



VOLUME 9: PHARMACY SERVICES	Effective Date: 4/08
CHAPTER 3	Revision Date (s): 1/14
9.3 PHARMACY RESPONSIBILITIES, SCOPE OF SERVICE, AND SUPERVISION	Attachments: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

I. PROCEDURE OVERVIEW

California Department of Corrections and Rehabilitation (CDCR) shall provide pharmaceutical services to CDCR patient-inmates. Pharmaceutical services shall be available to provide patients with medically necessary prescribed medications according to state and federal regulations.

Each institution shall have a local Pharmacy and Therapeutics (P&T) Committee [may be named Pharmaceutical Care Committee (PCC)] to provide professional multidisciplinary oversight of the clinical aspects of pharmacy services and to implement policies and procedures and other therapeutic initiatives approved by the California Correctional Health Care Services (CCHCS) systemwide P&T Committee. Records shall be maintained in compliance with federal and state requirements.

II. PURPOSE

To define the scope of services, supervision, and clinical oversight of pharmacy services and to ensure that pharmacy services comply with the requirements of state and federal laws and regulations governing pharmacy practices.

III. PROCEDURE

A. Scope of Pharmacy Services

1. Pharmacies operating within CDCR institutions provide services to
 - patient-inmates of that institution who are housed as inpatients or outpatients;
 - patient-inmates leaving for transfer to a different institution, parole, or discharge; and
 - patient-inmates in community correctional facilities for which the institution is the hub facility.
2. Pharmacy staff procures, compounds, dispenses, distributes, stores, and disposes of pharmaceuticals in conformance with applicable state and federal regulations.
3. Pharmacy services shall, in collaboration with nursing, be responsible for the oversight of all non-pharmacy medication areas.
4. Pharmacy staff is responsible for providing cost-effective pharmacotherapy management, medication information, and surveillance programs as appropriate.
5. The professional actions of pharmacists that are intended to ensure safe and effective use of drugs and may affect patient outcomes shall be documented.

B. Supervision

1. A Pharmacist-in-Charge (PIC) who is a licensed pharmacist in the State of California and credentialed by CCHCS shall oversee all functions of the pharmacy staff at the institution.
2. The PIC shall have the sole responsibility for local administration of pharmacy services.
3. The PIC is immediately responsible to the Chief Executive Officer (CEO) and the Statewide Chief of Pharmacy Services.

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4. The PIC shall oversee and supervise all pharmacy activities in the institution including, but not limited to, storage, distribution, and control of all drugs for all service areas.
5. The PIC, an automatic member of the local P&T Committee, is responsible for the professional direction of clinical functions and decisions, implementation of CCHCS systemwide P&T Committee policies and procedures, the CCHCS systemwide Formulary, and other programs approved by the systemwide P&T Committee. The responsibilities of the P&T Committee are further described in the Inmate Medical Services Policies and Procedures, Volume 9, Chapter 4, CCHCS Systemwide Pharmacy and Therapeutics Committee.
6. The PIC participates in the development of appropriate health care policies and procedures relevant to pharmacy services such as the prescribing and administering of medication and attends appropriate in-service and continuing education activities. The PIC also participates in committees as necessary or as requested.

C. Pharmacy Services

Pharmacy services include, but are not limited to, the following:

1. Procurement, storage, distribution, and dispensing of pharmaceuticals in accordance with federal and state regulations;
2. Conducting routine inspections of all non-pharmacy medication areas in collaboration with nursing;
3. Establishing and maintaining appropriate pharmaceutical inventory to meet institutional needs;
4. Maintenance of pharmacy records in accordance with state and federal requirements;
5. Furnishing drug information to clinicians, nursing staff, other clinical staff as necessary, and to patient-inmates on request;
6. Implementation of the systemwide and local P&T/PCC Committee decisions in collaboration with the CEO and medical leadership; and
7. Maintenance of a system for after-hours access to medication. Pharmacy services include availability of 24-hour access to medications on a prompt and timely basis.

D. Hours of Operation

The pharmacy shall be open a minimum of five days per week (Monday through Friday, except for holidays) for at least eight hours per day. The PIC, in collaboration with the Statewide Chief of Pharmacy Services and the local CEO, shall determine the hours of the operation of the pharmacy.

E. Reports

1. The Statewide Chief of Pharmacy Services shall provide PICs with a list of required reports and their frequency. This list shall be available on the Pharmacy intranet site.
2. The PIC shall be responsible for communicating issues related to the operational and clinical aspects of pharmacy services to the CEO, institutional medical leadership, and statewide pharmacy leadership as appropriate.

F. Maintenance of Records

The PIC shall ensure that:

1. The maintenance of pharmacy-related records is in accordance with state and federal regulations;
2. All records are shredded after the designated time-periods have expired.

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IV. REFERENCES

- Inmate Medical Services Policies and Procedures, Volume 9, Chapter 4, CCHCS Systemwide Pharmacy and Therapeutics Committee.