

A good practice guide to patient returned medication

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Scope

Patients returned medication include unwanted and expired medication. This guidance aims to highlight the legislation governing patient returned medication. The guidance is aimed at professionals working in general practice to provide clarity and understanding of how to deal with patient returned medication for practices at Sandwell and West Birmingham CCG.

Key points

- GPs and practice staff should **not** accept patient returned medication or remove medication from patient's home, unless under exceptional circumstances e.g. high risk of harm or diversion of CD, or nobody to return them. In these exceptional circumstances, details of the CDs removed should be recorded e.g. separate part of the GP's register, and returned to a community pharmacy. The pharmacist should be asked to countersign receipt.
- It is good practice for GP practices to refer/signpost patient, patient's representative or residential home staff to their local pharmacy for disposal of **all** medication.
- If a GP practice decides to accept patient returned medication, it is **the practice's responsibility** to contact local disposal services or return these medications to a local pharmacy. Practices should agree governance arrangements with clear lines of responsibility and accountability for patient returned medication.
- Community pharmacies have a contractual obligation to accept unwanted medicines from patients (even if they did not dispense them) and **not** from GP practices.
- Pharmacies can accept controlled drugs (CDs) returned by patients and must keep a record of these in a dedicated CD register.

Controlled Drugs Guidance

If a member of staff at the GP practice has accepted a control drug inadvertently:

- There should be systems in place to ensure the safe management of controlled drugs. This may include standard operating procedures for risk assessing patient returned controlled drugs and destruction of these drugs.
- A CD register should be kept on the premises.
- Any movement of a Schedule 2 CD (including patient returned) into and out of the practice must be recorded in the CD register within 24 hours of receipt.
- All CD's awaiting destruction must be stored in the CD cupboard with restricted access until they can be disposed of. They should be segregated from in-date stock.
- Patient returned CDs should ideally be returned as soon as possible to a community pharmacy for disposal.
- CDs must be denatured (e.g. tablets crushed, ampoules opened) using a denaturing kit before disposal. The denaturing kit can be obtained from NHS supplies.
- Only where a practice has a T28 exemption from the Environment Agency (which negates the need to obtain a license to carry out the process), can they denature CDs before disposal. T28 exemption can be registered at the link: <https://www.gov.uk/guidance/waste-exemption-t28-sort-and-denature-controlled-drugs-for-disposal>. This exemption complies with the requirements of the Misuse of Drugs Regulations 2001 of denaturing controlled drugs (making them unsuitable for consumption).
- Arrangements for destroying and disposing of controlled drugs must be in place in the practice and in line with the Misuse of drug regulations 2001 and the Controlled Waste (England and Wales) Regulations 2012, regardless of the source of supply.

- Under the Misuse of Drugs Regulations, all Schedule 1 and 2 Stock controlled drugs can only be destroyed in the presence of a person authorised under those regulations to witness destruction.
- Staff working at the practice should know how to contact the Area Team Controlled Drugs Accountable Officer (CDAO). This information is available on the CQC website

Care homes and Nursing homes

Important distinction between the two types of homes is explained in the table below.

Care Home	Nursing home
<ul style="list-style-type: none"> ✓ Most residential homes provide personal care for the residents who need it. This might include help with dressing, washing, going to the toilet and taking medicine. ✓ Must keep record of all medication including CD's that has been disposed or is awaiting disposal. ✓ Care homes should return all unwanted medication and out-of-date medication to the pharmacy for disposal. 	<ul style="list-style-type: none"> ▪ Always have a trained nurse on duty and can offer 24-hour nursing care in addition to personal care. ▪ Clinical waste (medication) is classed as industrial waste, therefore nursing homes need to dispose appropriately and <u>not return to pharmacy or dispensing practices.</u> ▪ Disposal is carried out through licensed disposal waste company.

References

- T28 exemption available at: <https://www.gov.uk/guidance/waste-exemption-t28-sort-and-denature-controlled-drugs-for-disposal> Accessed 19/8/16
- DOH 'Self management of healthcare waste' accessible at: http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_126348.pdf Accessed 19/8/16
- NICE guidelines on Controlled drugs: safe use and management available at: <https://www.nice.org.uk/guidance/NG46/chapter/Recommendations> Accessed 19/8/16
- CQC 'Nigel's surgery 28 Management of controlled drugs' available at: <http://www.cqc.org.uk/content/nigels-surgery-28-management-controlled-drugs> Accessed 19/8/16
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- PSNC 'Disposal of unwanted medicines' accessed on 19/8/16 at: <http://psnc.org.uk/services-commissioning/essential-services/disposal-of-unwanted-medicines/>
- CSCI 'Safe disposal of waste medicines from care homes(nursing) accessed 19/8/16 at: <http://www.clinicalwaste.com/pdf/Safe%20Disposal%20of%20Medicines%20Guidance.pdf>
- The controlled waste (England and Wales) regulations 2012 available at: <http://www.legislation.gov.uk/uksi/2012/811/schedule/1/made> Accessed 19/8/16



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