

AT A GLANCE – 6 ADMINISTRATION AND TRANSFER OF CDS IN ST JOHNS HOSPICE [V2]

ROLE	TRUST WIDE		ST JOHNS HOSPICE SPECIFIC ^{1,2}
	Last Review: November 2020	Next Review: November 2023	
ADMINISTRATION of CDs – INPATIENTS	<p>1. RDaSH REQUISITIONED Schedule 2, 3a and 3b CDs (STOCK CDs) AND PATIENT'S OWN DRUGS</p> <ul style="list-style-type: none"> • Consult the patients prescription chart, and ascertain the following: <ul style="list-style-type: none"> a) Name and form of the drug b) Dose c) Date and time of administration d) Route and method of administration e) Diluents as appropriate f) Validity of prescription g) Signature of prescriber • Select the correct drug (Schedule 2 and 3a) from the CD cupboard. • Select the correct drug (Schedule 3b) from the drug cupboard. • Check the stock against the last entry in the CD register book, a second person is required to check the stock level and both members of staff are required to sign the CD register book. • Check the appropriate dose against the prescription chart. When using liquid medications use an oral syringe to measure the appropriate dose. • Return the remaining stock to the cupboard and lock the CD cupboard. • Enter the date, time dose, the patient's name in the CD record book and sign the register along with the counter-signatory. • Take the prepared dose to the patient, whose identity is to be checked. • Administer the drug after checking the prescription chart again. Once the drug has been administered, the prescription chart is signed by one single person (the nurse responsible for administering the medication). • Record the administration on appropriate charts. • The purpose of the second person is as a check of the correct administration of the drug (i.e. right patient, right drug, right dose, right route and dose, and form), and that the appropriate paperwork is 		<ul style="list-style-type: none"> • Staff authorised to administer CDs are All qualified staff within the hospice inpatient unit, who have been assessed as competent

	<p>completed.</p> <ul style="list-style-type: none"> • Where the second person is a qualified professional they should also review the clinical appropriateness of the dose (this will exclude i.e. nurse assistants and pharmacy technicians) • It is the administering nurse's responsibility to observe the service user taking any oral medication. 	
<p>TRANSFER of CDs between clinical areas</p>	<ul style="list-style-type: none"> • No medicines are to be transferred from a ward or department within normal pharmacy opening hours, and even outside of these hours CDs may only be used from another area in an extreme emergency. • In the event that such an emergency arises the following process MUST be followed: • A nurse from the patient's clinical area must visit the issuing ward with the patient's prescription chart. • A record must be made in the CD register of the issuing ward with the Controlled Drug being booked out directly to the patient on the receiving ward. • A nurse from the issuing ward will then witness the administration of the drug to the patient. 	

1. Ward manager should update this column with
 - Ward/team name and last review date
 - Complete the suggested specific details of the SOP for the ward
 - 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 ward 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

