



Illicit Controlled Drugs Procedure

Version Number	1	Version Date	April 2018
Author & Title	Security and Logistics Manager Chief Pharmacist		
Staff/Groups Consulted and agreed	Medicines Committee		
Date Approved by Approval group	June 2018		
Review Date	June 2021		
Related procedural documents	Trust's Medicines Management Policy Trust's Information Governance Policy		

Purpose

To ensure that the removal of illegal/illicit, and unidentified substances, complies with the Misuse of Drugs Act and YDH Policies.

This policy describes the procedure to be followed by Trust staff if a person is known, or suspected, to be in possession of, using or supplying any illicit substance (as defined by the Misuse of Drugs Act 1971 and Psychoactive Substances Act 2016) on Trust premises.

- The following links take you to the current version of the acts:
[Misuse of Drugs Act 1971](#)
[Psychoactive Substances Act 2016](#)
- Under the above acts, it is an offence to knowingly allow possession, use, production or supply of any illicit substance on premises for which you are responsible.
- The Home Office website <http://www.homeoffice.gov.uk/drugs/drug-law> provides a list of drugs that are currently classified as illicit under the act.
- Possession, use or supply of prescription only medicines (including Controlled Drugs) by persons who have not been prescribed them should be treated as illicit and dealt with in a similar way.

Scope

This procedure is for:

- Registered Nurses
- Midwives,
- Operating Department Practitioners
- Pharmacy staff

This procedure applies to:

- All staff who handle Controlled Drugs (CDs) or unidentified substances.
- All areas where CDs are used and stored e.g. wards, X-ray, theatres etc.

This procedure ensures that:

- The use and management of CDs within the Trust conforms to legislation and national guidance.
- There is consistent and transparent practice across the Trust
- There is a robust audit trail in place for CDs.
- Any anomalies, concerns and risks associated with poor practice are reduced and identifiable.

Related Documents

- Trust's Medicines Management Policy
- Trust's Information Governance Policy

Responsibilities

- Risk and Safety Manager
- Local Security Management Specialist
- Security and Logistics Manager
- On Call Manager
- Clinical Site Manager
- The Accountable Officer (Chief Pharmacist)
- All staff who handle CDs

Procedure

- Possession of illegal substances for use within the Trust premises is forbidden and patients and relatives must be made aware of this prior to elective admission and at the time of emergency admission.

- Whenever staff believe that a patient may have concealed about them or their property harmful, illegal/illicit/suspected illicit substances for use by themselves or others, staff must inform the nurse-in-charge.
- Many people who use illegal substances are treated as patients within the Trust. In some cases, the fact that a patient uses illegal substances or is a risk to themselves or others may be known to medical and nursing staff, in others it is not. Sometimes a patient may be found in possession of objects that could cause physical harm, suspicious powders, tablets, capsules or other unidentified substances for which he/she does not have an adequate explanation.
- Although the substance may be unidentified, it could be a drug such as heroin, cocaine, LSD or amphetamine. The possession of these drugs may be an offence under the Misuse of Drugs Act 1971 and the associated Regulations and applies equally to hospitals as to elsewhere.
- When a member of staff takes possession of the substance, he/she may be placed in a vulnerable position unless it can be demonstrated that the substance was taken for the purpose of delivering it into the safe custody of a person lawfully entitled to possess or destroy it. It is therefore important that all actions relating to the removal of suspicious items are in accordance with this procedure.
- Actions taken under this procedure must not delay any medical treatment that is necessary.
- Care must be taken to avoid putting anyone at risk of harm.

1.0 Reporting of Adverse Incidents Involving Illicit Substances

- 1.1 In all cases an Incident form should be completed at the earliest opportunity.
- 1.2 Details of incidents involving patients should also be reported to the Trust's Local Security Management Specialist, or Security and Logistics Manager, who will investigate any case and implement any appropriate action in liaison with the Trust Accountable Officer (Chief Pharmacist).

2.0 Incidents involving possession, use or supply of illicit substances by patients

Possession or use

- 2.1 The Trust owes a duty of care to patients and all incidents must be dealt with discretely. Confidentiality must be maintained at all times unless the patient refuses to cooperate (see section 6 below).
- 2.2 If possession or use is strongly suspected or proven (e.g. witnessed, reported), the nurse currently in charge of that area must be informed immediately.
- 2.3 The nurse in charge should
 - Assess the situation.
 - Avoid putting anyone at risk of harm during the course of any actions taken.
 - Inform the Local Security Management Specialist and/or the Security and Logistics Manager, in working hours and the Clinical Site Manager, out of hours, and request their presence if deemed appropriate.
 - Discretely discuss the situation with the patient involved. Care must be taken that this is not seen to be an unfounded accusation and the identity of anyone reporting the possession or use should be protected.
 Advise them that:
 - Trust policy prohibits the possession, use or supply of illicit substances
 - They should surrender any such substances.
 - This will not be reported to police unless the person fails to cooperate.
 - Inform the consultant responsible for the patient's care.
 - Document the incident fully in the healthcare record.
- 2.4 If a substance is surrendered, refer to section 4 below for action to be taken.
- 2.5 If the patient refuses to surrender a substance and there is strong suspicion or

- evidence of possession or use, refer to section 6 below for action to be taken.
- 2.6 If the patient is unable to surrender the substance voluntarily e.g. because they are unconscious, the substance should be removed for safe keeping following section 4 below. This action should be explained to the patient at the earliest opportunity.
- 2.7 A patient's property can only be searched with their permission and in the presence of the patient and another witness.
- 2.8 The patient involved should be offered referral for support and / or appropriate treatment.

Supply or intent to supply by patients

- 2.9 The incident should normally be referred to the police - see section 6

3.0 Incidents involving possession, use or supply of illicit substances by non-patients

- 3.1 If the person involved is not a staff member the incident should normally be referred to the police (see section 6)

4.0 Handling any surrendered substance(s) from patients who are in possession for personal use.

(N.B. Refer to section 6 for actions to be taken involving referral to the police e.g. suspicion of dealing, refusal to surrender a suspected illicit substance):

Actions by nurse in charge:

- 4.1 With due regard for their own and others' health and safety:
- Make any hazardous materials, e.g. needles, safe by placing into a sharps bin.
 - Remove the suspected illicit substance and place in a sealable container such as an envelope or sealable bag.
 - Clearly mark the container with
 - The date and time
 - Name and signature of person who removed the suspected illicit substance
 - Page Number and Line Entry Number of the record made in the patient's own Controlled Drugs record book
 - Document in the patient's own Controlled Drugs record book:
 - Date and time
 - Description of substance and approximate quantity.
 - Details of person the substance was taken from (i.e. hospital number, other identifier if non-patient or "unknown source" if substance was found).
 - Place the bag in the CD cupboard.
 - Ask the pharmacist at the earliest opportunity or complete the CD removal request form on the Pharmacy page of YCloud (during normal Pharmacy opening hours, Monday to Friday) to transfer the suspected illicit substance to Pharmacy.

Actions by pharmacist:

- 4.2 With a witness sign out the suspected illicit substance from the patient's own Controlled Drugs record book.
- 4.3 Transfer to the Pharmacy CD cupboard
- 4.4 Document in the Patients' Own Drugs (PODs) CD destruction register in Pharmacy:
- Date.
 - Details of the person the substance was taken from (i.e. hospital number, other identifier if non-patient or "unknown source" if substance was

found).

- Name, signature and role of the person who returned the suspected illicit substance.
- Description of substance and approximate quantity.

5.0 Destroying the illicit substance

5.1 The substance should be destroyed with other unwanted PODs Controlled Drugs

6.0 Referral to police:

6.1 This should be considered in the event of refusal to surrender a substance or strong suspicion or evidence of dealing or supply of an illicit substance by any person.

6.2 Any action must not involve force unless the person presents a risk to himself or others.

6.3 Security should be contacted and requested to attend if deemed appropriate.

- The nurse in charge should refer to the Clinical Site Manager regarding further action.
 - The Clinical Site Manager should involve the Local Security Management Specialist/Security and Logistics Manager and at least one other appropriate Trust staff member when deciding whether there is strong enough suspicion or evidence to call the police. Suitable staff may include:
 - A patient's consultant
 - Senior Nurse - Matron
 - Risk and Safety Manager
 - Security and Logistics Manager
 - Trust Accountable Officer for CDs
 - On-call General Manager
 - Any further discussions with the person involved should be discrete.
 - If the incident involves personal use by a patient, a final attempt should be made to persuade the person to surrender the substance.
 - If the decision is to involve the police they should be contacted via 101 and given all requested details (excluding any clinical details).
- 6.4 If any substance has been seized:
- The substance should be placed in a sealed bag/envelope, placed in the CD cupboard and documented in the patient's own CD record book (as in section 4).
 - When the police attend, they should be asked to remove the substance. The Police and a witness should sign the sealed bag/envelope out of the patient's own CD record book and the police should remove.

References

- Use and Disclosure of Health Data 2002
- Code of Professional Conduct 2008 NMC
- Advice – confidentiality – March 2009 NMC
- Misuse of Drugs Act 1971
- Medicines Act 1968