State of Iowa Department of Corrections
Policy and Procedures

Policy Number: HSP-408
Applicability: Institutions
Policy Code: Public Access
Iowa Code Reference: N/A
Chapter 6: Health Services
Sub Chapter: Pharmacy
Related DOC Policies: HSF-408, HSF-408A, HSP-404, HSP-615
Administrative Code Reference: 657-8.14 (155A)
Subject: Self-Administration of Prescribed Medication
PREA Standards: N/A
Responsibility: Dr. Michael Riley, William Yohe
Effective Date: April 2025
Authority:

1. PURPOSE

To ensure the safe and proper administration of self-administered medication within the Iowa Department of Corrections (IDOC).

2. POLICY

It is the policy of the IDOC to promote patient self-reliance for their health care and to define relevant parameters for patient self-administration of medication.

3. PROCEDURES

A. In general, most physically and mentally competent patients may participate in self-administering prescribed medication, except if notified by a licensed medical practitioner for direct observation of compliance with therapy (DOT). Pharmacy staff, upon receiving an applicable and complete medication order, may routinely dispense an appropriate quantity (maximum 30-day supply) of medication for the patient.

B. The following medications/medication groups are to be dispensed for direct observation of compliance with therapy, unless the patient resides in a minimum-live-out unit or the provider's order specifies the patient may have all meds SAM as part of his/her re-entry preparation plan.

    1. Psychiatric medication that is specified in **HSP-751** *Self-Administration of Prescribed Psychiatric Medications*, as being for pill line/direct observation only.

2. Sedatives and hypnotics.

3. Anti-tuberculosis agents.

4. Muscle relaxants

5. Taper doses (increasing and decreasing) and interventions with complex directions.

6. Gabapentin

7. Oxybutynin

8. Dicyclomine

9. Clonidine

10. Carbamazepine

11. Warfarin and Direct Acting Oral Anticoagulants unless the provider's order specifies that the individual patient may self-administer their medication.

12. Medications for transgender hormone therapy (estrogen, antiandrogens, and testosterone), unless the provider's order specifies that the individual patient may self-administer their medication.

13. All injectable medications, including insulin, will still be dispensed for pill line only for all patients.

14. All controlled substances will still be dispensed for pill line only for all patients.

15. Direct-Acting Antivirals (DAAs) for Hepatitis C

C. The *Medication Administration Notice*, **HSF-408A**, may be used to advise the patient of the designated pill line at which he/she will obtain medications dispensed for self-administration. This form also serves to advise patients of the discontinuation of an order for medication self-administration or other changes to their drug regimens. Discontinued self-administration medication must be returned at a designated pill line. All unused or discontinued medications are to be returned to the pharmacy.

D. Each institution shall detail procedures specifying when and how patients shall obtain and return self-administered medications to Health Services.

E. Pharmacy staff will dispense up to a 30-day supply of medication in appropriate packaging (a separate package for each medication) for distribution to the patient by Health Services staff. Self-administered medications will be labeled in accordance with **Section 657-8.14 (155A) of the Iowa Administrative Code**. Written patient counseling information will be provided to the patient. It is the patient's responsibility to obtain refills of his/her self-administered medications; this may be done through the kiosks on the living units (when appropriate) or by submission of a request to Health Services.

F. Health Services staff will document medication distribution with an entry in the ICON electronic Medication Administration Record. All entries must include the date and initials of Health Services staff and the quantity of medication issued.

G. Each institution will develop procedures for intra-system transfer of self-administered medication. Institutional staff will ensure that all self-administered medication is transported with the patient's Health Records and, when appropriate, made available to the patient within 12 hours of arrival at the receiving institution. Self-administered medications should not be transported with the patient's personal property.

H. Self-administered medication will be returned to pharmacy when a patient leaves the prison system, i.e., work release, parole, etc. Discharge medications will be packaged by pharmacy staff in child-proof containers, and subsequently sent with the patient, consistent with **HSP-404** *Dispensing and Medication Administration*. Discharge medications may only be dispensed in non-child proof packaging if the patient has signed the *Notice of Non-Child Resistant Packaging*, IDOC Policy Form **HSF-408B**.

I. Patients who leave the prison system without adequate notice for the pharmacy to provide a supply of appropriately packaged release medications may be issued their self-administered medication supply for use until the pharmacy can mail or otherwise provide their supply to them at their community address. Patients must sign Policy Form **HSF-408B** prior to issuance of these medications.

J. Disciplinary action may apply if a patient fails to comply with rules and regulations pertinent to medication self-administration, as specified in IDOC Policy Form **HSF-408**, *Medication Self-Administration Program*. Non-

compliance may result in termination from participation in the medication self-administration program. Infraction of rules include, but are not limited to:

1. Failure to return an appropriately labeled container when picking up a refill of licensed medical practitioner prescribed medication.

2. Possessing more than one medication package for the same medication order.

3. Possession of altered/unlabeled/unpackaged medication.

4. Possession of discontinued medication.

5. Possession of another patient's medication.

6. Inappropriately carrying self-administered medications throughout the facility: medications should be kept locked in the patient's personal locker or appropriately secured in their cell except when they are being taken. The only medications allowed to be kept on a patient's person are inhalers for breathing problems, nitroglycerin for chest pain, and individual doses of medication needed by patient workers whose dose is due during their work shift and who cannot to return to their living unit to take their medication. Each institution will develop procedures that cover the process of medication handling for these patient workers.