Policy:	Controlled and Expired Medications	
Owner of Policy:	Regional Medical Director, Regional Program Manager	
Department/Program:	Southwest Ontario Regional Base Hospital Program	
Approval By:	Director, Emergency Services & Base Hospital	Approval Date: April 2011

	Last Review Date: June 2020	Last Revised Date: June 2019
Original Effective Date: April 2011	Reviewed Date(s): May 2012, March 2014, May 2015, July 2016, June 2017, June 2018, June 2019	Revised Date(s): Sept 2012, May 2015, July 2016, June 2017, June 2018

POLICY

This policy details the mechanism for accountability and compliance with the *Controlled Drugs and Substances Act.*

PROCEDURE

1.0 CONTROLLED SUBSTANCE

1.1. The controlled substances in the Southwest Ontario are: diazepam, midazolam, fentanyl, ketamine and morphine.

1.2. The Regional Medical Director delegates to Advanced Care Paramedics (ACP) through medical directives that permit administration of controlled substances to patients.

1.3. The Employer, whose staff members hold and transport controlled substances, is required to designate an individual as a Designated Administrator. The Designated Administrator is responsible for compliance with the *Controlled Drugs and Substances Act*.

1.4. When the controlled substance inventory requires replenishment, the Designated Administrator will provide the prescribing Medical Director with a summary that accounts for controlled substance use since the previous prescription. The summary should identify the current inventory, and account for all use, waste and disposal through supporting documentation (i.e. daily check sheets, controlled substance inventories and disposal/waste records). The prescribing Medical Director will issue a prescription for controlled substances (provided there is sufficient evidence that the *Controlled Drugs and Substances Act* requirements are satisfied), to a hospital or community pharmacy with which the Employer is affiliated.

1.5. Paramedics must follow the local process approved by the prescribing Medical Director to properly document daily inventory, use and waste. The approved inventory control and validation process must address the maintenance of security of controlled substances through locked storage, and the use of signatures (with witnesses) to validate each step in the chain of use. Paramedics disposing of waste (controlled substance that is expired, contaminated, damaged or any residual controlled substance remaining after administration from a multi-dose vial, or reconstituted from concentrated form) will follow the local process approved by the prescribing Medical Director and enforced by the Designated Administrator.

1.6. The prescribing Medical Director may request supporting documentation regarding controlled substances from the Employer when required as part of an investigation into adverse outcomes secondary to controlled substance use, deviations from medical directive or evidence of controlled substance procedural deviations. If the Employer has concerns about potential misappropriation of controlled substances they are to inform the Medical Director immediately.

1.7. Any missing controlled substance will be reported immediately to the prescribing Medical Director and if necessary to Health Canada (as required under the *Controlled Drugs and Substances Act.*).

1.8. When a controlled substance vial is opened, the Ambulance Call Report (ACR) documentation must contain, in addition to standard documentation elements:

1.8.1.   name of the patient the medication was administered to;
1.8.2.   dose and route administered; and
1.8.3.   name and signature of the Paramedic responsible; and
1.8.4.   if applicable, the name of the Base Hospital Patch (BHP) Physician giving the order.

2.0 EXPIRED MEDICATION

2.1   Expired medications include any medications administered as per the associated medical directive (including controlled substances).

2.2   Medications must be checked regularly and rotated in order to ensure efficient use to prevent use of expired medications, and/or to avoid unnecessary disposal.

2.3   The Employer/Paramedic is responsible for ensuring that the following procedures are adhered to:

2.3.1   Paramedics should follow their Employer's process to ensure medication checks, medication stock, and stock rotation comply with public safety requirements;
2.3.2   Medications are not to be used past the documented expiry date;
2.3.3   Medications with only a month and year expiry date can be used until the last day of the applicable month; and
2.3.4   Expired medications will be properly disposed of as per the Employer's policy.

DEFINITIONS

Employer
Means an ambulance service operator certified to provide ambulance services as defined in the Ambulance Act.

Medical Director
Means a physician designated by a RBH as the Medical Director of the RBHP.

Paramedic
Means a paramedic as defined in subsection 1(1) of the Ambulance Act, and for purposes of this Standard a reference to the term includes a person who is seeking Certification as a Paramedic, where applicable.

Regional Base Hospital (RBH)
Means a base hospital as defined in subsection 1(1) of the Ambulance Act, and provides an RBHP pursuant to an agreement entered into with the MOHLTC.

Regional Base Hospital Program (RBHP)
Means a base hospital program as defined in subsection 1(1) of the Ambulance Act.

REFERENCES

Controlled Drugs and Substances Act; Subsection 56(1) Class Exemption for Primary Care Paramedics, Advanced Care Paramedics and Critical Care Paramedics in Ontario
Narcotic Control Regulations, Subsection 8(1)
Benzodiazepines and Other Targeted Substances Regulations, Subsection 2(1)

Ministry of Health and Long Term Care (MOHLTC); Emergency Health Services Branch Advanced Life Support Patient Care Standards Version 4.7, Appendix 6 as updated from time to time.

EMS MDS v 1.1 Data Dictionary