

SAFE AND SECURE HANDLING OF MEDICINES

Section 8.2. Security

8.2.1. [Controlled Drug Cabinets](#)

8.2.2. [Controlled Drug Cabinet Keys](#)

8.2.3. [Storage and Management of Controlled Drugs in Wards and Departments](#)

8.2.4. [Missing Controlled Drugs Cabinet Keys](#)

8.2.4.1. [Initial Investigation](#)

8.2.4.2. [Ensuring security of the CD cabinet stock](#)

8.2.5. [Broken CD cabinet](#)

8.2.5.1. [Broken CD cabinet where stock can be accessed](#)

8.2.5.2. [Broken CD cabinet where stock cannot be accessed](#)

8.2.1. Controlled Drug Cabinets [\[Return to Section 8.2.\]](#)

The senior charge nurse/midwife/operating department practitioner (ODP) in overall charge of a ward/department/theatre is responsible for the safe and appropriate management of controlled drugs (CD's) in their designated clinical area. Overall legal responsibility cannot be delegated. The registered nurse /midwife/ODP in charge on each day/shift has delegated responsibility for control of access to the CD Cabinet.

The CD Cabinet must be kept locked at all times when not in use.

Controlled drugs in schedule 2 and certain controlled drugs in schedule 3 (Temazepam, Buprenorphine, Flunitrazepam and Diethylpropion) must be kept separate from other medicines, in a locked cabinet designated only for the storage of CDs. The locked cabinet must meet the regulatory requirement for the '[Safe Custody of Medicines](#)'. Any new cabinets purchased or installed for the purpose of storing CDs must conform to the British Standard reference BS2881.

The locked CD cabinet may be located within a locked cabinet used for storing other medicines. The CD cabinet should not be fitted to a studded or wooden wall; it must be fixed on a flat, solid (brick or block work) wall. There should be no direct access, for example, door or window to the exterior of the building and the CD cabinet should not be in an obvious location. The CD cabinet must also not be labelled.



Refer to [The Misuse of Drugs \(Safe Custody\) Regulations 1973](#) which specifies the minimum specifications for CD cabinets and safes for the storage of CDs.

8.2.2. Controlled Drug Cabinet Keys [\[Return to Section 8.2.\]](#)

The registered nurse/midwife/operating department practitioner (ODP) in charge of the ward/department/theatre on each day/shift is responsible for the safe custody of the CD cabinet keys at all times. The keys must be kept separate from the other ward drug keys. Control of the keys may be delegated to another suitably trained, registered healthcare professional e.g. a nurse or midwife.

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The keys should be returned to the registered nurse/midwife/ODP in charge immediately after use by another registered healthcare professional. If this is not practical, the registered nurse/midwife/ODP in charge must be fully aware of who has the CD key.

CD keys must be available in the ward/department/theatre at all times and must not be removed upon any circumstances.

The keys may be given, following an identity check, to a pharmacist, pharmacy technician or a member of the CD team for the purposes of stock checking. Upon completion of the check, the keys must be immediately returned to the registered nurse/midwife/ODP in charge.

It is good practice that the CD Cabinet should only be opened in the presence of 2 registered healthcare professionals.

When an area does not have 24 hour cover, or is routinely closed for a period, appropriate arrangements must be in place for storage of CD keys. The stock must be checked when the ward/department/theatre is closed, and again when it re-opens.

Each CD cabinet must have a spare key in case of loss or damage. Arrangements must be made by the senior charge nurse/midwife/ODP for this to be stored securely in a suitable location.

8.2.3. Storage and Management of Controlled Drugs in Wards and Departments [\[Return to Section 8.2.\]](#)

It is good practice that the CD Cabinet should be opened in the presence of two registered healthcare professionals.

The senior charge nurse/midwife/ODP of the ward/department/theatre is responsible for ensuring that CD stocks are appropriate and CD cabinets are kept in good order.

High strength CDs must only be kept where there is current patient need. All high strength CDs must be stored separately where possible, for example on a separate shelf or in a separate cabinet, to avoid any confusion and risk of incorrect administration. Wards/departments/theatres should only store CDs required.

There must be immediate access to Naloxone injection 400micrograms/mL.

Immediate release and prolonged release preparations, for example, Oxycodone (Shortec is immediate release and Longtec is prolonged release) should be stored on separate shelves, space permitting within the CD cabinet. Different concentrations of Methadone (including normal and sugar free) should be stored on separate shelves, space permitting within the CD cabinet.

Schedule 2 and 3 (that require secure storage) CDs ready for patient discharge, must be stored in the CD cabinet and segregated from ward stock. The patient's own CD register must be updated accordingly.

Patient's own CDs not requiring storage in the CD Cabinet may be kept in their patient's own drug (POD) locker.

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Examples of some CDs and their storage requirements (not an exhaustive list):

Controlled Drug	Schedule	Store in a CD Cabinet
Alfentanil	2	Yes
Buprenorphine	3	Yes
Codeine injection 60mg/ml	2	Yes
Dexamfetamine	2	Yes
Diamorphine	2	Yes
Fentanyl	2	Yes
Gabapentin	3	No
Hydromorphone	2	Yes
Ketamine	2	Yes
Lisdexamfetamine	2	Yes
Methadone	2	Yes
Methylphenidate	2	Yes
Midazolam	3	No
Morphine	2	Yes
Oxycodone	2	Yes
Pethidine	2	Yes
Pregabalin	3	No
Tapentadol	2	Yes
Temazepam	3	Yes
Tramadol	3	No

8.2.4. Missing Controlled Drugs Cabinet Keys [\[Return to Section 8.2.\]](#)

8.2.4.1. Initial Investigation [\[Return to Section 8.2.\]](#)

If it is suspected that the CD cabinet keys are missing, the nurse / midwife / ODP in charge must take appropriate steps to establish that the keys are missing and have not been misplaced or are in the possession of an off-duty member of staff. As a matter of urgency:

- Ask all staff on duty to check if they have keys on their person.
- Check the CD register(s) to see when the last issues were and contact staff involved to check if they have the keys.
- Contact all staff who have left the premises. If one of them has the key, they must return immediately.
- Conduct a thorough search, for example consideration should be given to checking areas such as linen trolleys.
- Ensure the CD cabinet is never left unsupervised until keys are located.

If the CD keys cannot be located the nurse/midwife/ODP in charge should inform the senior charge nurse/midwife/ODP and the pharmacist/pharmacy technician responsible for the area. In the out of hours period the on-call duty manager for the area/site should be informed.

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The spare key to the CD cabinet should be obtained and used to perform a full stock check to ensure no stock is missing.

If CD stock is needed urgently to ensure continuity of care the spare CD keys should be used.

8.2.4.2 Ensuring security of the CD cabinet stock [\[Return to Section 8.2.\]](#)

The CD cabinet should not be left unsupervised when CD keys are missing.

If the CD keys cannot be found within 24 hours, Estates should be contacted, using the fault line, to replace the locks on the cabinet. This includes in the out of hours period when the on-call service should be contacted.

Until Estates can attend to replace the CD cabinet lock, arrangements must be made to ensure the ongoing security of CDs within the area.

- CD cabinet stock should be relocated temporarily, for example:
 - To another locked cabinet within the ward/department or
 - To another ward/departments CD cabinet or
 - Returned temporarily to Pharmacy for safe storage during normal working hours (contact Pharmacy prior to relocation).

The location for storing is at the discretion of the senior charge nurse/midwife/ODP or senior member of staff on duty for the area/site in OOH period and will vary in different circumstances. As a minimum the CD cabinet stock must be stored in a locked receptacle/ cabinet. If the area is left unmanned overnight or at the weekend, during this period CDs should be relocated to another ward/departments CD cabinet or returned to Pharmacy.

- A [Datix](#) should be completed immediately, stating the details of the investigation, any actions taken and the location of the CD cabinet stock to make the CD team and CD Accountable Officer aware of what has happened.

Following investigation if there is evidence or a strong suspicion of criminality the senior charge nurse/midwife/ODP should give consideration to contacting Police Scotland. Further advice can be obtained from the CD team if required.

8.2.5 Broken CD cabinet [\[Return to Section 8.2.\]](#)

8.2.5.1 Broken CD cabinet where stock can be accessed [\[Return to Section 8.2.\]](#)

The above advice, in section 8.2.4, regarding security should be followed if the CD cabinet is broken, meaning that CD stock is no longer stored securely.

If the original CD key is broken the spare CD keys should be obtained. Estates should be contacted, via the fault line, during normal working hours, to replace the locks on the CD cabinet to ensure 2 sets of keys are available.

8.2.5.2 Broken CD cabinet where stock cannot be accessed [\[Return to Section 8.2.\]](#)

If the CD cabinet lock is broken or the CD cabinet is damaged in some other way that means it cannot be opened, Estates should be contacted, via the fault line, to report that an urgent repair is required. In the out of hours period the on-call service should be contacted.

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The nurse/midwife/ODP in charge should inform the senior charge nurse/midwife/ODP and the pharmacist/pharmacy technician responsible for the area. In the out of hours period the on-call duty manager for the area/site should be informed.

The senior charge nurse/midwife/ODP or the senior member of staff on duty for the area/site in the OOH period must make a decision about the maintenance of supplies to the affected clinical area. In the short term CDs could be obtained from a neighbouring ward/department/theatre if possible (see guidance in section 8.9).

If the issue cannot be resolved within a reasonable period of time by Estates, contact Pharmacy to arrange an emergency supply of CDs to ensure continuity of care for patients. On arrival, the supply of CDs should be stored securely, as per advice above in 8.2.4.2, and staff informed as to where these are being stored. A [Datix](#) should be completed immediately, stating what has happened, what action has been taken and if required the location of any new CD stock supplied from Pharmacy so that this information has been officially recorded.

[\[Return to Section 8.2.\]](#)

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