4664.0425 CENTRAL MEDICATION STORAGE.

- Subpart 1. **Applicability.** A hospice provider that operates a residential hospice facility must comply with this part.
- Subp. 2. Central medication storage. Central storage of medications must be managed under a system that is established by a pharmacist or a registered nurse in consultation with a pharmacist and that addresses the control of medications, handling of medications, medication containers, medication records, and disposition of medications, including ongoing security of drugs scheduled under Minnesota Statutes, section 152.02. Central medication storage must include a cabinet or device that stores medications for one or more persons. Medications requiring refrigeration must be stored in a separate locked box in the refrigerator or in a separate lockable drug-only refrigerator, capable of maintaining temperatures required for the storage of drugs. Central medication storage is not required for hospice patient medications in a private home unless assessed as needed by the interdisciplinary team.
- Subp. 3. **Control of medications.** A residential hospice facility must have in place and implement a written policy that contains at least the following provisions:
- A. a statement of whether the staff will be delegated to provide medication reminders, assistance with self-administration of medication, medication administration, or a combination of those services;
 - B. a description of how the distribution of medications will be handled;
- C. a requirement that all drugs be stored in locked compartments under proper temperature controls. Schedule II drugs, as defined in Minnesota Statutes, section 152.02, must be stored in separately locked compartments, permanently affixed to the physical plant or medication cart:
 - D. a procedure for accounting for all Schedule II drugs after each shift;
 - E. procedures for recording medications that hospice patients are taking;
- F. procedures for review and destruction of discontinued, outdated, or deteriorated drugs. Secure storage of all discontinued drugs must be provided until destruction. Schedule II drugs must be held in a separately locked compartment until destruction. Destruction of all legend drugs must be witnessed and documented by two persons, one of which is a registered nurse. The destruction notation must include the date, quantity, name of drug, prescription number, signature of the person destroying the drugs, and signature of the witness. The medication destruction must be recorded in the patient's clinical record;
 - G. procedures to address hospice patient medications brought from home; and

- H. a statement that only authorized personnel are permitted to have access to keys to locked drug compartments.
- Subp. 4. **Over-the-counter drugs.** An over-the-counter drug may be retained in general stock supply and must be kept in the original labeled container.
- Subp. 5. **Legend drugs.** A legend drug must be kept in its original container bearing the original prescription label with legible information stating the prescription number, name of drug, strength and quantity of drug, expiration date of a time-dated drug, directions for use, patient's name, prescriber's name, date of issue, and the name and address of the licensed pharmacy that issued the medication.
- Subp. 6. **Medication samples.** A sample of medication provided to a hospice patient by an authorized prescriber may be used by the patient and must be identified with the patient's name and kept in its original container bearing the original label with legible directions for use. If assistance with self-administration of medication or medication administration is provided, a hospice patient's plan of care must address the use of a medication sample.
- Subp. 7. **Prohibitions.** No legend drug supply for one hospice patient may be used or saved for the use of another patient.
- Subp. 8. **Fines.** For each violation of the following subparts, the stated fine shall be assessed:
 - A. subpart 2, \$300;
 - B. subpart 3, \$300;
 - C. subpart 4, \$300;
 - D. subpart 5, \$300;
 - E. subpart 6, \$300; and
 - F. subpart 7, \$300.

Statutory Authority: MS s 144A.752

History: 28 SR 1639

Published Electronically: October 11, 2007