

Controlled Drugs - Safe Custody Policy

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Related documents:	<i>Health and Safety Policy</i>

Approval History

Version	Reviewed by	Amendment history	Approved by	Date
1.0	Nicola Walker Health and Safety	First Draft (old format)	Health and Safety Committee Executive Board	24 June 2016 19 July 2016
2.0	Nicola Walker Health and Safety	Reviewed (2018 format – no other changes required)	Health and Safety Committee	19 October 2018

1	Introduction
1.1	Purpose
1.1.1	<p>The University has a duty to assess the risks posed to the health and safety of its employees and to anyone else who may be affected by its activities. Significant risks identified by this process have to be reduced to a tolerable level.</p> <p>This Policy sets out the arrangements for the purpose of securing the safe appropriate and effective management of Controlled Drugs by the University of Surrey, in accordance with statutory requirements.</p>
1.2	Scope
1.2.1	To govern the manner in which Controlled Drugs are requisitioned, stored, handled, recorded and checked.
1.3	Definitions
1.3.1	<p>Controlled drug is any drug in Schedule 1,2,3,4, or 5 of the Misuse of Drugs Regulations 2001. The legislation regarding Controlled Drugs is subject to change and current information regarding Controlled Drugs can be found at www.dh.gov.uk</p> <p>Controlled medicines are classified (by law) based on their benefit when used in medical treatment and their harm if misused.</p> <p>Schedule 1 has the highest level of control, but drugs in this group are virtually never used as medicines. Schedule 5 has a much lower level of control.</p>
1.3.2	Standard Operating Procedure (SOP) is a step by step description of the way things are done in a particular setting. Written SOP's help to ensure the quality and consistency of the management of Controlled Drugs in each registered area.
1.3.3	Occupational Health, Safety and Environment is defined as “the measures and systems aimed at preventing harm and ill health to those at work, whilst protecting the environment from damage that could result from work practices.”
1.3.4	<p>Competent person</p> <p>A competent person has the skills, knowledge, attitude, training and experience to undertake the role effectively.</p>
1.3.5	<p>Training and Briefing</p> <p>Training is equipping staff, students (and others where the University has a duty-of-care) with relevant skills to deal appropriately with a given Health and Safety situation.</p> <p>Briefing is informing such persons of relevant knowledge in relation to Health and Safety.</p> <p>Training and briefing will be made available in a range of formats according to the needs of the trainee and different groups of staff, students and others.</p>
1.3.6	<p>Accessibility</p> <p>The duty to make reasonable adjustments, as far as possible, to ensure that all staff and students (and others where the University has a duty-of-care) with a disability have equal access to everything they need to do a job or studies as those persons without a disability.</p>
2	Policy
2.1	Principles
2.1.1	The University will comply with the Misuse of Drugs (Storage) Regulations 1973, Misuse of Drugs Regulation’s 2001 (as amended) and the Controlled Drug Regulations 2015 in addition to the terms and conditions of Home Office Controlled drug licences issued to Faculties to ensure all Controlled Drugs are correctly purchased stored, used and disposed of and adequate records kept.

2.1.2	<p>Policy Procedures</p> <p>Refer to relevant Standard Operating Procedures (SOPs) on the Health and Safety Intranet Site (Hazardous Substances section)</p>
2.2	<p>Roles and Responsibilities</p>
2.2.1	<p>Director of Health & Safety Responsibility for auditing, monitoring, investigating incidents, information advice and training.</p>
2.2.2	<p>Dean of Faculty</p> <p>Controlled Drug licences are issued by the Home Office for specific area(s). They do not cover the whole University. The Dean of the Faculty is the most senior manager of those areas and as such identified as the ‘User’. The User is responsible for overall compliance with the requirements of the Misuse of Drugs, Veterinary Medicines, Controlled Drug Regulations and the Environmental Permitting 2010 Regulations.</p> <p>Deans of Faculties holding controlled drugs will take whatever actions are necessary to ensure that all staff act in accordance with specific conditions of the Home Office Licence and the procedures in place to comply with the Controlled Drug, Misuse of Drugs and Environmental Permitting Regulations.</p> <p>In addition the Deans of the Faculty, where Controlled Drugs are used, are responsible for ensuring that the departmental staff under their management control, including Principle Investigators, researchers, technicians and academic visitors, who use Controlled Drugs or produce Controlled Drug waste:</p> <ul style="list-style-type: none"> • Comply with conditions specified with any Faculty held Controlled Drugs Licence • Ensure all workers under their management control or supervision comply with the requirements of the relevant regulations listed in <u>Appendix 1</u>
2.2.3	<p>Controlled Drug Compliance Officer</p> <p>Appointed by the Dean of the Faculty and responsible for legal compliance and regulatory affairs in respect of the area to be licensed by the Home Office to hold Controlled Drugs. The compliance officer will;</p> <ul style="list-style-type: none"> • Ensure there is full compliance with the statutory requirements of the Misuse of Drugs Act 1971 and Misuse of Drugs Regulations 2001. • Ensure the conditions stipulated on the licence are complied with. • Ensure Standard Operating Procedures are in place and available on request by the Home Office. • Undertake independent audits and stock control checks on Faculty held Controlled Drugs. • Identify non-compliance to the Dean of the Faculty.
2.2.4	<p>Supervisory Staff</p> <p>Academic, technical and experimental staff who have supervisory responsibilities or exercise control over areas, activities or Controlled Drug processes involving either employees, visitors or students, are accountable to the Dean of Faculty or Head of Departments for the enforcement of statutory Health and Safety measures. In particular, supervisors must;</p> <p>Ensure that area Standard Operating Procedures are disseminated to all users of controlled drugs. The Standard Operating Procedures should cover the following matters:</p> <ul style="list-style-type: none"> • Ordering, transport and receipt • Who has access to controlled drugs • Where controlled drugs are stored

	<ul style="list-style-type: none"> • Security in relation to the storage and transportation of Controlled Drugs • Record keeping, management of errors and incidents including: <ul style="list-style-type: none"> ○ Maintaining relevant Controlled Drug registers under the Misuse of Drugs Legislation ○ Who should be alerted should complications arise ○ Destruction and disposal of Controlled Drugs. <p>Ensure that appropriate approvals and permissions (e.g. ethics, licensing, permissions or sponsorship) are in place before research commences and follow the Code of Practice for Research.</p> <p>Seek to ensure that an appropriate risk assessment is undertaken before work is undertaken or started (including undergraduate and postgraduate project work)</p> <p>Staff and students have sufficient instruction and information and are adequately trained and supervised.</p> <p>Cooperate with responsible bodies (i.e. Controlled Drug Liaison Officer) when they carry out their inspections and provide relevant documentation that may be requested.</p>
2.2.5	<p>Staff</p> <p>Academic, Technical and Experimental, Visiting and or Temporary staff who undertake activities with Controlled Drugs but do not have supervisory responsibilities must take reasonable steps to ensure their own health and safety and that of others who may be affected by the things they do or fail to do. In particular, they shall:</p> <ul style="list-style-type: none"> • Comply with the Standard Operating Procedures of their area concerning the safe custody of Controlled Drugs. • Report unsafe conditions, activities, accidents, near misses and property damage to loss to their supervisors. • Ensure all uses of Controlled Drugs are recorded as required by law and by the area SOP.
2.2.6	<p>Postgraduate Students</p> <p>Postgraduate students who undertake activities with Controlled Drugs must take reasonable steps to ensure their own health and safety and that of others who may be affected by the things they do or fail to do. In particular, they shall:</p> <ul style="list-style-type: none"> • Comply with the Standard Operating Procedures of their area concerning the safe custody of Controlled Drugs. • Report unsafe conditions, activities, accidents, near misses and property damage to loss to their supervisors. • Ensure all uses of Controlled Drugs are recorded as required by law and by the area Standard Operating Procedure.
2.27	<p>Authorised Witness for the Destruction of Controlled Drugs</p> <p>It is a legal requirement for out of date or unusable Controlled Drugs to be destroyed by a person authorised by the Home Office, to witness the destruction of controlled drugs.</p> <p>Any person authorised to witness the destruction of Controlled Drugs should be;</p> <p>either a or b in addition to c, and d</p> <ul style="list-style-type: none"> a) Subject to a professional code of ethics, or b) Be subject of a satisfactory Disclosure and Barring Service (DBS) see <u>Appendix 2</u> c) Have received appropriate training. d) Be independent of day to day controlled drug use or management in the premises that the destruction is carried out.

3	Governance Requirements
3.1	Implementation / Communication Plan
3.1.1	<p>The policy is communicated to all staff as part of the University Policy website – and through specific, relevant training.</p> <p>Chemical Safety Forum will be informed and relevant details disseminated through line management.</p> <p>Relevant information is also published on the University Health and Safety intranet site and Health and Safety Handbook, as appropriate.</p>
3.2	Exceptions to this Policy
3.2.1	There are no exceptions
3.3	Review and Change Requests
3.3.1	<p>This Policy is regularly reviewed by the Director of Health and Safety; and the Chemical Safety Forum.</p> <ul style="list-style-type: none"> ➤ Minor changes will be reviewed and agreed through Chemical Safety Forum, and approved by Health and Safety Committee; ➤ Major changes will be reviewed through Chemical Safety Forum, and approved by Health and Safety Committee, and if required, submitted to Executive Board, for noting or approval. <p>Review will generally be every three years or in line with any relevant changes to Legislation, if sooner. Health and Safety Consultative Committee will be consulted during the review process, as required.</p>
3.5	Legislative context
3.5.1	This Policy complies with the requirements of the Health and Safety at Work Act 1974, and other associated Legislation listed in <u>Appendix 1</u> :
3.5.2	<p><u>Health and Safety Policy statement</u></p> <p>This policy sets out to comply with the required ‘duty of care’ placed upon the University. Under Health and Safety Law a ‘duty of care’ is generated between organisations and individuals when carrying out activities that could foreseeably cause harm.</p> <p>The primary duty of care is owed through the employer-employee relationship in which the employer owes a duty of care to ensure that work activities that could result in harm to the employee are assessed and controlled. That duty of care is put into practice by the line management responsibilities as set out in the hierarchy of the organisation.</p> <p>This duty of care cannot be delegated away; instead the act of delegation must be accompanied by a realistic and workable system of monitoring or supervision to ensure that the delegated task has been adequately implemented (i.e. the responsibility is not met by giving directions; it is met when those directions have been confirmed as carried out). The result is a cascade of delegated accountability that runs through the organisation via the line management network, accompanied by a system of monitoring, supervision and feedback.</p> <p>The duty of care extends to assurance that services provided by others (be they another department of the University or contractors) are undertaken safely. The level of assurance required should be commensurate with the risk of the activity.</p> <p>In addition, anyone carrying out an activity owes a duty of care to anyone who may be put at risk by the activity, such as students, staff and visitors.</p>

3.6	Stakeholder Statements
3.6.1	<p>Equality: Consideration is given to the protected characteristics of all people groups identified in the Equality Act 2010. The protected characteristics are gender, age, race, disability, sexual orientation, religion/belief, pregnancy and maternity, and marriage/civil partnership.</p> <p>The University recognises the need for specific measures to ensure the health and safety of each of these groups. This policy and all other associated Health and Safety related policies take this into account.</p>
3.6.2	<p>Health & Safety: This Policy forms part of the overarching statement on health and safety for the University.</p>
3.6.3	<p>Executive Board, Health and Safety Committee, Chemical Safety Forum and Faculty Health and Safety Committees (as appropriate), Security Department, and Health and Safety Consultative Committee</p> <p>Changes to this policy will be consulted, reviewed and approved at the appropriate level; in line with policy guidance.</p>

Appendix 1

List of Associated Legislation and Regulations

In addition to the Health and Safety at Work Act, 1974 – the 'Controlled Drugs - Safe Custody policy' will comply with the requirements of the following:

- Misuse of Drugs Act 1971
- Misuse of Drugs (Storage) Regulations 1973
- Misuse of Drugs Regulations 2001 (as amended)
- Misuse of Drugs and Misuse of Drugs(Safe Storage) (amendment) Regulations 2007
- Misuse of Drugs (Amendment) (No.2) Regulations 2015
- Veterinary Medicines Regulations 2013
- Controlled Drugs Regulations 2015
- Environmental Permitting (England and Wales) Regulations 2010

Appendix 2

Enhanced Disclosure – Security Checks

Faculties, Departments or areas required to apply for a Schedule 1 Controlled Drug Licence must ensure each individual person named on the application for the Licence undertaken an Enhanced Disclosure and Barring Service (DBS) enhanced disclosure BEFORE application is submitted.

DBS checks

The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 enables DFLU to ask questions about spent convictions for the purpose of assessing applicant's suitability to obtain a licence.

DFLU has contracted Security Watchdog (part of CAPITA PLC) to provide a scheme to enable DFLU licence applicants to obtain DBS enhanced disclosures. A DBS disclosure guidebook is available from the Security watchdog website.

To apply for a DBS enhanced disclosure contact Security Watchdog on: +44 (0) 114 241 3280 (Monday to Friday 9:00am to 5:30pm). During the call all aspects of the disclosure application process will be explained to you.

The contents of the DBS enhanced disclosures for all applicants named on the application form will also be taken into account in the decision as to whether or not to issue a licence.

Compliance site visits will only be arranged with applicants once the Home Office has received confirmation that everyone named on the application has undergone a DBS check.