

Whiddon Beaudesert Substance Management Plan Version 1.0

Important Development Instructions (delete when completed):

1. All Residential Aged Care Services require a Service Specific Substance Management Plan (SMP) by 27 September 2022 that addresses all 'dealings' with regulated substances (e.g. S2,3,4,8 medications). In a residential aged care Service 'dealing' with regulated substances includes to **Buy, Possess, Administer, Prescribe** and **Dispose**.
2. This Development Guide will assist Services develop a suitable SMP to meet legislative requirements. See also the [Queensland Health Departmental Standard for Substance Management Plans, Version 1](#)
3. A separate Substance Management Plan (SMP) must be completed for each site/facility to reflect the specific strategies and practices of that location
4. Guidance on considerations for each topic are provided at the beginning of each section
5. Qld Health require that each Plan meets the requirements of the [Medicines and Poisons Act 2019 \(QLD\)](#) (MPA) and [Medicines and Poisons \(Medicines\) Regulation 2021 \(QLD\)](#) (MPMR)

This document sets out **Whiddon Beaudesert's** strategies for managing known and foreseeable risks associated with regulated substances. Key areas of risk include:

- *Diversion/theft or other loss*
- *Fraud and tampering*
- *Expiry, cold chain breach, or other substance quality issue*
- *Improper or inappropriate use*
- *Public, patient, or environmental harm*
- *Staff having insufficient training, qualifications or experience to perform an activity*
- *Non-compliance with legislation or codes of practice*

The Whiddon Medication Management policy forms part of this SMP.


All Parts of the SMP should be available (at the time it is made and revised) to all staff who are involved in any aspect of medication support. This ensures staff are complying with the MPA and MPMR and dealing with medicines in the authorised way that minimises risk and is consistent with the organisation's Policy.

Governance and Operational Requirements

Service name	Whiddon Beaudesert		Service address	14 Brooklands Dr, Beaudesert QLD 4285	
Development date	24.8.2022	Commencement date	27 th September 2022	Next planned review¹	
Version History	Version Number	Change Summary	Review reason	People Involved	Review date
	1.	SMP- Initial Plan		DCEO A.Jarrett RGM I. Reynolds GM-QCC S.Fletcher DCS S.Falzon	1 st December 2022
Relevant legislative instruments	Medicines and Poisons Act 2019 (QLD) (MPA) supported by the Medicines and Poisons (Medicines) Regulation 2021 (QLD) (MPMR)				

¹ SMPs must be reviewed **at least every 5 years or as soon as practicable after a review incident happens**, refer to the Whiddon Medication Management Policy.

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Regulated substance groups used at this Service	This Service deals in Schedule 2,3,4,8 Regulated Substances to treat residents’ medical conditions and support their health and wellbeing, as ordered by an authorised prescriber.		
SMP endorsing committee	Clinical Governance Committee		
Person responsible for this SMP	General Manager Quality Care And Compliance	Best contact number (including after-hours)	02 9827 6612
Signature of person responsible ²		Date signed	August 24 th , 2022
Staff who deal with regulated substances	This SMP is applicable to all staff at this Service who deal with regulated substances including appropriately trained and competent: <ul style="list-style-type: none">• The specific roles and responsibilities performed by these staff are outlined in the Whiddon Medication Management Policy		
Buy - Refer also to the Whiddon Policy - Medication Management and Queensland Legislation			
Purchase orders for medicines are made by appropriate persons or their delegates	<ul style="list-style-type: none">• Whiddon Beaudesert: DCS, DDCS, or a delegate with a minimum qualification of a RN, can order medications that are prescribed for individual residents, or appear on a NIM or Ward stock List.• Controlled Drugs for Ward Stock may only be ordered by the DCS or in their absence the RGM or DDCS• (only authorised personnel, with the appropriate position at the entity, can make or access and submit a purchase order for stock of medicine before or at the time of supply)		
The stock received is secure and fit for purpose	<ul style="list-style-type: none">• On receipt of goods, they are recorded, secured and stored to maintain medicine quality/integrity• any damaged, unsuitable or expired medicines are identified, quarantined and returned, destroyed or disposed of in a manner that is safe and secure• Confirmed through Audit• Consider quarterly Audits completed by DDCS		
Incidents, including potential incidents, are deterred, identified and reported in a timely manner	Review of Incidents- Including those where Nil Stock Is recorded is done regularly by DCS and DDCS. Minuted at MAC Meeting quarterly		

² The Responsible Person for the SMP is defined by the MPA and MPMA as the Nurse Manager. In the Whiddon Beaudesert context the 'Nurse Manager' for the purposes of compliance with this MPA and MPMA in relation to the requirement for a SMP is either the:

- Director of Care Services of the residential aged care service if they are a Registered Nurse (RN) **OR**
- The most senior RN on staff (Usually one of the following; Care Manager, Care Co-ordinator or Clinical Lead) who has been specifically delegated this responsibility by the RSM

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Possess - Refer to the: Whiddon, Medication Management Policy	
Medicines are only accessible and possessed by appropriate persons	<ul style="list-style-type: none"> only appropriate persons, with respect to character and understanding of regulatory requirements, are employed, contracted or engaged by the entity to possess medicines s8 Medicines are stored within the <i>"Controlled Drug Safe"</i>. S2, s3 and s4 medicines are kept in a locked trolley / room away from the public. Keys to the safe are held separately from the medication room/trolley and are held on the person of a Registered Nurse at all times
Medicines are stored in secure and appropriate storage	<ul style="list-style-type: none"> opportunities for diversion, theft and inappropriate use of medicines is minimised through restricting access to appropriate persons adequate supervision is provided for persons who can only possess medicines temporarily, under direct supervision or at the direction of an authorised person the movement of medicines, both internal and external, is tracked and recorded, including the receipt, transfer, distribution, division, dilution, disposal or loss of medicine any medicines that are expired, damaged or otherwise unsuitable for use are identified, separated and removed from use reconciliation of medicines registers with stocks of medicines on hand will occur All medicines (including self-administered medicines) must be stored immediately after they are received so as to maintain their integrity and security and to prevent unauthorised access in either: <ul style="list-style-type: none"> A locked cupboard (securely attached to the premises); A locked room (on a shelf or in a cupboard); A locked medication trolley; or A locked drawer/cupboard in resident's room (for self-medicating residents) S8 Medicines are stored within the <i>"Controlled Drug Safe"</i>.
Recording and keeping of information enables traceability of medicines	<ul style="list-style-type: none"> A register is in place, outlining the receipt, use and destruction of controlled substances. This is held securely records are to be kept so they are retrievable, secure and unable to be tampered with Audit Review of the register is conducted each Month
There is compliance with relevant Departmental Standards namely;	<ul style="list-style-type: none"> Controlled substances are held in line with Whiddon Policy and QLD govt regulations Monitoring of this is done through Audits every Month Audits are reviewed through Whiddon's Governance system

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Departmental standard - Secure storage of S8 medicines & Departmental standard - Substance management plans for medicines	<ul style="list-style-type: none"> access and security measures for storage of S8s are compliant with the Departmental Standard - Secure storage of Schedule 8 medicines suspicious activity in and around each storage location is detected and reported both internally and externally with respect to the quantity, schedule and illicit value of medicines possessed incidents, including breaches or failures to achieve the outcomes required with respect to possession, will be identified and reported in a timely manner to ensure a review is commenced and appropriate action taken to reduce or mitigate recurrence medicine stock is stored and handled in a secure, stable and safe manner considering the recommended storage conditions and separating and quarantining substances where necessary
Incidents, including potential incidents, are deterred, identified and reported in a timely manner	<ul style="list-style-type: none"> Incident Management systems are in place and reported on monthly Incidents are analysed and actions taken to improve service delivery through critical Incident Management and CI Incident trending is completed by the site locally and at a governance level
Administer - Refer also to Whiddon Policy, training records and Audits Schedule	
Medicines are only administered by persons who are competent to administer medicines in the circumstances	<ul style="list-style-type: none"> Staff work according their scope of practice Education on Medication Management and Competency Assessments are completed and reviewed medicines are only administered by authorised persons with the appropriate qualifications, training and experience adequate supervision of administration is provided where necessary
Records are kept of medicines administered	<ul style="list-style-type: none"> records of medicines administered are maintained to minimise the risk of diversion, overdose, or other negative outcomes records of medicines administered can assist with the management of complaints, recalls and returns, and enable reconciliation to identify loss, theft or diversion records are secure and cannot be tampered with
Incidents, including potential incidents, are deterred, identified and reported in a timely manner	<ul style="list-style-type: none"> Whiddon has an effective Incident Management System (AC) and Risk Management System (eQstats) incidents, including breaches or failures to achieve the outcomes required with respect to administering medicines, will be identified and reported in a timely manner to ensure a review is commenced and appropriate action taken to reduce or mitigate recurrence
Prescribe - Refer also to the Whiddon Medication Management Policy	
Only appropriate persons can prescribe medicines	<ul style="list-style-type: none"> Staff may only administer medications when they are lawfully prescribed, including general practitioners, medical specialists, dentists and nurse practitioners; or included on an approved Nurse Initiated List. persons engaged or credentialled to prescribe a medicine hold the necessary qualifications, registration and expertise and have demonstrated (and continue to demonstrate) the necessary competencies
Prescriptions are appropriate	<ul style="list-style-type: none"> All medications must have an appropriate prescription and accompanying drug order

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	<ul style="list-style-type: none"> • access by unauthorised persons to stationery, computers, devices, software etc. used for making a prescription is prevented •
There is compliance with relevant Departmental Standards - Secure storage of S8 medicines & Departmental standard - Substance management plans for medicines	<ul style="list-style-type: none"> • Management of a controlled substance is inline with Whiddon Policy and QLD Legislation •
Incidents, including potential incidents, are deterred, identified and reported in a timely manner	<p>Whiddon has an effective Incident Management System (AC) and Risk Management System (eQstats) , information in regards to all medication incidents and prescribing incidents are shared with the prescriber</p> <p>incidents, including breaches or failures to achieve the outcomes required with respect to prescribing medicines, will be identified and reported in a timely manner to ensure a review is commenced and appropriate action taken to reduce or mitigate recurrence</p>
Dispose - Refer to the Whiddon Medication Policy for details – Approval List	
Waste from medicines is disposed of appropriately by appropriate persons	<ul style="list-style-type: none"> • Medications are disposed of by returning unused drugs to pharmacy through the RUM system. • Where medications require immediate disposal they are to be disposed of by placing the medication into a sharps container and witnessed by a second member of staff. Where liquids are disposed of best practice is to pour the liquid into a bin with absorbent capacity or onto another material that is absorbent (e.g. pad) and then they are placed in the RUM bin. • Cytotoxic medications are to never be crushed, broken or allowed to be chewed. If disposal is required, they must be stored in a sealed container and returned to pharmacy for destruction • S8 diversion-risk medicine waste is only disposed of by an authorised person and that adequate supervision/witnessing of the disposal is provided for as required • S8 diversion-risk medicine waste is to be destroyed so that it is rendered unusable, unrecognisable and unfit for human or animal use and incapable of growth or germination • diversion-risk medicine waste is to be disposed of so that access by an unauthorised person is prevented • medicine waste is to be disposed of in a way that does not endanger a person, animal or the environment •
Disposal of S8 diversion risk medicine waste is recorded	<ul style="list-style-type: none"> • S8 Medications that are discarded or require destruction are recorded in the S8 register and disposed of in accordance to QLD GUIDELINES • disposed S8 diversion risk medicine waste is recorded including the location, method of destruction, timing, personnel and any other relevant details • records are to be kept secure and are unable to be tampered with •
Incidents, including potential incidents, are deterred,	<ol style="list-style-type: none"> 1. Whiddon has an effective Incident Management System (AC) and Risk Management System (eQstats)

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identified and reported in a timely manner	incidents, including breaches or failures to achieve the outcomes required with respect to disposal of medicines waste, will be identified and reported in a timely manner to ensure a review is commenced and appropriate action taken to reduce or mitigate recurrence
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