

**HOFFMANN HOSPICE**

**STORAGE AND DISPOSAL OF CONTROLLED DRUGS**

**Patient Function**

**Policy & Procedure**

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**PROCEDURE NO.: 3.10**

**Reviewed/revised by: Review Committee**

**Date Drafted: 11/01/94**

**Approved by: TOM HOFFMANN, ADMINISTRATOR**

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**PURPOSE:**

Controlled drugs are those substances subject to the Controlled Substance Act of 1970. To safeguard all controlled substances in the patient's home. To ensure that all controlled drugs are disposed of in an appropriate manner.

**POLICY:**

Controlled substances will be kept in a safe location, during the time a patient is receiving hospice care.

If a Hoffmann Hospice staff member is present at the time of death of a Hospice patient who has been receiving any controlled drug(s), he/she will instruct disposal of, all controlled drugs following the appropriate procedure. If the staff is not present he/she will instruct the family over the phone in the proper disposal of all controlled drugs. Any controlled drugs no longer needed by Hospice patients should be disposed of as well. Method of disposal and name of the person disposing of or instructing family to dispose of controlled drugs is documented in the patients' file.

No Hoffmann Hospice staff member will remove any medications from the patient's home. Skilled nursing facilities will follow their specific policies for drug disposal.

**PROCEDURE:**

1. Medication Storage

- A. Patients, their family members and/or caregivers will be instructed by Hoffmann Hospice staff regarding safe storage of all medications, including controlled substances, in the home. The Patient/Family Handbook can serve as a reference tool. Nurses and other staff will continue to monitor and instruct medication storage safety in the home on an on-going basis.

- B. Any situation in which the clinician believes there is a safety issue regarding controlled substances or other medications should be discussed with the other IDT members and/or the DOPCS. A solution regarding corrective action will be agreed upon and instructed/discussed with the patient/family/caregiver as necessary.
  - C. It may be determined that in a situation which is unsafe related to medication storage/availability or potential abuse, the Hospice team should make the appropriate referral(s) to other team members and/or to Protective Services.
  - D. Follow-up will continue, and if an unsafe situation persists, the Hospice team may decide to discharge the patient "for cause", because patient or other person in patient's home has behavior that is disruptive, abusive, or uncooperative to the extent that delivery of care or ability of hospice to operate effectively is seriously impaired.
2. Disposal of Controlled Drugs - Oral, transdermal or rectal
- A. Staff present in patient's home:
    - 1. Nurse notes with family, drugs to be disposed.
    - 2. The patient, family or caregiver disposes of all controlled drugs by removing all medications from original container and throwing them in the trash, mixing with substances such as kitty litter or coffee grounds. (staff may witness family member dispose of medication).
    - 3. Staff documents the name of medication and who was present as witness when medication was disposed of, in the patient's file.
  - B. Hoffmann Hospice staff not present in patient home:
    - 1. The nurse, when called regarding disposal of medication, instructs the family and/or primary caregiver (PCG) to remove all medications from original container and throw them in the trash, mixing with substances such as kitty litter or coffee grounds or they may take all medications to Kern County Waste Management for disposal.
    - 2. The staff member documents instruction given to family regarding disposal of drugs and the name of the person instructed in the disposal of the controlled drugs in the patient's file.

3. Controlled Drugs - Parenteral

A. Nurse present at the home:

1. The nurse will witness and assist the family/caregiver on proper disposal of all intravenous/subcutaneous controlled medications by cutting tubing from original container and dripping into the trash. The cassette and tubing may then be thrown into the trash. A witness will be present to verify disposal and nurse will document in EMR.
2. Containers, tubing, and/or syringes will be disposed of in accordance with applicable waste disposal regulations and/or policies and procedures.

B. Nurse not present at the home:

1. The nurse will instruct the family/caregiver on the proper technique for disposal of controlled medications and document instructions.
- \* All reasonable efforts will be made for a nurse to visit to assure proper disposal/waste of controlled parenteral medications.

\*\* If a patient, caregiver or family member refuses to dispose of controlled medications(s) that are no longer needed, this will be documented in the patient's file.

Reference: California State Board of Pharmacy