

PHARMACY MANAGEMENT OF SCHEDULE 8 POISONS

*This summary has been prepared by the Drugs and Poisons Regulation Group (DPRG) because there have been an increasing number of cases where the management of Schedule 8 poisons has been in **serious contravention** of the Drugs Poisons and Controlled Substances Regulations 2006. Some of these cases have been associated with the misappropriation of drugs for misuse (see page 2) and some have resulted in the prosecution of the pharmacists. Reference should be made to the Drugs, Poisons and Controlled Substances Regulations 2006 (at www.legislation.vic.gov.au) for full details of legislative requirements.*

Recommendations

(plus examples of acceptable and unacceptable practices)

Drug Registers for Schedule 8 poisons:

- Bound books with consecutively numbered pages are the basic option.
 - *Loose-leaf pages and most computer records do **not** satisfy the regulations.*
- Registers should be clearly labelled, indexed and marked with a clear reference to the previous/next page - to prevent multiple pages being used concurrently for the same drug.

Recording the remaining balance after EACH TRANSACTION:

- Records **must** be made contemporaneously.
 - *It is **not** acceptable to wait for days, weeks or months until it is more convenient to record transactions.*
 - *When Schedule 8 poisons are supplied with the prescriber to forward the prescription subsequently, the pharmacist must record the transaction when the supply occurs and must **not** delay recording until the prescription is received.*
 - *When only a portion of a prescribed quantity is supplied, that is the quantity that must be recorded, with the supply of the remaining quantity to be recorded at the relevant time.*
- The remaining balance **must** be accurately recorded.
 - *A calculated balance should be frequently reconciled with the actual balance to confirm it is accurate.*
- The accuracy of a recorded balance should be clearly confirmed in the drug register.
 - *Some pharmacists do this by consistently ticking (or highlighting) a recorded balance to confirm its accuracy whilst others conduct periodic stock checks and record them as a separate line entry.*
- Recording a "negative balance" is unacceptable – except (possibly) in relation to a single calculated balance. *The continual recording of negative balances after multiple transactions, over a period of several days or weeks, is **not** acceptable.*

Discrepancies in Schedule 8 poisons:

- Pharmacists must investigate discrepancies without delay. *It is **not** acceptable for discrepancies to not be investigated promptly.*

- Discrepancies that cannot be resolved **must** be reported to the Department of Health. *It is **not** acceptable to simply "correct" the balance without resolving the discrepancy or without clearly recording how the discrepancy was resolved.*

Destruction of Schedule 8 poisons:

- Pharmacists must record the receipt of identifiable Schedule 8 poisons that are returned to the pharmacy for destruction.
 - *It is recommended that pharmacists employ a separate register or designated page(s) of the drug register to record "Drugs for Destruction".*
- Two pharmacists must sign to confirm the destruction of Schedule 8 poisons; *they must ensure that the Schedule 8 poisons are made unidentifiable and unrecoverable or must personally confirm destruction of the drugs.*

Retaining prescriptions for Schedule 8 poisons:

- Prescriptions for Schedule 8 poisons must be retained for 3 years and must be produced on demand to an authorised officer of the Department of Health.
- It is recommended that prescriptions are filed in chronological order in a container of a size that keeps them neatly in order. Throwing the prescriptions haphazardly into a larger box will make it much more difficult for a pharmacist to locate specific scripts if required to do so.
- It is recommended that prescriptions are neatly bundled and clearly labelled on a regular basis (e.g. monthly or quarterly) and then stored securely in the dispensary and **not** at another location.
- To prevent damage to details on the documents, scripts should **not** be placed on a spike.
- It is recommended that prescriptions associated with pharmacotherapy treatment are stored separately from prescriptions for other Schedule 8 poisons.
- Some pharmacists prefer to use expanding files or file boxes and to sort prescriptions by drug name or by the names of prescribers. These options may facilitate searches associated with discrepancies or make it easier to locate prescriptions to compare handwriting but, unless filing is carried out in a very consistent manner, it may be more difficult to locate specifically required prescriptions.

Storage of Schedule 8 poisons:

- Pharmacists **must** store **all** Schedule 8 poisons in a drug cabinet or safe. Larger or additional cabinets or safes must be obtained if existing facilities are inadequate.
- Keys to drug cabinets must be strictly controlled. It is not acceptable to leave the key in the door of the cabinet or to keep it in a "hidden" location that is known to staff other than pharmacists. This practice **has** resulted in misappropriation at some pharmacies.

Misappropriation of drugs from pharmacies

In recent years, the Department of Health has investigated an increasing number of pharmacists who have been self-administering drugs including cocaine, dexamphetamine, methylphenidate, morphine, methadone, pethidine, oxycodone, alprazolam and diazepam plus codeine in the form of Panadeine Forte and Codeine linctus.

In the noted cases, the offenders tried to conceal their activities by:

- creating false records of prescriptions for themselves or patients.
- creating false records of drugs being supplied to other pharmacies.
- ordering Schedule 8 poisons but not recording their receipt in the drug register.
- falsely recording the destruction or spillage of Schedule 8 poisons.
- misappropriating Schedule 4 poisons from the pharmacy at which they were employed.
- creating forged prescriptions or fraudulent repeat authorisations.
- failing to record Schedule 8 poisons that were returned to the pharmacy for destruction.

Staff members (other than pharmacists) have also been found to have ordered Schedule 4 poisons (e.g. anabolic steroids), as a late addition to an order, and removing the invoice with the drugs.

For further information

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