

## Purpose of this procedure:

To ensure that medicines are transported safely and securely.

## The Procedure:

### **1.0 Maintaining security and quality.**

- 1.1 All medicines must be transported in sealed tamper evident containers or packages.
- 1.2 All containers and packages must be clearly labelled with the final destination.
- 1.3 A record must be kept at each step where a medicine changes hands during its delivery from the place of issue to the final destination.
- 1.4 The person responsible for the medicine at each point of the transportation chain must be identifiable.
- 1.5 Containers and packages must be kept securely or under surveillance whilst awaiting collection or in transit between the place of issue and the final destination.
- 1.6 Containers and packages awaiting collection or in transit must be kept in the appropriate storage conditions to maintain the quality of their contents. This includes maintaining the cold chain where required.
- 1.7 Responsibility for security and maintenance of appropriate storage conditions remains with those transporting the sealed container until delivery is made, and documentation is signed for receipt.
- 1.8 Persons issuing medicines must advise of any health and safety risks and special storage conditions associated with the transport of a medicine at the time of collection. Specific arrangements must be in place for the transportation of cytotoxic medicines, medical gases, intrathecal injections, radiopharmaceuticals, and controlled drugs. Refer to *NHS Lothian Guidelines for the Safe Use of Systemic Anti-Cancer Therapies (SACT)* and *NHS Lothian Safe Use of Medicines Procedures for: Cytotoxic chemotherapy, Medical gases, Intrathecal injections, Radiopharmaceuticals and Controlled drugs*.
- 1.9 Managers of staff groups responsible for transporting medicines are responsible for ensuring staff are trained to understand the need for security and relevant procedures, including action to be taken in the event of physical threat. NHS Lothian policy should be followed.

## **2.0 Maintaining the cold chain**

- 2.1 Sensitivity to changes in temperature varies depending on the medicine. The manufacturers' literature must be consulted, and other expert advice must be sought if medicines that require to be stored at temperatures out with normal ambient temperatures, that is in a refrigerator or freezer, need to be transported.
- 2.2 If medicines that are sensitive to temperature changes are to be transported on a regular basis, the transport system must be validated and monitored using a continuous temperature recording device for the duration of the transport time.
- 2.3 If medicines that are sensitive to temperature changes are to be transported on an occasional basis, the following good practice should be followed.
  - The manufacturers' literature should be consulted, and the medicine should be transported in a manner to maintain the medicine within the recommended storage temperature.
  - Cool boxes or expanded polystyrene boxes or other suitable commercial transport containers should be used where appropriate.
  - If cool packs are used, they must be conditioned before use at an appropriate temperature (i.e., kept in a refrigerator or freezer for a suitable period, usually in accordance with manufacturer's instructions) and in use they should be evenly distributed in the transport container. Direct contact with the medicines must be avoided by using layers of card between the medicines and the packs. Using frozen or partially frozen cool packs should be avoided unless the medicine is a frozen product. This reduces the risk of the medicine freezing.
  - Ask a member of pharmacy staff for advice if required.
- 2.4 Patients should be provided with advice on medicines with specific storage requirements and that these medicines should be placed in the appropriate storage conditions, e.g., refrigerator or freezer as soon as possible.

## **3.0 Delivery of medicines by NHS Lothian staff or couriers to patient's homes**

- 3.1 This procedure does not include recommendations for registered clinical staff who routinely deliver medicines to patients, e.g., Community psychiatric nurses.
- 3.2 Every effort should be made to ensure the patient's medicines are ready to supply to the patient on discharge.
- 3.3 Medicines must only be delivered in exceptional circumstances when the patient or the patient's representative cannot collect them, and there is no suitable alternative means of delivery.
- 3.4 Couriers may only be used to transport medicines from or between hospitals if hospital transport is not available.
- 3.5 Couriers used by hospitals must always be ordered via approved NHS Lothian processes.

- 3.6 Only couriers able to produce identification may be used to transport medicines.
- 3.7 The courier must sign for collection of medicines to be transported.
- 3.8 Couriers must not carry passengers while transporting medicines unless a pharmacy staff member is required to accompany the medicine delivery.
- 3.9 A risk assessment must be made on how the medicines are to be delivered and that the patient or carer can receive the delivery, e.g., mobility and cognitive impairment should be considered. There must also be an assessment of potential missed doses before the decision is made to discharge the patient without their medicines.
- 3.10 The address, including the postcode that the medicine is to be delivered to and a contact telephone number must be confirmed and documented in the patient's notes.
- 3.11 Staff should place the medicines in a sealed bag so it would be obvious that the bag had been opened prior to delivery to the patient.
- 3.12 Staff must contact the patient or carer prior to ordering a courier or sending a member of staff with the medicines to ensure that they are in and able to answer the door. The patient should be advised that the medicines will be delivered in a sealed bag.
- 3.13 The patient must be asked to telephone the ward or department if the medicines are not delivered.
- 3.14 If the medicine has failed to arrive then the courier must be contacted to investigate what the delay is and obtain an estimate of the time the medicine will be delivered.
- 3.15 There must be a process in place for the courier to report that they were unable to deliver the medicine, e.g., there is no response at the address.

#### **4.0 Posting medicines**

- 4.1 Medicines must only be posted in exceptional circumstances when the patient or the patient's representative cannot collect them, and there is no suitable alternative means of delivery. An exception to this is for delivery of bowel preparation taken prior to endoscopy, which are routinely posted.
- 4.2 If medicines need to be posted, they must be packed, transported, and delivered in such a way that their integrity, quality, and effectiveness are preserved.
- 4.3 Patients' medicines may provide confidential information about their condition and treatment, and this must be considered before posting medicines.
- 4.4 Some medicines, e.g., cytotoxic chemotherapy, are classified as prohibited or restricted material by the Postal Service and must therefore not be sent by routine post. Special arrangements are required, and the carrier must be made aware of the hazardous contents. Storage, handling, and packaging requirements must be agreed. Royal Mail International Headquarters must be contacted for further information.

4.5 Where medicines are posted, a record must be kept of the date, name and address of the recipient, contents of the package, and person responsible for posting.

4.6 Medicines must always be posted using recorded delivery or registered mail.

### **5.0 Return of medicines to the hospital pharmacy**

5.1 Medicines must not be returned to the pharmacy in the pharmacy delivery box unless it has a tamper evident seal and is agreed with a member of the pharmacy department.

5.2 Refer to NHS Lothian Medicines Policy procedure, *Return and disposal in hospital*.

5.3 Controlled drugs, cytotoxic medicines, intrathecal injections, radiopharmaceuticals, or items requiring refrigeration or freezer storage must not be returned in the pharmacy delivery box at any time. Contact the pharmacy department for advice on returning these medicines.

### **6.0 Transfer of medicines in or between hospitals**

6.1 When a patient is transferred to another clinical area within the same hospital site, or a different hospital site then the responsibility for the safety and security of the medicines is also transferred. Refer to the NHS Lothian Safe Use of Medicines Procedure, *Medicines on transfer within and between NHS Lothian healthcare premises* (document in development).

6.2 In areas where medicines or medicine kits are issued from hospital wards and departments to personnel, for example midwives, community nurses, paramedics, the charge nurse, or equivalent registered senior healthcare professional is responsible for ensuring that written records of issue and return are maintained.

6.3 If defective administration equipment, or a medical device, containing medicines must be removed from the clinical area for investigation, the person releasing the medicine must make a written record of the transfer. Records of any subsequent transfers, and of final disposal must be kept by the person releasing or destroying the medicine.

Associated materials/references:

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[Safe Use of Medicines – Policy Online \(nhslothian.scot\)](#)

[Controlled Drugs Procedures \(nhslothian.scot\)](#)

[Radiopharmaceuticals \(nhslothian.scot\)](#)

[The receipt of medicines on wards and clinical areas in hospitals](#)

[NHS Lothian Guidelines for the Safe Use of Systemic Anti-Cancer Therapies \(SACT\)](#)

**The following materials are in development, please refer to the current version in the [Safe Use of Medicines Procedure](#):**

- 14. *Issue of medicines for patients to take away from hospital*
- 15. *Return and disposal in hospital*
- 16. *Cytotoxic chemotherapy*
- 18. *Intrathecal injections*
- 28. *Medical gases*