1.0 PURPOSE

To ensure the continuation of appropriate drug therapy for patients being released from a correctional facility on a prescribed medication regime.

2.0 REFERENCES AND DEFINITIONS

.1 References

a. Hawaii Revised Statutes; Section 26-14.6, Department of Public Safety; and Section 353C-2, Director of Public Safety, Powers and Duties.


.2 Definitions

a. Personal Medications: Medications prescribed for the patient by a licensed provider and dispensed by pharmacy.

b. Formulary: A list of medications approved for use in the Health Care Division by the Medical Director and Pharmacy and Therapeutics Committee

c. “Weekenders”: Inmates who are sentenced to intermittent detention.

3.0 POLICY

.1 Patients shall be prescribed only clinically indicated medication.

.2 Inmates released from custody who require ongoing medication therapy shall be provided access to an appropriate supply as described in this policy.
4.0 PROCEDURES

.1 The patient’s treating physician or physician-on-call shall be responsible for determining whether to prescribe release medications for a patient.

.2 Release medications are limited to those medications clinically necessary to treat chronic or serious medical or mental health conditions.

.3 The maximum allowable quantity of medications dispensed for chronic illnesses and/or mental health disorders shall be a fourteen (14) day supply.

.4 The facility shall notify the Health Care Section (HCS) at least forty-eight (48) hours prior to release of the inmate to ensure a sufficient supply of medication prescribed and delivered by the pharmacy. HCS shall inform the pharmacy that the inmate is being released to allow the prescription to be dispensed in a childproof container.

.5 By the date of the release, medication shall be secured in a sealed envelope or box and delivered to the facility staff assigned to deliver property to the inmate upon release. Any medication not picked up by or delivered to the inmate shall be returned to the HCS.

.6 Should insufficient notice be provided to HCS to secure a childproof container the patient shall be released with the remainder of their prescription medications in standard prison issue blister pack packaging. The patient shall be counseled on their responsibility regarding keeping these medications secured and inaccessible to children. The inmate shall sign the notification on non-childproof containers Form DOC 0446.

.7 In the event the patient is receiving stock medication while in the facility and an insufficient notice of release occurs. The nursing staff shall contact the contracted pharmacy and request an emergency prescription to be dispensed at the local emergency pharmacy for pick-up by the patient.

.8 Prescriptions picked up by a patient at the community pharmacy shall picked-up within 3 days or returned to ensure continuity of necessary medication therapy for patients with chronic medical or mental health conditions, the to pharmacy stock. Prescriptions shall be for no more than 14-day supply of medication and non-refillable.
5.0 **SCOPE**

This policy and procedure shall apply to all correctional facilities and their assigned personnel.

**APPROVAL RECOMMENDED:**

[Signature]

Medical Director Date

[Signature]

Health Care Division Administrator Date

[Signature]

Deputy Director for Corrections Date

**APPROVED:**

[Signature]

Director Date

7/28/09
MEDICATIONS PACKAGED IN NON-CHILDPROOF CONTAINERS

The Department of Public Safety and the contracted pharmacy strongly support and encourage the use of child resistant containers in homes with young children. You have been prescribed medications that you need to continue to take upon your release from custody. The medication that you are taking home is not packaged in a child resistant container. You must take the necessary precautions when arriving home to keep your medication secure and out of the reach of children.

The nursing staff has explained it to me and I understand that medication I am being released with and taking home is not packaged in child resistant containers. It is my responsibility to make sure the medications are secured and kept out of the reach of children.

(Print Name)

(Signature) (Date)

(Nurse Signature) (Date)