

**AT A GLANCE – 4.0 RETURN AND DESTRUCTION OF UNWANTED CDS ON RDaSH CARE GROUPS COMMUNITY SERVICES (PHYSICAL HEALTH) [v3.0]**

ROLE	TRUST WIDE		[TEAM NAME] TEAM SPECIFIC <sup>1,2</sup>
	Last Review: May 2022	Next Review: May 2025	Last Reviewed: [enter date]
<b>REMOVAL AND DISPOSAL</b> of patient's own CDs	<ul style="list-style-type: none"> <li>• If community nurses have been involved with the administration of these drugs, they should also take the responsibility for ensuring the safe disposal of any unwanted CDs at the end of a course of treatment or on the death of the patient.</li> <li>• Staff themselves should not routinely remove CDs from a patient's home or possession, either during their care or after the death of a patient. Unnecessary medications should not be removed unless there is a perceived risk of misappropriation.</li> <li>• Ideally the patient's carer or patient should be encouraged to return CDs to the pharmacy that originally dispensed them for appropriate destruction following a completed stock check.</li> <li>• To minimise the opportunity for the misuse of Controlled Drugs this should be a 2 person process using another staff member, family member or carer. This is not always possible so the following process can be followed instead:               <ul style="list-style-type: none"> <li>○ Stock check of medications to be completed and documented by staff at the verification of death visit.</li> <li>○ Stock check and destruction of medications to be completed and documented by staff at the bereavement visit. These 2 tasks must not be completed by the same person.</li> </ul> </li> <li>• The used DOOP kit should be labelled with the names of the CD in them.</li> </ul>		<ul style="list-style-type: none"> <li>• Staff authorised to dispose of medicines are (xxxxxxx)</li> <li>• Staff authorise to witness the disposal of medicines are (xxxxxxx)</li> </ul>

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	<ul style="list-style-type: none"> <li>• CDs may be destroyed in a patient's home providing all the following criteria have been met:               <ul style="list-style-type: none"> <li>○ Permission to destroy the CDs is granted by the patient or carer. Where a patient has died, the practitioner can determine that the CDs will not be required by the coroner.</li> <li>○ If there is a perceived risk return medication to base for immediate destruction (exceptional circumstances).</li> <li>○ Obtain a CD destruction kit (DOOP kit) and follow the instructions provided with the kit. This is the only method of destruction that should be used. Drugs must not be disposed of via the sink or toilet.                   <ul style="list-style-type: none"> <li>○ Tablets/capsules – to be removed from blisters, crushed if possible and added to the container (no more than half full)</li> <li>○ Liquids – to be added directly to the container (no more than half full)</li> <li>○ Whole ampoules – to remove all packaging, break ampoules, reconstitute and shake fluid into DOOP kit before adding empty ampoule</li> <li>○ Part filled ampoules – these should have their contents shook into the DOOP kit before adding the empty ampoule to the kit. If an episode of care results in partially empty ampoules these should be disposed of as above, allowing the liquid to form a clump. The process can be repeated at subsequent doses until the</li> </ul> </li> </ul> </li> </ul>		

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	<p>DOOP kit is approximately half full.</p> <ul style="list-style-type: none"> <li>○ Larger volumes – to empty contents of ampoules into DOOP kit (no more than half full) and dispose empty ampoules into DOOP kit.</li> <li>○ Patches – to be removed from packaging, to render the active ingredient irretrievable remove backing off the patch, fold patch in half adhesive side inwards and then place in the DOOP kit.</li> <li>○ Lozenges – to be removed from packaging and placed in the DOOP kit. Any excess packaging i.e., plastic stick attached to lozenge should be cut off to save space in the kit.</li> <li>○ Aerosols – to be expelled under water in a small container. The resulting solution can then be disposed of in the kit.</li> <li>○ Once the above drugs/formulations are in the DOOP kit (no more than half full) fill the container with water up to the fill line marked on the label, secure lid and shake thoroughly. The contents will gel, and the drugs will be rendered unrecoverable in 3-4 minutes.</li> <li>○ The used DOOP kit must be returned to the community pharmacy for appropriate disposal. DOOP kits are single use kits which can be used for the destruction of CDs in the community</li> <li>○ This destruction should be recorded and signed in the</li> </ul>		

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	<p>patient's notes; the record should contain the drug name, strength and quantity destroyed and the signature of any "second person".</p> <ul style="list-style-type: none"> <li>• A separate DOOP kit is to be used for individual patients/single instance of destruction.</li> <li>• In the case of an unexpected sudden or suspicious death, the CDs relating to the care of that patient must be regarded as evidence and must not be removed or destroyed without the instructions of the Coroner.</li> <li>• If permission to destroy is refused staff should not put themselves at risk and escalate to the GP and the staff member's line manager, documenting all actions taken to risk assess the situation. The organisation's Accountable Officer (Chief Pharmacist) must be informed as soon as possible. The refusal must be recorded in the patient's documentation.</li> </ul>		
<b>REMOVAL AND DISPOSAL of CDs – CARE HOMES</b>	<ul style="list-style-type: none"> <li>• In the case of an unexpected/expected or suspicious death, all medications are to remain at the care home for 7 days.</li> <li>• If the care home is a residential home, then the home makes arrangements for them to be collected by or taken to their pharmacy for destruction.</li> <li>• If the care home is a nursing home, it is the responsibility of the home to destroy and dispose of them. Arrangements will need to be in place with pharmacy as soon as possible for CDs to be destroyed.</li> </ul>		<ul style="list-style-type: none"> <li>• Staff authorised to dispose of medicines are (xxxxxx)</li> <li>• Staff authorise to witness the disposal of medicines are (xxxxxx)</li> </ul>
<b>DISPOSAL OF UNKNOWN SUBSTANCES – HEALTH BUS</b>	<p>Upon the discovery of unknown substance (if suspicion is aroused regarding the quantity the police are to be contacted) on the Health Bus the following process is to be followed:</p>		<ul style="list-style-type: none"> <li>• Staff authorised to initiate disposal of unknown substance are the designated Health Bus driver.</li> <li>• Other Health Bus staff are authorised to witness the</li> </ul>

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	<ul style="list-style-type: none"> <li>• Completion of the Destruction of Unknown Health Bus Record Sheet (Appendix C)</li> <li>• Unknown substance to be placed into the DOOP kit (no more than half full), fill the container with water up to the fill line marked on the label, secure lid and shake thoroughly. The contents will gel, and the drugs will be rendered unrecoverable in 3-4 minutes.</li> <li>• The used DOOP kit must be returned to the Trust Pharmacy Team for appropriate disposal and DOOP kit replacement at the earliest opportunity.</li> <li>• A copy of the Destruction of Unknown Health Bus Record Sheet will be held by the Pharmacy Team in addition to the original being held by Childrens Care Group.</li> </ul>		disposal of unknown substances

1. Team managers should update this column with
  - team name and last review date
  - complete the suggested specific details of the SOP for the team
  - add any further details of clarification to support a member of staff carrying out this particular aspect of managing medicines.
2. Where a task is carried out within the team which is either not covered by the SOP or cannot conform to the guidance within the middle column then the Trust Pharmacy Department should be contacted for guidance

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Staff members should sign below to indicate that they have read and understand the process required to return and destroy CDs for this team

STAFF MEMBER'S NAME	STAFF MEMBER'S SIGNATURE	DATE