



## **PHARMACY IN-SERVICE**

### **Pharmacy Procedures for New Nursing Staff**

# **OVERVIEW**

## **COMMUNICATION: THE KEY TO SUCCESS**

GOOD COMMUNICATION BETWEEN THE FACILITY AND THE PHARMACY IS **ESSENTIAL** FOR EFFICIENT SERVICE AND HIGH QUALITY RESIDENT CARE.

Understanding how the pharmacy operates is critical to help ensure the residents receive their needed medications in a timely and efficient manner.

The enclosed information is an overview of National Pharmacy's policies & procedures. Familiarizing yourself with these procedures will help you understand our processes and help us to serve you and your residents better.

## **TOPICS FOR REVIEW**

Hours of Operation  
Ordering of Medications (New Orders / Refills)  
After Hours Emergency Procedures  
Emergency Kit Procedures  
Medication Check-in Procedures  
Medications Ordered but not Received  
STAT Orders  
Medication Cart Information



### **Hours of Operation:**

**Monday-Friday**  
**Saturday**  
**Sunday**

**8 a.m. to 5 p.m. (on call for emergencies after 5pm)**  
**9 a.m. to 1 p.m. (on call for emergencies)**  
**Closed (on call for emergencies)**

**Phone: 1-769-235-4141**  
**1-855-295-5888**

**Fax: 1-769-235-7162**  
**1-866-691-8962**

# Ordering Medications

## **Purpose:**

To ensure that all new and refill medications are ordered properly so that all medications are received timely.

All non-controlled new orders and all refills will be sent electronically over the EHR/Pharmacy Interface.

All new controlled orders will be faxed to the pharmacy.

## **Re-fills:**

1. Refills received **prior** to - **1pm** - will be sent that same day (Mon – Fri).  
Refills received **after** - **1pm** - will be sent the next business day. If you are completely out of a needed medication and it is after **1pm**, please call the pharmacy.  
(Note: We make every attempt to fill all requested refills on a daily basis)
2. The nurse should begin requesting refills electronically **3 days** prior to med being depleted. It is important to not order refills too early as insurance will not pay.
3. If a medication is “too soon” to refill, it will be suspended and filled when allowed. A refill too soon report is sent nightly with delivery indicating anything that was requested that day but too soon to fill and will also indicate when it will be filled. If you do not have adequate supply to last until indicated fill date, please contact the pharmacy the next day so this can be resolved.

## **Controls (CII-CV):**

1. **Please FAX** all new controlled substance. (Please check confirmation page to assure fax went through)
2. If faxed during normal hours of operation (8am-5pm M-F), medications will be sent same day.
3. If faxed after 5pm, on weekends or holidays, please follow after hours emergency procedure.  
(See Section below)

## **After Hours Emergency Procedure**

### **Purpose:**

To provide clarification for medication needs outside the pharmacy's normal business hours.

Before calling after hours please observe the following:

1. Please make sure this is a true EMERGENCY situation. A refill that was missed or an order that can be started the next morning is **not** an emergency situation, unless resident is totally out.
2. Please do not call simply to pass on information that is not of an emergency basis. Please make every effort to handle the next working day.
3. Verify with Prescriber when taking orders after hours if a medication can be started when available.
4. Before calling, also please check Emergency Kit List for needed medication before paging the pharmacist. If the medication is in the Emergency Kit, you need only remove it, complete an ER Kit Slip and fax it to the pharmacy...no need to call unless the item you are removing from ER Kit will not have enough doses until the pharmacy reopens.

\*\*If you have a true EMERGENCY situation, please follow the below procedures:

Call **1-769-235-4141 or 1-855-295-5888** – call will be answered by our answering service. If there is no answer, please call 318-449-2160. This will get you directly to our answering service as well.

- 1) Give the answering service your call back info (your name, facility name, phone number). The operator will contact the on call pharmacist. Do not give the on call service the order because they are not allowed to take them. Although rare, if your call is not returned within 15 minutes, please repeat the process, but let operator know that this is your second call, and no one has called you back.
- 2) If after second call to operator and your call is still not returned, please call one of the following pharmacy staff members. \*\*Please reserve this only for situations where the above procedure fails.

- **Matthew Smith: 601-616-9090**

## **ER Kit Process**

### **Purpose:**

To provide needed medication to the Residents as medications are needed per Physician orders. List of medications needed is developed by the Medical Director, Pharmacy Provider, and DON and is posted on or near the ER Kit.

Items used from the ER-kit/IV kit must be signed out with the ER Kit Form and faxed to the pharmacy. The items will be sent for replacement with the next scheduled delivery. A newly restocked ER-kit/IV Kit will be provided on a monthly basis or more frequently as needed.

The new ER-Kit/IV Kit will arrive locked with a Green Tag with the driver signifying that the Pharmacy has stocked this kit. Please lock the kit with the Red Tag provided in the bottom drawer and return the used ER-Kit/IV Kit with the driver.

### **Process for obtaining needed medication from ER-Kit/IV Kit:**

1. Nurse will review the Medication List and identify which drawer the needed medication is in.
2. Cut lock and remove needed medication from drawer.
3. Complete all parts of an Emergency Medication slip.
4. Fax ER slip to pharmacy immediately upon completion to 1-769-235-7162 or 1-866-691-8962
5. Re-seal the kit using a yellow lock provided in bottom drawer.
6. For items in the control drug safe if applicable the nurse must contact pharmacy. The detailed procedures for accessing the control drug safe are attached.

## Controlled Drug Emergency Safe Protocol

Controlled substances are only to be taken from the Controlled Drug Emergency Safe pursuant to a valid prescription issued by the resident's prescriber or his/her designated agent. It is the responsibility of the nurse/facility to obtain the prescription.

- The Controlled Drug Emergency Safe shall be stored securely in the designated secure locked area at the facility.
- The safe shall only be accessed pursuant to a valid controlled drug prescription being issued for a resident.
- A valid Controlled Substance prescription contains the following elements:
  - Resident Name
  - Resident Address
  - Date
  - Drug Name
  - Drug Strength
  - Quantity
  - Directions
  - Number of Refills
  - Practitioner Signature
  - Practitioner DEA number
  - Practitioner Address
- Emergency supplies of controlled substances will be kept in a separate box (safe) provided by the pharmacy under combination lock.
- Refrigerated controlled substances will be kept in a refrigerator lock box.
- Upon receipt of a valid written control drug prescription that needs to be started from the Controlled Drug Emergency Safe, the following procedure should be followed:
  - ❖ Written prescription from provider must be faxed to the pharmacy.
  - ❖ The resident's nurse is to contact pharmacy with a request to access the Controlled Drug Emergency Safe.
  - ❖ After verifying there is a valid prescription available, the pharmacy staff will then give the combination to the resident's nurse.
  - ❖ The resident's nurse will remove quantity intended for administration (**at that time only**) from the Controlled Drug Emergency Safe using the combination provided by pharmacy staff. At this time, the nurse removing the medication from the Controlled Drug Emergency Safe will verify the count with another nurse by completing the "Controlled Drug Emergency Safe Count Sheet" located in Controlled Drug Emergency Safe. For a facility where only one nurse is available in the entire facility at the time of access to the Controlled Drug Emergency Safe, then her/his signature on the count sheet will stand alone.
  - ❖ The original (white) copy of the "Controlled Drug Emergency Safe Count Sheet" shall be left in the Controlled Drug Emergency Safe and sent back to the pharmacy in the Safe for record keeping.
  - ❖ A copy should be kept in the facility for record keeping in designated area for at least one year.
  - ❖ The Controlled Drug Emergency Safe shall be closed and locked immediately by nurse opening safe.

- ❖ Pharmacy will document the date, time, name of nurse requesting, medication requested, and the quantity requested.
- ❖ **Under no circumstance is the combination to be shared or given to any other nurse or staff members.**
- ❖ Furthermore, the Controlled Drug Emergency Safe should not be accessed again (even by nurse who obtained original combination) without contacting the pharmacy. A new “Controlled Drug Emergency Safe Count Sheet” shall be completed for each entry into the Controlled Drug Emergency Safe.
- ❖ **Removing any controlled drug from the Controlled Drug Emergency Safe without a valid prescription constitutes theft.**
  
- ❖ In the event the practitioner is unable to provide or fax a written prescription to the pharmacy, the following procedure should be followed:
  - a) At time order is given, nurse should notify prescriber of the need for a written prescription.
  - b) If unable to provide, the practitioner or their agent should be instructed to call the pharmacy directly to issue a verbal order for the controlled medication.
  - c) **The pharmacy cannot accept a verbal order for a controlled substance from the nurse at the nursing home unless they are a designated agent of the physician. Verbal orders must come directly from the practitioner or their designated agent.**
  - d) Once verbal order is obtained from practitioner, pharmacy will contact the nurse with combination to the Controlled Drug Emergency Safe.
  - e) Pharmacy will document the date, time, name of nurse requesting, medication requested, and quantity requested.
  - f) Nurse shall immediately complete the “Controlled Drug Emergency Safe Count Sheet” and place original back in the Safe and retain a copy for the nursing home’s records following procedure outlined previously.
  
- ❖ Once the Controlled Drug Emergency Safe has been used, the pharmacy will make arrangements to replace on the next scheduled delivery. Do not send the Controlled Drug Emergency Safe back without receiving a replacement.
  
- ❖ The Controlled Drug Emergency Safe will be returned to the pharmacy for inventory, reconciliation of meds, and a new combination will be assigned for future use.



## Medication Check-in Procedures

- Medications are not required to be checked in with the delivery driver, usually this is done after the driver leaves as the nurse has time.
- The nurses sign for the medication tote which simply confirms that a tote was received. At this point, they are **not** responsible for all medications being in the tote.
- Nurse opening the tote should compare medications in the tote to the packing list.
- If a medication is missing, nurse is to fax a copy of packing list with noted missing order. Discrepancies will be addressed the next business day, unless it is considered an emergency. If missing medication is needed prior to next scheduled delivery, the nurse will need to use the After Hours procedure to arrange delivery.
- It is important to understand the person delivering the medication is a contracted courier and not an employee of National Pharmacy. There is nothing they can do if a medication is missing.

### REMEMBER THIS SIMPLE FORMULA:

**The Medication you ordered today = Medications in tote, Refills ordered Too Soon to fill (on the report sent nightly in the tote), OTC's waiting on approval, any clarifications from the prescriber that are still pending.**

**If you do not receive a medication, refer the section entitled, "ORDERED MEDICATION NOT RECEIVED" below.**

## ORDERED MEDICATION NOT RECEIVED

There are various reasons a medication ordered by the nurse does not come in. Please be aware of the following scenarios:

- 1) Med is "too soon" to refill.
  - In these cases, the order is "suspended" in our system and will be refilled as soon as the 3<sup>rd</sup> party payor will allow.
  - This will print on that day's (refill too soon report) for the nurse to review. It is **extremely** important that the nurse checking the medications in also checks to make sure they have enough supply in house to get to the next available refill date. If the resident does not have enough supply to get to the refill date, denote this on the report and fax the report back to the pharmacy. The pharmacy will call the next business day.
  - The nurse will not need to re-order again unless for some reason that the med will be depleted prior to the allowable refill date. In these cases, the pharmacy must be contacted.
- 2) Non-covered medication.
  - All 3<sup>rd</sup> party payors have formularies of what they will and will not cover or meds in which they require Prior Authorization (PA) information from the prescriber before approving payment.

- In these cases, the pharmacy will fax a notification to the facility and prescriber informing them that the medication is not covered. The covered alternative medication or PA information will be listed.
- A **5-Day supply** of the non-covered medication will be sent allowing time for the PA to be obtained or medication changed to a covered alternative.

3) Failed Fax: (Controlled Drugs or if Interface is down)

- There will be times in which a fax from the facility will fail to transmit. Please verify that you receive a fax confirmation before filing the order as sent assuring that the result was “GOOD” or “OK” and the intended number of pages went through. Without a confirmation page that has the time and date on it, it is difficult to assess whether technical difficulties existed, or the pharmacy missed something.

## **STAT MEDS**

### **WHAT IS A STAT MED?**

1. A STAT med is a New Order for a medication in which the Prescriber has requested that it be started immediately.
2. In most cases, medications that are needed for immediate administration can be found in the Emergency kit (E-kit). In these cases, there is no need to notify the pharmacy. Simply pull from the E- kit and fax E- kit slip to the pharmacy.
3. If a medication is needed as a STAT and is not in the E- kit, the pharmacy must be notified by phone. This will ensure the pharmacy is aware of the STAT and the expected time of delivery can be arranged. Please do not rely on an interface transmission or a faxed order to inform us of a STAT order. Depending on that days’ workload, an order may not even be seen for several hours.
4. Refills should always be ordered prior to depletion and should not be needed as a STAT.
5. New orders received by the pharmacy after close of business will be sent the next working day unless otherwise notified.

# **Medication Cart Information**

## **Keys**

- We will provide medication cart locks (main and narcotic drawer) with 2 keys each. We will give 1 set of keys to the nurses and the other set to your DON.
- If keys get locked in the cart or if a key is lost, please contact your DON to use the extra key to unlock the cart. The next business day, contact the pharmacy and we will either order a new key or arrange to change out the lock if necessary.
- For any unresolved issues with locks or keys, please call the pharmacy.

## **Parts/Service**

- If you need maintenance or anything replaced on your cart, please let us know right away so we can get it fixed before it becomes a problem.
- Bent or broken key
- Issues with drawers opening/closing
- Lock Issues
- Replacement accessories
- Issues with wheels
- Cracked/Broken tops

## **Contacts**

- For any questions or assistance with your medication carts, please contact your Account Executive. If you are unable to reach your Account Executive, please call the pharmacy and we will make sure someone reaches out to you.

# **REMEMBER**

**WORKING TOGETHER – WE CAN MAKE IT HAPPEN!**