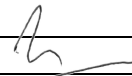


MANUAL TITLE	Hometown Pharmacy Policies and Procedures Manual
POLICY #/TITLE	Patients' Own Medications
APPLICATION	Facility Receiving Pharmacy Products and Services
EFFECTIVE DATE	August 1, 2016
REVISION DATE	September 28, 2016
APPROVED BY	Thain Ho (Tim) Wey, 9/28/16 

APPLICABILITY: This policy describes the procedures regarding the use of Patients' Own Medications by the Santa Barbara Psychiatric Health Facility (PHF).

POLICY/PROCEDURE:

1. The PHF uses patient's own medications with the following provisions
 - a. The medication must be in the original prescription container, intact, whole, and labeled according to California prescription labeling laws. The label must include the following:
 - i. The name of the drug.
 - ii. The directions for the use of the drug including frequency.
 - iii. Route of administration.
 - iv. Lot number.
 - v. Warnings/precautions.
 - vi. The name of the patient.
 - vii. The name of the prescriber or other healthcare professional as described in the law.
 - viii. The date of issue.
 - ix. The name and address of the pharmacy, and prescription number or other means of identifying the prescription.
 - x. The strength of the drug or drugs dispensed.
 - xi. The quantity of the drug.
 - xii. The expiration date of the effectiveness of the drugs dispensed.
2. The PHF must retain the medication in its original packaging unless requested by the prescriber. If the prescriber does request repackaging, this must be done by the pharmacy and cannot be done by PHF staff.
3. In order to use patient's own medications, the prescriber must write an order to use patient's own medication and the medication must be verified by either a PHF physician or a consultant pharmacist retained by the facility.
 - a. If a medication needs to be administered immediately, the medication can be inspected and verified by a PHF physician.
 - b. If the medication is not needed immediately and the next dose is not needed until after the next two pharmacy deliveries, then the PHF will notify the pharmacy of the need to have patient's own medications verified and the medications are sent to the contracted pharmacist for inspection and verification with the next delivery

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and the medications will be returned to the PHF during the next scheduled delivery regardless of whether or not they could be verified for administration. This will occur even if there are no new medications to be delivered and the only item to be delivered is the patient own medication.

4. During normal pharmacy operating hours, the PHF should call the pharmacy and talk to the pharmacist on duty there. Outside of normal operating hours, the PHF should call the pharmacist on call. These pharmacists and their information are listed in the "Providing Pharmacy Products and Services" policy.
 - a. Normal Operating Hours for Hometown LTC Pharmacy
 - i. Monday through Friday: 9 am to 6 pm
 - ii. (805) 928-2200
5. The pharmacist on duty, or PHF physician will validate the following information before verifying the prescription for use with the patient
 - a. Quality of the medication and container- none of the medication units are broken, wet, soiled, or damaged
 - b. All items listed above in 1.a.
 - c. The description and markings on the medication itself are verified via Epocrates (<https://online.epocrates.com/pill-search>) to positively identify the medication.
 - d. If the identity and integrity of the medication cannot be verified, the medication may not be provided to the patient.
6. The PHF does not use patient's own medications in the case of liquids or other non-marked dosage forms due to the lack of ability to verify the identity and quality of the substance.

This verification must be documented on the physician's order form and the patient's MAR. Documentation must include the name of the verifying pharmacist or physician and the date of verification.

REFERENCES: Title XXII of the California Code of Regulations § 77079.8