

DEPARTMENT OF PUBLIC SAFETY

CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES

EFFECTIVE DATE: 10/03/2014

POLICY NO.: COR.10.1F.06

SUPERSEDES (Policy No. & Date): 10/09/07

SUBJECT:

SELF ADMINISTERED MEDICATIONS

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1.0 PURPOSE

The purpose of this policy is to identify and provide pharmaceutical guidelines for patient self-administered medications.

2.0 REFERENCES AND DEFINITIONS

.1 References

- a. Hawaii Revised Statutes; Section 26-14.6, <u>Department of Public Safety</u>; and Section 353C-2, Director of Public Safety, <u>Powers and Duties</u>.
- b. National Commission on Correctional Health Care, <u>Standards for Health Services in Prisons and Jails</u>, (2008).
- c. American Correctional Association, <u>Standards for Adult Correctional Facilities</u>, (199-), 3-4341.

.2 Definitions

- a. <u>Administer:</u> The giving of a single dose of a medication prescribed for a patient for immediate ingestion, application or injection by a licensed health professional.
- b. <u>Antidepressants</u>: drugs used for the treatment of major depressive disorder and other conditions, including dysthymia, anxiety disorders, obsessive compulsive disorder, eating disorders, chronic pain, neuropathic pain.
- c. <u>Blister Packs:</u> pre-formed plastic packaging containing medication in unit dose increments,
- d. <u>Contraindicate:</u> To indicate the inadvisability of the use of certain drugs with certain other drugs or pre-existing conditions.
- e. <u>Dispense:</u> To issue one or more doses of a medication in a suitable container appropriately labeled for subsequent administration, delivery, or use by a patient. Only a pharmacist, or in certain instances a physician, can dispense medication.

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- f. <u>Medications for chronic conditions:</u> Drugs that do not cure the underlying illness but instead control the symptoms and complications of a condition that usually lasts for life.
- g. <u>Lithium:</u> A mood stabilizing drug used to treat psychiatric conditions such as bipolar disorder, depression, schizophrenia.
- h. <u>Parenteral:</u> A route of medication administration that is other than oral such as intravenous, intramuscular, etc.
- i. <u>Psychotropic:</u> Medication capable of affecting the mind, emotions, and behavior used to treat delusions, hallucinations and agitation in psychiatric conditions such as schizophrenia.
- j. <u>Scheduled Drugs:</u> Medications whose use and distribution is tightly controlled because of its abuse potential or risk. These drugs are rated in the order of their abuse risk and placed in schedules by the Federal Drug Enforcement Administration (DEA). The drugs with the highest abuse potential for abuse are placed in Schedule I, and those with the lowest abuse potential are in Schedule V.
- k. <u>Self-Administration:</u> The administration of medication by a patient to themselves.

3.0 POLICY

- .1 To foster patient responsibility, prescribed medications shall be dispensed to patients for self-administration whenever possible.
- .2 Scheduled drugs shall be administered by nursing staff dose-by-dose.

4.0 PROCEDURES

- .1 Prescribed medications shall be dispensed to patients in a legal prescription form for self medication. The patient shall receive sufficient medication for the duration of the prescription, one blister pack, or for thirty (30) days, whichever comes first.
- .2 Clinical Services shall generate a medical needs memorandum for patients who are required to take medication while on work assignment or during other activities away from the housing unit.

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- .3 Medications shall be dispensed in blister packs with legal prescription labels. The prescription label shall indicate the patient's name, dose, frequency and expiration date of the prescription. Any medication that is maintained in the patient's property beyond the expiration date of the prescription shall be contraband.
- .4 Prescription renewals shall be indicated on the prescription label. Patients shall be responsible for notifying the nurse during sick call or medication pass of prescription renewals at a minimum of one (1) week before the expiration of the prescription. The patient shall present an unadulterated blister pack to the nurse obtain a renewal. The blister pack presented cannot have more than one (1) week of medication left before a renewal is requested. This is required to eliminate hoarding by the patient. The patient and his or her belongings are subject to search for failure to return the blister pack. Medication removed from the blister pack to store elsewhere or in another container shall be considered contraband.
- .5 The following drugs or drug classes shall be nurse administered:
 - a. Psychotropic (e.g., phenothiazines, butyrophenones)
 - b. Antidepressants
 - c. Lithium
 - d. Scheduled drugs
 - e. All parenteral medications except Insulin, Intron A and Epipens.
 Epipens may not be distributed for self administration in the facility, but may be distributed to the patient to self administer if the patient is assigned to community or field work.
- In addition to the medication listed above in § 4.5(a)-(e), providers may order patients to receive their medication as nurse administered or in liquid form. This will be in response to patients who do not comply with self-administration guidelines. Non-compliance with self-administration guidelines shall be documented in the patient's medical record. Nurses shall obtain a written order from the provider to discontinue self-administration of a prescription medication. The dose, frequency and start and stop dates of all self administered medications or medications issued by nurses shall be recorded on the Medication Administration Record.

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.7	Provider staff shall be responsible for instructing patients about their medications and the proper dosage, frequency and contraindications. Nursing staff shall reinforce the instructions.		
.8	Nurse staff shall review Form DOC 0459 B, Patient Self Administration Guidelines and Agreement with the patient upon intake or no later than the fourteen (14) day health appraisal. The patient shall be given a copy and the original shall be filed in the medical record.		
5.0	SCOPE		
	This policy and procedures applies to all branch facilities and their assigned personnel.		
	Deputy Director for Correction	Date 9 Multiple rator Date	
APPROVED: Director			
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MEDICATION SELF-ADMINISTRATION GUIDELINES

The following guidelines have been prepared for you on the self-administration of medication. This means that medication will be issued to you to treat your medical condition(s). After receiving initial instruction regarding the medication from the provider or nurse you will become responsible for taking the medication according to the directions on the prescription. It is your responsibility to know what the medication is: why you are taking it and the medication's relationship to your condition. Any questions regarding medications can be discussed with the nurse or provider.

- 1. The nurse at sick call, or the provider in clinic will instruct you on the type of medication being prescribed to you, and why, including the proper dosage and frequency.
- 2. Your medication may be in a tube or a "blister pack". The blister pack is a card with either a thirty-day supply or the exact amount of medication needed for your condition. This means if the prescription requires you to take one tablet, twice a day, for fourteen days, your blister pack will contain 28 tablets.
- 3. You will be responsible to take the medication prescribed for as long as required by the prescription and at the proper time during the day. YOU MUST RETURN YOUR BLISTER PACK TO THE NURSE TO PICK- UP REFILLS OR RENEWALS.
- 4. The blister pack contains an identifying label. **DO NOT TAMPER WITH THE BLISTER PACK. DO NOT TAMPER WITH OR REMOVE THE LABEL**. Blister packs found in your possession that have been tampered with or that do not have an identifying label will be considered contraband under Corrections Administrative Policy, COR.13.03, 0.4 (4) Misuse of Medication.
- 5. Medications must remain in your cell at all times with two exceptions. You may be prescribed medication that must be taken during the workday. Work line inmates will be issued a copy of the Medical Needs Memo DOC 0449, and the correct amount of medication for the hours the inmate will be working. The second exception is for prescriptions that need to be re-filled. IT IS YOUR RESPONSIBILITY TO BRING YOUR MEDICATION TO SICK CALL ONE WEEK BEFORE THE EXPIRATION DATE SO THE NURSE CAN INITIATE A RENEWED PRESCRIPTION.
- 6. Medication belonging to other inmates found in your possession is contraband.
- 7. Medication found in your possession beyond the expiration date of the prescription is contraband. Sometimes you may forget to take a dose. If you forget to take a dose, do not "double" up the next time you need to take the medication. All left over medication at the expiration date must be returned to the medical unit.
- 8. Do not share your medication with other inmates even if the other inmate is on the same prescription.
- 9. If you have followed your prescription properly, the blister pack will be empty at the expiration date. Do not throw away empty blister packs they must be returned to the clinic.

Original: Medical Record

Canary: Inmate DOC 0459 B (4/11)

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