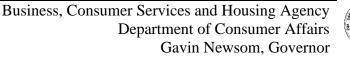


### California State Board of Pharmacy 2720 Gateway Oaks Drive, Ste. 100 Sacramento, CA 95833

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**LEGEND:** Proposed changes made to the current regulation language are shown by double strikethrough for deleted language and double underline for added language.

#### **AUTOMATED DRUG DELIVERY SYSTEM SELF-ASSESSMENT**

Business and Professions Code (BPC) section 4427.7(a) requires that the pharmacy holding an automated drug delivery system (ADDS) license complete an annual a self-assessment, performed pursuant to section 1715.1 of Title 16 of the California Code of Regulations, evaluating the pharmacy's compliance with pharmacy law relating to the use of the ADDS. The assessment shall be performed before July 1 of every odd-numbered year by the pharmacist-in-charge of each pharmacy under BPC sections 4029 (Hospital Pharmacy) or section-4037 (Pharmacy). The pharmacist-in-charge (PIC) must also complete a self-assessment within 30 days whenever; (1) a new automated drug delivery system permit has been issued, or (2) there is a change in the pharmacist-in-charge and becomes the new pharmacist in charge of an automated drug delivery system, or (3) there is a change in the licensed location of an automated drug delivery system to a new address. The primary purpose of the self-assessment is to promote compliance through self-examination and education. All information regarding operation, maintenance, compliance, error, omissions, or complaints pertaining to the ADDS shall be included in this Self-Assessment.

All references to Business and Professions Code (BPC) are to <u>Division 2</u>, Chapter 9<del>, Division 2</del>; California Code of Regulations (CCR) are to Title 16; and Code of Federal Regulations (21 CFR) to Title 21 unless otherwise noted.

The self-assessment must be completed, and the signed original must be readily available and retained in the pharmacy for three (3) years after performed.

Please mark the appropriate box for each item. If "NO", enter an explanation and timeframe when the deficiency will be completed on the "CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE" lines at the end of the section. If more space is needed, you may add additional sheets.

Pharmacy Name:			
Address:			
City:	Zip Code:		
Phone:	Fax number:		
Website:			
Pharmacy License #:	Expiration Date:		
DEA Registration #:			
	Last <del>← CS</del> Inventory Reconciliation Date (CCR 1715.65(c)):		
Pharmacy Hours: M-F:	Saturday Sunday		
PIC:	RPH#		
ADDS License #:	ADDS Expiration Date:		
ADDS Address:			

City:	Zip Code:		
	ADDS Hours: M-F: Saturday Sunday		
	Please explain if the ADDS hours are different than the pharmacy:		
	Reason for completing self-assessment:		
	☐ Performing self-assessment before July 1 of every odd-numbered year. [BPC 4427.7, CCR 1715.1(a)]		
	Completing a self-assessment within 30 days when a new ADDS license was issued. [BPC		
	4427.7, CCR 1715.1(b)(1)]		
	Completing a self-assessment within 30 days when there was a change in PIC. [BPC 4427.7, CCR 1715.1(b)(2)]		
	☐ Completing a self-assessment within 30 days when there was a change in the licensed location of an ADDS to a new address. [BPC 4427.7, CCR 1715.1(b)(3)]		
	FOR ALL TYPES OF ADDS: COMPLETE SECTIONS 1, 2 AND 3		
	SECTION 1: DEFINITIONS/TYPE OF ADDS DEVICE USED		
	An ADDS – "Automated drug delivery system," a mechanical system that performs operations or activities other than compounding or administration, relative to storage, dispensing, or distribution of drugs. An ADDS, shall collect, control, and maintain all transaction information to accurately track the movement of drugs into and out of the system for security, accuracy, and accountability. [BPC 4119.11(b)(1), 4017.3(a)]		
Yes No N/A	IDENTIFY THE TYPE OF ADDS DEVICE USED		
	1.1. The pharmacy uses an APDS – "Automated PATIENT dispensing system," an ADDS for storage and dispensing of prescribed drugs directly to the patients pursuant to prior authorization by a pharmacist. [BPC 4119.11(b)(2), 4017.3(c)]		
	1.2 The pharmacy uses an <b>AUDS – "Automated UNIT DOSE system</b> ," an ADDS for the storage and retrieval of unit dose drugs for administration to patient by persons authorized to perform these functions. [BPC 4119.11(b)(3), 4017.3(b)]		
	1.3 The pharmacy uses an <b>AUDS – "Automated UNIT DOSE system</b> ," an ADDS for the storage and retrieval of unit dose drugs for administration and dispensing to patients by a physician in a drug room or hospital emergency room when the pharmacy is closed. [BPC 4427.2(i), BPC 4056, BPC 4068]		
Yes No N/A	SECTION 2: LOCATION OF DEVICES		

	2.1 Provides pharmacy services to the patient of <u>covered entities</u> , as defined that are eligible for discount drug programs under federal law as specified through the use of an APDS as defined. The APDS need not be at the same location as the underlying operating pharmacy if all the specific conditions are met. "Covered entity" as defined by section 256b of Title 42 of United Sates Code. [BPC 4119.11(a)-(a)(11)]
	2.2 Provides pharmacy services through an <u>ADDSAPDS</u> <u>adjacent to the secured pharmacy area</u> of the pharmacy holding the ADDS license. [BPC 4427.3(b)(1)]
Yes No N/	2.3 Provides pharmacy services through an ADDSAUDS in a health facility licensed pursuant to section 1250 of the Health and Safety Code (HSC)(Long Term Care (LTC)) that complies with section 1261.6 of the Health and Safety Code. [BPC 4427.3(b)(2), HSC 1250, HSC 1261.6]
	2.4 Provides pharmacy services through <u>an AUDS in</u> <u>a clinic</u> licensed pursuant to section 1204 or 1204.1 of the Health and Safety Code, or section 4180 or 4190 of Business and Professions Code. [BPC 4427.3(b)3)]
	2.5 Provides pharmacy services through a <u>correctional clinic</u> . [BPC 4187.1, 4427.3(b)(4)]
	2.6 Provides pharmacy services through a <u>medical office</u> <u>or other location where patients are</u> <u>regularly seen for purposes of diagnosis and treatment, and the APDS is only used to dispense dangerous drugs and dangerous devices to patients of the practice</u> . [BPC 4427.3(b)(5), 4427.6(j)]
	2.7 <u>AUDS operated by a licensed hospital pharmacy</u> , as defined in section 4029 <u>of the Business and Professions Code</u> , and is used solely to provide doses administered to patients while in a licensed general acute care hospital facility or a licensed acute psychiatric hospital facility, as defined in subdivision (a) and (b) of section 1250 of the Health and Safety Code, shall be exempt from the requirement of obtaining an ADDS license, if the licensed hospital pharmacy owns or leases the AUDS and owns the dangerous drugs and dangerous devices in the AUDS. The AUDS shall comply with all other requirements for an ADDS in Article 25 <u>of the Business and Professions Code</u> . The licensed hospital pharmacy shall maintain a list of the locations of each AUDS it operates and shall make the list available to the board upon request. [BPC 4427.2(i)]
	2.8 AUDS operated by a licensed hospital that contains 100 beds or fewer (Drug Room), as
	defined in section 4056 of the Business and Professions Code, and is used to provide doses administered to patients while in a licensed general acute care hospital and to dispense drugs to outpatients if the physician determines that it is in the best interest of the patient that a particular drug regimen be immediately commenced or continued, and the physician reasonably believes that a pharmacy located outside the hospital is not available and accessible at the time of dispensation to the patient within 30 minutes of the hospital pharmaceutical services or within a 30-mile radius. The quantity dispensed is limited to an amount necessary
	to maintain uninterrupted therapy and does not exceed a 72-hour supply. [BPC 4056, 4427.2(i)]

Yes No N/A	
	2.9 AUDS located in the emergency room operated by a licensed hospital pharmacy, as defined
	in subdivisions (a) and (b) of section 4029 of the Business and Professions Code, and is used to
	provide doses administered to patients while in a licensed general acute care hospital facility or
	a licensed acute psychiatric hospital facility, as defined in subdivisions (a) and (b) of section
	1250 of the Health and Safety Code, and to dispense to an emergency room patient if: [BPC
	<u>4068, 4427.2(i)]</u>
	2.9.1. The hospital pharmacy is closed and there is no pharmacist available in the
	<u>hospital.</u>
	2.9.2. The drug is acquired by the hospital pharmacy.
	2.9.3. The dispensing information is recorded and provided to the pharmacy when the
	<u>pharmacy reopens.</u>
	2.9.4. The hospital pharmacy retains the dispensing information and controlled
	substances dispensing information is reported to the Department of Justice pursuant to
	section 11165 of the Health and Safety Code.
	$\square$ 2.9.5. The prescriber determines it is in the best interest of the patient that a particular
	drug regimen be immediately commenced or continued and the prescriber reasonably
	believes a pharmacy located outside the hospital is not available and accessible at the
	time of dispensing to the patient.
	2.9.6. The quantity is limited to an amount necessary to maintain uninterrupted
	therapy, but shall not exceed a 72-hour supply.
	Note: Licensure of AUDS operated under these provisions is required.
	2.40 & facility lineared in CA with the state term outhouts to associate whomselves a series
	2.10 A facility licensed in CA with the statutory authority to provide pharmaceutical services.
	[BPC 4427.65(a)(1)]
	Type of Facility:  Statutory outbority to provide pharmacoutical convices (List code section):
	Statutory authority to provide pharmaceutical services (List code section):
	2.11 Jail, youth detention facility, or other correctional facility where drugs are administered
<u> </u>	within the facility under the authority of the medical director. [BPC 4427.3(b)(6), BPC
	4427.65(a)(2)]
	Type of Facility:
	Statutory authority for type of Facility (List code section):
	Statutory authority for type of racinty (List code section).
	<u>Please</u> Note: An ADDS license is not required for technology, installed <u>within the secured</u>
	licensed premises area of a pharmacy, used in the selecting, counting, packaging, and labeling
	of dangerous drugs and dangerous devices. [BPC 4427.2(j)]
	or dangerous and sangerous devices. [5] o 1127.2(J)]
	SECTION 3: GENERAL REQUIREMENTS FOR ALL TYPES OF ADDS
	(Answer N/A if licensure not required)
Yes No N/A	
	3.1 The ADDS is installed, leased, owned, or operated in California and is licensed by the board.
	[BPC 4427.2(a), 4427.4(a)]

Yes No N/	3.2 The AD		to a holder of a current, valid, a in California. [BPC 4427.2(b)]	and active pharmacy license of a
	3.3 Each Al	DDS has a separate lic	ense. [BPC 4427.2(c)]	
	3.4 The lice	ensed ADDS meets the	e following conditions: [BPC 442	27.2(d)]
	☐ <u>3.4.1</u> ☐ <u>3.4.2</u>	The proposed location	onsistent with legal requirement on for installation of the ADDS rene ADDS is secure from access a	neets the requirements of
	<ul><li></li></ul>	The pharmacy's police security measures are The pharmacy's police.	cies and procedures related to to not monitoring of the inventory to by and procedures include provi ADDS inventory, as required by	to prevent theft and diversion. isions for reporting to the board
Yes No N/I	■ No N/A  3.5 A prelicensure inspection was conducted within 30 days of a completed application for the ADDS license at the proposed location(s). [BPC 4427.2(e)]  List date(s) of pre-license inspection(s):			
	3.6 The pha	•	ocation of an ADDS shall require	e a new application for licensure.
	•	narmacy is aware a rep days. [BPC 4427.2(e)]	placement of an ADDS shall requ	uire notification to the board
	3.8 The pharmacy is aware the ADDS license will be canceled by operation of law if the underlying pharmacy license is not current, valid, and active. Upon reissuance or reinstatement of the underlying pharmacy license, a new application for an ADDS license is submitted to the board. [BPC 4427.2(f)]			
	3.9 The pharmacy is aware the holder of an ADDS license will advise the board in writing within 30 days if use of an ADDS is discontinued. [BPC 4427.2(g)]			
	3.10 The ADDS license(s) is/were renewed annually, and the renewal date is the same as the underlying pharmacy license. [BPC 4427.2(h)]			
	3.11 The ADDS is placed and operated inside an enclosed building, with a premises address, at a location approved by the board. [BPC 4427.3(a)]			
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Yes No N/A	
	3.12 Prior to installation, the pharmacy holding the ADDS license and the location where the ADDS is placed pursuant to subdivision (b) of Business and Professions Code section 4427.3, jointly developed and implemented written policies and procedures to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the ADDS, as well as quality, potency, and purity of the drugs and devices. The policies and procedures are maintained at the location of the ADDS and at the pharmacy holding the ADDS license. [BPC 4427.3(c)]
	3.13 Each ADDS is operated under the supervision of the pharmacy holding the ADDS license. [BPC 4427.4(b)]
	3.14 The ADDS is considered an extension and part of the pharmacy holding the ADDS license, regardless of the ADDS location, and is subject to inspection pursuant to BPC <u>section</u> 4008. [BPC 4427.4(c)]
Yes No N/A	
	3.15 Drugs and devices stored in an ADDS will be deemed part of the inventory and the responsibility of the pharmacy holding the ADDS license, and the drugs and devices dispensed from the ADDS shall be considered to have been dispensed by the pharmacy. [BPC 4427.4(d), 4119.11(a)(3)]
	3.16 The stocking and restocking of an ADDS is performed by a pharmacist, or by a pharmacy technician or intern pharmacist under the supervision of a pharmacist, except for an ADDS located in a health facility pursuant to HSC 1250, where the stocking and restocking of the ADDS may be performed in compliance with HSC 1261.6. [BPC 4427.4(e)(1)]
	3.17 Access to the ADDS is controlled and tracked using an identification or password system or biosensor. [BPC 4427.4(e)(2), $4427.65(c)(5)(D)$ , HSC $1261.6(f)(4)$ ]
	3.18 The ADDS makes a complete and accurate record of all transactions including all users accessing the system and all drugs added to, or removed from, the system. [BPC 4427.4(e)(3), BPC 4427.65(c)(5)(D), BPC 4119.11(f), HSC 1261.6(f)(5)]
	3.19 Are drugs or devices not immediately transferred into an ADDS upon arrival at the ADDS location, stored for no longer than 48 hours in a secured room within the ADDS location approved by the board under section 4427.3 of the Business and Professions Code, and, upon retrieval of the dangerous drugs and dangerous devices from the secured storage, is an inventory taken to detect any losses or overages? [BPC 4427.4(f)]
	3.20 Prior to installation, and annually thereafter, the pharmacy holding the ADDS license provides training on the operation and use of the ADDS to the pharmacy personnel and to personnel using the ADDS at the location where the ADDS is placed pursuant to BPC 4427.3(b). [BPC 4427.5]

Yes No N/A
3.21 The pharmacy complies with all recordkeeping and quality assurance requirements
established in pharmacy law and regulations, and maintains records within the licensed
pharmacy holding the ADDS license and separate from other pharmacy records.
[BPC 4427.7(b), BPC 4427.7(b), BPC 4119.11(j)]
3.22 The record of quality assurance review, as provided in California Code of Regulation section
1711(e), is immediately retrievable in the pharmacy for at least one year from the date the
record was created. [CCR 1711(f)]
3.23 The pharmacy will submit to the board any quality assurance record related to the use of a
licensed ADDS within 30 days of completion of the quality assurance review. Any facility with
an unlicensed ADDS must report the quality assurance review to the board at the time of
annual renewal of the pharmacy's license. [CCR 1711(f)]
annual renewal of the pharmacy 3 license. [CCN 1711[1]]
3.24 The PIC of <b>EACH</b> ADDS completes a self-assessment of the pharmacy's compliance with
federal and state pharmacy law and is performed [CCR 1715.1(a), (b)]:
Before July 1 of every odd-numbered year.
<ul> <li>Within 30 days whenever a new ADDS licensed has been issued.</li> </ul>
<ul> <li>Within 30 days when there is a change in PIC.</li> </ul>
<ul> <li>When there is a change in the licensed location of an ADDS to a new address.</li> </ul>
3.25 The PIC of an ADDS assesses the system's compliance with current laws and regulations by
using the components of Form 17M-112 (Rev 1/22) entitled "Automated Drug Delivery System
Self-Assessment." [CCR 1715.1(c)]
DDD 2.26 The DIC recovered "vee" "red" or "red condicable" chavit whether the ADDS is at the time of
3.26 The PIC responds "yes", "no", or "not applicable" about whether the ADDS is, at the time of
the self-assessment, in compliance with laws and regulations that apply to that pharmacy
<u>setting. [CCR 1715.1(c)(2)]</u>
3.27 For each "no" response, the PIC provides a written corrective action or action plan to come
into compliance with the law. [CCR 1715.1(c)(3)]
3.28 The PIC initialed each page of the self-assessment with original handwritten initials in ink o
digitally signed in compliance with Civil Code Section 1633.2(h) of the self-assessment form.
[CCR 1715.1(c)(4)]
3.29 The PIC has certified on the last page of the self-assessment that they are the PIC, has
certified a timeframe within which any deficiency identified within the self-assessment will be
corrected, and has acknowledged all responses are subject to verification by the Board of
Pharmacy. The certification is made under penalty of perjury of the laws of the State of
California and the information provided in the self-assessment form is true and correct with an
original handwritten signature in ink or digitally signed in compliance with Civil Code Section
1633.2(h) on the self-assessment form. [CCR 1715.1(c)(5)]

Yes No N/A	<u>4</u>		
	3.30 The ADDS owner has certif	<u>fied the final page of the self-asses</u>	sment that they have read and
	reviewed the completed self-as	<u>ssessment and acknowledges that</u>	failure to correct any
	deficiency identified in the self	-assessment could result in the re-	vocation of the ADDS license
	issued by the Board. The certif	<u>fication is made under penalty of p</u>	perjury of the laws of the State
	of California with an original ha	andwritten signature or digitally si	gned in compliance with Civil
	•	self-assessment form. [CCR 1715.	•
			<del></del>
	3 31 Fach self-assessment is con	mpleted in its entirety and kept or	ofile in the underlying
		fter it is performed. The completed	
	•		
	is readily available for review d	luring any inspection by the Board	<u>. [CCR 1713.1(d)]</u>
	2.22 A identified area of record		:f:d : thf
<u></u>	-	compliance shall be corrected as s	<u>pecified in the seif-assessment.</u>
	[CCR 1715.1(e)]		
	3.33 The PIC ensures the follow	ving: [CCR 1715.65(h)]	
	☐ 3.33.1 All controlled substa	inces added to an ADDS are accou	nted for.
	3.33.2 Access to the ADDS i	is limited to authorized facility per	sonnel.
		on of discrepancies or unusual acc	
		on or discrepancies or unusual acc	C33 d330Clated With Controlled
	substances is performed.		
	☐ 3.33.4 Confirmed losses of	controlled substance are reported	l to the board.
	3.34 The original board-issued A	ADDS permit and current renewal	are posted at the ADDS
	premise, where they may be cl	early read by the public. [BPC 405	<u>8]</u>
	CORRECTIVE ACTION OR ACTIO	N. D. AN. AND COMBUSTION DATE	
	CORRECTIVE ACTION OR ACTIO	ON PLAN AND COMPLETION DATE	
	CHECK OFF THE TYPE OF ADDS	USED BY THE PHARMACY AND C	OMPLETE THE FOLLOWING
	SECTION(S) AS IT APPLIES TO T	THE TYPE OF ADDS THE PHARMAC	CY IS USING.
	Please Note: The Pharmacist-i	n-Charge of the pharmacy and the	e <u>pharmacy</u> owner of the
	ADDS shall sign the Certification	on Acknowledgment on page <del>33</del> 4	8 after completing the
	assessment.		<u> </u>
	assessment.		
	☐ SECTION 4: ADDS used	d to provide pharmacy convice to c	covered entities and medical
	<del></del>	d to provide pharmacy service to o	overed entitles and medical
	-	d with a covered entity.	
	☐ SECTION 5 <u>:</u> <del>—ADDS</del>		
	<u>APDS</u> adjacent t	o the secured pharmacy area (or)	
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- <u>APDS</u> located in <u>a Medical Offices (or)</u>
- <u>APDS located where patients are regularly seen for purposes of diagnosis and treatment to only be used for patients of the practice (or)</u>
- <u>APDS located at a clinic pursuant to HSC 1204, HSC 1204.1, BPC 4180, or BPC 4190.</u>

	SECTION 6: —ADDS in a health facility pursuant to HSC 1250 that complies with HSC
	1261.6.
=	SECTION 7 - APDS through a clinic pursuant to HSC 1204 or 1204.1 or BPC 4180 or 4190
	5
	4427.3(b)(6), or 4427.65(a)(2).
	SECTION <u>\$8:</u>
	<ul> <li>Hospital Pharmacy: AUDS used for dispensing pursuant to BPC 4068 when the</li> </ul>
	hospital pharmacy is closed and no pharmacist is available.
	<ul> <li><u>Drug Room:</u> AUDS used for dispensing pursuant to BPC 4056.</li> </ul>
	SECTION 9:

- AUDS through a facility licensed in California with statutory authority to provide pharmaceutical services (or)
- AUDS through a jail, youth detention facility, or other correctional facility where drugs are administered within the facility under the authority of the medical director pursuant to BPC 4187.1, 4427.3(b)(6), or 4427.65(a)(2).

## SECTION 4: APDS USED TO PROVIDE PHARMACY SERVICES TO COVERED ENTITIES AND MEDICAL PROFESSIONALS CONTRACTED WITH A COVERED ENTITY

	A. GENERAL REQUIREMENTS		
Yes No N/	A  4.1 A Covered Entity May Contract of providing pharmacy services to the by any other law, patients enrolled covered entity as described in BPC the use of the APDS. [BPC 4119.11)	patients of the covered en in the Medi-Cal program, s section 4126 to provide the	tity, including, unless prohibited hall be under contract with the
	4.2 Contracts between the covered published by the Health Resources by Board during normal business hour	and Services Administration	
	4.3 Drugs purchased and received p ( <u>USC)</u> shall be segregated from the means. [BPC 4126(b)]		
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Yes No N/A	4.4 All records of acquisition and dis separate from the pharmacy's other		ll be readily retrievable in a form
	4.5 The drugs shall be returned to the dispensed to patient of a covered distributed because of a change in [BPC 4126(c)]	ed entity pursuant to section	n 256b of Title 42 USC cannot be
	4.6 A licensee that participates in a this section shall not have both a p	·	
	CORRECTIVE ACTION OR ACTION PI	LAN AND COMPLETION DAT	E
Yes No N/	B. UNDERLYING OPERATING F	PHARMACY	
	4.7 The operating pharmacy has obtaincludes the address of the APDS Icsite. [BPC 4119.11(a)(1)]		
	4.8 A separate license was obtained concurrent with the pharmacy licer APDS at an address for which the B 4119.11(a)(8), 4107]	nse. (Note: The Board may i	ssue a license for operation of an
	4.9 A prelicensure inspection of the 30 days after Board receipt of the A		-
	Date of Inspection:		
	4.10 The pharmacy will submit a new current APDS is relocated. [BPC 413	• •	n for Board approval if the
	4.11 The pharmacy will notify the Bodiscontinuing an APDS. [BPC 4119.2]	•	cement of an APDS or
	4.12 A new APDS licensure applicati underlying operating pharmacy's p (Once cancelled, a new APDS licens reissued or reinstated.) [BPC 4119.	ermit being cancelled, not one can only be issued if the o	current, not valid, or inactive.
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Yes No N/	<del></del>	ve more than 15 APDS licenses for	one underlying operating
	• • • • • • • • • • • • • • • • • • • •	BPC 4119.11(d)(10) <u>, 4427.6(k)</u> ] List	
	1	2	
	3	4	
	5	6	
	7	8	
	9	10	
	11	12	
	13	14	
	15		
4.14 The operating pharmacy will maintain the written APDS policies and procedures for 3 years after the last date of use for that APDS. [BPC 4119.11(d)(11), CCR 1713(f)]  4.15 The operating pharmacy of an APDS has completed an annual biennial Self-Assessment pursuant to CCR 1715.1 or BPC 4427.7(a) evaluating the pharmacy's compliance with pharmacy law relating to the use of the APDS. [BPC 4119.11(i)]  Date of Last Self-Assessment:  Reason:  Biennial:  New ADDS:  Change in PIC:  Change in location of ADDS			
	requirements pursuant to BPC	as complied with all recordkeeping 4119.11 and those records will be ly from the other pharmacy record	maintain within the pharmacy
	• • • • • • • • • • • • • • • • • • • •	at the drugs stored in an APDS are a I the drugs dispensed by the APDS acy. [BPC 4119.11(a)(3)]	
	4.186 The underlying operating	pharmacy is solely responsible for	: [BPC 4119.11(a)(5), (6)]
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	<u> </u>		g the operation and use of the ersonnel using system. [BPC 4	APDS for both the pharmacy 119.11(a)(6)]	
	CORRECTI	VE ACTION OR ACTION	PLAN AND COMPLETION DAT	Ē:	
	C. PH	ARMACIST RESPONSI	BILITIES		
Yes No N/	4.1 <del>9</del> 7 The o	the operating pharmac	is under the supervision of a I y. [BPC 4119.11(a)(7)]. Note: <sup>-</sup> he APDS and may supervise th	The pharmacist need not be	
	pockets, c	ards, drawers, similar t ng of the APDS may be		the APDS utilizes removable ingle dose containers are used, the following conditions are m	
	superv similar 4. <del>20</del> 18 unit of	vision of the pharmacis technology, or unit of 2.2 Transportation of	use or single dose containers removeable pockets, cards, d stainer between the pharmacy	noveable pockets, cards, draw	<del>O</del> r
	☐ 4. <del>20</del> 18 drawe	$\frac{1}{2}$ .3 There are policies	and procedures to ensure the or unit of use or single dose or	e removeable pockets, cards, ontainers are properly placed i	nto
	of the drug	 gs contained within, o <sub>l</sub> all transaction records	peration, maintenance, and cl	OS including a physical inspection in the apply and a and accountability of the APDS	
	Date of La	st Review:			
	4. <del>22</del> <u>20</u> The [CCR 1715	_	of the offsite ADDS/APDS has	ensured the following:	
	<u>4.20.1</u>	_All controlled substar	ices added to the ADDS/APDS	are accounted for;	
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	4.20.3 An one	going evaluation of di	•	ty personnel; access associated with controlled
		nce is performed; and med losses of control	d ed substances are repo	orted to the Board.
	CORRECTIVE ACT	ION OR ACTION PLAN	AND COMPLETION DA	ΓE:
		EQUIREMENTS		
es No N/	4.2 <u>31</u> Access to th biosensor. Systen	ns tracked via passwo	rd shall include a came	entification or password system or ra that records a picture of the ined for a minimum of 180 days.
		· ·		nsactions including users
	4.2 <u><del>5</del>2</u> The APDS w	ill collect, control, and	removed from the APE I maintain all transaction APDS. [BPC 4119.11(c)	on information to accurately track
		and inspection by au		ily available in downloadable a minimum of 3 years.
	4.2 <u>∓4</u> The APDS ma [BPC 4119.11(d)]	ay dispense medicatic	ns <b>DIRECTLY</b> to the pat	cient if <b>all</b> the following are met:
	policies and p	•	ct to all the following a	d <u>, and maintained</u> written nd the policies are reviewed
	<u> </u>	Maintaining the secu	urity of the APDS and d	angerous drug and devices
	<u> </u>	Determin <u>ing</u> and a devices are appropri	pply <u>ing</u> inclusion criter ate for placement in th then consultation is nea	
	<u> </u>	Ensuring patients are	e aware that consultati	on with a pharmacist is ncluding those delivered via APDS <u>.</u>
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	<ul> <li>4.24.1.4 Describing assignment of responsibilities and training of pharmacy personnel and other personnel using the APDS at that location, regarding maintenance and filling procedures for the APDS.</li> <li>4.24.1.5 Orienting patients on the use of APDS and notifying patients when expected medications are not available in the APDS. The pharmacy must ensure the use of the APDS does not interfere with the delivery of drugs and devices.</li> <li>4.24.1.6 Ensuring the delivery of drugs and devices to patients expecting medications from the APDS in the event that the APDS is disabled or malfunctions.</li> </ul>
	Date of Last Policy Review:
	4.2₹4.2 The APDS may only be used for patients who have signed a written consent demonstrating their informed consent to receive prescribed drugs and devices from the APDS. Attach a copy of the consent form to the back of the self-assessment. [BPC 4119.11(d)(2), CCR 1713(d)(1)]
<del>'es No N/A</del> □	4.2 <u>₹4</u> .3 The device-APDS shall have a means to identify each patient and only release the identified patient's drugs and devices to the patient or the patient's agent. [BPC 4119.11(d)(3), CCR 1713(d)(3)]
<u>_</u>	4.2₹4.4 The pharmacist has performed all clinical services as part of the dispensing process, including, but not limited to_drug utilization review and consultation. [BPC 4119.11(d)(4)]
	$4.2$ $\pm \underline{4}$ .5 Drugs are dispensed from the APDS only upon authorization from the pharmacist after the pharmacist has reviewed the prescription and the patient's profile for potentials contraindications and adverse drug reactions. [BPC 4119.11(d)(5)]
□	$4.2\frac{7}{4}$ .6 The pharmacist shall consult patients for the first time on all prescribed drugs and devices dispensed from the APDS. The consultation shall be provided by a Board_licensed pharmacist via telecommunication link that has two-way audio and video capabilities. [BPC 4119.11(d)(6)]
	$4.2$ $\frac{1}{2}$ .7 The APDS shall prominently post a notice that provides the name, address and telephone number of the pharmacy [BPC 4119.11(d)(7)]
□	$4.2$ $\pm \underline{4}$ .8 The prescription labels on all drugs dispensed via APDS shall comply with BPC 4076 and CCR 1707.5. [BPC 4119.11(d)(8)]
	7.9 Any complaint, error or omission involving the APDS shall be reviewed as a part of the
□□□ 4.2	armacy's quality assurance program pursuant to BPC 4125. [BPC 4119.11(d)(9)]  §5 The federal warning label prohibiting transfer of controlled substances is on the escription container. [21 CFR 290.5]

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Yes No N//	4.2 <u>96</u> Prescriptions are dis opening tested container,	spensed in a new and child-resistant cont , or in a non-complying package only pur urchaser. [15 USC 1473(b), 16 CFR 1700.1	suant to the prescriber or
	4. <del>30</del> 27 Patient package ins	serts are dispensed with all estrogen med	dications. [21 CFR 310.515]
	4. <del>31</del> 28 The pharmacy prov with 21 CFR 201.57(c).	vides patients with Black Box Warning Inf	ormation in conformance
	4. <del>32</del> 29 Medication guides	are provided on required medications. [﴿	21 CFR 208.1 <u>]</u>
	4.30 The pharmacy uses th [CCR 1713(d)]	ne APDS to deliver prescription medication	ons to patients as provided:
	criteria for use of the	t has determined that each patient using  APDS established by the pharmacy prior	
		on to the patient.  I means to identify each patient and only  I mos to the patient or patient's agent.	release the patient's
	☐ 4.30.3 The pharmacy	provides an immediate consultation with ne, upon the request of a patient.	ı a pharmacist, either in-
	4.30.4 Any incident in occurred shall be review	volving the APDS where a complaint, delewed as part of the pharmacy's quality assions Code section 4125.	
	CORRECTIVE ACTION OR A	ACTION PLAN AND COMPLETION DATE	
Yes No N/	E. RECORD KEEPING	REQUIREMENTS	
	4.33 The operating pharm	acy has complied with all recordkeeping	and quality assurance
	- 1	DS and separately from the other pharma	
	drugs stored in the APDS	acy will maintain records of acquisition a separate from other pharmacy records. [	[BPC 4119.11(a)(4)]
	<u> </u>	ned electronically must be maintained so ton duty if the pharmacist-in-charge is no	•
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	electronic	copy of all records	emises are open for business, be ab of acquisition and disposition or ot cally. [BPC 4105(d)(1)]	•
	CORRECTI	VE ACTION OR ACT	ION PLAN AND COMPLETION DATE	<u></u>
		<u> </u>		
es No N//		LICIES AND PROCE	DURES	
	4.3 <del>6</del> <u>2</u> The բ		loped and implemented written pond the policies are reviewed annual	
	<u> </u>	Maintaining the se	ecurity of the APDS and dangerous	drug <u>s</u> and devices within the
	<u>4.32.2</u>		ply inclusion criteria regarding which acement in the APDS and for which	
	<u> </u>	Ensuring patients	are aware that consultation with a cation including those delivered via	
	<u> </u>		nent of responsibilities and training sing the APDS at that location rega	
	<u> </u>	Orienting patients medications are n	on use of <u>the</u> APDS and notifying pot available in the APDS. The pharn erfere with the delivery of drugs ar	nacy must ensure the use of the
	<u>4.32.6</u>	Ensuring the deliv	errere with the delivery of drugs an ery of drugs and devices to patient in the event if the APDS is disable	s expecting medications
		Date of Last Po	olicy Review:	
		oharmacy has polic	ies and procedures for security med d diversion. [BPC <u>4427.2(d)(3)</u> 4105	asures and monitoring of the
		oharmacy reports d 6, 21 CFR 1301.76]	rug losses as required by law. [BPC	2 4104, <u>4427.2(d)(4)</u> 4 <del>105.5(c)</del> ,
	Last Repor	rted Drug Loss:		
	CORRECTI	VE ACTION OR ACT	ION PLAN AND COMPLETION DATE	·
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		ON 5: ADDS
	믈	APDS ADJACENT TO THE SECURED PHARMACY AREA OR
		APDS LOCATED IN MEDICAL OFFICES (OR)  APDS A LOCATION WHERE PATIENTS ARE REGULARLY SEEN FOR PURPOSES OF DIAGNOSIS
	<u>=</u>	AND TREATMENT TO ONLY BE USED FOR PATIENTS OF THE PRACTICE (OR)
	П	APDS THROUGH A CLINIC PURSUANT TO HSC 1204 OR 1204.1 OR BPC 4180 OR 4190.
	=	ALDS THROUGH A CERTIC FOR SOART TO TISE 1204 ON 1204.1 ON DEC 4100 ON 4130.
		GENERAL REQUIREMENTS
Yes No N/A		
		e pharmacy maintains the APDS policies and procedures for 3 years after the last date of
	use to	r that APDS. [BPC 4427.6(I) <u>, CCR 1713(f)</u> ]
	E 2 Th	e pharmacy developed and implemented, and reviewed annually the APDS policy and
		dures pertaining to the APDS, including: [BPC 4427.6(a)]
	•	- Maintaining the security of the APDS and the dangerous drugs and devices within the
		APDS
	_	Determining and applying inclusion criteria regarding which drugs and devices are
	_	appropriate for placement in the APDS and for which patients.
	•	Ensuring patients are aware consultation with a pharmacist is available for any
		prescription medications, including those delivered via the APDS.
	•	Describing assignment of responsibilities to, and training of, pharmacy personnel and
		other personnel using the APDS at the location where the APDS is placed, regarding
		maintenance and filing procedures for the APDS.
	•	Orienting participating patients on the use of the APDS, notifying patients when
		expected prescription medications are not available in the APDS, and ensuring patient
		use of the APDS does not interfere with delivery of drugs and devices.
	•	Ensuring delivery of drugs and devices to patients expecting to receive them from the
		APDS in the event the APDS is disabled or malfunctions.
		e pharmacy uses the APDS to deliver prescription medications to patients provided: [CCR
	<u>1713(</u>	<u>1)]</u>
	<u> </u>	5.2.1 A pharmacist has determined that each patient using the APDS meets inclusion
		criteria for use of the APDS established by the pharmacy prior to deliver of
	_	prescription medication to the patient.
	<u> </u>	5.2.2 The APDS has a means of identifying each patient and only release that patient's
	_	prescription medication to the patient or patient's agent.
		5.2.3 The pharmacy provides an immediate consultation with a pharmacist, either in-
		person or via telephone, upon the request of a patient.

	<u>⊔</u> <u>5.2.4</u>		g the APDS where a complaint, do iewed as part of the pharmacy's o	
			ss and Professions Code section 4	
Yes No N/A	5.3 The pha pharmacy u	under this section. [BPC	more than 15 APDS licenses for or C 4427.6(k)] List of current APDS li	censes:
	1		2	
	3		4	
	5		6.	
	7		8	
	9		10	
	11		12	
	13		14	
	15			
	CODDECTIV	/F ACTION OP ACTION I	PLAN AND COMPLETION DATE	
	CORRECTIV	L ACTION OR ACTION I	PLAN AND COMPLETION DATE	<del></del>
B. PHAR Yes No N/A		SPONSIBILITIES:		
	· · ·	process, including, but	oard performs all clinical services not limited to, drug utilization re	
	pharmacist	has reviewed the pres	APDS only upon authorization fro cription and the patient's profile g reactions. [BPC 4427.6(e)]	
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Yes No N/A	
	5.6 The pharmacist shall consult patients for the first time on all prescribed drugs and devices dispensed from the APDS. All prescribed drugs and devices dispensed to the patient from the
	APDS for the first time are accompanied by a consultation conducted by a California licensed
	<u>pharmacist</u> . The consultation shall be provided by a Board licensed pharmacist via
	telecommunication link that has two-way audio and video capabilities. [BPC 4427.6(f)]
	, , , , , , , , , , , , , , , , , , , ,
Yes No N//	t
	5.7 The <u>Pp</u> harmacist-in-charge of the offsite ADDS/APDS has ensured the following: [CCR 1715.65(h)]
	[CCN 1713.03(11)]
	$\square$ 5.7.1 All controlled substances added to the ADDS/APDS are accounted for;
	5.7.2 Access to ADDS/APDS is limited to authorized facility personnel;
	5.7.3 An ongoing evaluation of discrepancies or unusual access associated with controlled
	substance is performed; and
	$\square$ <u>5.7.4</u> Confirmed losses of controlled substances are reported to the Board.
	5.8. The pharmacy operating the APDS has completed an <u>annual Self-Assessment pursuant to</u>
	CCR 1715 evaluating the pharmacy's compliance with pharmacy law relating to the use of the APDS. [BPC 4427.7(a)]
	<del>A. D. [D. C. 1427.7 (8)]</del>
	Date of Last Self Assessment:
	<del></del>
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
	<del></del>
	<del>-</del>
	C. DEVICE REQUIREMENTS:
Yes No N//	
	5.9 The stocking of the APDS is performed by a pharmacist, or by a pharmacy technician or
	intern pharmacist under the supervision of a pharmacist, except for an APDS located in a health
	facility pursuant to HSC 1250, where the stocking and restocking of the APDS may be
	performed in compliance with HSC 1261.6. [BPC 4427.4(e)(1)]
	F 10 Access to the ADDC is controlled and treated using an identification or recovered outland and
	5.10 Access to the APDS is controlled and tracked using an identification or password system or biosensor. [BPC 4427.4(e)(2)]
	<del>www.ior.com/e/te/te/te/te/te/te/te/te/te/te/te/te/t</del>
	5.11 The ADDS makes a complete and accurate record of all transactions including all users
	accessing the system and all drugs added to, or removed from, the system. [BPC 4427.4(e)(3)]
	5 , 5 , 1 , 1 , 1 , 1 , 1 , 1 , 1 , 1 ,
	5.12 Drugs and devices not immediately transferred into an APDS upon arrival at the APDS
	location are stored for no longer than 48 hours in a secured room within the APDS location.

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	any losses or overages. [BPC 4427.4(f)]
	5.13 Drugs stored in the APDS are part of the inventory of the operating pharmacy and drugs dispensed by the APDS shall be considered to have been dispensed by the pharmacy.
Yes No N/A	[BPC 4427.4(d)]
	5. <u>448</u> The APDS may only be used for patients who have signed a written consent demonstrating their informed consent to receive prescribed drug and devices from the APDS. Attach a copy of the consent form to the back of the self-assessment. [BPC 4427.6(b)]
	5. <u>459</u> The APDS has a means to identify each patient and only release the identified patient's drugs and devices to the patient or the patient's agent. [BPC 4427.6(c)]
	$5.\underline{\textbf{16}}\underline{\textbf{10}}$ The APDS has a notice, prominently posted on the APDS, which provides the name, address, and phone number of the pharmacy. [BPC 4427.6(g)]
	5. <u>4711</u> Any incident involving the APDS where a complaint, error, or omission occurred is reviewed as part of the pharmacy's quality assurance program pursuant to BPC 4125. [BPC 4427.6(i)]
	5. <u>4812</u> If the APDS is located and operated in a medical office or other location where patients are regularly seen for purposes of diagnosis and treatment, the APDS is only used to dispense dangerous drugs and dangerous devices to patients of the practice. [BPC 4427.6(j)]
	5.4913 The labels on all drugs and devices dispensed by the APDS comply with section 4076 and with section 1707.5 of Title 16 of the California Code of Regulations. [BPC 4427.6(h)]
	5. <del>20</del> 14 The federal warning label prohibiting transfer of controlled substances is on the prescription container. [21 CFR 290.5]
	5.2115 Prescriptions are dispensed in a new and child-resistant container, or senior-adult ease-of-opening tested container, or in a non-complying package only pursuant to the prescriber or when requested by the purchaser. [15 USC 1473[b], 16 CFR 1700.15, CCR 1717]
	5.2216 Patient package inserts are dispensed with all estrogen medications. [21 CFR 310.515]
	5. <del>23</del> 17 The pharmacy provides patients with Black Box Warning Information in conformance with 21 CFR 201.57(c).
	5.2418 Medication guides are provided on required medications. [21 CFR 208.1]

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Upon retrieval of these drugs and devices from secured storage, an inventory is taken to detect

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′es No N/	A	CORD KEEPING RE	EQUIREMENTS  s complied with all recordkeep	ing and quality accurance
	<del>requirements</del>	pursuant to BPC 4	427.6 and those records shall ly from the other pharmacy rec	e maintain within the pharmacy
		•	will maintain records of acquis PDS separate from other phari	ition and disposition of macy records. [BPC 4119.11(a)(4)]
	charge, or the during which electronic cop	e pharmacist on du the licensed premi by of all records of	ises are open for business, be a	ed so that the pharmacist-in- is not on duty, must, at all times able to produce a hardcopy and other drug or dispensing-related
	CORRECTIVE A	action or action	N PLAN AND COMPLETION DAT	E
	E. PC	DLICIES AND PROC	EDURES	
es No N/	5. <del>28</del> 21 The ph respect to all	•	oped and implemented written the policies are <u>maintained and</u> 13(e)]	•
	<u>□</u> <u>5.21.1</u>	Maintaining the s	security of the APDS and dange	rous drug and devices within the
	<u> </u>	Determin <u>ing</u> e an	nd apply <u>ing inclusion criteria re</u> for placement in the APDS and	garding which drugs <u>and</u> devices for which patients.
	<u>□</u> 5.21.3	Ensuring patients	-	rith a pharmacist is available for
	<u> </u>	Describing assign	ment of responsibilities and trainel using the APDS at that loca	<del>-</del>
	<u>□</u> <u>5.21.5</u>	Orienting patient medications are r	s on use of APDS and notifying	pharmacy must ensure the use of
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		suring the delivery of edications from the AF	_	patients expecting APDS is disabled or malfunctions.
		st Policy Review:		
Yes No N/A			es as required by law	. [BPC 4104, <u>4427.2(d)(4)</u> <del>4105.5(c)</del> ,
	Last Reported Dr	ıg Loss:		_
	CORRECTIVE ACT	ON OR ACTION PLAN	AND COMPLETION DA	ATE
		S IN A HEALTH FACILIT		C 1250 <del>– LONG TERM CARE</del>
	A. GENERAL	REQUIREMENTS		
	subdivision (c), (d		0 of the Health and S	cility licensed pursuant to afety Code that has an ADDS
	•	and biologicals to me		the provision of both routine and atient, as prescribed by a physician.
Yes No N/A				
	procedures to en maintenance of t	d the pharmacy has d sure safety, accuracy, ne ADDS as well as qu 7.3(c), HSC 1261.6 (d)	accountability, securi ality, potency, and pu	ty, patient confidentiality, and
	6. <u>⊋1</u> The ADDS po	- (-),	define access to the A	ADDS and limits to access to
	6.3 All ADDS polic	nes and procedures an	e maintained at the p	harmacy and the location where
	the ADDS is being	<del>: used. [HSC 1261.6(d)</del>	<del>(2), BPC 4427.3(c)]</del>	
		cy is responsible for re iintenance of the ADD	<del>-</del>	ned within the ADDS and the
	CORRECTIVE ACT	ON OR ACTION PLAN	AND COMPLETION DA	ATE
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Vaa Nia Ni/A	В.	PHARMACIST RESPONSIBILITIES:
Yes No N/A	6. <del>5</del> 3 Th pocket the sto	ne stocking of the ADDS is performed by a pharmacist, or, if the ADDS utilizes removable is, cards, drawers, similar technology, or unit of use or single dose containers are used, ocking system may be done outside the facility and be delivered to the facility if the ing conditions are met: [HSC 1261.6(g)]
		$6.\pm \underline{3}.1$ The task of placing drugs into the removeable pockets, cards, drawers, or unit or use or single dose containers is performed by a pharmacist, or by an intern pharmacist or a pharmacy technician under the direct supervision of a pharmacist. [HSC 1261.6(g)(1)]
		6.53.2 The removable pockets, cards, drawers, or unit of use or single dose containers are transported between the pharmacy and the facility in a secure tamper-evident container. [HSC 1261.6(g)(2)]
		6.\(\frac{1}{2}\).3 The facility, in conjunction with the pharmacy, has developed policies and procedures to ensure that the removable pockets, cards, drawers, or unit of use or single dose containers are properly placed into the ADDS. [HSC 1261.6(g)(3)]
Yes No N/	<b>'A</b>	
	6. <u>€4</u> In	dividualized and specific access to the ADDS is limited to facility and contract personnel ized by law to administer drugs. [HSC 1261.6(c)]
	ADDS 1	pharmacist reviews and approves all orders prior to a drug being removed from the for administration to a patient. The pharmacist reviews the prescriber's orders and the t's profile for potential contraindications and adverse drug reactions. [HSC 1261.6(f)(2)]
	C C A C	shadula II controlled substance for a nationt in a licensed skilled nursing facility or
		chedule II controlled substance for a patient in a licensed skilled nursing facility or a intermediate care facility is dispensed only after the pharmacist has received:
		6.6.1 An <b>orally transmitted</b> prescription for a Schedule II controlled substance from the prescriber and only after the pharmacist reduced the prescription to writing in ink in the
		handwriting of the pharmacist on a form developed by the pharmacy. The prescription
		must contain: [HSC 11167.5(a)]
		☐ 6.6.1.1 The date the prescription was orally transmitted by the prescriber.
		☐ 6.6.1.2 The name of the person for whom the prescription was authorized.
		☐ 6.6.1.3 The name and address of the licensed skilled nursing facility or licensed
		intermediate care facility in which the person is the patient.
		$\square$ 6.6.1.4 The name and quantity of the controlled substance prescribed.
		☐ 6.6.1.5 The directions for use, and the name, address, category of the

	professional licensure, license number, and federal controlled substance		
		registration number of the prescriber.	
	□ 6.6.1.6	The prescription is endorsed by the pharmacist with the pharmacy's	
		name, license number, and address.	
	6.6.2 Prior to	ofilling a prescription for a Schedule II controlled substance that has been	
		y transmitted, the pharmacist has produced, signed, and dated a hard	
	copy prescri	otion. The prescription must contain: [HSC 11167.5(a)]	
	□ cc21	The data the aveces intime was also transically transcent to dispute	
	<u>□</u> 6.6.2.1	The date the prescription was electronically transmitted by the prescriber;	
	□ 6622	The name of the person for whom the prescription was authorized;	
	<u> </u>	The name and address of the licensed skilled nursing facility or licensed	
	<u> </u>	intermediate care facility in which the person is the patient;	
	□ 6624	The name and quantity of the controlled substance prescribed;	
	·	The directions for use, and the name, address, category of the	
	<u> </u>	professional licensure, license number, and federal controlled substance	
		registration number of the prescriber.	
	□ 6626	The prescription is endorsed by the pharmacist with the pharmacy's	
	<u> </u>	name, license number, and address.	
	□ 6627	<del></del>	
	<u> </u>		
		controlled substance for the licensed skilled nursing facility or licensed	
		intermediate care facility.	
П	6 6 3 An orig	inal Schedule II prescription is written on a form that complies with Health	
=	<u> </u>	ode section 11162.1. [HSC 11164(a)]	
	and saicty s	<u> </u>	
	6.6.4 An orig	inal Schedule II prescription is written with the "11159.2 exemption" for	
_		ly ill. [HSC 11159.2]	
		<del> </del>	
	6.6.5 In an e	mergency where failure to issue the prescription may result in loss of life	
_		uffering, a Schedule II controlled substance may be dispensed from a	
		transmitted orally or electronically by a prescriber or written on a form	
		ied in HSC 11162.1, subject to the following: [HSC 11167(a)-(c)]	
	<u> </u>	The order contains all information required by subdivision (a) of Section	
		<u>11164.</u>	
	<u> </u>	If the order is written by the prescriber, the prescription is in ink, signed,	
		and dated by the prescriber.	
	☐ <u>6.6.5.3</u>	If the prescription is orally or electronically transmitted, it must be	
		reduced to hard copy.	

	<u>□</u> <u>6.6.5.4</u>	The prescriber pr	<u>ovides a written pre</u>	scription on a controlled substance
		form that meets t	the requirements of	HSC 11162.1 by the seventh day
		following the tran	nsmission of the init	<u>ial order.</u>
	☐ <u>6.6.6 An elec</u>	tronic prescription	(e-script) for contr	olled substances that is received
	from the pre	scriber and meets	federal requiremen	ts. [21 CFR 1306.08, 21 CFR 1311]
Yes No N/A	6. <u>₩7</u> The review of the the ADDS is conducted	ed, on a monthly back OS for cleanliness, a	asis, by a pharmacis and a review of all to	d the operation and maintenance of t. The review includes a physical ransaction records in order to verify h)]
	Date of Last Review:			
	6. <u>98</u> The <u>p</u> ₽harmacis [CCR 1715.65(h)]	t-in-charge of the o	offsite ADDS has ens	sured the following:
	☐ <u>6.8.2</u> Access t ☐ <u>6.8.3</u> An ongo controll	o ADDS is limited t ling evaluation of c ed substance is pe	formed; and	
		luating the pharma		<u>biennial</u> Self-Assessment pursuant th pharmacy law relating to the use
	Date of Last Self-Asse	essment:		
	CORRECTIVE ACTION		AND COMPLETION [	DATE
	C. DEVICE REQU	IREMENTS:		
Yes No N/A				
	6. <u>4110</u> The stocking a of the Health and Saf	_	•	ed in compliance with section 1261.6 (c), (g)
	6.12 Drugs and devic	es not immediatel	transferred into an	ADDS upon arrival at the ADDS
- <del></del>	J	•		Froom within the ADDS location.
		U		rage, an inventory is taken to detect
	any losses or overage	_		•
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Yes No N/A	6. <u>1311</u> Transaction information from the ADDS will be made readily available in a written format for review and inspection by individuals authorized by law and maintained in the facility for a minimum of three years. [HSC 1261.6(b)]
	6. <u>1412</u> The information required by BPC section 4076 and HSC 111480 is readily available at the time of drug administration if unit dose packaging or unit of use packaging is used. Unit dose packaging, for purposes of this section, includes blister pack cards. [HSC 1261.6(i)]
Yes No N/A	When the ADDS is used as an emergency pharmaceutical supplies container, drugs removed from the ADDS are limited to the following [HSC 1261.6(e)]:
	6. <u>4513</u> A new drug order given by a prescriber for a patient of the facility for administration prior to the next scheduled delivery from the pharmacy, or 72 hours, whichever is less. The drug is retrieved only upon the authorization of a pharmacist and after the pharmacist has reviewed the prescriber's order and the patient's profile for potential contraindications and adverse drug reactions. [HSC 1261.6(e)(1)]
	6. <u>1614</u> Drugs that a prescriber has ordered for a patient on an as-needed basis, if the utilization and retrieval of those drugs are subject to ongoing review by a pharmacist. [HSC 1261.6(e)(2)]
	6.4715 Drugs designed by the patient care policy committee or pharmaceutical service committee of the facility as emergency drugs or acute onset drugs. These drugs are retrieved from the ADDS pursuant to the order of a prescriber for emergency or immediate administration to a patient of the facility and reviewed by a pharmacist within 48 hours. [HSC 1261.6(e)(3)]
	When the ADDS is used to provide pharmacy services pursuant to BPC 4017.3, the ADDS is subject to the following requirements [HSC 1261.6(f)]:
Yes No N//	6. $\frac{1816}{1}$ Drugs removed from the ADDS for administration to a patient are in properly labeled units of administration containers or packages. [HSC 1261.6(f)(1)]
	$6.\underline{1917}$ A pharmacist reviews and approves all orders prior to a drug being removed from the ADDS for administration to a patient. The pharmacist reviews the prescriber's orders and the patient's profile for potential contraindications and adverse drug reactions. [HSC 1261.6(f)(2)]
	6. <del>20</del> 18 The pharmacy controls access to the drugs stored in the ADDS. [HSC 1261.6(f)(3)]
	6.21 Access to the ADDS is controlled and tracked using an identification or password system or biosensor. [BPC 4427.4(e)(2), HSC 1261.6(f)(4)]

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	6.22 The ADDS makes a complete and accurate record of all transactions that includes all users				
	accessing the system and all drugs added to, or removed from, the system. [BPC 4427.4(e)(3),				
	HSC 1261.6(f)(5)]				
Yes No N/A	6. <u>2319</u> After the pharmacist reviews the ADDS is limited only to drugs ordered by that are specific to the patient. [HSC 126	the prescriber and reviewed	•		
	6.2420 When the prescriber's order requests personnel only have access to the drug [HSC 1261.6 (f)(6)]				
	6.2521 If the ADDS allows licensed person patient specific in itstheir design, the ADDS allows licensed person place to ensure that the drugs delivered ([HSC 1261.6(f)(7)]).	DDS has electronic and mechar	nical safeguards in		
	Please Note: A skilled nursing facility or intermediate care facility using an ADDS that allows licensed personnel to have access to multiple drugs is required to contact the California Department of Public Health, Licensing, and Certification in writing prior to utilizing this type of ADDS. [HSC 1261.6(f)(7)(A)]				
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE				
			_		
Yes No N/4	D. RECORD KEEPING REQUIREMEN	TS	nco roquiromento		
	established in pharmacy law and regulat	or arceping aria quarry assura	rds within the licensed macy records		
Yes No N/A	6. $\frac{27}{22}$ Transaction information from the format for review and inspection by indifor a minimum of three years. [HSC 1261]	viduals authorized by law and			
	6.23 Records of inspections completed b [HSC 1261.6(b), 22 CCR 70263(f)(3)]	y the pharmacist are kept for a	at least three years.		
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	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE			
Yes No N/A	E. POLICIES AND PROCEDURES			
	6.2824 The facility and the pharmacy has developed and implemented written policies and procedures to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the ADDS as well as quality, potency, and purity of the stored drugs and devices. [BPC 4427.3(c), HSC 1261.6(d)(1)]			
	6.2925 The ADDS policies and procedures define access to the ADDS and limits to access to equipment and drugs. [HSC 1261.6(d)(1)]			
	6.3926 All ADDS policies and procedures are maintained at the pharmacy and the location where the ADDS is being used. [HSC 1261.6(d)(2), BPC 4427.3(c)]			
	6.3127 The facility, in conjunction with the pharmacy, has developed policies and procedures to ensure that the removable pockets, cards, drawers, or unit of use or single dose containers are properly placed into the ADDS. [HSC 1261.6(g)(3)]			
	6.32 The pharmacy has policies and procedures that include appropriate security measures and monitoring of the inventory to prevent theft and diversion. [BPC 4427.2(d)(3)]			
	6.3328 The pharmacy's policies and procedures include provisions for reporting to the board drug losses from the ADDS inventory, as required by law. [BPC 4104, 4427.2(d)(4), CCR 1715.6, 21 CFR 1301.76]			
	Last Reported Drug Loss:			
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE			
	SECTION 7: APDS THROUGH A CLINIC PURSUANT TO HSC 1204 OR 1204.1 OR BPC 4180 OR 4190			
<del>Yes No N/</del>	A.—GENERAL REQUIREMENTS			

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	$\Box$	7.1 The ADDS is located inside an enclosed building with a premises address, at a location
		approved by the Board [BPC 4427.3 (a)]. The clinic has a current Board of Pharmacy Clinic
		license pursuant to BPC 4180 or BPC 4190? or the clinic is licensed pursuant to HSC 1204 or
		<del>1204.1. [BPC 4427.3(b)(3)]</del>
		License number:Expiration Date:
		7.2 The clinic has developed and implemented written policies and procedures that ensure the
		safety, accuracy, accountability, security and patient confidentiality. Additionally, the policies
		and procedures shall ensure the maintenance of the quality, potency and purity of the drugs.
		The policies and procedures shall be maintained at the location where the ADDS is being
		used[BPC 4186(a)]
Щ	Ш	7.3 Drugs removed from the ADDS shall be provided to the patient by a health professional
		<del>licensed pursuant to BPC 4186(b).</del>
Щ		7.4 The clinic is responsible for the review of the drugs contained within, and the operation and
		maintenance of, the ADDS. [BPC 4186(d)]
<del></del>		7.5 Drugs dispensed from the clinic ADDS shall comply with labeling requirements in BPC 4076
		with CCR 1707.5. [BPC 4186(g), 4426.7(h)]
	<del></del>	7.6 The clinic shall keep records of the kind and amounts of drugs purchased, administered, and
		dispensed and the records shall be available and maintained for a minimum of three years for
		inspection by all authorized personnel. [BPC 4180(a)(2)]
ПГ	٦П	7.7 The proposed ADDS installation location meets the requirement of BPC 4427.3 and the ADDS
=_	_==	is secure from access and removal by unauthorized individuals. [BPC 4427.2(d)(2)]
		is secure from access and removal by anadenomized maividuals. [b] c =====/(a)(±/)
	<u>]</u>	7.8 The clinics licensed under BPC 4180 or BPC 4190 perform periodic inventory and inventory
		reconciliation functions to detect and prevent the loss of controlled substances.
		<del>[CCR 1715.65(a)]</del>
		7.9 The clinic shall compile an inventory reconciliation report of all federal Schedule II
		controlled substance at least every three months. [CCR 1715.65(c)] The compilation requires:
		A physical count (not estimate) of all quantities of all federal Schedule II controlled
		substances.
		A review of all acquisition and disposition records of federal Schedule II controlled
		substances since that last inventory reconciliation report:
		Date of last inventory
		<ul> <li>A comparison of (1) and (2) to determine if there are any variances.</li> </ul>
		<ul> <li>All records used to compile each inventory reconciliation report shall be maintained at</li> </ul>
		clinic for 3 years in a readily retrievable form.

• Possible causes of overages shall be identified in writing and incorporated into the inventory reconciliation report.

Yes No N/	<b>∆</b>
	7.10 The clinic shall report in writing identified drug losses and known cause to the Board within
	30 days of discovery. Cases of the loss is due to theft, diversion or self-use shall be reported to
	the Board within 14 days of discovery. If the clinic is unable to identify the cause of loss, further
	investigation shall be undertaken to identify the cause and actions necessary to prevent
	additional losses of controlled substances. [CCR 1715.65(d)]
	dadicional losses of controlled substances [con 17 15105(a)]
	7.11 The individuals performing the inventory AND the clinic professional director shall date and
	7.11 The individuals performing the inventory AND the clinic professional director shall date and
	sign the inventory reconciliation reports. The reports shall be readily retrievable at the clinic for
	<del>3 years. [CCR 1715.65(e)]</del>
	7.12 Any incident involving the APDS where a complaint, error, or omission has occurred is
	reviewed as part of the pharmacy's quality assurance program pursuant to BPC 4125.
	<del>[BPC 4427.6(i)]</del>
	7.13 The federal warning label prohibiting transfer of controlled substances is on the
	prescription container. [21 CFR 290.5]
	7.14 Prescriptions are dispensed in a new and shild resistant container, or senior adult ease of
	opening tested container, or in a non-complying package only pursuant to the prescriber or
	when requested by the purchaser. [15 USC 1473(b), 16 CFR 1700.15, CCR 1717]
	7.15 Patient package inserts are dispensed with all estrogen medications. [21 CFR 310.515]
	7.16 The pharmacy provides patients with Black Box Warning Information in conformance with
	<del>21 CFR 201.57(c).</del>
	7.17 Medication guides are provided on required medications. [21 CFR 208.1]
	7.18 is the APDS located and operated only used to dispense dangerous drugs and dangerous
	devices to patients of the clinic? [BPC 4427.6j)]
	7.19 Does the pharmacy have no more than 15 ADDS licensed as APDS units? [BPC 4427.6(k)]
	<del>List of current APDS licenses:</del>
	<del>1.</del>
	<del>3. 4.</del>
	5. 6.
	•·

	7.	<del></del>	
	0	10	
	<del>3.</del>		
	11	13	
	<del>**·</del>	<del>\</del> <del>\</del>	
	<del>13</del>	<u>14.</u>	
	<del>15</del>		
	CORRECTIVE ACTION OR ACTIO	N PLAN AND COMPLETION DATE	<u> </u>
	CONNECTIVE ACTION ON ACTIO	IN FEATN AIND COIVIFEE HOIN DATE	
	R.— PHARMACIST RESPONS	CIRILITY	
No N//	4	<del></del>	
		as stacking of the ADDS IRDC 41	96/c\1
	<del>- 7.20-тте рнагнасы репотны с</del>	ne stocking of the ADDS. [BPC 41	<del>00(0)]</del>
	3	<del>e ADDS system only upon the au</del>	•
	after the pharmacist has review	red the prescription and patient	<del>profile for potential</del>
	contraindications and adverse of	trug reactions. [BPC 4186(b)]	
		_	
	7.22 The pharmacist shall condu	<del>ict a review on a monthly basis ir</del>	ocluding a physical inspection of
		liness and a review of all transac	
	3		<del>tion records in order to verify</del>
	the security and accountability	<del>of the ADDS. (BI'C 4186(d))</del>	
	Date of Last Review:		
	7.23 The pharmacist licensed by	the board performs all clinical s	ervices conducted as part of the
	-	ut not limited to, drug utilization	
	[BPC 4427.6(d)]	at not minera to, and a timeation	review and consumation.
	<del>[BFC 4427.0(U)]</del>		
AI - AI / A	•		
<del>No N//</del> □ □			
		<del>he APDS after the pharmacist ha</del>	• •
	the patient's profile for potenti	<del>al contraindications and adverse</del>	-drug reactions. [BPC 4427.6(e)]
	7.25 All prescribed drugs and de	vices dispensed to the nationt fr	om an APDS for the first time
		ultation conducted by a pharma	
	•	, ,	•
	terecommunication link with a t	two-way audio and video. [BPC-4	<del>"#=/.0(T)]</del>
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	7.26 The APDS has a notice, prominently posted on the APDS, with the name, address, and
	phone number of the pharmacy holding the ADDS license for the APDS. [BPC 4427.6(g)]
	7.27 The pharmacist shall provide patient consultation pursuant to CCR 1707.2 via a two-way audio and video telecommunication link for drugs dispensed by the clinic ADDS. [BPC 4186(e)]
	7.28 The pharmacist operating the ADDS shall be located in California. [BPC 4186(f)]
	7.29 The clinic consultant pharmacist shall review all inventory and inventory reconciliation reports taken and establish and maintain secure methods to prevent losses of controlled substances. The clinic shall develop written policies and procedures for performing the inventory reconciliation reports. (CCR 1715.65(b))  CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
	7.32 The pharmacy has developed and implemented, and reviewed annually, written policies and procedures pertaining to the APDS, including all the following: [BPC 4427.6(a)]
	<ul> <li>Maintaining the security of the APDS and dangerous drugs and dangerous devices within the APDS.</li> <li>Determining and applying inclusion criteria regarding which drugs and devices are appropriate for placement in the APDS and for which patients.</li> <li>Ensuring patients are aware consultation with a pharmacist is available for any prescription medication, including those delivered via the APDS.</li> </ul>
	<ul> <li>Describing assignments of responsibilities to, and training of, pharmacy personnel, and other personnel using the APDS at the location where the APDS is placed pursuant to subdivision (b) of section 4427.3, regarding maintenance and filing procedures for the APDS.</li> <li>Orienting participating patients on the use of the APDS, notifying patient when expected prescription medications are not available in the APDS, and ensuring the patient use of the APDS does not interfere with delivery of drugs and devices.</li> <li>Ensuring delivery of drugs and devices to patients expecting to receive them from the APDS</li> </ul>
	in the event the APDS is disabled or malfunctions.  Date of Last Policy Review:
<del>Yes No N/A</del>	7.33 Is the APDS only used for patients who have signed a written consent form demonstrating their informed consent to receive prescribed drugs and devices from an APDS, and whose use of the APDS meets inclusion criteria established by policies and procedures. [BPC 4427.6(b)]

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	7.34 The APDS shall have a means of identifying each patient and only release the identified
	patient's drugs and devices to the patient or patient's agent. [BPC 4427.6(c)]
	7.35 The pharmacy holding the ADDS license for an APDS maintains its policies and procedures for three (3) years after the last date of use of an APDS. [BPC 4427.6(I)]
	7.36 Does the pharmacy maintain all recordkeeping and quality assurance requirements
	established in pharmacy law and regulations, and maintain these records within the licensed pharmacy holding the ADDS license and separate from other pharmacy records.  [BPC 4427.7(b)]
SECTION	<u>87</u> : ADDS OPERATED BY A CORRECTIONAL CLINIC
	A. GENERAL REQUIREMENTS
Yes No N/#	Z8.1 The pharmacy uses an "automated drug delivery system" used in a correctional clinic, meaning a mechanical system controlled remotely by a pharmacist that performs operations or activities, other than compounding or administration, relative to the storage, dispensing, or distribution of prepackaged dangerous drugs or dangerous devices. An automated drug delivery system shall collect, control, and maintain all transaction information to accurately track the movement of drugs into and out of the system for security, accuracy, and accountability. [BPC 4187.5(h)]
	$\underline{78}$ .2 The ADDS is located in a "correctional clinic," a primary care clinic, as referred to in subdivision (b) of section 1206 of the Health and Safety Conducted, maintained, or operated by the state to provide health care eligible patients of the Department of Corrections and Rehabilitation. $\underline{18}$ [BPC 4187 $\underline{18}$ ].
Yes No N/A	<ul> <li><u>7</u>8.3 The correctional clinic licensed by the board obtains the drugs from a licensed correctional pharmacy, the Department of Correction and Rehabilitation's Central Fill Pharmacy, or from another correctional clinic licensed by the board within the same institution for the administration or dispensing of drugs or devices to patients eligible for care at the correctional facility if under either: [BPC 4187.1(a), 4187.2]</li> <li>The direction₅ of a physician and surgeon, dentist, or other person lawfully authorized to prescribe.</li> <li>An approved protocol as identified within the statewide Inmate Medical Services Policies and Procedures. California Correctional Health Care Services Health Care Department Operations Manual. [BPC 4187.2]</li> </ul>
	<u>7</u> 8.4 The dispensing or administering of drugs in the correctional clinic is performed pursuant to a chart order, as defined in section 4019, a valid prescription consistent with chapter 9 division 2 of the Business and Professions Code, or pursuant to an approved protocol as identified

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within the statewide Inmate Medical Services Policies and Procedures. <u>California Correctional Health Care Services Health Care Department Operations Manual.</u> [BPC 4187.1(b), 4187.2]

Yes No N/A	<u>7</u> 8.5 Medications dispensed to patients to the labeling requirements of section 407 division 2 of the Business and Profession	76 and all record=keeping requi		
	<u>7</u> <b>8</b> .6 The correctional clinic keeps record administered, transferred, and dispense maintained for a minimum of three year [BPC 4187.1(c)]	d. The records must be readily	available and	
	<u>7</u> 8.7 The correctional clinic has obtained	a license from the board. [BPC	C 4187.1(d)(1)]	
	<u>7</u> 8.8 A separate license was obtained for located and is not to be transferrable. [E		on where an APDS is	
	<u>7</u> 8.9 The correctional clinic's location an and building within the correctional inst	-	orrectional institution	
	<u>7</u> 8.10 The correctional clinic will notify the address on a form furnished by the boar		ange in the clinic's	
	8.11 The ADDS is secured from access and removal by unauthorized individuals.  [BPC 4427.2(d)(2)]			
	CORRECTIVE ACTION OR ACTION PLAN	AND COMPLETION DATE		
	B. POLICIES AND PROCEDURES			
Yes No N/A				
	<u>7</u> 8.1 <u>21</u> The policies and procedures to in the correctional clinic was developed an and Therapeutics Committee referenced	d approved by the statewide C	Correctional Pharmacy	
	<u>7</u> 8.132 Prior to the issuance of the corre of the policies and procedures was signe servicing the institution, the pharmacist and Rehabilitation's Central Fill Pharmac supervising dentist, chief nurse executiv	ed by the correctional facility p -in-charge for the California De cy, and the correctional clinic's	harmacist-in-charge epartment of Correction chief medical executive,	
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Yes No N/A	<u>A</u> _ <del>7_8</del> .1 <del>4</del> 3_The chief executive officer _pharmacy services. [BPC 4187.2(b		derly and lawful provision of	
	78.154 The pharmacist-in-charge of procedures developed and approx Committee referenced in section Services California Correctional Hoppartment Operations Manual in medical executive, the supervising	of the correctional facility shaved by the statewide Correct 5042.2 of the Penal Code and ealth Care Services Policies and conjunction with the chief	ional Pharmacy and Therapeutics of the <del>statewide Inmate Medical</del> and Procedures <u>Health Care</u> executive officer, the chief	
	<u>78</u> .1 <u>65</u> The licensed correctional c chief executive officer on a form f	•		
	<u>7</u> 8.1 <u>¥6</u> Schedule II, III, IV or V cont the licensed correctional clinic law defined in section 4019, a valid pr and Professions Code, or pursuan Inmate Medical Services Policies & Health Care Department Operation	wfully authorized to administ rescription consistent with ch it to an approved protocol as and Procedures <u>California Co</u>	er pursuant to a chart order, as apter 9 division 2 of the Business identified within the statewide rrectional Health Care Services	
	<u>78.187</u> The ADDS located in a licer Correctional Pharmacy and Thera statewide Inmate Medical Service Department Operations Manual accountability, security, patient copurity of drugs. [BPC 4187.5(a)]	peutics Committee's policies <del>S California Correctional Hea Policies and Procedures</del> to en	and procedures and the <a href="https://link.nih.google-color: blue;">https://link.nih.google-color: brocedures and the link.nih.google-color: brocedures an</a>	
	<u>78</u> .1 <u>98</u> All policies and procedures the location where the <del>automate</del>			
	CORRECTIVE ACTION OR ACTION	PLAN AND COMPLETION DAT	E	
	C. PHARMACIST RESPONSIE	BILITIES		
Yes No N/	<b>A</b> _ <del>7</del> 8. <del>20</del> 19 A correctional facility pha	rmacist inspects the clinic at	least quarterly. [BPC 4187.2(c)]	
	78.2120 Drugs removed from the automated drug system ADDS is are removed upon authorization by a pharmacist after the pharmacist has reviewed the prescription and the patient profile for potential contraindications and adverse drug reactions. If the correctional			
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<u>reviewed the prescription</u> and if, <u>in</u> the prescriber's professional judgment, a delay in therapy may cause patient harm, the medication may be removed from the automated drug delivery system-ADDS and administered or furnished to the patient under the direction of the prescriber. Where the drug is otherwise unavailable, a medication may be removed and administered or furnished to the patient pursuant to an approved protocol as identified within the statewide Inmate Medical Services Policies and Procedures California Correctional Health Care Services Health Care Department Operations Manual. Any removal of the medication from an automated drug delivery-ADDS system is documented and provided to the correctional pharmacy when it reopens. [BPC 4187.5(b)] Yes No N/A  $\square$   $\square$   $\square$  28.2221 The review is conducted on a monthly basis by a pharmacist and shall include a physical inspection of the drugs in the automated drug delivery system-ADDS, an inspection of the automated drug delivery system-ADDS machine for cleanliness, and a review of all transaction records in order to verify the security and accountability of the system. [BPC 4187.5(e)] Date of Last Review: CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE D. DEVICE REQUIREMENT Yes No N/A 니니니 <u>7</u>8.<del>23</del>22 Drugs removed from the ADDS <del>is </del>are provided to the patient by a health professional licensed pursuant to division 2 of the Business and Professions Code who is lawfully authorized to perform the task. [BPC 4187.5(c)]  $\Box\Box\Box$  78. $^{24}$ 23 The review of the drugs contained within, and the operation and maintenance of, the ADDS shall be the responsibility of the correctional clinic. [BPC 4187.5(e)]  $\Box\Box\Box$  78.2524 The ADDS is operated by a licensed correctional pharmacy. Any drugs within the ADDS are considered owned by the licensed correctional pharmacy until they are dispensed from the ADDS. [BPC 4187.5(f)]  $\square$   $\square$   $\square$  28.2625 Drugs from the ADDS in the correctional clinic are removed by a person <u>authorized to</u> stock the ADDS, or by a person lawfully authorized to administer or dispense the drugs. [BPC 4187.5(g)] CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE\_\_\_\_\_

pharmacy is closed. Where administration of the drug is necessary before a pharmacist has

E.	RECORD KEEPING	REQUIREMENT	ΓS	
dange inspec	— erous drugs or dange etion by authorized c	erous devices, a officer of the la	t all times during w and <del>is </del> are pres	n, receipt, shipment, or disposition of the served for at least three years frow decrectional clinic. [BPC 4081(a
CORRI	ECTIVE ACTION OR A	ACTION PLAN A	ND COMPLETION	N DATE
□ Please used f	Hospital Pharmacy PURSUANT TO BPC A HOSPITAL PHARMA	is closed and no 4056 (DRUG RO CY: AUDS USED armacies and c This section ad	o pharmacist is avo OM) OR FOR DISPENSING drug rooms must dresses addition	BPC 4056 (Drug Room) or BPC 4068  ailable) USED FOR DISPENSING  PURSUANT TO BPC 4068  t also complete Section 6 for ADI al requirements for hospital
-	GENERAL REQUIREM			<u></u>
89.1 T admin hospit deterr immed locate patien means quant	nistration and dispental, to emergency case mines that it is in the diately commenced ed outside the hospite within 30 minutes as of the method of tricky dispensed is limited.	sation by a physes under treate best interest or continued, at all is not availal of the hospital ransportation t	ysician to person ament in the hosp of the patient the and the physician ble and accessible pharmaceutical the patient states unt necessary to	pharmacist and the AUDS is used s registered as inpatients of the pital, or to outpatients if the physical a particular drug regimen be a reasonably believes that a pharmale at the time of dispensation to the services or within a 30-mile radius they he/she intend to use. The maintain uninterrupted therapy,
00 2 Th	iot exceed a 72-noul			
includ	<del>ne</del> <u>Where the</u> prescr	<u>stance,</u> from th	al emergency ro	om dispenses <u>a dangerous</u> drug <u>,</u> nergency room patient, the follov

	브	<u>8.2.1</u>	when to Indian hospital pharmachospital.	cy is closed and there is no	pharmacist available in the
		8.2.2	The drugs <del>is </del> are acquired by	the hospital pharmacy.	
			The dispensing information i		the pharmacy when the
			pharmacy reopens.		
		<u>8.2.4</u>	The hospital pharmacy retain	ns the dispensing informati	on <u>and, if the drug is a</u>
			schedule II, schedule III, or so	chedule IV controlled subst	ance, reports the dispensing
			information to the Departme	ent of Justice pursuant to S	ection 11165 of the Health
			and Safety Code.		
		<u>8.2.5</u>	The prescriber determines it		
			drug regimen be immediatel	•	·
			reasonable believes that a pl	•	•
	_		and accessible at the time of		
	Ш	<u>8.2.6</u>	The quantity dispensed is lim		•
			uninterrupted therapy when	•	•
			available or accessible, and s		
		8.2.7	The prescriber ensures that t		ins all the information
			required by BPC section 407	<u>).</u>	
	use		erating pharmacy has obtained dispensing		•
Yes No N/	<del>9.3</del> 8		prescriber ensures the label c CCR 1707.5 <u>.</u>	on the drug contains all the	information required by BPC
			federal warning label <del>s</del> prohib on container. [21 CFR 290.5]	iting transfer of controlled	substances is on the
	eas	e-of-op	prescription drug is dispensed ening tested container, or in scriber or patient. [15 USC 14]	a non-complying package	only pursuant to the request
	III o	or IV co sonably	hospital pharmacy or drug ron ntrolled substance to the Dep y possible, but not more than . [BPC 4068(a)(4), HSC 11165(	t of Justice pursuant to HS seven days after the date	C 11165 as soon as
	<del>9.7</del> 8	<u>.8</u> Patio	ent package inserts are disper	nsed with all estrogen med	ications. [21 CFR 310.515]
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Yes No N/A	9.88.9 The hospital has written polic information regarding each drug give from a drug room, including the use warnings, and the importance of co	en at the time of discharge and storage of each drug,	e or dispensed from a prescriber the precautions and relevant
	9.9 The operating pharmacy has obtained used for administration and dispense 4427.2(i)]		Į.
Yes No N//	8.10 Medication guides are provided	on required medications.	[21 CFR 208.1]
	8.11 Black box warning information i	is in conformance with 21 (	CFR 201.57(c).
	8.12 Whenever an opioid prescription pharmacy or practitioner dispensing means of a flag or other notification "Caution: Opioid. Risk of overdose a	the drug prominently disp mechanism attached to the	plays on the label or container, by ne container, a notice that states,
	CORRECTIVE ACTION OR ACTION PL	AN AND COMPLETION DAT	E
	SECTION 9 – AUDS THROUGH A FAC AUTHORITY TO PROVIDE PHARMAC DETENTION FACILITY, OR OTHER CO WITH THE FACILITY UNDER THE AU A. GENERAL REQUIREMENTS	CEUTICAL SERVICES (OR) A DRRECTIONAL FACILITY WI	UDS THROUGH A JAIL, YOUTH HERE DRUGS ARE ADMINISTERED
Yes No N/A	9.1 Review of the drugs contained volume in accordance with law and is the review on a monthly basis, which inspection of the ADDS for cleanline the security and accountability of the Date of Last Review:	the responsibility of the ph h includes a physical inspe ess, and a review of all tran	narmacy. A pharmacist conducts ction of the drugs in the ADDS, an saction records in order to verify
	CORRECTIVE ACTION OR ACTION PL	AN AND COMPLETION DAT	<u>[E</u>
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			В	PHARMACIST RESPONSIBILI	TIES:	
Yes No	N/A					
	$\overline{}$	9.2	The	stocking of an ADDS is perfo	rmed by a pharmacist. If t	the ADDS utilizes removable
						single dose containers, as defined
		by t	he L	Inited States Pharmacopoeia	a, the stocking system ma	y be done outside of the facility
		<u>and</u>	be o	delivered to the facility, if all	the following conditions	are met: [BPC 4427.65(c)(6)]
		_		4		
			9.2		•	ets, cards, drawers, or unit of use
						acist, or by an intern pharmacist
		_				t supervision of a pharmacist.
		Ц	<u>9.2</u>			use or single dose containers are
				transported between the	pharmacy and the facilit	<u>y in a secure tamper-evident</u>
				<u>container.</u>		
			<u>9.2</u>	.3 The facility, in conjunctio	n with the pharmacy, has	developed policies and
				procedures to ensure that	at the removable pockets,	cards, drawers, or unit of use or
				single dose containers ar	e properly placed into the	<u>e ADDS.</u>
		0 2 ·	Tho	nharmacist in sharge of a ni	aarmaey coryicing an onci	te or offsite ADDS ensures the
<u></u>				g: [CCR 1715.65(h)]	larmacy servicing an onsi	te of offsite ADD3 effsures the
		IOIIC	<i>7</i>	<u>g. [CCIV 1713.03(II]]</u>		
			<u>9.3</u>	.1 All controlled substances	added to an ADDS are ac	counted for.
			9.3	.2 Access to the ADDS is lim	ited to authorized facility	personnel.
						access associated with controlled
		=		substances is performed.		
			9.3	.4 Confirmed losses of cont	-	orted to the board.
		COE	RFC	TIVE ACTION OR ACTION PLA	ΔΝ ΔΝΟ COMPLETION DΔ	TF
		COI	IILC	TIVE ACTION ON ACTION 1 L	AN AND COMI LETION DA	ME.
			C. <u>I</u>	DEVICE REQUIREMENTS:		
Yes No						6 400
<u>ШШ</u>				•		facility and contract personnel
		<u>autl</u>	1011Z	<u>red by law to administer dru</u>	gs. [BPC 4427.65(C)(2)]	
		176		<b>3</b> (Dov. 12/1022)	Dago 40 of 44	DIC Initials
		T / I/	/I-TT	<b>2</b> (Rev. 1 <del>2</del> / <del>18</del> <u>22</u> )	Page 40 of 44	PIC Initials

# When the ADDS is used as an emergency pharmaceutical supplies container, drugs removed from the ADDS are limited to the following [BPC 4427.65(c)(4)]:

Yes No N/A	=
	9.5 A new drug order given by a prescriber for a patient of the facility for administration prior to
	the next scheduled delivery from the pharmacy, or 72 hours, whichever is less. The drugs are
	retrieved only upon authorization by a pharmacist and after the pharmacist has reviewed the
	prescriber's order and the patient's profile for potential contraindications and adverse drug
	<u>reactions. [BPC 4427.65(c)(4)(A)]</u>
	9.6 Drugs that a prescriber has ordered for the patient on an as-needed basis, if the utilization
	and retrieval of the drugs are subject to ongoing review by the pharmacist. [BPC
	<u>4427.65(c)(4)(B)]</u>
	9.7 Drugs designed by the patient care policy committee or pharmaceutical service committee
	of the facility as emergency drugs or acute onset drugs. These drugs may be retrieved from the
	ADDS pursuant to the order of the prescriber for emergency or immediate administration to
	the patient of the facility. Within 48 hours after retrieval, the case is reviewed by the
	pharmacist. [BPC 4427.65(c)(4)(C)]
	· · · · · · · · · · · · · · · · · · ·
	When the ADDS is used to provide pharmacy services pursuant to BPC 4017.3, the ADDS is
	subject to the following requirements [BPC 4427.65(c)(5)]:
	9.8 The drugs removed from the ADDS for administration to a patient are in properly labeled
	units of administration containers or packages. [BPC 4427.65(c)(5)(A)]
	9.9 The pharmacist reviewed and approved all orders prior to a drug being removed from the
	ADDS for administration to the patient. The pharmacist reviewed the prescriber's order and the
	patient's profile for potential contraindications and adverse drug reactions. [BPC
	<u>4427.65(c)(5)(B)]</u>
	9.10 The pharmacy providing services to the facility controls the access to the drugs stored in
	the ADDS. [BPC 4427.65(c)(5)(C)]
	9.11 After the pharmacist reviews the prescriber's order, access by licensed personnel to
	the ADDS is limited only to drugs ordered by the prescriber and reviewed by the pharmacist
	and that are specific to the patient. When the prescriber's order requires a dosage variation of
	the same drug, licensed personnel has access to the drug ordered for that scheduled time of
	administration. [BPC 4427.65(c)(5)(F)]
	<u> </u>
	0.12 ADDS that allow licensed personnel to have access to multiple drugs and are not
<u></u>	9.12 ADDS that allow licensed personnel to have access to multiple drugs and are not
	patient specific in their design, shall be allowed if the ADDS has electronic and mechanical
	safeguards in place to ensure the drugs delivered to the patient are specific to the patient.
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	[BPC 4427.65(c)(5)(G)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
Yes No N/A	D. <u>RECORD KEEPING REQUIREMENTS</u>
	9.13 Transaction information shall be made readily available in a written format for review and inspection by individuals authorized by law and are maintained in the facility for a minimum of three years. [BPC 4427.65(c)(1)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE
Ves No N/A	E. POLICIES AND PROCEDURES
Yes No N/A	9.14 The pharmacy operating the AUDS shall develop and implement, and review annually, the
	written policies and procedures pertaining to the ADDS. [BPC 4427.65(b)]
	9.15 The facility and the pharmacy has developed and implemented written policies and procedures to ensure safety, accuracy, accountability, security, patient confidentiality, and maintenance of the quality, potency, and purity of stored drugs. The policies and procedures
	define access to the ADDS and limits to access to equipment and drugs. [BPC 4427.5(c)(3)(A)
	9.16 All policies and procedures are maintained at the pharmacy operating the ADDS and the location where the ADDS is being used. [BPC 4427.5(c)(3)(B)]
	CORRECTIVE ACTION OR ACTION PLAN AND COMPLETION DATE

### **CERTIFICATION ACKNOWLEDGMENT**

PHARMACIST-IN-CHARGE	CERTIFICATION:	
completed the self-assess pharmacist-in-charge. Any responses are subject to v	rerification by the Board of Pharr he State of California that the inf	
Signature (Pharmacist-ii	Date n-Charge)	
ACKNOWLEDGMENT BY C	OWNER OF ADDS:	
the State of California that understand that failure to	t I have read and reviewed this c	d in this self-assessment could result
Signature	Date	

### **CERTIFICATION OF COMPLETED ACTION PLAN**

PHARMACIST-IN-CHARGE CE	RTIFICATION:	
corrected the deficiencies ide system of which I am the pha verification by the Board of F	entified in the self-assessm armacist-in-charge. I under Pharmacy. I further state u	hereby certify that I have nent of this automated drug delivery rstand that all responses are subject to nder penalty of perjury of the laws of provided in this self- assessment form
Signature (Pharmacist-in-C	Date harge)	
ACKNOWLEDGMENT BY OW	NER OF ADDS:	
the State of California that I I understand that failure to co	nave read and reviewed th rrect any deficiency identi	under penalty of perjury of the laws of is completed self-assessment. I fied in this self-assessment could result m's license issued by the California
Signature	Date	