## Appendix 9: NHS Grampian refrigerated pharmaceutical products storage and handling audit checklist

The purpose of this audit checklist is to provide a tool to assess the arrangements for the storage and handling of refrigerated pharmaceutical products in any NHS Grampian areas/sites where pharmaceutical products are stored in order to provide assurance of compliance with Policy For Handling Refrigerated Pharmaceutical Products By All Staff Working Within NHS Grampian and identify areas where improvement is necessary.

A separate audit checklist should be used for each of the refrigerators used to store refrigerated pharmaceutical products. Any areas of concern should be discussed with the manager in charge of the area/site.

Where any issues are identified these must be resolved with appropriate remedial action taken and escalated via relevant management/pharmacy routes if unable to resolve issues locally.

**General**

|  |  |
| --- | --- |
| **Question** | **Answer** |
| Audit undertaken by (name and designation 1) |  |
| Site being audited? |  |
| Date of audit? |  |
| Location of refrigerator? |  |
| Refrigerator identification number? |  |
| Manufacturer/model? |  |
| Approximate age (years)? |  |

**Section 1 – People**

|  |  |
| --- | --- |
| **Question** | **Answer** |
| Who is the designated person in charge of monitoring the storage and handling of vaccines and refrigerated products(usually the Senior Charge Nurse or Team Lead)? |  |
| Who is the named deputy for the designated person (usually the senior staff nurse)? |  |

**Section 2 – Procedures/training**

| **Statement** | **Answer (Yes or No)** | **Comment** |
| --- | --- | --- |
| Staff are aware of and can access the Policy For Handling Refrigerated Pharmaceutical Products By All Staff Working Within NHS Grampian. |  | Document here how this is evidenced as per local procedure e.g. designated person holds record. |
| A local Standard Operating Procedure (SOP) detailing the following procedures for refrigerated pharmaceutical products has been completed for the site.   * Ordering refrigerated products * Receipt of refrigerated products * Storage and stock rotation of refrigerated products including expiry date checking * Temperature monitoring including monthly sign off * Action to be taken in the event of temperature recordings outside of recommended storage range Quarantining stock * Contingency for equipment or power failures.   Staff responsible for the above |  | An example SOP can be found as an appendix in Policy For Handling Refrigerated Pharmaceutical Products By All Staff Working Within NHS Grampian |
| The local SOP is reviewed annually. |  |  |
| All staff involved in monitoring the pharmaceutical refrigerator and recording temperatures have undertaken the [management of medicines refrigerators](https://learn.nes.nhs.scot/53122) Turas eLearning module and a record of completion is maintained. |  |  |

**Section 3a – Equipment – The pharmaceutical refrigerator**

| **Statement** | **Answer (Yes or No)** | **Comment** |
| --- | --- | --- |
| The pharmaceutical refrigerator is locked when not in use and the key is removed and/or within a room that is locked when not occupied |  | See [NHS Grampian Storage of Medicines Within Clinical Areas Policy](https://www.nhsgrampian.org/globalassets/foidocument/foi-public-documents1---all-documents/Policy_Storage_CA.pdf) for further information on safe storage of medicines. |
| The pharmaceutical refrigerator is clean and in good condition – including locks, keys, door seals, shelving |  |  |
| The pharmaceutical refrigerator is only used for storage of refrigerated pharmaceutical products |  | Food, drink and clinical specimens must never be stored in refrigerators used to store pharmaceutical products. |
| The pharmaceutical refrigerator is filled to no more than two thirds of the internal volume |  |  |
| The pharmaceutical refrigerator has a fan that is unobstructed |  |  |
| The pharmaceutical refrigerator has no refrigerated products stored in enclosed plastic trays throughout or at the bottom of the refrigerator |  |  |
| The pharmaceutical refrigerator has stock organised in a way that allows quick access and minimises the time that the refrigerator door is open |  |  |
| Stock is rotated to ensure products are used in expiry date order |  | Document here that process for stock rotation is detailed in SOP. |
| The pharmaceutical refrigerator is directly wired (spurred) or all plugs are clearly marked ‘refrigerator: do not switch off’ or are physically covered |  | **‘Refrigerator – Do not Switch Off’** label to the plug. Consider if a ‘red’ socket, which will operate on generator in the event of a power failure is available.  Labels are available from your Department/Ward Pharmacy Technician/Pharmacy team. |
| The pharmaceutical refrigerator is situated away from heat sources and direct sunlight |  |  |
| The pharmaceutical refrigerator has adequate ventilation space around the refrigerator (as per fridge manufacturer’s instructions) |  |  |
| The pharmaceutical refrigerator has an auto defrost function |  |  |
| The pharmaceutical refrigerator is cleaned regularly and recorded in the temperature log book |  | Document here when last cleaned |

**Section 3b – Equipment – The refrigerator thermometer**

| **Statement** | **Answer (Yes or No)** | **Comment** |
| --- | --- | --- |
| The digital maximum/minimum thermometer in use is an approved NHS Grampian make and model (refer to Policy For Handling Refrigerated Pharmaceutical Products By All Staff Working Within NHS Grampianfor latest guidance) |  |  |
| The digital maximum/minimum thermometer probe is placed in the middle of the refrigerator unobstructed |  |  |
| The digital maximum/minimum thermometer is capable of recording the current, maximum and minimum temperatures |  |  |
| Batteries for the digital maximum/minimum thermometer are changed annually or sooner if required |  |  |
| Thermometer calibration certificate is retained and the thermometer is replaced every 5 years (or sooner if issues identified). |  | Date thermometer purchased:  Date thermometer due to be replaced: |

**Section 4 – Temperature monitoring/recording**

| **Statement** | **Answer (Yes or No)** | **Comment** |
| --- | --- | --- |
| A separate record is used for each refrigerator and the refrigerator ID is recorded |  |  |
| The temperature logbook is kept close to the refrigerator |  |  |
| The following is completed daily on working days in the temperature logbook:   * the current, maximum and minimum temperature * the thermometer is reset after each reading * legible signature by the person taking the readings |  |  |
| Information about activity such as restocking/cleaning the refrigerator etc. that may affect temperature is recorded |  |  |
| There is evidence in the temperature logbook that any temperature excursions (temperatures that are out of range: between +2oC to +8oC) are escalated appropriately |  |  |
| The designated person for medicines refrigerators has signed the following on a monthly basis:   * Expiry date check has been completed * Thermometer alarm settings have been checked * Temperature recordings for the month have been reviewed and that appropriate action has been taken in the event of any temperature excursion |  |  |
| Completed temperature logbooks are retained in a safe, secure location within the department for a period of 5 years. |  |  |