Controlled Drugs Policy

Contents

Policy statement

1. Key principles
2. Breach of this policy
3. Categories of drugs
4. Before drugs can be used in research
5. Related links
6. Effective date
7. Review date
8. Amendment history

Annex A – Authorised Persons
## Document Control Summary

<table>
<thead>
<tr>
<th>Title</th>
<th>Controlled Drug Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Electronic file reference</strong></td>
<td>Intranet</td>
</tr>
<tr>
<td><strong>Status</strong></td>
<td>Final</td>
</tr>
<tr>
<td><strong>Version No.</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Date of this Document</strong></td>
<td>15/12/2015</td>
</tr>
<tr>
<td><strong>Policy author(s)</strong></td>
<td>Revised by Arthur Mitchell</td>
</tr>
<tr>
<td><strong>Approved by</strong></td>
<td>Michael Stephens</td>
</tr>
<tr>
<td><strong>(Names, titles and date)</strong></td>
<td>Head of Safety, Security Resilience</td>
</tr>
<tr>
<td><strong>Next Review Date</strong></td>
<td>15/12/2016</td>
</tr>
</tbody>
</table>
Policy statement

The Medical Research Council (MRC) is a publicly-funded organisation dedicated to improving human health through world-class medical research. This Policy is a statement of the MRC’s values in relation to the management of controlled drugs.

This Policy complies with the relevant legislation. In addition, the MRC’s policies and procedures are assessed for language and accessibility and equality impact. The MRC’s operational activities are regularly reviewed with key stakeholders and Trade Unions, which in turn informs the further development of the MRC’s policies.

For the purposes of this policy, the use of the word “employees” covers MRC employees on permanent or fixed term contracts as well as persons who are on secondment to the MRC and non-employees such as students, contractors and other persons carrying out work on the MRC premises and/or on behalf of the MRC. This Policy applies to all categories of employees and applies whenever individuals are acting in their capacity as an employee be it in their usual place of work or on external business. The inclusion of non-employees in the scope of this policy should not be taken to infer any employment rights for those individuals.
1. **Key principles**

1.1 The MRC is a publicly funded body and as such is bound to comply with the highest standards of professional and ethical practice.

1.2 The MRC is accountable to government and the public for its actions in pursuit of its goals and therefore must conduct its business in an open and transparent manner.

1.3 The policy of the Medical Research Council is to ensure that the purchase, storage, transport, access and use of controlled drugs within its units or establishments is controlled and monitored.

1.4 This policy requires that any controlled drugs are;

   1. Procured by only a named person, the “Accountable Officer”
   2. Recorded on delivery
   3. Stored in a secure place
   4. Controlled drug use is recorded and monitored
   5. Disposal is recorded

   Unit directors should ensure that the above conditions are in place

2. **Breach of this policy**

2.1 While the MRC is confident in the honesty and integrity of its employees, it will maintain zero tolerance of proven instances of illegal or unethical behaviour. A breach of this policy by employees may result in disciplinary action, up to and including dismissal/termination of contract (an equivalent and alternative action may be taken for those who are not an MRC employee).

2.2 Legal action may be considered including reporting the matter to the Police if a criminal offence is suspected.

2.3 The MRC has a duty to report misconduct to a professional body if the rules of conduct of that body may have been breached by one of its members.

   For further information see the MRC Disciplinary Policy and Procedure on the RCUK Knowledgebase.

3. **Categories of drugs**
3.1 Controlled drugs within the UK are covered by the “Misuse of Drugs Act 1971” as modified by the “Drugs Act 2005” and the “Health Act 2006”. Controlled drugs themselves are categorised into five separate schedules.

3.2 These are drugs that require a license from the Home Office prior to their use in research and include cannabis and LSD. These drugs are normally not used for medicinal purposes.

3.3 These are drugs that are prescribed by a physician and include cocaine, methadone etc. A register must be maintained to record their use. Within this schedule are Class A, B and C drugs which are normally used for medicinal purposes. Such drugs will normally be used and administered within animal facilities by a veterinary surgeon.

3.4 These also include prescription medicines such as barbiturates (except quinalbarbitone/secobarbital) and phentermine that do not require a register to be maintained.

3.5 Within here are drugs such as Benzodiazepines. The controlled drugs prescription and safe custody do not apply.

3.6 Subject to minimal control e.g. Pulmo Bailly (cough medicine).

4. Before drugs can be used in research units must have the following in place.

4.1 The relevant Home Office license.

4.2 The unit must appoint a named person or persons who can authorise the order for any controlled drug. This person is known as the “accountable officer” and is responsible for allowing the procurement of controlled drugs and is responsible for ensuring their destruction at the end of their use in a research project (see annex 1). Such procurement must be recorded by the “accountable officer” and a record of delivery must be maintained and the drug(s) stored in a secure place until ready for use.

4.3 The use of and exact amount of drug used must be recorded by the researcher responsible for its use. The person responsible for the use of the substance is also responsible for ensuring inventory control, risk assessment, and that licencing and security arrangements are in place.

4.4 The disposal of the controlled drug(s) must be recorded by the researcher in charge and by the “accountable officer”. Controlled drugs in schedules 1 and 2 can only be destroyed in the presence of a person authorised by the Secretary of State, normally a police officer, however, the “accountable officer” is also empowered to witness and record the destruction of controlled drugs.

4.5 Records of the purchase, storage, use and disposal of any controlled drug must be maintained should an inspector request them. Such records should normally be kept for a minimum of two years after the use of a controlled drug ceases.

4.6 Units using controlled drugs must ensure that this is recorded on HASID.
5. Related links

The following links contain kits for the destruction of controlled drugs.
http://www.sellesmedical.co.uk/store/product/3395-Controlled-Drug-Destruction-Kit

http://www.wms.co.uk/Facilities_and_Housekeeping/Controlled_Drugs_Management/Controlled_Drugs_Destruction_Kits

6. Effective date

6.1 This policy is effective from

7. Review date

7.1 This policy will be formally reviewed in

8. Amendment history

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Comments/Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Annex A

AUTHORISED PERSONS

The Accountable Officer of an organisation can authorise suitable individuals to witness the destruction of controlled drugs. The Accountable Officer will hold a record of Authorised Persons and self-declaration forms for the destruction of controlled drugs.

The Authorised Person should be trained to carry out witnessed destruction and should always work to a Standard Operating Procedure for witnessing the safe Destruction of Controlled Drugs (CD).

An example of a template self-declaration for authorised witnesses is below.

<table>
<thead>
<tr>
<th>Drug being destroyed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of witness for CD destruction</td>
</tr>
<tr>
<td>Address (Unit)</td>
</tr>
<tr>
<td>Contact email address (Unit)</td>
</tr>
<tr>
<td>Contact telephone number (Unit)</td>
</tr>
<tr>
<td>Signature</td>
</tr>
<tr>
<td>Position</td>
</tr>
<tr>
<td>Date of signing</td>
</tr>
</tbody>
</table>