

UTAH DIVISION OF JUVENILE JUSTICE AND YOUTH SERVICES POLICY AND PROCEDURES		
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MEDICATIONS AND PHARMACEUTICALS		
<p>RATIONALE: To ensure that division programs and staff follow proper medical practices in the administration, distribution, and dispensation of medications to minors.</p> <p><i>Related Policies, Applicable Standards, Statutes: 07-02 Emergency Medical</i></p>		
Original Effective: December 1, 2004	Revision: March 20, 2025	Next Review Due: March 20, 2028

I. DESCRIPTION

This document outlines the Utah Division of Juvenile Justice and Youth Services' (JJYS) policy and procedures for medications and pharmaceuticals. JJYS focuses on the administration, distribution, and dispensation of medications to minors. It includes definitions, policies, procedures, and guidelines for staff training, medication storage, and handling of medication-related incidents. The document also covers documentation requirements and continuous policy review.

II. DEFINITIONS

The following terms are defined for this policy as:

- A. **Abandoned:** Medications that have been left by a minor who has departed a community based placement or medications that have been left at a division facility and not claimed within 30 days.
- B. **Administer:** The function of staff when they give minors their medications.
- C. **Dispense:** Term used to describe the function the pharmacy performs when providing prescribed and over-the-counter medications to individual minors.
- D. **Distribute:** Term used to describe the function the medical personnel or nurse does when handing out prescription medications.
- E. **Over-the-counter medications:** Medicinal, herbal, or topical remedies that can be purchased without a prescription and do not require a health care provider's orders for usage.

- F. **Prescription medications:** Prescribed by a health care provider and have a typed patient name, medication name, directions for use, date prescribed, and party prescribing the medication.
- G. **Properly disposed:** Term used to describe medications that are properly disposed of when no longer required. This includes taking them to a community drop box (generally found in a police station), mailing them back to the pharmacy distributor, or using a pharmaceutical waste disposal solution.
- H. **Wasted:** Term used to describe medications that have been removed from bubble packaging and not administered.

III. POLICY

- A. Division facilities, in collaboration with medical providers, shall provide the necessary medications and pharmaceutical services to meet the needs of minors placed in the division's care.
- B. Medications and medical instruments, kits, and supplies shall be stored in a locked and secure location that is inaccessible to minors and non-authorized persons.
- C. Medical personnel shall maintain and oversee the inventory of all medications and supplies.
- D. Staff shall be trained and have at least 30 days of experience working in a residential program before administering medications.
- E. Wasted, abandoned, or discontinued prescription medication shall be properly disposed of under the direction of a health care provider or designee. Prior to disposal, the medication shall be labeled and securely stored.

IV. PROCEDURE

- A. Pharmacy Management and Storage
 - 1. Prescription medications brought in from outside the facility, shall be counted in the presence of the person delivering the medications to the facility. Opened packages of over-the-counter (OTC) medications shall not be accepted.
 - 2. Sealed packages of OTC medication may be accepted and do not need to be counted.
 - 3. When medications are brought into a facility during clinic hours the on-site medical provider shall be contacted for authorization for staff to administer the medication as prescribed. If medication is brought in after clinic hours, the on-call health care provider shall be contacted between 7:00 a.m. and 10:00 p.m. for authorization to administer the

medication prior to the next clinic day. If administration of the medication is urgent, staff may contact the on-call health care provider between 10:00 p.m. and 7:00 a.m.

4. A parent or guardian must authorize the administration of prescription medications for youth admitted to a non-secure JJYS Youth Services Residential program.
5. Staff shall ensure when medications are received at a JJYS facility, that those medications are delivered to the medical unit or placed in a secure lock box or cabinet. Medical providers shall review new or incoming medications each shift.
6. Prescription medications shall be stored and kept in the original packaging with dosing instructions from the health care provider.
7. The unit supervisor, or designee, shall ensure medical providers are notified 10 days prior to a medication running out.
8. JJYS medical providers shall notify the prescriber no less than seven days prior to the medication running out to determine whether the medication should be refilled and to make arrangements to have the prescription refilled as needed.
9. When a minor is released from a JJYS facility, unused prescription medication shall be provided to the party responsible for the minor to be finished as prescribed. Staff shall ensure that the case manager, parent, or other responsible party observes the counting of the medications and signs the Medication Inventory form (Form 07-03A) prior to releasing the prescription medication.

B. Administering Medication

1. Prescription medications shall be distributed, dispensed, and administered under the direction of medical personnel, or a designated staff, as ordered by the prescribing medical provider.
2. Designated staff shall administer prescribed medications according to instructions listed on the Medication Administration Record (MAR), adhering to indicated times and dosages.
3. JJYS staff shall not force minors in care, custody, or control of JJYS to take medication, without approval from the director.
4. Staff shall administer over-the-counter medications according to training, the product instructions, or standing orders from facility medical providers (unless otherwise instructed by medical providers). If there are no standing orders, parent or legal guardian permission shall be obtained prior to over-the-counter medication being administered. Exceptions to this requirement are contained in policy 07-02 Emergency Medical.
5. Staff shall ensure the medication has been properly ingested in accordance with division training.

6. Medications requiring intramuscular administration shall be administered by qualified medical personnel or self-administered per medical instruction.
7. Under no circumstances, shall a stimulant, tranquilizer or psychotropic drug be administered for purposes of program management and control or for purposes of experimentation and research.
8. Only medical personnel may authorize keep-on-person medication.

C. Medication Overdoses

1. In cases of suspected overdose from medication or other injurious substance(s) (e.g. cleaner, batteries, inhalants), staff shall:
 - a) Call 911 (07-02 Medical Emergency).
 - b) Contact the facility nurse and the nurse shall call Poison Control (1-800-222-1222).
 - c) When a facility nurse is not available, staff shall call Poison Control (1-800-222-1222) and follow their directions.
2. When staff suspect a minor has ingested a battery, staff shall contact the facility nurse who shall call the National Battery Ingestion Hotline (800-498-8666). If a nurse is not available, staff shall call the National Battery Ingestion Hotline directly.
3. In cases of suspected overdose from opioid medication or other substance, naloxone (Narcan) shall be administered by trained direct care staff to youth who experience symptoms of overdose due to opioids.
 - a) Direct care staff shall complete naloxone (Narcan) training annually through an online course available in SABA.
 - b) A supply of naloxone shall be stored in the clinic. Two doses of naloxone shall be stored on the medication cart on each living unit.
 - c) Once per month, a nurse shall take an inventory of naloxone on the medication cart to confirm that naloxone is available, undamaged, and not expired, and that used naloxone is replaced.
 - d) Upon discharge, qualifying youth may be given Narcan and administration instructions.

D. Documentation

1. Staff or medical personnel shall record medications administered in the MAR or EMAR for each minor, documenting the date, time, dosage, current medication count and personnel who administered the medication. Staff or medical personnel shall enter the MAR into the minor's permanent medical record.
2. Staff shall complete the Medication Inventory form (Form 07-03A) when receiving, or releasing medications and when sending medication for disposal or wasting.

3. Facilities and programs shall adhere to specific instructions in operational manuals to ensure security and documentation for over-the-counter medications, prescribed medications, and controlled substances.
4. Staff shall document incidents in which a minor has refused to take their prescribed medications and shall notify medical personnel and the parent(s)/guardian(s) of the refusal.
5. A pharmacist shall conduct an on-site review on a quarterly basis.

V. Continuous Renewal

This policy shall be reviewed every three years to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Division of Juvenile Justice and Youth Services Executive Management Team and is approved upon the signature of the director.



Brett Petersen, Director
Division of Juvenile Justice & Youth Services

03/20/2025

Signature Date