

OREGON DEPARTMENT OF CORRECTIONS
Operations Division
Medical Services Section Policy and Procedure #P-D-02.1

SUBJECT: INMATE/PATIENT SELF-MEDICATION

PURPOSE: Inmate/patient self-medication is in alignment with a Department philosophy of inmate/patient self-responsibility, and helps with preparation for life outside Corrections. The inmate/patient self-medication program is the process by which responsible inmate/patients possess and self-administer identified prescription medications ordered by Health Services staff. The Health Services Section maintains that there are some individuals who, while they may be taking medications, are as stable and as competent as many other inmate/patients and that they can be, and should be encouraged, to be responsible for keeping and taking their medications.

REFERENCE: NCCHC Standard P-D-02, Medication Services
ODOC Rule Health Services (Inmate) 291-124-0070

DEFINITIONS:

- Blister Pack - A sealed card of prescribed medication, containing individual unit dosages.
- Long Term - A period of time more than 30 days.
- Prescribed Medication - Medication ordered by the treating practitioner to be used by the inmate/patient.
- Short Term - A period of time 30 days or less.
- MAR - Medication Administration Record.
- Approved Medication = Medications that have been designated by the Therapeutics Committee for self carry Department wide. Nurses may remove or restore an individual's self carry privileges based on behavior, but the medication once designated "self carry," remains self carry for the rest of the population.
- Earned Medication = Self-medication privileges granted for selected medications based on past compliance, stability on the medication and demonstrated responsible behavior on the part of the inmate/patient. (May only be granted by prescribing practitioner and is only possible once the inmate/patient has shown adherence to proper regimen for >=60 days.)
- Restricted Medication = Medications that are to be administered dose by dose by staff.

PROCEDURE:

Before being allowed to keep and take their medications, a determination must be made by the treating health staff that the inmate/patient is stable, competent, and responsible enough to self-administer his/her medications safely. It is expected that the inmate/patient will take their medication regularly, as prescribed, and follow all the rules on self-medication.

The Pharmacy and Therapeutics Committee may reassign the category designation (e.g., approved, earned, restricted) for any combination of institutions, programs or medications for reasons of institution security and/or inmate/patient and staff safety.

Approved Medication. Medication issued to an inmate/patient for self-administration will be prescribed medication as listed on the "Inmate Self-Medication List" and will not include controlled substances.

Earned Medication. Requires specific authorization by the prescribing practitioner before the inmate/patient may participate in any self-medication program. The medications that may be earned may not include controlled medications but may include non-formulary medications and is only possible once the inmate/patient has shown adherence to proper regimen for ≥ 60 days.

Restricted Medication. Medication that remains in staff control and is issued dose by dose at designated times.

A. Prescribed Medication Packaging

1. All approved medication will be prepackaged in blister packaging or unit dose form except for inhalers, ointments and other medication not conducive to blister packaging. These medications will be provided in appropriate alternative packaging.
2. All prescribed medication will be labeled with the following:
 - a. Inmate/patient's name
 - b. SID
 - c. Issuance date
 - d. Expiration date of medication
 - e. Discontinued date of order
 - f. Medication name
 - g. Unit dosage
 - h. Prescribing practitioner
 - i. Medication instructions
 - j. Prescription number
 - k. KOP status

B. Prescribed Medication Issuance for Approved Medications

1. Medical Services staff will process all medication orders in the usual manner.

2. All medication refills will be noted on the MAR.

C. Prescribed Medication Issuance for Earned Medications

1. The self carry, self-administration privilege clearance must be documented in a progress note.
2. Have the inmate/patient sign the MAR for receipt of the medication. This indicates that the inmate/patient has been instructed regarding the medication being issued and also understands the "Inmate Self-Medication Instructions."
3. Eligible inmate/patients must have been maintained on current medications for enough time to establish a record of being stable (at least two months). Once the KOP privilege is earned, dosage, strength, or time of day adjustments are not an indication of instability and not an indication for removal of self carry. Moving from one institution to another is not reason enough to restrict self carry privileges.
4. Each individual inmate/patient must be cleared/approved for self carry by their treating practitioner, and this privilege can be revoked for cause by any practitioner or nursing staff. If nursing staff revokes this privilege they must notify both the pharmacy and the treating practitioner.
5. If an inmate/patient medication is cleared for self carry, the approval must be noted on the medication order to the pharmacy each time an order is entered or extended (e.g., Zoloft 100mg qd x 90 days, approved for KOP).
6. An individual inmate/patient's earned self carry medication privilege may be revoked at any time by either BHS staff or MS staff, and his/her medication will be returned to medical staff for their control of administration. When an inmate/patient is removed from earned medication privileges, the provider or nurse will write or electronically enter an order, for up to 6 months, indicating that the inmate/patient has been removed from earned medication privileges. A corresponding progress note will detail the events that lead to the change in medication privileges. Nursing staff must also notify the practitioner. This individual's privilege to self carry may be reinstated after 60 days of demonstrated compliance.
7. Mental Health inmate/patients on self- carry status will be reviewed for MH special needs on a regular basis.

D. Prescribed Medication Completion

1. Empty medication containers may be returned to the Health Service area if required by the institution.

2. Approved medication containers that are not empty but are no longer valid, have reached expiration date or not desired by the inmate/patient, will be returned by the inmate/patient to Medical Services and then returned to the pharmacy. CII-CV medications must be destroyed on-site. See P-D-02.12, Disposal of Discontinued, Damaged or Expired DEA "Controlled" and "Staff Controlled" Medications

E. Prescribed Medication Accountability

1. Inmate/patients who are unable or unwilling to comply with an order for prescribed medication may not be allowed to have certain medications in their possession. The prescribed medication for the inmate/patient will be issued during the medication line.
2. When an inmate/patient is removed from approved or earned self-medication privileges, the nurse will write the order then fax or electronically enter the information for the pharmacy indicating that the inmate/patient has been removed from self-medication privileges and the length of time. A corresponding progress note will detail the events that lead to the change in medication privileges. Nursing staff must also notify the practitioner.
3. When an inmate/patient is removed from earned self-medication privileges, the removal order cannot be overridden by another nurse or a prescribing provider. At the conclusion of the removal order for earned medication privileges, the inmate/patient may ONLY be reinstated to self-medication privileges by the prescribing practitioner.
4. For approved medications, the inmate/patient can be returned to self-medication privileges at the discretion of the nurse. The nurse will write the reinstating order and scan/fax the information to the pharmacy. A corresponding progress note will detail the events that led to the inmate/patient has been put back on self-medication privileges. Nursing staff must also notify the practitioner.
5. All prescribed medication (pills) will remain in the blister pack until immediately prior to ingestion. An exception will be allowed for an inmate/patient worker who does not have access to the functional unit during regularly scheduled work hours, such as inmate work crews. The Medical Services section may authorize an inmate/patient to carry one dose of medication in a sealed envelope if the inmate/patient identification and medication contents have been written on the envelope.
6. Any loose (unpackaged) pill(s) found in the facility is/are considered contraband.
7. Violation of this procedure may result in the issuance of a Misconduct Report to the inmate/patient.
8. Any inmate/patient found in violation of subverting, i.e. cheeking, hoarding, selling, etc., the medication will be referred back to the prescribing provider or Chief Medical Officer to determine necessity of medication.

F. Medication Refill

1. Refill of ongoing "Inmate/Patient Self-Medication" is the responsibility of the inmate/patient.
2. The method the inmate/patient will use to make his/her request to Medical Services for medication refill will be specified by each institution's Medical Service for their various housing areas.
3. Medical Services staff will fax or electronically enter the information for the medication to be refilled, or if not available sufficient information will be sent for pharmacy to refill five to seven days prior to running out.
4. When a medication is renewed, if asked MS Nursing staff may amend the expiration date and initial the expiring blister (same Rx) so that the inmate/patient is not in violation of ODOC's contraband rule.

G. Special Housing Units

The Medical Services Manager in conjunction with the Security designee may make provisions for self-medication privileges in the special housing units.

H. Prescribed Formulary Medications

A list of formulary medications indicating their status as A-approved, E-earned or R-restricted, is accessible through the HS Shortcuts icon on all Medical Services computer desktops. Go to HS Shortcuts; go to Formulary shortcut; go to Formulary Information.xls; go to worksheet tab named "Formulary".

Certain non-formulary medications may also be earned. Those non-formulary medications are at the discretion of the Pharmacy and Therapeutics Committee.

Effective Date: _____

Review date: August 2014

Supersedes P&P dated: October 2013

DEPARTMENT OF CORRECTIONS
HEALTH SERVICES SECTION

Inmate/Patient Self-Medication Instructions

Inmate/Patient Orders

(Violation will result in a misconduct report)

1. Do not break apart the blister pack.
2. Do not possess medication that has expired.
3. Do not possess another inmate's medication.
4. Do not give any of your medication to or, accept any medication from another inmate.
5. Do not possess a loose (unpackaged) pill(s) unless specifically approved by the Medical Services Section.
6. You are responsible to lock your medication in your housing storage area.

General Instructions

1. Return your medication to the Medical Services Section for the following unless specifically instructed otherwise:
 - a. The date on your prescription has expired.
 - b. The blister pack is empty.
 - c. The prescription or medication has been changed or discontinued by a prescribing practitioner.
2. A Medical Services' employee may request you to bring your medication to the Medical Services' Section periodically to be examined.
3. Medication refills may take five to seven working days to arrive. As such, you need to request a refill from the Medical Services Section five to seven days before a refill is needed.
4. You will be given medication in a blister pack for a 30 day period of time or less.
5. If you are found in non-compliance of the self-medication system you will be required to report to the medication line for any further medication.
6. Some medications may require a modified self-medication process until you can demonstrate compliance with instructions. The Medical Services' employee will determine how the self-medication process will be modified and when you can assume the full self-medication system.

Departamento Correccional

Instrucciones De Propio Medicamentos De Los Presos

Inmate/Patient Orders

(Violación puede resultar en Reporte de Mala Conducta)

1. No rompa el paquete de pastillas o cápsulas.
2. No tenga medicamento que se ha vencido en su posesión.
3. No tenga en su posesión medicamento de otro preso.
4. No le de su medicamento a otro preso ni acéptelo de nadie tampoco.
5. No tenga pastillas o cápsulas sueltas en su posesión al menos que sea aprobado específicamente por los Servicios de Salud.
6. Usted es responsable de guardar su medicina en su celda.

INSTRUCCIONES GENERALES

1. Entregue sus medicamentos al Departamento de Salud cuando:
 - a. La fecha de su medicamento se ha vencido.
 - b. El paquete esta vacío.
 - c. El medico cambia la receta de su medicamento o discontinúa su uso.
2. Cualquier empleado de Servicios de Salud podrá pedir que usted traiga sus medicamentos para revisarlos de vez en cuando.
3. El proceso de rellenar sus medicamentos puede tardar cinco a siete días de trabajo para llegar. Solicite sus medicamentos cinco a siete días antes que se vencen o terminan.
4. A los presos se les darán sus medicamentos en paquete por 30 días o menos. El paquete vacío será entregado al departamento de salud.
5. El preso que no comparte con las reglas del sistema de propio medicamento, puede ser que lo manden a la fila de medicamentos por su medicina en el futuro.
6. Algunas medicinas tendrán un proceso modificado hasta que el preso puede mostrar que puede seguir las instrucciones. Un empleado del Departamento de Salud será el que determinara como será el proceso de propio medicamento y cuando el preso puede guardar sus propios medicamentos.

CRCI/SFFC Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication

POLICY: CRCI Medical Services assures that proper identification is obtained prior to issuing any medications to inmates.

PROCEDURE:

1. All inmate/patients will present their Institution ID card prior to receiving any controlled medication and whenever a keep-on-person medication is issued to them.
2. Inmates/patients who do not have their ID card will be sent back to their housing unit to obtain the card.
3. Should an inmate/patient not have their institution ID card, medications will be issued provided there is positive identification by a staff member.

SRCI Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication

- A. When a inmate/patient misuses or abuses his approved medication privileges, his opportunity to self-carry approved medications will be revoked at the discretion of medical services staff. Misuse or abuse includes (but is not limited to) not taking the medication as ordered and the inability to account for doses delivered. These actions will then be taken:
1. All approved oral medications will be administered at med line for six (6) months.
 2. The incident will be thoroughly documented in the progress notes by nursing staff.
 3. A nursing order alerting the pharmacy of the change in medication status will be written.
 4. The prescribing providers shall be notified.
 5. During this restricted period, all ordered oral medications shall be administered during med lines.
- B. When a inmate/patient misuses/abuses his medication line privileges, he is subject to a change in how his medications are delivered. Misuse or abuse includes (but is not limited to) the inmate/patient attempting to divert the medication during or after med line. Discovery of med line medication on an inmate/patient's person or in his property after the med line. These actions will then be taken:
1. The inmate/patient's medications will be crushed (if this medication can be crushed) for six months. A mouth check will be completed by nursing staff if the medication cannot be crushed.
 2. The crush order will be in force for six months.
 3. A nursing order alerting the pharmacy of the change in medication status will be written.
 4. A thorough note documenting the incident will be completed by nursing staff.
 5. The chart will be forwarded to the prescribing provider for review and to determine if the medication should be continued.

EOCI Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication

Inmate/patients request medication refills by sending an inmate communications form to pharmacy. The inmate/patient needs to peel the sticky label off of his current blister pack of medication and apply the label to the inmate communications form. Inmates are instructed to send in their refill request five to seven days before they run out of medication. If they cannot apply their medication label to the inmate communication then they need to copy the name of their medication, prescription number, their name and SID number and send it to the appropriate Health Service staff. Refill requests will still be received at medication lines if the inmate needs assistance in making his request. Inmate/patients may also sign up for sick call and ask the nurse for directions.

**SCCI Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication**

Inmate/Patient Self-Medication Instructions

Inmate Orders

(Violation will result in a misconduct report)

1. Do not break apart the blister pack.
2. Do not possess medication that has expired.
3. Do not possess another inmate's medication.
4. Do not give any of your medication to another inmate.
5. Do not possess a loose (unpackaged) pill(s) unless specifically approved by the Medical Services section.
6. You are responsible to lock your medication in your housing storage area.

General Instructions

1. Return your medication to the Medical Services section for the following unless specifically instructed otherwise:
 - a. The date on your prescription has expired.
 - b. The Prescribing Practitioner has changed your medication or it has been discontinued.
2. If the blister pack is empty, for your confidentiality you can pull off the label with your name and SID number and destroy the label. Empty blister packs do not need to be returned to medical.
3. A Medical Services' employee may request you to bring your medication to the Medical Department periodically to be examined.
4. Medication refills may take four working days to arrive. As such you need to request a refill from the Medical Services section seven days before a refill is needed. Apply the label to an I/M communication form.
5. You will be given medication in a blister pack for a 30 day period of time or less.
6. If you are found in non-compliance of the self-medication system, you will be required to report to the medication line for any further instructions.
7. Some medications may require a modified self-medication process until you can demonstrate compliance with instructions. The Medical Services' employee will determine how the self-medication process will be modified and when you can assume the full medication system.

OSCI Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication

Subject: Keep on Person Medication-Modifications for selected MH medications.

Purpose: This policy will allow some inmate/patients to keep, self-administered, and be responsible for some of their “Mental Health” medications. This addendum is to govern the process of monitoring and delivery of KOP Mental Health medications to inmate/patients at OSCI. This addendum does not change any aspect of the original P&P for Mental Health KOP.

OSCI: Addendum to KOP inmate/patient monitoring process/procedure.

- A. Initially inmate/patients on this program will bring their medication card to Medical Services for review at least weekly for the first month. If the inmate/patient is compliant and stable with this self-administer program they may bring their medication card to Medical Services a minimum of every two to three weeks for review for the second month. If compliance and stability is maintained into the third month, the inmate/patient will continue on KOP but will be monitored during routine visits with CTS. This will be done at the discretion of the treating practitioner, and/or the nursing services. All time intervals are not specific intervals but are proposed intervals. Medical Services can request the inmate/patient to bring the medication to the clinic for review at any time.
- B. Once an inmate/patient is approved for KOP, the KOP nurse will document it on the MAR in the area of the medication that is approved. This will be transcribed on a monthly basis to the new month during MAR checks.
- C. Inmate/patients that are transferred and are already on the KOP will continue on the program. Their medications will be given to them if the chart clearly documents compliance and stability. If the chart is not clear and there is a KOP order, the inmate/patient will be treated as an initial inmate/patient on the program.

TRCI Site Specific Attachment
P&P# P-D-02.1, Inmate/patient Self-Medication

DEPARTMENT OF CORRECTIONS (TRCI)
Inmate/Patient Self Medication Instructions
Inmate/patient orders
(Violation may result in a misconduct report.)

1. Do not break apart the blister pack.
2. Do not possess medication that has expired. **Return on Order Ends or Rx Exp. Date.**
3. Do not possess another inmates' medication.
4. Do not give your medication to another inmate by individual or multiple dosages or by blister pack.
5. Do not possess a loose (unpackaged) pill (s) unless specifically approved by the Medical Services Section.
6. You are responsible to lock your medication in your housing storage area.

GENERAL INSTRUCTIONS

1. Return your medication to the Medical Services Department for the following:
 - a. The date of your order ended or your prescription has expired. **Order Ends Date or Rx Exp. Date.**
 - b. The prescribing Practitioner has changed your medication or it has been discontinued.
2. A Medical Services employee may request you to bring your medication to the Health Service's Department periodically to be examined.
3. Medication refills may take **five to seven working days** to arrive. As such, you need to request a refill from Medical Services no less than seven working days before a refill is needed.
4. You will be given medication in a blister pack or tube for a period of 30 days or less. **To extend the Rx Exp. Date you must sign up for sick call.**
5. If you are found in non-compliance for the self medication system you will be required to report to the medication line for any further medication.
6. Some medications may require a modified self medication process until you can demonstrate compliance with instructions. The Medical Services employee will determine how the self medication process will be modified and when you can assume the full self medication system.

TRCI GUIDELINES

1. If you have a current medication order and need a refill, peel off the small sticker on the right side of the label or write the information (**Prescription** number) on an inmate communication (**KYTE**) and send it to Medical Services, seven days prior to needing the refill.
2. When your blister pack runs out and you have received notification from Medical Services, report to the Medication line at 1:00 PM to pick up your refill.
3. If you have any questions or concerns about your medication or the refill order process, please sign up for sick call.

TRCI Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication

Departamento De Correcciones (TRCI)
Instrucciones de “propio tratamiento con medicamentos” de los presos
Ordenes para los Encarcelados
(Violación puede resultar en un reporte de Mala Conducta)

1. No rompa el paquete de pastillas o cápsulas.
2. No tenga medicamento que se ha vencido en su posesión. **(Devuélvalo en la fecha que la Orden se Termina o Rx Exp Fecha que se vence la receta)**
3. No tenga, en su posesión, medicamento de otro preso.
4. No le de su medicamento a otro preso; no por dosis individual, ni varias dosis, ni el paquete de pastillas o cápsulas.
5. No tenga ni una pastilla suelta (desempaquetada) a menos que sea indicado por los Servicios de Salud.
6. Usted es responsable de guardar su medicina en su celda.

INSTRUCCIONES GENERALES

1. Devuelva su medicamento al Departamento de Servicios de Salud por lo siguiente:
 - a. La fecha de su orden se ha terminado o la fecha de su receta se ha vencido.
ORDER ENDS DATE o Rx Exp: Date
 - b. El Medico ha cambiado la receta de su medicamento o ha discontinuado su uso.
2. Cualquier empleado de los Servicios de Salud podrá pedir que usted traiga su medicamento a los Servicios de Salud para revisarlo de vez en cuando.
3. El proceso de rellenar los medicamentos pueden tardar hasta **CINCO A SIETE DIAS DE TRABAJO** para llegar. Así que usted necesita hacer su pedido de medicina a los Servicios de Salud no menos de **Siete** días antes de que lo va necesitar.
4. Le darán sus medicamentos en un paquete o tubo para el periodo de 30 días o menos. **Para renovar la fecha de vencimiento de la receta (Rx Exp: Date) tiene que apuntarse en la Llamada del Enfermería (Sick Call)**
5. Si lo encuentran en falta de cumplir con el sistema de “propio tratamiento con medicamento” va ser requerido presentarse a la “fila de medicina” para recibir sus medicamentos de entonces en adelante.
6. Algunos medicamentos pueden requerir un proceso modificado de “propio tratamiento con medicamento” hasta que usted pueda demostrar que puede cumplir con las instrucciones. El empleado de los Servicios de Salud determinara como el proceso de “propio tratamiento con medicamento” se modificara y cuando podrá encargarse del sistema completo.

TRCI DIRECTIVOS

1. Si usted tiene una orden actual de medicamento y necesita rellenarla, despegue la etiqueta pequeña al la mano derecha de el sello en su paquete o escriba la información **(Numero de receta)** en una comunicación de preso (**KYTE**) y mándelo al Departamento de Servicios de Salud siete días antes de que necesite el relleno de medicina.
2. Cuando se le acaba su medicamento, y ha recibido la notificación de los Servicios de Salud, reportase a la línea de medicina a la 1:00 de la tarde para recoger su medicamento.
3. Si tiene preguntas o preocupación acerca de su medicina o el proceso de pedir el relleno de medicamentos, por favor apúntese en la Llamada del Enfermería.

CCCF Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medications

1. Inmate/patients are instructed in the self-medication process during the intake process, when issued medications, and as necessary.
2. When an inmate/patient has a 5-day supply of self-medication remaining, they are to peel the refill portion of the prescription label from the medication and apply to a medical communication form. If the refill portion is missing, information from the label may be written on the communication form.
3. The medical communication form with the refill request is placed by the inmate/patient into the medical kyte box. The medical kyte boxes are emptied daily by nursing staff.
4. Nursing staff will review the refill requests for appropriateness and place in the pharmacy basket. If the refill request is not appropriate, nursing staff will instruct the inmate/patient to sign up for nurse triage.
5. The medication room technician will fax or scan refill requests to Central Pharmacy.
6. When the refill is received from Central Pharmacy, a pass will be sent to the inmate/patient indicating that the medication is available for pick-up.
7. Prior to receiving any self-medication, all inmate/patients will present their Institution ID card. Inmate/patients who do not have their ID card will be sent back to their housing unit to obtain the card.
8. To receive a refill, inmate/patients will turn in their medication pass and their empty blister back or medication container.

PRCF Site Specific Attachment
P&P# P-D-02.1, Inmate/Patient Self-Medication

- A. When a inmate/patient misuses or abuses his approved medication privileges, his opportunity to self-carry approved medications will be revoked at the discretion of medical services staff. Misuse or abuse includes (but is not limited to) not taking the medication as ordered and the inability to account for doses delivered. These actions will then be taken:
1. All approved oral medications will be administered at med line for six (6) months.
 2. The incident will be thoroughly documented in the progress notes by nursing staff.
 3. A nursing order alerting the pharmacy of the change in medication status will be written, faxed or electronically entered for pharmacy.
 4. The prescribing providers shall be notified.
 5. During this restricted period, all ordered oral medications shall be administered during med lines.
- B. When a inmate/patient misuses/abuses his medication line privileges, he is subject to a change in how his medications are delivered. Misuse or abuse includes (but is not limited to) the inmate/patient attempting to divert the medication during or after med line. Discovery of med line medication on an inmate/patient's person or in his property after the med line. These actions will then be taken:
1. The inmate/patient's medications will be crushed (if this medication can be crushed) for six months. A mouth check will be completed by nursing staff if the medication cannot be crushed.
 2. The crush order will be in force for six months.
 3. A nursing order alerting the pharmacy of the change in medication status will be written, faxed or electronically entered for pharmacy.
 4. A thorough note documenting the incident will be completed by nursing staff.
 5. The chart will be forwarded to the prescribing provider for review and to determine if the medication should be continued.