



Oregon

Kate Brown, Governor

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**2017
COMMUNITY HEALTH CLINIC
SELF-INSPECTION REPORT**

ATTENTION: MEDICAL DIRECTOR or CLINIC REPRESENTATIVE

An Oregon public healthcare facility that utilizes a Registered Nurse to dispense medications requires registration with the Oregon Board of Pharmacy as a Community Health Clinic (CHC). Oregon Administrative Rule 855-043-0710 states that a Community Health Clinic Drug Outlet must employ a Medical Director who is an Oregon practitioner with prescriptive and dispensing authority. The CHC must designate a representative employee who will be the contact person for the Oregon Board of Pharmacy and must be onsite the majority of the CHC's normal operating hours. The Medical Director or the designated representative must conduct and document an annual review of the outlet. The completed report form must be filed in the clinic, and be available to the Board for inspection for three years. Accompanying this letter is the form you need to complete to document your annual inspection.

Following your self-inspection and completion of the report, please review it with your staff and file it so that it will be accessible to Board Inspectors upon inspection. Board inspections are unscheduled. For this reason, you are asked to provide the locations of required documents, such as written policies & procedures and drug dispensing logs. Having all required documents and records maintained in a well-organized and readily retrievable manner provides for a straightforward inspection.

The primary objective of this report, and your self-inspection, is to provide an opportunity to **identify** and **correct** areas of non-compliance with Oregon Board of Pharmacy rules. (Note: Neither the self-inspection nor a Board inspection evaluates your complete compliance with all rules.) The inspection report serves as a necessary document used by Board inspectors during an inspection to evaluate an outlet's level of compliance.

When a Board inspector discovers an area of non-compliance they will discuss details with you. He or she may issue a Deficiency Notification or a Non-Compliance Notification. Both require a written response from the Medical Director or designated representative.

The Board understands that regulations may sometimes appear confusing and open to different interpretations. If you have any questions, please fax or email your questions, "attention inspectors", **prior to an inspection**, to the fax or email above.

By answering the questions and referencing the appropriate rules provided, you can determine whether you are compliant with the rules. If you have corrected any deficiencies, please write corrected and the date of correction by the appropriate question.

**2017
COMMUNITY HEALTH CLINIC
SELF-INSPECTION REPORT**

Date: _____ CHC Lic. No: _____

Telephone: _____ Hours: _____

Clinic Name: _____

Address: _____

City, Zip: _____

INSTRUCTIONS

The clinic's Medical Director or designated employee representative shall evaluate the outlet's compliance with the Board of Pharmacy's rules. Please complete this report by January 1, 2017.

YES NO

OAR 855-043-0700

1. Is the clinic (CHC) utilizing a Registered Nurse (RN) to dispense medications?

- Is RN only dispensing medication for the purpose of prevention & treatment dental caries, hormone deficiencies, urinary tract infections, sexually transmitted diseases, communicable diseases, amenorrhea, and contraception?

2. Does the CHC dispense any over-the-counter (OTC) medications? If so, an RN may only dispense OTCs pursuant to established CHC protocols.

3. Is any dispensing being done by a person other than a practitioner who has been given dispensing privileges by their own licensing board (such as the Oregon Medical Board or Oregon State Board of Nursing), or by an RN employed by the clinic who is authorized to dispense?

OAR 855-043-0710 and 855-043-0715

4. Does the CHC employ a Medical Director who is an Oregon practitioner with prescriptive and dispensing authority? Name: _____

5. Does the CHC employ a designated representative who works onsite the majority of the CHC's normal operating hours, and who is the contact person for the Oregon Board of Pharmacy? (Note: this may be the Medical Director) Name: _____

6. Have the CHC's drug management and RN dispensing training policies and procedures been developed in collaboration between the Medical Director and the designated representative? Where are these P&Ps stored?

7. Does the CHC ensure continued competence in the dispensing of drugs for all dispensing personnel? Where are the training documents located?

OAR 855-043-0720

8. Does the CHC store all drugs intended for dispensing in a locked cabinet or designated storage area that is sufficiently secure to deny access to unauthorized persons? Note: The drug storage cabinet or area must remain locked and secure when not in use, and only a physician, clinical nurse specialist, nurse practitioner, or registered nurse shall have access to the key.

YES NO

OAR 855-043-0725

9. Does the CHC only acquire drugs from a registrant of the Oregon Board of Pharmacy?
Note: You may use the Board's online lookup tool which is available at the following link:
<https://obop.oregon.gov/LicenseeLookup/>

OAR 855-043-0730

10. Are all drugs, including drug samples, stored in accordance with the manufacturer's published guidelines? Note: This includes proper temperature. How is this maintained?
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OAR 855-043-0740

11. Prior to dispensing a medication does the registered nurse obtain a prescription from the practitioner?
12. Are all initial dispensings done personally by a physician, pharmacist, registered nurse, or nurse practitioner?
13. Are staff assistants only permitted to perform nonjudgmental functions on refills only when the accuracy and completeness of the prescription is first verified by the physician, nurse, or nurse practitioner?
14. Are drugs dispensed in containers in accordance with the federal Poison Prevention Packaging Act?
15. Are all drugs packaged by the practitioner, registered nurse, a pharmacy, or a manufacturer registered with the Board?
16. Are all repackaged drugs labeled with:
- Brand name, or generic name and the manufacturer;
 - Strength;
 - Lot number; and
 - Manufacturer's expiration date, or an earlier date if preferable?
17. Does the practitioner or registered nurse provide the patient with appropriate drug information for medications at the time of dispensing?
18. Is staff aware that a CHC may not accept the return of drugs from a previously dispensed prescription and must maintain a list of sites in Oregon where drugs may be disposed?
19. Where is the CHC's pharmaceutical reference kept? _____

OAR 855-043-0735

20. Are all prescriptions labeled in accordance with OAR 855-043-0735(1)?
- Unique identifier (easily retrievable "prescription number" for tracking purposes);
 - Name of patient;
 - Name of prescriber;
 - Name, address and phone number of CHC;
 - Date of dispensing;
 - Name of drug, including strength – when a generic name is used the label must also contain the identifier of the manufacturer or distributor;
 - Quantity dispensed;
 - Directions for use;
 - Initials of the practitioner with dispensing privileges, or the registered nurse;
 - Cautionary statement, if any, as required by law; and
 - Manufacturer's expiration date, or an earlier date if preferable, after which the patient should not use the drug (*e.g. 4 months on Nuvaring*)

YES NO

OAR 855-043-0745

21. Are all outdated/expired, damaged, deteriorated, suspect, illegitimate, misbranded or adulterated drugs properly quarantined and physically separated until destroyed or returned to the supplier? Note: A medication that has previously been dispensed to a patient cannot be re-dispensed to another. It is considered adulterated and must be destroyed or returned to the supplier.

Where does the CHC keep drugs quarantined, awaiting destruction or disposal?

OAR 855-043-0750

22. Is a dispensing record, *separate from the patients' charts*, maintained for three years in accordance with OAR 855-043-0750(1)? Where is this located?

Does the dispensing record contain?

- Name of patient;
- Unique identifier ("prescription number")
- Dose, dosage form, quantity dispensed and either brand name of drug, or generic name and name of manufacturer or distributor;
- Directions for use;
- Date of dispensing; and
- Initials of person dispensing the prescription.

23. Are all records of receipt and disposal of drugs kept for a minimum of three years? Where are these records located?

24. Does the CHC utilize dispensing protocols? Where are these located?

Signature of the Medical Director or Designated Representative completing form: _____

Printed name: _____ Date: _____

Inspector Signature: _____

Date: _____ Outcome: _____

Comments: _____