



Purpose:

- Establish consistent processes when supplying pass medications for patients requiring temporary leave from an Island Health facility.
- Provide practice standardization for pass medications within Island Health care environments.
- Ensure federal and provincial legislation and regulation of medication handling and administration are followed in all Island Health facilities. These include:
 - [Controlled Drugs and Substances Act](#)
 - [Food and Drugs Act](#)
 - [Health Care \(Consent\) and Care Facility \(Admissions\) Act](#)
 - [Health Professions Act](#)
 - [Pharmaceutical Services Act](#)
 - [Pharmacy Operations and Drug Scheduling Act](#)

Context:

Island Health offers programs and services on the unceded and traditional territories of the Coast Salish, Nuu-chah-nulth, and Kwakwaka'wakw Peoples.

As a signatory to the 2015 Declaration of Commitment to Cultural Safety and Cultural Humility, Island Health is committed to addressing the ongoing impacts of colonialism and Indigenous-specific racism in order to provide a culturally safe, inclusive, healthy and respectful environment.

The organization is committed to strengthening diversity, equity and inclusion to enable excellence in health and care for everyone, everywhere, every time. Through these commitments, Island Health strives to deliver the highest possible standard of care and to promote safe workplaces.

Scope:

- Audience: This policy applies to all health care professionals (HCPs) and respective student populations who are authorized to:
 - Order medications in Island Health. This includes:
 - Prescribers (i.e., physicians, nurse practitioners, and midwives)
 - Administer, handle and dispense medications in Island Health. This includes:
 - Pharmacists and pharmacy technicians
 - All nurses: registered nurse (RN), licensed practical nurse (LPN), and/or registered psychiatric nurse (RPN)
 - Students authorized to perform medication administration as part of their clinical rotation or practicum or as an employed student nurse, with the required regulatory supervision.
- Environment:
 - Island Health-wide
 - The following care environments: acute care, ambulatory acute, long-term care, hospice, respite, and mental health rehabilitation
- Exceptions:
 - [Emergency Discharge Medications \(Also known as To-Go Medication\)](#)

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1.0 Policy

- Healthcare professionals administering medications must adhere to the [Medication Administration Policy](#).

1.1 Roles and Responsibilities

- HCPs are responsible to ensure they follow relevant federal and provincial legislation or regulations, professional standards, limits and conditions, and relevant Island Health policies and procedures when performing any medication-related activity.
- All HCPs are responsible to interact with the patient and/or family from a place of cultural humility and support a culturally safe environment during medication management.
- The prescriber and care team, in conversation with the patient and/or substitute decision maker (SDM), must determine patient suitability to self-administer medication while on pass.
 - If patient self-administration of pass medications is not appropriate:
 - The family or SDM may administer medications to the patient while on pass; or
 - An Island Health unregulated HCP may provide medications under a client-specific delegation of task.

1.2 Orders

- A prescriber order is required for pass medications.
 - The exact duration of pass must be specified, including a start and end date and time.
 - If the pass is extended while the patient is out on pass, and there are essential medications for the patient to receive during that time, then the prescriber must send a prescription to a community pharmacy.
- If PRN medications are required while the patient is out on pass, the prescriber must write or enter a complete medication order for the medication and stipulate the number of doses authorized to be dispensed to the patient.

1.3 Day Passes (Less than 24 Hours of Medication and less than 24-hour's Notice)

- Regularly scheduled and PRN medications are to be supplied from the clinical area, prepared, labelled and dispensed by nursing.

1.4 Overnight Passes (Greater than 24 Hours of Medications)

- Pharmacy will provide overnight pass medications if notice greater than 24-hours has been given.
- Pass medication orders must be sent to Pharmacy at least 24 hours prior to the pass.
 - Some passes require at least 48 business hours to fulfill pass medication requests:
 - Weekend pass: by Wednesday 13:30.
 - Some long-term care sites may require greater than 48 hour's notice during periods where a high number of resident are going on pass (E.g., Christmas).
 - Only those facilities with no on-site pharmacies or those with patient-specific multi-dose packages may follow the day pass procedures for both overnight and day passes.

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1.5 Pharmacy Requests

- Pharmacy will be responsible for delivery of pass medications to the patient care areas with regular delivery times only. Pick up from Pharmacy may be requested.
 - At some sites, narcotics and controlled drugs will be held in the pharmacy for pick-up by the nurse.

1.6 Nurse Dispensing

- Nurses must follow the British Columbia College of Nurses & Midwives [Dispensing Medications](#) Standard.
- Nurses shall only dispense the quantity of medications necessary for the duration of the pass ordered by the prescriber.
- Bulk items such as: topical medications, eye & ear drops, inhalers, and patient's own medication (verified/labelled by pharmacy), shall be supplied directly from the patient care area to the patient provided they are appropriately labelled for self-administration.

1.7 Packaging

- Safety and flip top medication vials for oral medications as well as bottles for oral liquids will be stocked by the nursing unit.
- Unit dose packaged medications as well as multi-dose packages with specified medication administration times can be utilized as part of the pass.

1.8 Labelling

- Pass medications must be labelled using lay terminology and with appropriate auxiliary instructions.
- Nurses must use an approved label (e.g., [Prescription Label Format](#)).
- Per the [Health Professions Act Bylaws](#), and the [British Columbia College of Nurses & Midwives \(BCCNM\) Medication Practice Standard](#), the label for all pass medications must include:
 - Patient name and second identifier;
 - Medication name, dosage, route, and strength;
 - Directions for use;
 - Quantity dispensed;
 - Date dispensed;
 - Initials of the health care professional dispensing the medication;
 - Name, address, and telephone number of the agency from which the medication is dispensed;
 - Name and designation of the prescribing practitioner; and
 - Any other information that is appropriate and/or specific to the medication.

1.9 Medication Storage

- All pass medications must be held in a secure location until the patient is ready to leave according to the [Medication Storage Policy](#).
 - Pass medications containing controlled drugs must be kept in the controlled drug cupboard or in a secured, locked location until the patient is ready to leave the facility.

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1.10 Medication Returns, Disposal and Waste

- Pass medications that did not leave the facility must be returned to Pharmacy.
- Pass medications returned after a pass must be discarded or wasted in the appropriate pharmaceutical waste container. They are not to be returned to inventory or used for any other patient.
 - Controlled drugs must be wasted and co-signed.
 - If removed from the automated dispensing cabinet (ADC), controlled drugs must be wasted under the patient profile on the ADC.
 - Patient’s Own Medications must be re-verified and re-identified according to the [Patient’s Own Medication Procedure](#) on return from pass.

1.11 Narcotics and Controlled Drugs

- HCPs must follow the [Narcotics, Controlled Drugs and Substances Handling Procedure](#) for pass medications.
- The nurse shall provide the controlled drugs directly to the patient or SDM and record the dispensing quantity on the patient record.
- The nurse or pharmacist who dispenses prescription opioids to patients granted temporary leave from the hospital will apply a standard warning label to the drug package and provide a patient information handout as per Health Canada regulation for prescription opioids. (See [Opioid Medicines – Part B: Opioid Patient Information Handout](#))
- For patients on opioid agonist therapy (OAT) the prescriber and care team must assess whether it is safe to dispense more than the daily quantity of OAT.
 - If deemed unsafe, alternate arrangements for a daily dispense in the community while on pass must be arranged.

1.12 Education/Communication

- The nurse must reinforce medication information that is provided to clients and families and respond to concerns or questions they may have about their medication.

1.13 Documentation

- All medication administered and/or dispensed shall be documented in alignment with:
 - Regulated HCP regulatory college documentation practice standard;
 - [Island Health Clinical Documentation Policy](#).

1.14 Medication Safety Events While on Pass

- All HCPs must adhere to the [Patient Safety Incident Management Policy](#).

2.0 Monitoring and Evaluation

- Island Health shall have a monitoring process to evaluate pass medication processes.
- This policy will be reviewed by the Medication Systems and Therapeutics Quality Council (MSTQC) annually and updated as necessary.
- Compliance with this policy is the responsibility of all staff and will be enforced by all levels of leadership.

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- Evaluation will be conducted by the Medical Systems and Medical Informatics portfolio.

3.0 Definitions

- **Computerized Provider Order Entry (CPOE):** The placement of orders into the computer system using either groups of orders (electronic clinical order sets) or single orders by the provider or designated clinician. CPOE tools are implemented in conjunction with electronic clinical decision support to encourage best practice and evidence.
- **Controlled Drugs:** All drugs listed in the *Controlled Drugs and Substances Act*, which include narcotics, benzodiazepines, barbiturates, amphetamines, cannabis/marijuana for medical purposes, or other substances as defined by the Act and its regulations.
- **Delegation of Task:** The process by which client-specific tasks that are outside the unregulated health care professional's role description and basic training are delegated to the unregulated HCP.
- **Dispense(-ing):** Dispensing includes the preparation and transfer of a medication for a client to self-administer at a later time, taking steps to ensure the pharmaceutical and therapeutic suitability of the medication for its intended use, and taking steps to ensure its proper use.
- **Disposal:** To destroy or dispose of an unused portion of a medication into an appropriate pharmaceutical waste container.
- **Employer Controls:** Island Health standards, policies and procedures, and limits and conditions that define the activities that each HCP can or cannot do.
- **Health Care Professional (HCP):** Refers to all HCPs authorized to administer medications in Island Health. This includes:
 - Regulated HCPs: individuals who are part of a regulated health discipline, as defined by the *Health Professions Act*, and for whom administration of medication is within scope of practice and Island Health employer controls.
 - Unregulated HCPs: non-regulated HCPs who have formal approval, knowledge and skills to administer medications based on Island Health employer controls (e.g., Respiratory Therapists or Medical Radiation Technologists). This does not include client-specific delegations of task to unregulated HCPs (e.g., Mental Health Workers, Community Health Workers).
 - Students authorized to perform medication administration as part of their clinical rotation or practicum or as an employed student nurse, with the required regulatory supervision.
- **Medication:** Refers to prescribed and non-prescribed medications (e.g., over-the-counter medications and behind-the-counter medications).
- **Non-Prescription Medications:** Medications that do not require a prescription for sale are called non-prescription medications, over-the-counter (OTC) or behind-the-counter medications. Non-prescription medications are classified as Schedule II, Schedule III and Unscheduled under the BC Drug Schedules Regulation. Examples include acetaminophen, ibuprofen, antacids, decongestants, antihistamines, laxatives, emergency birth control drugs, iron products and certain heartburn drugs, etc.
- **Nurse:** Refers to a registered nurse (RN), licensed practical nurse (LPN), and/or registered psychiatric nurse (RPN).
- **Opioid Agonist Therapy or Treatment:** A treatment for addiction to opioid drugs such as heroin, oxycodone (OxyContin), hydromorphone (Dilaudid), fentanyl and oxycodone/acetaminophen (Percocet). The therapy involves taking the opioid agonists methadone (Methadose), buprenorphine/naloxone (Suboxone) or long-acting morphine (Kadian).
- **Order or Prescription:** A written or electronic directive (order) from a prescriber or provider for a specific patient identified.

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- **Pass:** A temporary leave of absence from an Island Health facility wherein the patient must return for treatment and care.
- **Pass Medications:** All medication required during a pass to ensure continuity of therapy.
- **Patient:** Refers to patient, client, resident or person in receipt of health care services within Island Health.
- **Substitute Decision Maker (SDM):** Committee, Representative, or Temporary Substitute Decision Maker as per [Consent to Health Care and Advanced Care Planning Policy](#).
- **Waste:** In the context of controlled drugs, the witnessed and documented disposal of medications in the appropriate pharmaceutical container.

4.0 Related Island Health Policy Documents

- [Clinical Documentation Policy](#)
- [Consent to Health Care and Advanced Care Planning Policy](#)
- [Emergency Discharge Medications Policy](#)
- [Labels and Labelling Medications Policy](#)
- [Medication Administration Policy](#)
- [Medication Storage Policy](#)
- [Narcotics, Controlled Drugs and Substances Handling Procedure](#)
- [Narcotics, Controlled Drugs and Substances Policy](#)
- [Orders Management Policy](#)
- [Patient Safety Incident Management Policy](#)
- [Patient's Own Medication Procedure](#)
- [Prescription Requirements Policy](#)

5.0 References

- Accreditation Canada. (2021). [Medication Management Standards](#)
- British Columbia College of Nurses & Midwives (2023). [Dispensing Medications](#)
- British Columbia College of Nurses & Midwives (2023). [Medication Practice Standard](#)
- [Health Professions Act – BYLAWS SCHEDULE F PART 1 - Community Pharmacy Standards of Practice](#)
- [Health Professions Act – BYLAWS SCHEDULE F PART 2 – Hospital Pharmacy Standards of Practice](#)

6.0 Resources

- [Dispensing Medications to Patients Granted Temporary Leave of Absence from Hospital \(Pass Meds\) BC Children's Hospital and BC Women's Hospital and Health Centre](#)
- [Know Your Medications before Leaving on a "Pass"! Institute for Safe Medication Practices](#)
- [Medications: Pass Medications \(GFS and UBCH\) \(Vancouver Coastal Health\)](#)
- [Opioid Agonist Therapy. \(Centre for Addiction and Mental Health\)](#)
- [Opioid Medicines – Part B: Opioid Patient Information Handout \(Government of Canada\)](#)

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