

Controlled Drug – Safe Custody Policy

Originator name:	Clive Parkinson, Director of Health and Safety
Section / Dept:	Health and Safety Department
Implementation date:	01 July 2016
Date of next review:	July 2018
Related policies:	Health and Safety Policy; Hazardous Substances Policy
Policy history:	New

Version History

Version	Author	Revisions Made	Date
1	Nicola Walker	First Draft	30 May 2016

Approval History

Equality Analysis

Version	Reviewed by	Comments	Date
1	Equality & Diversity Jo McCarthy-Holland	No negative equality impact identified	20 June 2016

Committee Sign Off

Version	Committee Name	Date of Sign Off
1	Health and Safety Committee	24 June 2016
	Executive Board Committee	

1	Introduction
1.1	Purpose
1.1.1	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.
1.2	Scope
1.2.1	To govern the manner in which Controlled Drugs are requisitioned, stored, handled, recorded and checked.
1.3	Equality Analysis
1.3.1	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. 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.
1.4	Definitions
1.4.1	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 Controlled medicines are classified (by law) based on their benefit when used in medical treatment and their harm if misused. 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.
1.4.2	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.
1.4.3	Competence, Training and Briefing Competence is based upon training and is equipping staff, students (and others where the University has a duty-of-care) with relevant skills and knowledge to deal appropriately with a given health and safety situation. Briefing is informing such persons of relevant knowledge in relation to health and safety. 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.
1.4.4	Accessibility 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.
1.5	Legislative context
1.5.1	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
1.6	Health & Safety Implications
1.6.1	This policy is part of the Health and Safety Policy
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.
2.2	Procedures
2.2.1	Refer to relevant Standard Operating Procedures (SOPs).
3	Governance Requirements
3.1	Responsibility
3.1.1	Director of Health & Safety Responsibility for auditing, monitoring, investigating incidents, information advice and training.
3.1.2	Dean of Faculty 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. 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. 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: <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; <ul style="list-style-type: none"> ○ Misuse of Drugs (Storage) Regulations 1973 ○ Misuse of Drugs Regulations 2001 (as amended)

	<ul style="list-style-type: none"> ○ Misuse of Drugs and Misuse of Drugs (Safe Custody) (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
3.1.3	<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 licenced by the Home Office to hold Controlled Drugs.</p> <p>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.
3.1.4	<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 • 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, licencing, 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) 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>

3.1.5	<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 tor loss to their supervisors. • Ensure all uses of Controlled Drugs are recorded as required by law and by the area SOP.
3.1.6	<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 tor loss to their supervisors. • Ensure all uses of Controlled Drugs are recorded as required by law and by the area Standard Operating Procedure.
3.1.7	<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)^{Appendix 1} 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.
<p>3.2 Implementation / Communication Plan</p>	
	<p>The Policy will be posted on the Policy Website and disseminated by Leaders Alert to the relevant Faculty Staff, students and other relevant persons</p>
<p>3.3 Exceptions to this Policy</p>	
	<p>None</p>
<p>3.4 Supporting documentation</p>	
3.4.1	<p>Controlled Drugs Standard Operating Procedures</p>
3.4.2	<p>Health and Safety Policy; Hazardous Substance Policy.</p>

Appendix 1

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.

Equality Analysis Template

for all University Policies

Organisational Sign Off by Equality and Diversity Team:	NAME OF POLICY: <u>Controlled Drug Policy</u>
	<input checked="" type="checkbox"/> Low Equality Impact (Minor input to Policy to reflect equality considerations)*
	<input type="checkbox"/> Medium to High Equality Impact (Equality Analysis template completed)
	<input checked="" type="checkbox"/> Sign off received
	Signed off by: <u>Jo McCarthy-Holland</u>
Position: <u>Equality Adviser</u>	
Date: <u>20/6/16</u>	

Note: This Template must be used in conjunction with the associated Equality Analysis Guidance Notes, which can be accessed from the [Equality and Diversity Website](#)