Emergency Department Discharge Medication Supply Procedure

1. Purpose

The following information relates to the appropriate supply of medication to patients upon discharge from WA Country Health Service (WACHS) Emergency Departments (ED) in the Wheatbelt region.

Provision of appropriate labels and packaging will be available through WACHS Wheatbelt Pharmacy as pre-labelled items (i.e. cardboard box, template label and Cautionary & Advisory label #1 or pill bottle, template label and Cautionary & Advisory label #1).

Appropriate supply of packaging will be monitored by WACHS Wheatbelt Pharmacy.

2. Procedure

The provision of discharge medications to ED patients is at the prescriber's discretion. It may be necessary for the medical practitioner to dispense, where a pharmacist or retail pharmacy is unavailable, sufficient medication on discharge until a discharge prescription can be filled.

The medical practitioner is to make a written record of the medication given at the time of supply and the medication is to be labelled in accordance with the *Medicines and Poisons Act 2014* (WA) and Medicines and Poisons Regulations 2016 (WA).

2.1 General Considerations

- Any medications given to a patient on discharge must be recorded in the patient's case notes and on the patient's medication chart (MR170A/ETS Medication and Fluid Chart)
- Care should be taken to avoid creating a drug seeking environment. When considering supply of S8 medications the prescriber must be of the belief that the patient is not drug dependent
- Discharge supplies should only be provided in circumstances that a delay in commencement of treatment would be detrimental to patient care or where there is a concern that the patient will not fill a prescription and therefore, not receive the required treatment
- Discharge supplies are limited in quantity to enable administration until a community pharmacy is open – maximum supply should not exceed 2 days of treatment
- **All** medications that are dispensed upon discharge are to be recorded into a Medication Supply Register and reported to the Wheatbelt Regional Pharmacy each month (copy of register page emailed to the sites regular supplying pharmacy either Narroginwheatbelt.pharmacy@health.wa.gov.au or Northamwheatbelt.pharmacy@health.wa.gov.au).

2.2 Discharge medication/s provided by ED staff

- Any medication/s supplied directly through the ED must be fully labelled using template labels and recorded in the patient's case notes and on the medication chart (MR170A/ETS Medication and Fluid Chart)
- These discharge supplies must comply with *Medicines and Poisons Act 2014* (WA) and *Medicines and Poisons Regulations 2016* legal requirements for labelling and packaging, including specific labelling for medication that may cause drowsiness (Cautionary and Advisory label #1)
- All provision of medication/s to patients must be performed by prescribers only. Should a Registered Nurse (RN) be required to assist a medical practitioner in the dispensing of a Schedule 4 or Schedule 8 medication to a non-admitted patient, the dispensed item is to be handed to the medical practitioner for supply by him/her to the patient
- Where the medical practitioner is not physically able to hand medication to the patient (Video Consult) the assisting RN is to prepare the label, package medication and hand the medication to the patient within sight of the virtual prescriber. Medications prescribed by a virtual prescriber on an MR 170A or ETS Medication and Fluid Chart and documented into the case notes will need to be faxed, or scanned and emailed via appropriately secure means (refer to WA Health MP 0067/17 Information and Security Policy – section 3.2.4.3) to site as soon as practicable within a 24 hour period
- Provision of medication related counselling is the responsibility of the medical practitioner and should be provided directly to the patient at the time discharge supplies are issued, either in person or virtually.

2.3 Provision of Starter Pack

Structured Administration and Supply Arrangements (SASA), issued by the Chief Executive Officer of Health under Part 6 of the Medicines and Poisons Regulations 2016, authorise Registered Nurses to supply starter packs, of approved medicines, for the acute treatment of patients of a hospital, other than in-patients. Provision of discharge supplies (including Starter Packs) is to be documented in the Medication Supply Register.

2.4 Provision of medication not packed as a Starter Pack

- Source supply of medication ensuring product is within expiry date and supply will not compromise treatment of current or expected inpatients
- Prepare label noting medication (generic name, formulation and dosage); instructions, patient name, date of issue, Doctor's name, batch number and expiry date. Where blister strips are cut the expiry date information must be retained on the supply remaining at the hospital
- Sedation warning label is provided and relevant for medication included in the Poisons Standard (SUSMP) (Appendix K)
- Document the provision of discharge supplies in the Medication Supply Register
- Supply appropriate medication related counselling.

2.5 Requirement to record details when supplying S4 or S8 Poison

The following details must be recorded, on the clinical record, when supplying any schedule 4 or 8 poison:

- the name, quantity, strength and form of the medicine
- the address of the person treated and
- the date on which the medicine is supplied
- if the medicine is a Schedule 8 poison:
  - the date of birth of the person treated and
  - the name and address of the prescriber.

3. Roles and Responsibilities

It is the role of the RN, nurse practitioner (NP) and midwife, eligible midwife and in limited situations, enrolled nurse (EN), to administer medication in accordance with legislative requirements.

Medical practitioner (MP) and NP are required to prescribe medications in line with their APHRA registration.

All staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

4. Monitoring and Evaluation

4.1 Monitoring

Pharmacy staff will review imprest levels of starter packs every 12 months.

Pharmacy staff will record all non-starter pack supplies for six (6) monthly evaluation.

4.2 Evaluation

Resupply of medication packaging will require reporting of all medication/s supplied, upon discharge, with monthly reporting of register back to Wheatbelt Pharmacy. Regional report will be provided six (6) monthly to the Medication Safety Network Meeting to monitor supply of discharge medications.

5. Compliance

This procedure enables prescribers to supply discharge medications in accordance with the *Medicines and Poisons Act 2014* (WA) and *Medicines and Poisons Regulations 2016* (WA).

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the Integrity Policy Framework issued pursuant to Section 26 of the *Health Services Act 2016* and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

Compliance with this medication policy is to be measured by the number of medication incidents, adverse events and near misses relating to inappropriate medication administration by a RN, midwife, EN or NP and reported through the Clinical Incident Monitoring system.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

6. References

Medication Supply Register
Safety and Quality (health.wa.gov.au)
Homepage | Australian Commission on Safety and Quality in Health Care
Australian Health Practitioner Regulation Agency (AHPRA) Code of Ethics for Nurses 2008
Structured Administration and Supply Arrangements (SASA), CEO of Health under Part 6

7. Definitions

Term	Definition
Dispense / Dispensed	Supply of medication by an authorised medical practitioner from the prescriber's own medication order in accordance with Medicine and Poison regulation 51.

8. Document Summary

Coverage	WACHS Wheatbelt
Audience	Medical, nursing and pharmacy
Records Management	Clinical: Health Record Management Policy
Related Legislation	*Medicines and Poisons Act 2014* (WA) *Medicines and Poisons Regulations 2016* Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) Federal Register of Legislation - Australian Government
Related Mandatory Policies / Frameworks	MP 0104/19 Medication Review Policy MP 0131/20 High Risk Medication Policy MP 0078/18 Medication Chart Policy MP 0067/17 Information and Security Policy Clinical Governance, Safety and Quality Policy Framework
Related WACHS Policy Documents	WACHS Medication Handling and Accountability Policy WACHS Medication Prescribing and Administration Policy
Related Forms	MR170A WA Hospital Medication Chart - Adult Short Stay MR170D Paediatric Short Stay Medication Chart ETS Faxed Medication and Fluid Chart
Aboriginal Health Impact Statement Declaration (ISD)	The completion of an Aboriginal Health Impact Statement and Declaration (ISD) is required for all new and revised policy documents. For further information, please see the ISD Guidelines. ISD Record ID: 1960
National Safety and Quality Health Service (NSQHS) Standards	1.3, 1.7, 1.27, 4.15

9. Document Control

Version	Published date	Current from	Summary of changes
3.00	13 February 2023	13 February 2023	• Transfer to new policy template • Addition of Wheatbelt Pharmacy details for Northam site, changes to supply of relevant materials

10. Approval

Policy Owner	Regional Director Wheatbelt
Co-approver	Executive Director Clinical Excellence
Contact	Regional Chief Pharmacist Wheatbelt
Business Unit	Medical Services
EDRMS #	ED-CO-18-35086

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