

**H**ealthcare  
Pharmacy



**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 PATIENT CARE.

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

The enclosed information is an overview of Healthcare 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  
After Hours Emergency Procedures  
Emergency Kit Procedures  
Ordering of Medications (New Orders / Refills)  
Faxing of Orders  
Medication Check-in Procedures  
Order Change Procedures  
Medications Ordered but not Received  
STAT Orders  
Med Pass Review Procedures

**H**healthcare  
Pharmacy



**Hours of Operation:**

**Monday-Friday  
Saturday  
Sunday**

**8a.m. to 6p.m. (on call for emergencies after 6pm)  
Closed (on call for emergencies)  
Closed (on call for emergencies)**

**Phone: 1-318-671-9603  
1-888-668-9916**

**Fax: 1-318-671-1106  
1-888-668-9975**

## After Hours Emergency Procedure

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 just to pass on an order or information that is not of an emergency basis. Fax and we will handle the next working day.
3. Verify with MD 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 what you are removing from ER Kit will not be enough due to an outbreak, etc.
5. If a medication is needed prior to next delivery but not needed that night, please note that on the faxed order and we will process the next morning.

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

- 1) Call **318-671-9603 or 1-888-668-9916** – call will be answered by on-call service. If there is no answer, please call 318-459-2305 or 1-877-722-3160. This will get you directly to our answering service as well.
- 2) Give the on call operator your call back info (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. 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.
- 3) If after second call to operator your call is not returned please call one of the following numbers. \*\*Please reserve this only for situations that the above procedure fails.

- **Lamar Bryant – 318-773-7976**
- **Tid Hilger- 318-321-9291**

## **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 with the driver signifying that the Pharmacy has stocked this kit. Please return the used ER-Kit/IV Kit with the driver.

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

1. Complete all parts of an Emergency Medication slip. There is **no need** to call the pharmacy when removing a drug from the ER Kit as the completed and faxed slip will suffice as an order.
2. Fax ER slip to pharmacy immediately upon completion to 318-671-1106 or 1-888-668-9975.
3. 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 patient's prescriber or his/her designated agent. The Control Safe cannot contain CII items.

- 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:
  - Patient Name
  - Patient 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 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.

## Ordering Medications

### **Purpose:**

To ensure that all new and refill medications are ordered properly so that all medications are received timely. Please note the following procedures for refills and new orders:

### **Re-fills:**

1. Refills faxed **prior** to - **1pm** - will be sent that same day (Mon – Fri). Refills faxed **after** - **1pm** - will be reviewed for the word “OUT” or “NEED”, and these refills will be processed to the fullest extent possible. The remaining refills will be sent on the next scheduled delivery. If you are completely out of a needed medication and it is faxed after **1pm**, please note that on the refill page as listed above.  
(Note: We make every attempt to fill all requested refills on a daily basis)
2. The nurse should begin pulling refill stickers 4 days prior to med being depleted, pull at 6 days on narcotic prescriptions.
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 that was 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.
4. All faxed refills should be filed **along with the fax confirmation**—Note: Be sure to check that the result was “GOOD” or “OK” and the intended number of pages went through.

### **New Orders/New Admits:**

1. **Please FAX** all new orders when possible. (see next section)
2. If faxed during normal hours of operation (8am-6pm M-F), medications will be sent same day, you must call after 6pm for any **NEW ORDERS** and refills you may be out of.
3. If faxed after hours and medications are needed prior to next scheduled delivery, please follow after hours emergency procedure.

### **Re-Admits:**

1. Please indicate by writing the word “**NEED**” beside the medication you need so we don’t send something the resident doesn’t need.

## **Faxing of Orders**

We are requesting that facilities fax all orders, refills and new order request, to the pharmacy rather than calling them in. If a nurse has a question or needs clarification regarding an order, we certainly encourage them to call the pharmacy.

The purpose of this request is for several reasons:

- 1) All orders have to be saved electronically into our system. This allows us to attach the faxed order to the typed order so there is an easy to follow paper trail. Previously when a nurse called questioning where an order came from or for any type of clarification, it would take some time to go back and dig through boxes to find that particular order. With our current document imaging system, we can now do that in a matter of seconds, giving the nurse the needed information without delay. It is a tremendous help if all orders are faxed from the facility in the fact that it eliminates us having to stop, take the order and then fax it back to ourselves.
- 2) With fewer phone calls, this will help ensure the Pharmacist or Technician is more readily available to address and help resolve any issues in which you may need assistance.
- 3) This also helps eliminate the chance of an error from miscommunication. With background noise and all that is going on at the facility and in the pharmacy there are times that what is spoken and what is heard are different.
- 4) This will help reduce the chance of errors that occur during order entry if the pharmacist does not have to continually stop to answer the phone. A simple analogy is a nurse having to continually stop during their med pass for non-emergency situations. The chance of something getting missed definitely goes up.

If you need to speak with the pharmacy for any reason, please call. We are here to answer any question and be a resource when needed. Our goal is simply to have a safe, efficient and documented ordering system that allows us to address your questions or concerns in a timely manner.

## **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, however you need to follow your nursing home management company's policies and procedures.
- We are asking that the nurses sign for the medication which simply confirms that a tote of medication was received.
- Nurse should compare medications in the tote to the packing list at their earliest convenience, but not later than end of their shift.
- 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 contact the on-call pharmacist to arrange delivery.
- It is important to understand the person delivering the medication is a contracted courier and not an employee of Healthcare Pharmacy. There is nothing they can do if a medication is missing.

### **REMEMBER THIS SIMPLE FORMULA:**

**The Medication you ordered today = Medications in tote, Prior Authorization Rejects (that were faxed) but not yet resolved with Doctor, 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.**

## ORDER CHANGES/DISCONTINUED ORDERS

- 1) Pharmacy must be notified when changes occur even if a medication is not needed. There are times a medication is re-ordered but not sent because it is too soon to refill and we were not aware the patient was completely out of medication due to the order being changed.
- 2) Please note the pharmacy cannot send a new label when directions change but the nurse can simply place a “**Directions changed. Refer to M.A.R.**” sticker on the card.
- 3) In summary, please just fax everything related to medications.

## ORDERED MEDICATION NOT RECEIVED

There are various reasons that at times 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 first available refill date. Denote this on the report and fax the report back to the pharmacy
  - 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 physician before approving for payment.
  - In these cases, the pharmacy will fax a notification to the facility informing them that the medication is not covered. The covered alternative medication or PA information will be listed.
  - The non-covered medication will NOT be sent unless we are authorized to send and bill the facility, so if you are having issues not getting these types of medications, please immediately get with your DON or Administrator for approval.
  - In most cases the physician is contacted and the order is changed to the covered alternative. When a covered alternative is not available or acceptable and a PA is needed, the order is typically put “on hold” until the PA is obtained.
- 3) Failed Fax:

- 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. The attachment of the confirmation page is the most important step in faxing anything. 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 ER kit. In these cases, there is no need to notify the pharmacy. Simply pull from the ER kit and fax ER slip to the pharmacy.
3. If a medication is needed as a STAT and is not in the ER 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 a faxed order to inform us of a STAT order. Depending on that days' workload, a faxed order may not even be seen for several hours.
4. Refills should always be pulled prior to depletion and should not be needed as a STAT order.
5. New orders written and faxed to the pharmacy after close will be sent the next working day unless otherwise notified.

# **REMEMBER**

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