POLICY

OVER THE COUNTER COMMISSARY ITEMS

REVIEW/REVISION HISTORY:

Effective: 1/10/99
Revised: 6/20/00
Revised: 9/4/06
Revised: 6/15/09
Revised: 8/2/10
Revised: 12/1/11
Revised: 4/14/14
Revised: 9/14/15
Revised: 6/3/22

SUMMARY OF REVISION/REVIEW:

Updated terminology throughout
I.B.1.a. & b. - Adjusted language for clarification
II.B. - Added clarifying language
Removed VI.A.2. that commissary OTC items will not be provided to individuals in an inpatient unit or restrictive housing

APPROVED:

Signature on file 5/18/22
MARYANN CURL, MD
Chief Medical Officer

Signature on file 5/23/22
DAVID FLYNN,
Assistant Secretary for Health Services

Signature on file 5/31/22
CHERYL STRANGE, Secretary
Department of Corrections
REFERENCES:

DOC 100.100 is hereby incorporated into this policy; DOC 200.000 Trust Accounts for Incarcerated Individuals; DOC 200.210 Prison Commissary; DOC 630.550 Suicide Prevention and Response; Washington DOC Health Plan

POLICY:

I. The Department will promote patient self-reliance and participation in their own health care by making selected Over the Counter (OTC) items available through the commissary. Unless otherwise specified, OTC items referenced in this policy are limited to the items listed on Over the Counter (OTC) Health Related Items.

II. The Secretary/designee and the Chief Medical Officer/designee will jointly approve OTC policy and procedures.

DIRECTIVE:

I. OTC Items

A. Prescribed OTC items may be dispensed from the central pharmacy only when they are medically necessary as defined in the Washington DOC Health Plan and approved by the Facility Medical Director.

1. Medically necessary OTC items require a prescription order to be dispensed from the pharmacy and administered or issued by a nurse.

B. OTC items that are not considered medically necessary per the Washington DOC Health Plan will be available for purchase at the commissary, based on product availability.

1. There are 2 categories of non-medically necessary OTC items:
   a. Debtable - Items that may incur debt, and
   b. Non-Debtable - Items that may not incur debt.

2. Before distribution, commissaries will charge OTC orders to the individual’s account per DOC 200.000 Trust Accounts for Incarcerated Individuals. If the individual lacks sufficient funds, the commissary will refuse the order unless the item is on the Debtable list.

II. Commissary Sales

A. Items will be available for purchase in the quantity and at the interval indicated in the Over the Counter (OTC) Health Related Items list based on availability.
1. Commissaries may sell or distribute an item in a quantity other than that listed, as long as the deviation is 15 percent or less. These items will be provided at the interval listed.

   a. If the deviation is more than 15 percent, written approval from the Director of Pharmacy is required. The written approval may indicate a change in the interval.

B. Each OTC item must satisfy all legal packaging and labeling requirements for direct-to-consumer sale per DOC 200.210 Prison Commissary. The package must be intact when distributed.

C. Changes to the Over the Counter (OTC) Health Related Items list will be processed through the Pharmacy and Therapeutic Committee with the approval of the Chief Medical Officer/designee and the Secretary.

   1. Department employees/contract staff may recommend or request changes through the Pharmacy and Therapeutic Committee and, if approved, a revised list will be issued to ensure consistency system wide.

D. Commissaries will attempt to deliver requested OTC item(s) within 7 days of receiving the order.

E. Unless otherwise noted, OTC items covered by this policy will be provided at the individual’s request and will not require authorization from a health care practitioner.

F. If an individual is determined to be at high risk for self-harm or suicide by drug overdose, the individual may be restricted from purchasing OTC medications that are potentially harmful or lethal.

III. Cost

A. Commissaries will make OTC items available at the lowest cost possible and will carry generic items when available.

IV. Possession

A. Individuals may have 2 containers, one open or in use and one sealed, of each OTC item in their cells unless otherwise indicated in the Health Services section of the electronic file. All OTC items must be stored in the original container.
B. Employees/contract staff will follow DOC 630.550 Suicide Prevention and Response if there is any concern that self-harm may result from the possession of OTC items.

V. OTC Items in the Outpatient Setting

A. If a health care practitioner recommends the use of a listed OTC item, the health care practitioner may suggest that the individual submit an order using the commissary order form.

1. The practitioner may submit a prescription order to the pharmacy for the OTC item using the sig code “Purchased by individual from commissary” for the medication order to appear in the Medication Administration Record (MAR).

2. The pharmacist will:
   a. Check for any drug interactions or any other clinical contraindications in the current medication profile.
   b. Notify the practitioner of any significant contraindication and delay dispensing the prescribed order.

B. Any clinical communication with an individual regarding an OTC item (e.g., Primary Encounter Report, Kite) should be appropriately documented in the health record.

C. OTC medications will remain on the medication profile unless the health care practitioner requests removal.

VI. OTC Items in the Inpatient Setting and in Intensive Management Units (IMUs), Intensive Treatment Units (ITUs), and Segregation

A. For patients housed in an Inpatient Unit (e.g., Close Observation Area, Infirmary, Residential Mental Health Unit) or in IMU/ITU/Segregation, OTC items will only be available by prescription order and dispensed by the pharmacy.

1. OTC items will be ordered only after a current medical evaluation determines the item(s) is appropriate to manage current health care needs.

B. OTC item orders will be:

1. Kept on Pill Line unless a health care practitioner allows the OTC to be issued to the individual.
a. The practitioner must write a separate prescription order for each OTC item and must rewrite it each time it is reordered.

b. If the nurse receives a prescription order that does not indicate if the OTC item should be Pill Line or Keep on Person, the OTC item will be kept on Pill Line until the prescription order is clarified.

2. Posted to a MAR and administered by appropriately licensed employees/contract staff per the Medication Administration and Documentation Procedure.

3. Administered one dose at a time if the OTC item is dispensed from bulk or unit dose containers.

VII. Exceptions

A. The Chief Medical Officer or Director of Pharmacy may grant exceptions to this policy on a case-by-case basis.

DEFINITIONS:

Words/terms appearing in this policy may be defined in the glossary section of the Policy Manual.

ATTACHMENTS:

None

DOC FORMS:

None