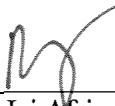


County of Marin Behavioral Health & Recovery Services (BHRS)	POLICY NO. BHRS-72
POLICY:	Next Review Date: January 2024
<u>SUBSTANCE USE SERVICES MEDICATION PRACTICES</u> SUPERCEDES: BHRS-SUS-23	Date Approved: January 28, 2021 By:  Jei Africa, PsyD Director, Behavioral Health and Recovery Services

POLICY: SUBSTANCE USE SERVICES MEDICATION PRACTICES

I. PURPOSE:

The purpose of this policy is to ensure safe and effective medication practices in County-operated and contracted substance use treatment programs.

II. REFERENCES:

State/Marin County DMC-ODS Intergovernmental Agreement (IA)
Department of Health Care Services AOD Certification Standards, Sections 7030 – 7040
DHCS Drug/Medi-Cal Certification Standards, Pharmaceutical Service Requirements

III. POLICY:

It is the policy of Marin County Division of Behavioral Health and Recovery Services (BHRS) to ensure compliance with applicable standards and regulations pertaining to safe and effective medication practices for County-operated substance use treatment programs and to monitor contracted providers for compliance with their policies and procedures regarding safe and effective medication practices. The monitoring mechanism shall be under the supervision of a person licensed to prescribe or dispense prescription drugs.

IV. AUTHORITY/RESPONSIBILITY:

Quality Management Program
Division Director
Program and Contract Managers
Chief, Addiction Services
Contracted Substance Use Treatment Providers

VI. PROCEDURE:

As applicable, County-operated and contracted substance use treatment providers shall have written policies regarding: the use of prescribed medications by clients; disposal of

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medications which are not removed by the client upon termination of services; and staff training and coverage.

If a clinic maintains, administers, or dispenses drugs, the drug distribution service shall be in conformance with all appropriate state and federal pharmacy laws and shall have policies and procedures outlining how medications are administered, labeled, stored, disposed and dispensed.

Programs that choose to provide Medication Assisted Treatment (MAT) shall develop a policy, which includes how the program informs clients and educates staff about the MAT available at the program. The policy shall also include the assessment of a client’s MAT needs, administration and storage of medications, and training of staff.

Staff shall be trained in the area of MAT protocols to include all portions of these Standards pertaining to monitoring of persons undergoing detoxification. Residential programs must obtain approval from DHCS to provide incidental medical services prior to providing MAT.

Contractor compliance with this policy shall be achieved through:

1. Distribution of the Contractor Manual, which includes information about Policies, Procedures and contract requirements, annually at contract renewal.
2. Contracted substance use treatment providers are required to submit copies of relevant medication policies for BHRS review at contract renewal.
3. Annual completion of the Self-Audit by relevant Contractors, and subsequent review by BHRS Contract Manager, including Contractor’s signed attestation of adherence to all applicable laws and regulations. The Self-Audit includes language on compliance with applicable requirements, including, but not limited to the DMC Pharmaceutical Service Requirements.
4. At the annual Site Visit, Contract Manager shall review relevant contractor procedures to assess their compliance with their policies and procedures, including a review of whether monitoring of medication services is performed at least annually and under the supervision of a person licensed to prescribe or dispense prescription drugs.

County-operated substance use treatment services do not currently prescribe, administer, dispense or store any medications. Should that change, compliance with this policy shall be achieved through:

1. Approval of State-County Intergovernmental Agreement by Board of Supervisors or authorized designee agreeing to all conditions set forth in the contract.

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2. Annual completion of the Self-Audit, and subsequent review by BHRS Quality Management, including County Alcohol & Drug Administrator’s signed attestation of adherence to all laws and regulations.
3. At annual Site Visit, BHRS Quality Management shall review relevant procedures to assess compliance with policies and procedures, including a review of whether monitoring of medication services is performed at least annually and under the supervision of a person licensed to prescribe or dispense prescription drugs.
4. At least annually, the Chief of Addiction Services shall monitor compliance with safe and effective medication practices.

BHRS
Checklist for New or Revised Policies and Procedures

Please submit this checklist to the BHRS Policy and Procedure Working Group Lead along with the first draft copy of your policy and accompanying documents.

Date of initial submission: November 5, 2020

Type of Update:

- New – Justification:
- Revision to Existing Policy or Procedure, Policy Number: bhrs sus 26

Complete Title of Policy: Medication Practices

Lead Staff Name / Subject Matter Expert: Jordan Hall

Other Staff Involved in Drafting of Policy: Cat Condon

System(s) of Care Affected: ALL BHRS Mental Health Only SUDS only

1. For **new** policies, summarize what the policy covers and explain the need for a new policy.
OR
For **revised** policies, summarize the changes that need to be made to the existing policy:
Updated references
2. List any existing governmental regulations that relate to policy or state “None”:
State/Marin County DMC-ODS Intergovernmental Agreement (IA) Department of Health
3. Describe how policy will impact consumer access to care or state “N/A”:
NA
4. Have you compared this policy to similar policies in other counties? Yes No
If so, list counties whose policies were reviewed:
5. Will this policy require staff training? Yes No
If so, indicate what staff will need to be trained and what training will be needed.
6. Will forms need to be developed or revised for this policy or policy update? Yes No If so, list forms that will need to be developed or revised (please list form number if available):
7. Describe any other changes that will need to be made in Behavioral Health (financial, consumer care, etc.) as a result of this policy:
NA

BHRS
Checklist for New or Revised Policies and Procedures

8. Who needs to review this policy?

BHRS staff: Jei Africa

Other County Staff:

Community partners: