*** DRAFT - NOT YET FILED ***

5122-26-15 **Medication handling and theft.**

- (A) The provider shall have written policies and procedures regarding the purchasing, receipt, storage, distribution, return, and destruction of medication that include accountability for and security of prescription and over-the-counter medications located within any of its facilities. These policies and procedures shall include, but not be limited to the requirements that providers handling medications shall provisions in paragraphs (B) to (D) of this rule are to be applied to both of the following scenarios:
 - (1) Hold a valid and current terminal distributor of dangerous drugs license from the Ohio board of pharmacy if maintaining a stock supply of prescription medications, if participating with the department's central pharmacy to receive dispensed prescriptions, or when otherwise required by rules of the Ohio board of pharmacyThe provider stores medication for the client and either dispenses medication to the client during programming or allows the client to self-administer the medication during programming.
 - (2) Locate all medications and prescription blanks in a locked, secure area The client brings the medication to the provider's premises for self-administration during day programming.;
 - (3) Designate a person having access to or authorized to handle medications and shall maintain a current list of these persons, their credentials and their medication handling responsibilities.
 - (4) Provide a method to record and follow the medications from the time of receipt to the time of distribution, return to central pharmacy, or destruction. This record shall be retained by the provider for three years and shall include, but not be limited to the following information:
 - (a) The date and time the medication was received by the provider, distributed to persons served, returned to central pharmacy or, if appropriate, destroyed;
 - (b) The name, eredentials and signature of all persons handling medications;
 - (c) The provision that unused medications prescribed for a person shall be appropriately destroyed or returned to central pharmacy, and that, under no circumstances shall the unused medications be issued to another individual. Return of unused medications prescribed to a person is only allowed when the return is to central pharmacy in accordance with rule 4729-9-04 of the Administrative Code.
 - (5) Ensure that all staff handling medications have basic and ongoing instruction

and training in safe and effective handling of medications.

- (6) Ensure that medications are handled only by authorized persons and that others do not have access to the medications; and
- (7) Ensure that controlled substances may be destroyed only by an agent of the Ohio board of pharmacy, or the federal drug enforcement agency, or by transfer to persons registered under Chapters 3719. and 4729. of the Revised Code and according to rule 4729-9-06 of the Administrative Code.
- (B) The provider is to have written policies and procedures regarding the purchasing, receipt, storage, distribution, return, and destruction of medication that include accountability for and security of prescription and over-the-counter medications located within any of its facilities. These policies and procedures are to include all of the following mandates:
 - (1) The facility is to possess a valid and current terminal distributor of dangerous drugs license from the Ohio board of pharmacy if maintaining a stock supply of prescription medications, if participating with the department's central pharmacy to receive dispensed prescriptions, or when otherwise required by rules of the Ohio board of pharmacy.
 - (2) The facility is to store all medications and prescription blanks in a locked, secure area.
 - (3) The facility is to designate a person who is to have access to or may handle medications and is to maintain a current list of these persons, their credentials, and their medication handling responsibilities.
 - (4) The facility is to provide a method to record and follow the medications from the time of receipt to the time of distribution, return to central pharmacy, or destruction. This record is to be retained by the provider for three years and is to include the following information:
 - (a) The date and time the medication was received by the provider, distributed to persons served, returned to central pharmacy or, if appropriate, destroyed;
 - (b) The name, credentials, and signature of all persons handling medications; and
 - (c) A provision stating that unused medications prescribed for a person are to be appropriately destroyed or returned to central pharmacy and that, under no circumstances, are unused medications to be issued to another individual. Return of unusued medications prescribed to a person is only allowed whent the return is to central pharmacy is accordance with rule 4729:5-3-16 of the Administrative Code.

- (5) The facility is to ensure that all staff handling medications have basic and ongoing instruction and training in safe and effective handling of medications.
- (6) The facility is to ensure that medications are handled only by authorized persons and that others do not have access to the medications.
- (7) The facility is to ensure that controlled substances are destroyed only by an agent of the Ohio board of pharmacy or the federal drug enforcement agency, or by transfer to persons registered under Chapters 3719. and 4729. of the Revised Code and according to rule 4729:5-3-01 or 4729:6-3-01 of the Administrative Code, as applicable.
- (B)(C) Providers maintaining a limited stock supply of medications shall are to do all of the following:
 - (1) Allow only a physician or pharmacist to dispense medications, although the following individuals may personally furnish samples of some medications if issued a certificate to prescribe clinical nurse specialist, certified nurse practitioner, or physician assistant may personally furnish controlled substances in accordance with section 3719.06 of the Revised Code or personally furnish dangerous drugs that are not controlled substances in accordance with section 4723.481 or 4730.43 of the Revised Code, as appliable:
 - (a) Certified nurse practitioner and clinical nurse specialist in accordance with division (D) of section 4723.481 of the Revised Code; and
 - (b) Physician's assistant in accordance with division (A) of section 4730.43 of the Revised Code.
 - (2) Have visibly posted the phone number of the nearest poison control center.
- (C)(D) Each provider that permits clients to self-administer medication shall have written policies and procedures that include, but are not limited to, the following: is to describe in its policies and procedures whether clients are permitted to self-administer medication at the provider site, and whether clients are permitted to have unsecured prescription and over-the-counter medication in their possession while at the client site.

A provider that permits clients to self-administer medication is to have written policies and procedures that include the following:

(1) Procedures for storing medications in a locked and secured cabinet, or similar

storage.

- (2)(1) Procedures for self-medication.
- (3)(2) Procedures for accounting for medications that are kept for the client while they are at the program site.
- (4)(3) Each provider shall describe in its policies and procedures whether clients are permitted to self-administer medication at the provider site, and whether clients are permitted to have unsecured prescription and over-the-counter medication in their possession while at the client site. When clients are not permitted to have medication in their possession, the provider shall have written procedures for obtaining, accounting for, and returning medication at the time of departure or discharge.
- (D)(E) The provider shallis to have a policy on employee medication theft and shall inform all employees concerning this policy. The policy shall is to include attention to prescription as well as over-the-counter medications maintained for client use.
 - (1) An employee, intern, or volunteer with knowledge of medication theft by an employee or any other person shall is to report such information to the executive director of the provider. If the executive director of the provider is suspected of medication theft, the employee or volunteer shall is to notify the department.
 - The provider shall is to take all reasonable steps to protect the confidentiality of the information and the identity of the person furnishing the information.
 - (2) Suspected medication theft shallis also to be reported to the Ohio board of pharmacy. For controlled substances, suspected medication theft shallis also to be reported to the federal drug enforcement administration. Providers participating in medication services with the Ohio department of mental health and addiction services central pharmacy shallare to also notify central pharmacy.
 - (3) Failure to report information of medication theft shall is to be considered in determining the eligibility of the employee to continue to work in a secure area where medications are stored.
 - (4) If an employee violates the provider's medication theft policies, the provider shall is to assess the seriousness of the employee's violation, whether the violation has a direct and substantial relationship to that employee's position, the past record of employment, and other relevant factors in determining

whether to suspend, transfer, terminate, or take other action against the employee.

(F) A provider that does not permit medications onsite is to have written procedures for taking possession of, accounting for, and returning medication the client brings onsite to the client at the time of departure or discharge.