	JUSTICE CABINET DEPARTMENT OF JUVENILE JUSTICE POLICY AND PROCEDURES	REFERENCES: 3-JTS-4C-19—21; 46 4 JDF-4C-18—20; 44 3-JCRF-3B-12, 13; 4C-08 1-JDTP-3B-12, 13 4-JCF-4C-28,29,30; 4D-01 1-JBC-4C-18—20 NCCHC Y-22, 29
CHAPTER: Health and Safety Services		AUTHORITY: KRS 15A.065
SUBJECT: Pharmaceuticals		
POLICY NUMBER: DJJ 407		
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APPROVAL: Carey D. Cockerell		, COMMISSIONER

I. POLICY

Department of Juvenile Justice (DJJ) programs shall comply with all applicable state and federal regulations regarding prescribing, distributing, administering, procuring, and disposal of pharmaceuticals. Only personnel who have received training in the administration of medication shall perform the administration of medication.

II. APPLICABILITY

This policy shall apply to all DJJ operated or contract programs providing services to youth probated, sentenced or committed to, or placed in the care and custody of, DJJ.

III. DEFINITIONS

Refer to DJJPP 400.

IV. PROCEDURES

- A. Each prescription ordered by a health care provider shall be filled by a registered pharmacist.
- B. Medication, whether over-the-counter or prescription, shall be picked up by a nurse or designee or delivered by the pharmacy.
- C. Upon arrival at the facility, the medication shall be counted by a nurse or designee to determine the correctness of the order. Inventory of all prescription medications shall be conducted at least weekly by a nurse or designee. Discrepancies shall be investigated and an incident report completed for unaccounted medication. Serious discrepancies shall be reported to the Director of Medical Health Services or designee. Documentation shall be maintained by Nurse Administrator, Nurse Shift Program Supervisor (NSPS), or designee.

- D. A nurse or designee shall record the prescription information on the Medication Administration Record (MAR). The information shall include name of the medication, dosage, time, and route. The MAR has the name of the youth, allergies, and other related information written on the MAR form including the start and stop dates. Unless otherwise stated, medication orders shall be reviewed every 30 days by the health care provider. A nurse shall inform the prescriber prior to the stop dates.
- E. The facility nurse shall be responsible for all aspects of medication administration including handling, measuring, and storing all medications. Health trained staff, approved by a registered nurse (RN), may assist in the limited role of administering medications.
- F. In the absence of a nurse, only staff trained in the Health Services Protocol shall administer medications. The Health Service Protocol (HSP) training is a protocol training course approved by the Kentucky Board of Nursing. Health-trained staff shall receive an annual HSP update at a minimum of two (2) hours.
- G. A nurse or health trained staff shall follow key control procedures-
- H. Health trained staff shall not repackage or dispense medications and shall be supervised by a facility RN.
- I. Staff administering medication shall initial the MAR each time a dose is administered. The name, signature, and initials of staff administering medication shall be maintained on a master signature list.
- J. Medication information shall be available with the MAR for staff and youth knowledge.
- K. Drugs requiring refrigeration shall be kept in a refrigerator in the area of the facility where medication is stored. This area shall be kept locked at all times except when administering that particular medication. The temperature in the refrigerator shall be logged twice daily.
- L. All medications shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Drugs for topical use shall be kept separate from the medication administered for ingestion.
- M. A nurse shall monitor and oversee the use of all pharmaceuticals in the facility by the following methods:
 - 1. Verifying the medication on hand.
 - 2. On weekends or at any other times when a nurse is not available, the administration of medication shall be monitored and given by health-trained staff, approved by a RN.
 - 3. Conducting and recording a daily MAR review.
- N. Controlled substances are double locked and counted and recorded each time the medication keys change hands.

- O. Any unused medications shall be disposed of by returning them to the pharmacy. Controlled substances shall be disposed of in a manner as mandated by a pharmacy. A nurse or designee shall make a list of disposed drugs.
- P. Psychotropic drugs, such as antipsychotics or antidepressants and other drugs used for psychiatric purposes, requiring parenteral administration are prescribed only by a health care provider and then only following an established treatment plan. Stimulants, tranquilizers, or psychotropic drugs shall not be administered for purposes of discipline, security, control, or experimental research.
- Q. Youth shall not prepare, dispense, or administer medication, except for:
 - 1. self medication programs approved by the Medical Director, the Nurse Administrator, the NSPS, and the facility Superintendent; or
 - 2. medication necessary for the emergency management of a condition.
- R. The use of needles and syringes for any reason shall be documented. A daily inventory shall be maintained for accountability.
- S. A registered pharmacist shall conduct pharmacy audits at each DJJ facility quarterly.
- T. An adequate and proper supply of antidotes and other emergency medications shall be readily available. The poison control center telephone number shall be posted in conspicuous areas throughout the facility. Safety Data Sheets shall be available in areas where overdoses or toxicological emergencies are likely.

V. MONITORING MECHANISM

This policy shall be monitored by the Director of Medical Health Services, the Chief of Mental Health Services, the Nurse Administrators, or designees. The MARS shall also be monitored as part of the regularly scheduled Quality Assurance Branch reviews and routinely reviewed by the NSPS.