

STANDARD OPERATING PROCEDURE:	PREPARATION AND ADMINISTRATION OF CONTROLLED DRUGS
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**AT ALL TIMES, STAFF MUST TREAT EVERY INDIVIDUAL WITH RESPECT
AND UPHOLD THEIR RIGHT TO PRIVACY AND DIGNITY**

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1 VALIDATE THE PRESCRIPTION

Care must be taken by staff to ensure as far as reasonably possible that the prescription is valid and fulfils the legal requirements for Controlled Drugs (CDs). If in doubt of the validity of the prescription, steps must be taken in order to verify the prescriber's authority to prescribe. Professional registration can be checked on the website of the respective professional body and pharmacy should be consulted if further advice is needed.

2 PREPARATION OF THE DOSE

The procedure for the administration of a controlled drug is the same for other medicines as described in the Administration of Medicines Standard Operational Procedure (TW10-037 SOP 15) with the additional requirements as described within this SOP.

3 SECOND CHECK

3.1 All CDs must be checked and administered by two people, one of whom must be a Registered Nurse/Midwife/ODP or Medical Practitioner. The second person (witness) should be a Registered Nurse/Midwife/ODP/Nurse Associate, Pre-Registration Nurse*/Pre-Registration Nurse Associate*/Midwife, Medical Practitioner or Pharmacist. An appropriately trained Assistant Practitioner* may be used as a second check provided no dose calculations are required.

3.2 *Pre-Registration Nurses or Pre-Registration Nurse Associates must have completed the appropriate training with the Medicines Safety Nurse prior to being allowed to undertake this role

3.3 The second check must include checking that the route of administration is correct as well as the CD details.

4 ENTRY IN THE CONTROLLED DRUGS REGISTER

4.1 Make an entry in the ward or department CD register. Each entry must include the:-

4.1.1 Full signatures of both practitioners (giving and witnessing)*

4.1.2 Date and time of administration.

4.1.3 Name of the patient.

4.1.4 Quantity/dose administered.

4.1.5 Name, formulation and strength.

4.1.6 Running Balance.

4.2 * Theatre registers require a witness for supply and destruction of controlled drugs but the administration doesn't need a witness if carried out by an anaesthetist. If nurses/ODP administers the drug then they do require a witness for administration.

4.3 The ward controlled drugs register must be completed immediately before the administration of a controlled drug.

4.4 Mistakes in the register must not be crossed out/obliterated. The wrong information must be bracketed, signed and dated by the member of staff in the margin and the correct information clearly added in the appropriate place.

5 RECORD OF ADMINISTRATION

5.1 The record of administration must be made within HIS at the time of administration and will require the Registered Nurse/Midwife/ODP or Medical Practitioner to enter on the HIS eMAR as well as the authorised witness.

5.2 Medical Practitioners can administer Controlled Drugs without a witness – wherever possible this should be witnessed and countersigned for safety and accountability purposes.

5.3 In areas where HIS is not in place then the administration records should be made on the administration section of the appropriate medicine chart and countersigned by the witness as above.

6 CHECK THE REMAINING STOCK BALANCE

Check the remaining stock balance and make a note to ensure any discrepancies are investigated as necessary.

7 HUMAN RIGHTS ACT

Implications of the Human Rights Act have been taken into account in the formulation of this document and they have where appropriate been fully reflected in its wording.

8 ACCESSIBILITY STATEMENT

This document can be made available in a range of alternative formats e.g. large print, Braille and audio CD.

For more details please contact the HR Department on 01942 77 3766 or email equalityanddiversity@wvl.nhs.uk.