SUMMARY of REVISION/REVIEW

Procedure I.A. – Deleted Stock/Individual Controlled Substance Perpetual Inventory from forms and added Controlled Substance Log Book and Stock Medication Log Book. Procedure I.B. – Assigned Nurse Managers at facilities the responsibility of quarterly inventory assessments and annual review of those reports.

APPROVED:

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PURPOSE

To insure a standardized procedure for the management of medical control items as well as provide a uniform method for the disposal of infectious waste in accordance with the Rules and Regulations of the Nebraska Department of Environmental Quality and consistent with the safety and security of the institution.

GENERAL

It is the policy of the Nebraska Department of Correctional Services (NDCS) that each institution will develop a procedure consistent with this regulation. This procedure will address staff training and the tracking, counting, storage, disposal and security of identified medical control items.

PROCEDURE

I. INVENTORY

A. Forms

Each institution will use only the approved NDCS forms for inventory of medical control items (see Attachments). Instructions will be on the forms.

1. Index Controlled Substance Usage Log
2. MEDICAL/DENTAL INVENTORY LOG
3. Controlled Substance Log Book DCS-A-med-077

B. Inventory Levels

Each institution will conduct at a minimum, quarterly control item inventory usage assessments. This assessment will be filed at each institution by the Nurse Managers of the facility. The Nurse Managers at each facility will ensure an annual review of these reports to establish acceptable inventory levels.

II. STORAGE

A. At a minimum, all scheduled II-V pharmaceuticals will be stored in a double locked cabinet (refrigerator).

B. At a minimum, all medical control items other than pharmaceuticals will be stored in a locked room with a single locked cabinet (refrigerator).

C. Only medical staff currently assigned to/responsible for storage area(s) or staff designated by the Warden/Program Administrator or Institutional Health Care Coordinator, for the purpose of conducting inventory checks, will have access to the keys for these areas. Keys to these areas will be considered “restricted access” and each institution key control procedure will apply.

D. Patients will have access to storage areas only under direct staff supervision.
E. Each Infirmary, Medical Clinic, Dental Clinic and Laboratory will maintain a single inventory log for all medical control items in their respective areas. The exception will be for the emergency response bags (i.e., Advanced Cardiac Life Support, Basic Life Support), which will maintain a separate inventory log.

III. COUNTING

A. Staff assigned to/responsible for areas that store medical control items will conduct an inventory count at the beginning and end of each shift.

B. The count shall be completed by the oncoming and outgoing staff. The oncoming staff will conduct the physical count and the outgoing staff will verify and document the count on the appropriate log/form. (Refer to Attachments) The exception to this procedure will be: clinics where there is only one staff member assigned at the beginning or end of each shift or in situations where there are overlapping shifts, one staff member shall be designated as the person responsible for inventory and counts.

C. Emergency response bags will be counted weekly and after each use on separate inventory forms located in the kit.

IV. DISPOSAL

A. All disposal medical control items (i.e. sharps, syringes, tools) are to be handled in the following manner:

1. Immediately following use, the above-cited items are placed in a locked, one-way disposable “sharp chute” container.

2. When appropriate, all “sharp chute” containers will be affixed to a wall in a room which has limited patient accessibility, which will remain locked when not in use.

3. “Sharp chute” container inserts will not exceed the designed full line. Once a container is removed, it will be stored in a secure area. Disposal will take place in accordance with the Rules and Regulations of the Department of Environmental Control (see section C below).

B. Pharmaceutical Items

1. Expired pharmaceuticals will be returned to the NDCS Pharmacy or contracted pharmacy for proper disposition.

2. Wasted pharmaceuticals (wasted pharmaceuticals include contaminated, one use items that exceed prescribed dosage) will be documented on the Stock/Individual Controlled Substance Perpetual Inventory (See Attachment B) citing the reason for wastage. A witness will verify the wastage and co-sign on the record form.

C. Disposal of Infectious Waste

In accordance with the Nebraska Department of Environmental Quality Title 132, Integrated Solid Waste Management, Chapter 13, which states, "Infectious waste shall not be disposed of at any solid waste disposal area unless such wastes are first rendered
non-infectious by incineration, autoclaving or other treatment methods approved by the Department. It shall be the policy of this Department that there is a plan for the management of bio-hazardous waste and for the decontamination of medical and dental equipment.

1. **Infectious**

   Relating to a spreadable microorganism.

2. **Infectious Waste**

   The following shall be considered infectious waste:

   a. All "sharps" i.e., needles, blades, syringes, scalpels and other items used in invasive procedures.

   b. Laboratory wastes, such as pathological specimens (i.e., all tissues, blood specimens, excreta, secretions), fomites having contacted such specimens and any substance that may or may not transmit pathogenic organisms (i.e., microbiological laboratory wastes such as growth media).

   c. Any equipment, instruments, utensils, fomites, etc. of a disposable nature which become contaminated:

      1) Blood, semen, vaginal secretions, cerebrospinal fluid, pericardial fluid, synovial fluid, pleural fluid and amniotic fluid.

      2) Large amount of feces, vomitus, nasal secretions, sputum, sweat, tears and/or urine with a pourable/squeezable quantity of blood.

      3) Fomites, a substance capable of absorbing and transmitting the contagion of disease.

3. **Contractor**

   The properly licensed individual or corporation who picks up infectious wastes from the Department’s facilities and renders such waste as non-infectious by incineration, autoclaving or other treatment approved by the Department of Environmental Quality, prior to the disposal of solid waste in a solid waste facility.

D. Nurses, Physicians, Dentists, Physician Assistants, APRNs, Medical Technologists, Dental Hygienists, Dental Assistants and all other personnel handling infectious wastes shall properly dispose of and/or package all infectious waste materials using the containers advocated by the NDCS Infection Control Nurse.

E. Packaged infectious waste shall be kept in a secure area, i.e., lock and keyed storage, in the medical area, until appropriate, designated contract or departmental personnel pick it up.
F. Disposal shall then take place in accordance with the Rules and Regulations of the Department of Environmental Quality.

G. Decontamination of medical and dental equipment shall be done in accordance with NDCS Infection Control Manual, Section 3, Nursing Procedure, I-5 Instruments, Cleaning and Sterilization of.

V. SECURITY

A. Key Control

All keys for the medical area will be secured in accordance with AR 203.01, Security and Control.

B. Transport of Medical Control Items

1. All Controlled substances along with prescription labels will be sent from Pharmacy to each facility inside a safety lock bag with numbered tag which will then be entered on the Index Controlled Substance Usage Log and on the Stock/Individual Controlled Substance Perpetual Inventory form (SICS).

2. Transportation of any medical controlled items within the institutions or Pharmacy will be sent in the secured lock bag with the numbered tag documented on the SCIS along with a copy of both the SICS and the Index Controlled Substance Usage Log form stating the disposition of the Controlled Substance. The original copies will be placed in the Medical Record.

C. Patient Access

Institutional procedures will address criteria for patient access to areas where medical control items are used, stored, and disposed.

VI. ACCOUNTABILITY

Reporting / Investigation

A. An incident report will be written before the end of shift whenever a discrepancy involving a medical control item is discovered.

B. This report will be forwarded to the employee’s immediate supervisor and the facility head of security.

C. The report will be investigated and disposition determined in accordance with AR 112.06, Management of Employee Performance as directed by the Warden/Program Administrator/designee with input from the Health Care Administrator.

VII. TRAINING

A. Pre-Service Training
Every employee will receive initial pre-service training at the Staff Training Academy and/or on-the-job training to include, but not be limited to, the following topics relating to control issues:

1. Identification of control items
2. Security concerns
3. Accountability statement
4. Reporting discrepancies
5. Review of applicable Administrative Regulations
6. Handling and disposal of control items
7. Documentation procedures
8. On-the-job training tour and orientation of institutional specific control item procedures.

B. In-Service Training

All NDCS medical personnel will receive annual in-service training on control items. This training may be provided through the Staff Training Academy, facility in-service training, or approved off-site training.

C. Annual Training Topics

1. Review of applicable Operational Memorandums
3. Discussion of problem areas
4. Display and demonstration of control items.

REFERENCE


II. ADMINISTRATIVE REGULATIONS

A. AR 112.06, Management of Employee Performance

B. AR 203.01, Security and Control

III. ATTACHMENTS

A. Controlled Substance Usage Log

B. Stock/Individual Perpetual Inventory (SICS)
C. Controlled Drug Count Verification Record
D. Medical/Dental Inventory Log
E. Medical/Dental Inventory Log Instruction Sheet
F. Nurse Procedure M-12 Medication Count Controlled Substance
G. Nursing Procedure, I-5 Instruments, Cleaning and Sterilization of

IV. AMERICAN CORRECTIONAL ASSOCIATION (ACA) STANDARDS
   A. Standards for Adult Correctional Institutions (ACI) (4th edition): 4-4331, 4-4358, 4-4378.
   B. Performance Based Standards for Adult Community Residential Services (ACRS) (4th Edition): 4-ACRS 1A-04