DEPARTMENT OF CORRECTIONS

Policy Number:	**500.208**
Title:	**Stock Medications**
Effective Date:	**6/5/18**

PURPOSE: To establish procedures for the use and management of floor stock medications at the Department of Corrections correctional facilities.

APPLICABILITY: Health services staff at all correctional facilities

DIRECTIVE:
DEFINITIONS:
Controlled medications – see Policy 500.206, "Controlled Medications."

Floor stock medications – a specified quantity of specific medications allowed to be kept in the correctional facilities for the purpose of availability as part of the provision of offender health care.

PROCEDURES:

A. Health services and other staff trained in medication administration must follow all Board of Pharmacy rules, controlled substances Drug Enforcement Administration (DEA) rules, and DOC policies and procedures when ordering, receiving, maintaining, and administering floor stock medications.

B. The pharmacy and therapeutics committee determines the number, type and quantity of medications that are allowed at each facility based on need, and in accordance with Board of Pharmacy rules and requirements.
   1. A maximum of 50 different oral, non-controlled legend prescription stock medications are allowed.

   2. A maximum of two blister cards of each oral, non-controlled legend medications are allowed.

   3. Each blister card must contain no more than 30 doses.

C. All stock prescription medications must be signed out when taken from inventory for administration; including the date, time, offender, offender identification number (OID), and staff signature.

D. All vials/bottles must be dated when opened, and discarded after 30 days.

E. The management of controlled stock medications must be in compliance with Division Directive 500.206, "Controlled Medications."

F. Each facility is allotted a specific maximum number of doses of designated controlled medication inventory based on population need.

G. Stock controlled substances are in addition to the 50 maximum oral, non-controlled legend medications.

H. Over-the-counter medications may be maintained in bottles or blister cards.

I. Stock medications may not be relabeled as patient specific.

J. Over-the-counter medications do not need to be signed out on an inventory sheet.

K. The health services administrator (HSA)/designee conducts a minimum of monthly audits to ensure compliance with stock medication policies and procedures are followed.

L. The consultant pharmacist reviews facility compliance with stock medication policies and procedures during regular site reviews and provides a written report to the pharmacy and therapeutics committee.

M. The pharmacy and therapeutics committee reviews the allowable legend stock medication inventory monthly and informs the Board of Pharmacy if there are any changes.

INTERNAL CONTROLS:

A. Stock medication decisions and audit reports are documented in the pharmacy and therapeutics committee minutes located in central office health services.

ACA STANDARDS: None

REFERENCES: Division Directive 500.206, "Controlled Medications"

REPLACES: Division Directive 500.208 "Stock Medications" 6/17/14.
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: None

APPROVALS:
Deputy Commissioner, Community Services
Deputy Commissioner, Facility Services
Assistant Commissioner, Facility Services
Assistant Commissioner, Operations Support