

### **Appendix 1: Example of a Controlled Drug Self-assessment and Declaration form**

P	ractice	Name	and	Address:
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The following questionnaire is a useful self-audit tool for Practices to use for assurance purposes.

#### Section 1

	Area of Activity	Yes/No	If the answer is 'yes'
Q1	Do you prescribe CDs?		Please complete Table A and Section 2
Q2	Do you supply CDs?		Please complete Table A and Section 3
Q3	Do you administer CDs (or supervise or assist patients own administration)?		Please complete Table A and Section 4
Q4	(i)Do you hold stock CDs either on the premises or off site e.g. doctor's bags? (ii)Do you hold patient CDs?		Please complete Table A and Section 5
Q5	Do you destroy or dispose of CDs (patient returns/stock)?		Please complete Table A and Section 6

If you have answered YES to any of the above questions then complete the appropriate Sections. The following declaration should then be signed.

In **ALL** cases please **delete** as applicable and sign the declaration below:

i) I declare to the best of my knowledge and belief that this Practice does not handle, use or manage Schedule 2 or 3 CDs on any premises of this Practice

Or

ii) I declare that to the best of my knowledge and belief that this Practice does/does not comply (please delete where appropriate) with the provisions of the Misuse of Drugs Act 1971 and the associated Regulations in its handling, use and management of Schedule 2 and 3 CDs.



Signature*	
Name (and registration number, of healthcare professional)	
Position within the Practice*	
Date of signing	

Please fill in the relevant tables below if your organisation prescribes, manages, uses or handles CDs. Please ensure that the information is accurate.

#### Table A: General Information: Please complete in ALL cases

		Yes/No	Details
1.	Do you have written standard operating procedures or written policies covering the handling and management of CDs, appropriate to the activities carried out at the premises?		
2.	Do you have in place a local procedure for dealing with a significant event* involving CDs?		
3.	Do you have appropriate procedures for the initial and continuing training or development of all staff involved in the prescribing, handling, supply and administration of CDs?		
4.	Do you have a process in place to ensure safety alerts regarding CDs are acknowledged, disseminated and actioned upon?		
5.	Are there any special factors which influence the prescribing or use of CDs by your organisation?		
	If yes, please give details		

<sup>\*</sup>Significant event includes any incident where a patient is harmed and included near misses when things almost go wrong.

<sup>\*</sup>This form must be signed by appropriately authorised personnel, who have responsibility for the management and use of CDs within the organisation.



#### **Section 2: Prescribing CDs**

		Yes/No or N/A	Details
1.	Are there any specific restrictions on the CD prescribing abilities of any of the healthcare professionals involved?		
2.	Have there been any patient or carer complaints* involving the prescribing of CDs?		
3.	Have there been any concerns expressed by colleagues, police, drugs misuse services or others about unusual, excessive or inappropriate prescribing of CDs?		
4.	Have there been any significant events** involving the prescribing of CDs?		

<sup>\*</sup>This includes complaints about failing to prescribe appropriate doses and/or appropriate medicines.

#### **Section 3: Supply of CDs**

	Yes/No or N/A	Details
Do you supply CDs to addicts?		
2. Do you supply CDs against private		
prescriptions:		
(a) from addiction services?		
(b) elsewhere?		
3. Do you supply controlled drugs:		
(a) to doctors?		
(b) to others (not including patients)?		
4. From where do you obtain your stocks of		
CDs?		

<sup>\*\*</sup>Significant event includes any incident where a patient is harmed or nearly harmed and includes 'near misses', when things almost go wrong.



5. Do you provide advice to patients on the safekeeping and disposal of unwanted CDs?	
6. Are patient returned medicines ever re-used?	
7. Are patient information leaflets supplied to all patients receiving CDs?	
8. Have there been any patient or carer complaints involving the supply of CDs?	
9. Have there been any concerns expressed by colleagues, police, drugs misuse services or others about the supply of CDs from the organisation/pharmacy?	
10. Have there been any significant events** involving the supply of CDs?	

# Section 4: Administration of CDs (This excludes supervision of CDs consumed by addicts)

		Yes/No or N/A	Details
1.	Are the CDs used for administration:		
	(a) stock CDs?		
	(b) patient's own CDs?		
	(c) both (a) and (b)?		
2.	Do you maintain records of administration?		
	If yes, where? (Register etc.)		
3.	Is administration of CDs witnessed?		
	If not, what risk management policies are in place to cover administration?		

<sup>\*\*</sup>Significant event includes any incident where a patient is harmed or nearly harmed and includes 'near misses', when things almost go wrong.



4.	Have there been any patient or carer complaints involving the administration of CDs?	
5.	Have there been any concerns expressed by colleagues, police, drugs misuse services or others about the administration of CDs?	
6.	Have there been any significant events** involving the administration of CDs?	

#### Section 5:

	A. Security and safe custody of CDs	on premise	es
		Yes/No or N/A	Details
1.	Do you store CDs in: (i) A central store? (ii) Doctors' bags? (iii) Other places (please detail)?		
2.	Do you have any current Chief Constable exemption certificates in operation for your CD storage facilities?(NB Not all premises will need exemption certificates for CD storage facilities)		
3.	Are all CDs kept under lock and key (including patient returned CDs or unwanted/obsolete CDs)?		
4.	Is access to CDs controlled?  If yes, then how?		
5.	Do you utilise the CD storage facilities for storage of anything other than CDs? If so, please state.		

<sup>\*\*</sup>Significant event includes any incident where a patient is harmed or nearly harmed and includes 'near misses', when things almost go wrong

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6.	How often does date checking of CD stock take place?  Give details of date checking procedures	
7.	How often does date checking of CD stock in	
	doctors' bags take place? (where applicable)	
	Please give details of date checking procedures.	
8.	Are all stock CDs kept in the original	
	container?	
9.	Are dispensed patients' medicines	
	appropriately labelled?	
10	Are different strengths of the same medicine segregated in any way?	
11	. Do you have out of date or obsolete stock	
	CDs currently stored?	
12	Are out of date/obsolete/patient returned	
	CDs segregated from other CDs?	
13	Are patient returned medicines ever reused?	

	Yes/No or N/A	Details	
14. Do you transport or are you responsible for the transport of CDs (this includes sending CDs using third party carriers such as delivery drivers and postal system)? If NO, please move on to section C.			
15. What procedure do you have in place for the transport of CDs?			

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16. Are CDs kept in a locked Doctor's Bag during transport?	
If no, then please provide details.	
17. What records are maintained of CDs in transport?	
transport?	

C Registers			
	Yes/No or N/A	Details	
18. Do you keep an up to date CD register?			
19. Do you keep running balances of stock CDs held? If yes: (a) Do you audit your running totals? (State how often and date of last audit) (b) Are the running totals audited? (State how often and date of last audit)			
20. Have you identified any discrepancies between running totals and actual CDs held in the last 12 months?  If yes, what was the explanation for the discrepancy?  What action was taken?			
21. Do you maintain records of all receipts and supplies of CDs?  If yes, for how long do you keep records?			
22. Have there been any patient or carer complaints involving the storage, transport or record keeping of CDs?			
23. Have there been any concerns expressed by colleagues, police, drugs misuse services or others about the storage, transport or record keeping of CDs?			



24. Have there been any significant events** involving the storage, transport or record keeping of CDs?	

### **Section 6: Destruction or disposal of CDs**

Patient's CDs				
		Yes/No or N/A	Details	
1.	Do you routinely destroy patients' old or obsolete CDs? If Yes, what systems do you have in place?			
2.	Is there an appropriate process in place to destroy Schedule 2 CDs			
St	Stock CDs (if applicable)			
1.	How often do you aim to destroy out of date or obsolete stock CDs?			
2.	Do you have any out of date or obsolete stock CDs currently awaiting destruction?			
3.	Who usually witnesses your stock destruction?			
4.	When was the last-witnessed CD stock destruction?			

<sup>\*\*</sup>Significant event includes any incident where a patient is harmed or nearly harmed and includes 'near misses', when things almost go wrong

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5.	Are records of stock destruction kept in the CD register?	
6.	Have there been any patient or carer complaints involving the destruction or disposal of CDs?	
7.	Have there been any concerns expressed by colleagues, police, drugs misuse services or others about the destruction or disposal of CDs?	
8.	Have there been any significant events** involving the destruction or disposal of CDs?	