

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Roles and Responsibilities

Accountable officer

Responsibility and Access of The CD Cupboard on The Ward

Responsibility and Access of The CD Cupboard Key in Theatre

The Witness for the Destruction of Controlled Drugs

Management of CD's Received and Receipt into Departments

Storage of Controlled Drugs

Administration of Patient's Own Drugs (PODs) and TTO

supplies

Stock Balance of Controlled Drugs In All Departments

Stock Checks Following Closure

Management of Incidents

Controlled Drugs Register

Administration and Documentation of CD's in the CDR

Pharmaceutical Waste

Destruction of CD's

Business During COVID-19

- The hospital was operational for 6 weeks
- We only had one list per week for vascular access
- Continued checking of medication
- No staffing issues
- No supply issues
- Used same supplier

List of Controlled Drugs Used

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ALFENTANYL (RAPIFEN) AMP 1mg/2ml (32045)
DIAZEPAM 2MG TABLETS (PHA00604)
FENTANYL (SUBLIMAZE) 500MCG/10ML AMP (PHA00803)
FENTANYL CITRATE AMP 100mcg/2ml (873562)
Gabapentin - 100mg (PHA00836)
Gabapentin - 400mg (PHA00837)
LIDOCAINE (XYLOCAINE) 1% AMP 5ml x 20 (PHA00835)
MIDAZOLAM AMPS 1mg/ml 2ml x10 (PHA00796)
MIDAZOLAM INJ 1MG/ML 5ML (CD) (110298 )
MORPHINE SULPHATE BP AMP 10mg/ml (109390 )
OXYCODONE SF ORAL SOLN 5MG/5ML 250ML (CD) (PHA00841 )
OXYCODONE/NALOXONE HYDROCHLORIDE (TARGINACT) 10MG/5MG M/R TABLETS (WDR00654 )
OXYNORM LIQUID 1MG/ML (OXYCODONE HYDROCHLORIDE) 250ML (CD) (PHA00840 )
REMIFENTANIL (ULTIVA) 1MG INJECTION (PDR FOR RECON) (PHA00686 )
TEMAZEPAM BP (APS) TABS 10mg (108678)
TRAMADOL 50mg CAPS x 100 (105622 )
TRAMADOL BP (AURUM) INJ 100mg/2ml (105873)
ZOPICLONE TABS 3.75MG (PHA00639)
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Stock Control

- All stock is managed by a dedicated purchasing officer who also works very closely with the local Pharmacist for ensuring that all audits and stocks are carried out on weekly basis.
- The CDs are kept within the operating theatres, Endoscopy and Ward areas in dedicated locked cabinets.
- Comprehensive records are kept.

List of CD received into pharmacy

Audits

- Structured audits are carried out and a recent audit highlighted some delivery issues that had not been recorded on our Events Management System which is an incident reporting system.
- All reported incidents are checked on daily basis by the Director of Governance in order to ensure that Root Cause Analysis is carried out and lessons learnt shared.

What Happened?



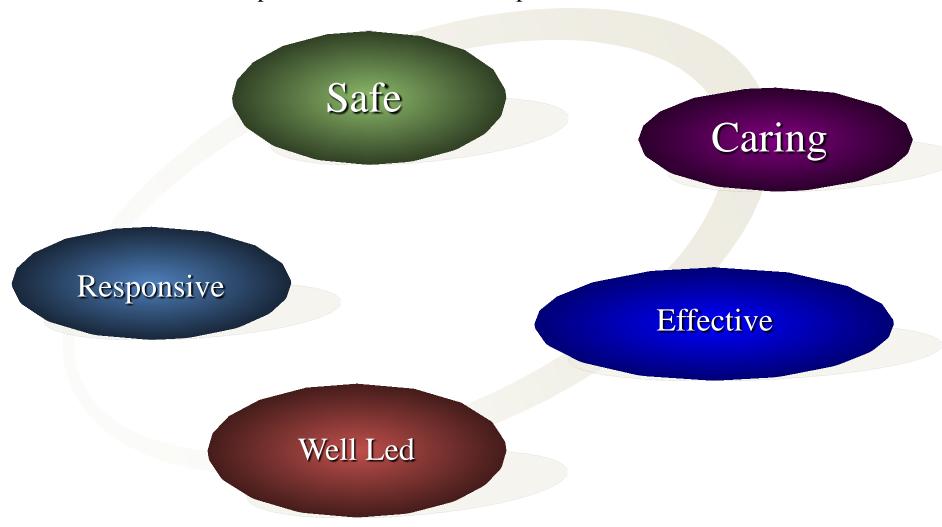
- •On receiving controlled drugs and receipting into the operating controlled drugs cupboard it was discovered that the box on movement rattled.

 010505616250004421156978642784417220831104D6W-A serial number for box
- •On noticing that a box of Fentanyl Sulphate (5) 10ml 50mcg/ml Amp and rattled it was opened by 2 nurses and ampoules were found to be broken. The whole box was destroyed as per policy. It was reported to the supplier.
- Policy of the supplier is that they do not accept returns of controlled drugs.
- •A 2nd box was reordered. No impact on patient safety.

Lessons Learnt

- •An audit was carried out on 04.09.20 by Alex and Director of Nursing and it was agreed that in future any such issues will be recorded as an EVENT.
- •Director of nursing and deputy ward sister aware and also included in the policy for management of controlled drugs.
- •This will be shared at Heads of Departments Meeting and Ward meetings.
- •The outcome will be also be reported to the Medical Advisory Committee (MAC).

I hope we have managed to demonstrate that through our operational and Governance processes, and COVID-19 phase, we offer a service which is:



Thank You For Your Attention