

Vermont Psychiatric Care Hospital Policy and Procedure		
Pharmacy Emergency Preparedness		
Effective: September 2014	Revised: September 2024	Due for Review: September 2026

POLICY

The Pharmacy and Therapeutics Committee will develop a plan whereby all medications will be readily available during an emergency. Vermont Psychiatric Care Hospital (VPCH) pharmacy will continue to provide medications for the hospitalized individuals during that emergency. The criteria of an emergency shall include but not limited to: Power outages, Severe weather conditions limiting supplies to the hospital, Bomb Threats, Train derailments, Terrorist attacks.

PROCEDURE


1. **Staffing:**
 - The Director of Pharmacy will maintain adequate pharmacy personnel for VPCH during the emergency.
2. **Supply:**
 - VPCH Pharmacist will always maintain an adequate inventory. Inventory levels maintained will be 30 to 90-day supply. Pharmacy will order medications as needed. Supplies will be available in the ADM and in the Pharmacy department.
3. **Dispensing**
 - **On generator power-CPSI and Pyxis functioning properly:**
 - i. VPCH pharmacy will dispense medications to the ADM if appropriate. If there is a power failure and on generator power- Medication stations can be accessed. All medications- controlled and non-controlled medication are available. If the power outage was anticipated or deemed extended - Nursing/ pharmacy may be asked to generate MAR’s. Nursing and Pharmacy will function normally.
 - **CPSI not functioning and Pyxis functioning as a stand-alone system:**
 - i. If the Electronic health record is not functioning, there will be NO connection to the ADM. The Medication station will only be current to the last moment the Electronic Health record was functioning. The ADM will remain operational on generator power. Pharmacy will continue to replenish the stations normally. All medications will be removed through critical override. MAR’s can be generated by Nursing supervisors on the PC backup computer.
 - **No generator power with prolonged power outages:**
 - i. Pyxis and CPSI will not be utilized. In a prolonged power failure, the pharmacy will revert to the paper and profile system, manually filling hospitalized individual’s medications will occur. Each hospitalized individual will receive a 24-48 hour supply of their medication dispensed daily and placed in a locked medication area in the medication room. With the extended power outage – Hospitalized individuals will be placed in other area hospitals.

Specialty Items

- i. Refrigerated items will be dispensed during these emergency situations, if applicable. If there is a power outage for the refrigerated medications and the integrity of the medication is questionable, the pharmacy will not dispense these medications. If the medications are not in correct storage conditions, they will be quarantined and not dispensed. If the medications can be stored for 28 days at room temperature, a new expiration date will be placed on the medication. The storage conditions have been recorded up to the power outage, so that time frame is when the 28 days begins. If there is any doubt, medications will be quarantined. Medications that are housed in the refrigerator apply to 28 day rule- Lorazepam liquid, Insulin. The other medications stored in the pharmacy refrigerator- Risperidone Consta and vaccines will NOT be used and will be quarantined.

4. Resumption of Power

- All connections with the Electronic Health Record and the ADM- will be investigated to ensure they function properly.
- **Short term outages with ADMachines and Electronic Health Records:**
 - i. Consisting of a working ADM with or without a functioning electronic health record. All electronic health records will be updated (by pharmacy) with the up to date medication orders on each hospitalized individual as needed. All controlled substances will be entered into the electronic medication administration record, either by the Nurse who administered the medications or by the pharmacist.
- **Long term outages without ADMachines and Electronic Health Records:**
 - i. Consisting of nonfunctioning ADM and Electronic Health records. A paper system was initiated with pharmacy and nursing.
 1. All the hospitalized individual’s paper medication orders will be entered into the functioning electronic health record (by pharmacy). Hospitalized individual’s medication profiles will show that most up to date medication orders for administration.
 2. All pharmacy documentation will be filed in the pharmacy as required by law.
 3. Pharmacy will utilize the ADM and be responsible for the properly functioning system for medication removal.

Approved by	Signature	Date
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