

Section 5 - Storage and Security of Medicines in Wards and Departments

1. Security

- 1.1 All medicines will be stored securely in pharmacy and at ward, theatre or department level to maintain their quality and security in suitable cupboards, refrigerators or freezers as appropriate
- 1.2 The registered nurse/midwife in charge is responsible for the safe custody of all medicines in her/his ward or department.
- 1.3 Medicine cupboards and trolleys should be sited where most convenient for nursing staff, whilst allowing adequate space and permitting surveillance to afford maximum security against unauthorised entry. Medicine cupboards should be sited in a clean utility room to which the general public does not have access. Cupboards should not be sited where they may be subjected to higher than average humidity or temperature. Reagent cabinets should be sited in areas where testing is carried out. The design and location should be approved by a pharmacist.
- 1.4 The registered nurse/midwife in charge must ensure that the keys of the medicine cupboards are held securely. Any duplicate keys to medicine cupboards must be kept secure at all times and access to them restricted. Records of access to the duplicate keys must be maintained.

The key of the Controlled Drugs cupboard should be kept separately and should be carried by the registered nurse/midwife in charge of the ward/department at all times. (See Section 20, Controlled Drugs in Operating Departments, for further advice.) Any duplicate key to the controlled drug cupboard must be kept secure at all times and access to this key restricted. Records of access to the duplicate key must be maintained.
- 1.5 All medicine cupboards and refrigerators in which medicines are stored should be kept locked when not in use.
- 1.6 Medicine cupboards must not be marked with distinguishing labels such as "C.D. Cupboard" etc. Colour coding of locks and keys is the preferred method for ease of identification by the registered nurse/midwife if required.
- 1.7 Controlled drug and medicine cupboards, cabinets and refrigerators **MUST NOT** be used for the storage of other materials, or patients' valuables.

SECTION 5 - STORAGE and SECURITY of MEDICINES in WARDS and DEPARTMENTS

- 1.8 **Ward Closure** - If a ward or department is to close permanently all medicines and pharmacy products must be returned to pharmacy. Should the ward/department close for only a temporary period – pharmacy must be contacted for advice. If a ward/department is due to close and regular CD checks cannot be maintained pharmacy must be contacted for advice and to assist in arranging temporary secure storage of controlled drugs.

2. Storage Cupboards

- 2.1 Medicines must be separated within cupboards and stocked, preferably alphabetically, by generic name as follows:-
- a. **Controlled Drugs** must be kept in a cupboard reserved for preparations controlled by the Misuse of Drugs Regulations, 1985, Schedules 2 and 3.

In critical care areas where Strong Potassium Chloride KCl is permitted it must be stored in the controlled drug cupboard and a record kept in the CD record book as detailed in the Patient Safety Alert NPSA July 2002.
 - b. **Medicines intended for internal use** should be kept in a separate cupboard. Separate shelves should be used for:-

Injections

Tablets and capsules

Mixtures, syrups,

Mouthwashes, gargles and throat lozenges should be stored with internal medicines or, if preferred, in a separate lockable cupboard.
 - c. **Medicines intended for external use** must be kept in a separate cupboard. They should be stored in an orderly fashion, separating creams, ointments, lotions, liniments, poultices, dusting powders, eye, ear and nose preparations, topical patches, pessaries and suppositories.
 - d. **Disinfectants and antiseptics** issued by pharmacy should be kept in a separate cupboard. Floor cleaning materials used by domestic staff should be kept in a lockable cupboard in the domestic services room.
 - e. **Reagents** should be kept in a cupboard reserved for reagents only.
 - i) Urine testing reagents must be kept in a lockable cupboard and sited where urine testing is carried out.
 - ii) Blood testing reagents should be kept in a cupboard in a clinical area.
 - f. **Simple intravenous infusions and sterile fluids for topical use and bladder irrigation** may be kept separate in a cupboard or on a shelf by themselves.
 - g. **Emergency drug trays/boxes** are supplied to agreed locations and kept in closely supervised areas.

SECTION 5 - STORAGE and SECURITY of MEDICINES in WARDS and DEPARTMENTS

Within the three acute hospitals any used or expired trays must be returned to the pharmacy for replacement. Pharmacy must be notified before the tray is returned so that availability of emergency trays in the ward/department is maintained.

Within off-site hospitals emergency trays/boxes are maintained by nursing staff. Ward staff may return expired stock once replacement stock has been received, but the emergency tray/box should not be returned to pharmacy.

3. Medicines Requiring Refrigeration

- 3.1 Medicines that require refrigeration must be stored at between 2°C–8°C in a refrigerator, unless otherwise directed. **NOTE: The instruction "store below 25°C" does not generally mean the product requires refrigeration. Consult pharmacy for information.**
- 3.2 The refrigerator must be lockable and of adequate size. It must be designated for the purpose of medicine storage and not shared with biochemical or biological samples or food or drink.
- 3.3 Internal and external preparations should be stored on separate shelves within the refrigerator.
- 3.4 The temperature of the refrigerator must be checked daily using a max/min thermometer to ensure that these limits are observed. A daily record of temperatures recorded must be maintained on the fridge monitoring sheet within the ward/department. Pharmacy must be contacted for advice if a refrigerator temperature above 8°C or below 2°C is recorded.
- 3.5 Drug refrigerators should be wired by a spur unit. This will avoid the use of sockets and minimise the possibility of the refrigerator being switched off accidentally. **Note:-** medicine refrigerators without a freezer compartment do not require to be defrosted and so the need to switch them off is minimal.

4. Medicine Trolleys

Medicine trolleys must contain only medicines which are currently in use. The trolleys must be locked and secured to a fixed point when not in use for administration of medicines. When in use for the administration of medicines the trolley must never be left unattended.

SECTION 5 - STORAGE and SECURITY of MEDICINES in WARDS and DEPARTMENTS

5. Patient Bedside Lockers with Integral Medicines Storage.

- 5.1 Patient's own medicines brought into the ward/department should be stored in the patient bedside lockers with integral medicines storage drawers/cabinets. This medicine storage drawer/cabinet must be kept locked at all times and the key held securely by the ward/department.
- 5.2 Staff must check integral medicines storage drawer/cabinets when patients are moved to another bed within the ward, transferred or discharged.