

SA Health

Policy

Staff Access to Medicines for Personal Use

Version 2.0

Approval date: 08 May 2024

PDS Reference No: D0327



Government
of South Australia

SA Health

1. Name of Policy

Staff Access to Medicines for Personal Use

2. Policy statement

This policy provides the mandatory requirements for SA Health employees regarding staff access to medicines in the workplace.

3. Applicability

This policy applies to all employees and contracted staff of SA Health; that is all employees including consultants, and students of the Department for Health and Wellbeing (DHW), Local Health Networks (LHNs) including state-wide services aligned with those Networks and SA Ambulance Service (SAAS).

4. Policy principles

SA Health's approach to staff access to medicines for personal use is underpinned by the following principles:

- > We will ensure appropriate governance to support safe, equitable, quality, and cost-effective use of medicines.
- > We will ensure that medicines are only accessed by staff in accordance with legislation, and as required for their duties.
- > We will ensure appropriate governance of medicines to minimise any potential financial risk to SA Health.
- > We act in the public interest.

5. Policy requirements

Staff access to medicines

In the ordinary course of their profession, scope of practice and defined role requirements, staff access to medicines must:

- > Be in accordance with legal requirements and scope of their roles, for the sole purpose of appropriate medicines management (such as procurement and distribution), and patient treatment.
- > Outside the conditions of their defined role requirements and/or professional duties, be considered unauthorised access and must not occur (refer to [unauthorised access to medicines](#)).

Staff access to medicines from hospital pharmacies for personal use

Hospital prescriptions

- > Hospital or health service prescriptions must not be written for personal use or for use or supply to friends or family members when unrelated to a consultation as a registered patient.
- > All staff must be permitted to present a prescription written on locally approved stationery to the hospital or health service's Pharmacy Department for dispensing when:
 - They are a registered public patient of the hospital or health service and have a hospital or health service Medical Record Number (or equivalent patient registration number)

- The prescription is provided as a result of consultation through either an admission, outpatient clinic or the Emergency Department
- Staff must pay the relevant patient co-payment for each drug dispensed according to [SA Pharmacy Patient Charges and Business Rules Operating Procedure](#), or
- Alternatively, the hospital prescription may be dispensed by a community pharmacy.
 - This includes any staff who develop an injury, illness or condition requiring treatment while at work and are provided a hospital prescription as per local procedures (see [new illness or injury at work](#)).

Other SA Health Hospitals prescriptions

- > The criteria for the [SA Pharmacy Patient Charges and Business Rules Operating Procedure](#) must be met for a prescription from another public hospital or health service to be dispensed to ensure optimal patient care and continuity of medication supply.

External prescriptions (community)

- > Only Pharmaceutical Benefits Scheme (PBS) prescriptions written on hospital stationery must be approved for dispensing at a public hospital as per the [National Health Act 1953](#), unless the prescription meets the exemption criteria outlined in the [SA Pharmacy Patient Charges and Business Rules Operating Procedure](#).

Staff access to medicines required for personal use while at work

Existing medical conditions

Staff with existing medical conditions that require them to take medicines while at work (including prescription, pharmacy, and over-the-counter medicines) must:

- > Ensure they have arrangements in place to access their own supply of medicines for their personal use as necessary.
- > Store their medicines securely at the workplace or provide to (as relevant) an authorised first aid officer for administration in an emergency.
- > Ensure the medicines are appropriately labelled and packaged according to legal requirements.

New illness or injury at work

- > LHNs and state-wide service Hospitals and health services must consider having procedures in place for the provision of medicines to SA Health employees in emergency situations or where an employee develops an injury, illness or condition requiring treatment while at work.
- > Staff who develop an injury, illness or condition requiring treatment while at work must follow the LHNs or health service procedure according to the [First Aid Management Guideline](#).

First aid Kits

LHNs and state-wide services must:

- > Consider the inclusion of selected medicines in first aid kits as provided in the [Model Code of Practice: First aid in the workplace](#) and [First Aid Management Guideline](#).
- > Ensure medicines, including analgesics such as paracetamol and aspirin, are not included in first aid kits due to their potential to cause adverse health effects in some people including pregnant women, asthmatics, and people with other medical conditions.
- > Consider including selected medicines, such as an asthma-relieving inhaler and a spacer to treat asthma attacks and adrenaline (epinephrine) auto-injector for the treatment of anaphylaxis or severe allergies.

Unauthorised access to medicines

All staff must:

- > While at work, take reasonable care to ensure their actions or omissions do not adversely affect the health and safety of other persons ([Work Health and Safety Act 2012](#), S28(b))
- > Not be under the influence of alcohol, psychoactive drug(s) or other medicines ([Worker Use of Alcohol and Other Drugs Policy](#)) while at work, which could impair or adversely affect their ability to provide reasonable care and skill in the practice of their role.
- > Be responsible, in accordance with their duty of care to patients, whilst considering confidentiality and rights of others, raise concerns with their manager or other local officers as appropriate when noticing or suspecting unauthorised access of medicines, impairment of cognition or performance of another member of staff.

LHNs and state-wide services must:

- > Ensure health practitioners, employers and education providers, as mandated by law, report to the Australian Health Practitioner Regulation Agency (AHPRA) any notifiable conduct relating to a registered health practitioner or a student an impairment that may place the public at substantial risk of harm.
 - Failure to report notifiable conduct may result in disciplinary action by the relevant National Board.
- > Undertake any other reporting stipulated in the [Worker Use of Alcohol and Other Drugs Policy](#).

Drug abuse, diversion or misuse by staff

- > Staff must not misuse, divert or access without authority LHNs and state-wide service medicines for their own purposes ([Appendix 1](#)).
- > A report must be made in the Safety Learning System (SLS) when the misuse, diversion or abuse of medicines occurs by staff
 - Refer to [Patients' Own Medications Policy](#).

Breaches

LHNs and state-wide services must:

- > Ensure, where it is suspected a staff member has breached any of the conditions of this policy, the suspected breach is reported according to the relevant LHN or health service local procedure.
- > Ensure all health practitioners, employers, and education providers fulfil their mandatory reporting responsibilities and report under the [Health Practitioner Regulation National Law \(SA\) Act 2010](#).
- > Ensure any investigation and management of potential breaches to this policy is done in accordance with the provisions described in the [Worker Use of Alcohol and Other Drugs Policy](#) or the [Public Sector Act 2009](#), whichever is applicable.
- > Report any unaccounted loss or suspected theft of medicines or substances that are subject to misuse and possible diversion, or a quantity of medicines or substances that cannot be reasonably accounted for, in accordance with the [Controlled Substances Act 1984](#).
 - For further information consult the [Theft and Loss of Medications from health facilities and Licence or Permit Holders](#).

6. Mandatory related documents

The following documents must be complied with under this Policy, to the extent that they are relevant:

- > [Controlled Substances Act 1984](#)
- > [Health Practitioner Regulation National Law \(SA\) Act 2010](#)
- > [Model Code of Practice: First aid in the workplace.](#)
- > [Patients' Own Medications Policy](#)
- > [Prescription Stationery Management Policy](#)
- > [Public Sector Act 2009](#)
- > [Theft and Loss of Medications from Health Facilities and Licence or Permit Holders](#)
- > [Therapeutic Goods Act 1989](#)
- > [Work Health and Safety Act 2012](#)
- > [Worker Use of Alcohol and Other Drugs Policy](#)

7. Supporting information

- > [Code of Ethics](#)
- > [First Aid Management Guideline](#)
- > [SA Pharmacy Patient Charges and Business Rules Operating Procedure](#)
- > [Safety, Wellbeing and Injury Management](#)
- > [SA Health \(Health Care Act\) Human Resources Manual](#)
- > [Standing Medication Order \(SMO\) Clinical Guideline](#)

8. Definitions

- > **Diversión:** means the transfer of legally prescribed drugs from the person for whom it was prescribed to another/others for any illicit use (including but not limited to misuse or trafficking).
- > **Medicine:** means a substance used for therapeutic purposes. This includes all scheduled and unscheduled medicines (such as prescription, pharmacy and over-the counter medicines) and may also be known as a 'drug' or 'medication'.
- > **Misuse:** means the use of a drug for purposes that are not consistent with the legal or clinically intended purpose. This may include unsanctioned overuse, non-medical use of prescription medicines and inappropriate use (such as injection of oral medication).
- > **Patients' own medicines (POMs):** means medicines patients bring into the hospital at admission, or that is brought in from an external source at a later point during their stay in hospital. These are the medicines that patients have been taking prior to their hospital/health service visit and may include prescription medicines, over-the-counter (OTC) medicines and complementary medicines.
- > **Statewide services:** means Statewide Clinical Support Services, Prison Health, SA Dental Service, BreastScreen SA and any other state-wide services that fall under the governance of the Local Health Networks.

9. Compliance

This policy is binding on those to whom it applies or relates. Implementation at a local level may be subject to audit/assessment. The Domain Custodian must work towards the establishment of systems which demonstrate compliance with this policy, in accordance with the requirements of the [Risk Management, Integrated Compliance and Internal Audit Policy](#).

Any instance of non-compliance with this policy must be reported to the Domain Custodian for the Clinical Governance, Safety and Quality Policy Domain and the Domain Custodian for the Risk, Compliance and Audit Policy Domain.

10. Document ownership

Policy owner: Domain Custodian for the Clinical Governance, Safety and Quality Policy Domain

Title: Staff Access to Medicines for Personal Use Policy

Objective reference number: A885251

Review date: 30/06/2028

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11. Document history

Version	Date approved	Approved by	Amendment notes
2.0	08/05/2024	Deputy Chief Executive, Clinical System Support & Improvement	Transfer to new Policy Framework template.
1.1	30/01/2019	Deputy Chief Executive	Formally reviewed in line with 1-5 year scheduled timeline and changed to new policy template.
1.0	01/09/2013	Portfolio Executive	Original Portfolio Executive approved version.

12. Appendices

1. Possible Diversion of Medicines Mandatory Instruction

Appendix 1: Possible Diversion of Medicines Mandatory Instruction

The following Instruction must be complied with to meet the requirements of this policy.

All SA Health staff must be responsible for medicines in their charge and must be alert to any possible diversion of medicines including:

- > Burglary/theft from ward stock or pharmacy storage areas
- > Pretend loss or breakage
- > Falsification of records
- > Substitution of a drug with other ampoules, tablets, or powders
- > Drug dilution or removal of doses
- > Administered partial doses to patients
- > Forgery of prescriptions and supply orders
- > Interception from pharmacy couriers, and
- > Accessing medicine from returns or waste bins from pharmacy.

When unauthorised access, misuse or diversion of LHNs medicines or patients' own medicines by staff for illicit purposes occurs SA Health staff must:

- > File a report in the SA Health Safety Learning System (SLS)
- > Undertake appropriate disciplinary action, and
- > File SA Police notification to enable investigation under the [Controlled Substances Act 1984](#) and/or further legal action as appropriate.