Medication Storage and Management Guide for RTF's

Policies and Procedures:

The RTF licensee is responsible for implementing policies and procedures for the control and appropriate use of all drugs within the RTF. The policies and procedures to implement this section must be developed, approved, and reviewed by a health care prescriber and the RTF administrator. (WAC 246-337-105 (1))

Health Assessment:

RTFs that have a health care prescriber initiate or adjust medications for residents must perform a health assessment for each resident they intend to initiate or adjust medications for unless a health assessment was performed within the past three months and is available to the RTF upon admission and the prescriber is accepting of the assessment. (WAC 246-337-080 (5)(a))

How a client comes to have medication:

A resident may bring in "patient-owned" medications (WAC 246-337-105 (1)(e), the RTF may provide certain "stock" medications and/or the resident may have medications prescribed for them ("prescription drug").

If the RTF provides nonprescription/"OTC" drugs for residents to self-administer a prescriber must develop the approved list of nonprescription/ "OTC" drugs acceptable for residents that includes the parameters of use for each drug (WAC 246-337-105(1)(e).

Medication Storage:

If the RTF stores medication it must be stored in a room that meets the requirements in (WAC 246-337-126(3)) and must be in accordance with United States pharmacopoeia standards (WAC 246-337-105). which includes locks for controlled substances, sharps containers (where sharps are used), refrigeration, environmental control, specific lighting and the need for a handwashing station (in new construction). Controlled substance drugs need to be isolated from noncontrolled substance drugs and stored in a secured area. If the facility has an HCE license, and medications that do not fall under the HCE (such as a "patient owned medication) they must be stored separately. They may be in the same room though if, for example a controlled substance, they must be easily distinguished and secured separately from one another.

The facility shall store drugs under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Poisons, drugs used externally, and drugs taken internally shall be stored on separate shelves or in separate cabinets at all locations.

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DOH 346-231 September 2026

When medication is stored in a refrigerator containing other items, the medication shall be kept in a separate compartment with proper security. All drugs shall be kept under lock and key unless an authorized individual is in attendance. (RCW 74.42.260)

Medications must always be stored according to the facility's policies and procedures. All controlled substances must be placed in a secure storage area. The facility may allow the residents to store non-controlled substance medications in their personal belongings (such as an inhaler or epi pen) per policy under the direction of the prescriber.

If a resident presents with their own personal "patient owned" medication, the medication must be identified, classified, and stored according to the type of medication as specified in the facility's policy and procedure.

Requirements for Controlled substances:

In order for the facility to obtain controlled substances, the facility must be licensed as an HCE with a DEA registration Once licensed as an HCE, the facility can then submit an application to the DEA to become registered. With an HCE license and DEA registration, the RTF may purchase and possess controlled substances.

If, however, a resident presents with any patient-specific (prescribed) medication, even if a controlled substance, an HCE license is not required to store the medication for the resident. The drug must be stored as any prescription/legend drug and administered as directed policies that have been developed, approved, and reviewed by a health care prescriber and the RTF administrator. (WAC 246-945-457)

An agency may not deny admission based solely on an individual taking FDA-approved medications, under the supervision of a medical provider, for their substance use disorder or require titration of dosages in order to be admitted or remain in the program. (WAC 246-341-1108(8))

Types of Administration:

The licensee's policies and procedures shall address the way(s) all medications are administered within the facility. This may include:

"Staff-administration": Refers to medication which shall be administered by staff in accordance with the prescribers' orders and may include nonprescription drugs in accordance with all applicable state and federal regulations that have been developed, approved, and reviewed by a health care prescriber and the RTF administrator. Staff

administration must be in accordance with the scope of the staff person's professional license/certification.

- "Self-administration": Includes independent and observed types of administration and do not require licensed staff. Staff must be acting within the scope of their professional certification/licensure and under the direction of the prescriber.
- "Independent self-administration" per the instruction and approval of the RTF prescriber, the resident may obtain the container of their medication from the medication storage area and take the dose as directed on the label without being observed by staff. The facility may also elect to allow the resident to keep the medication (dependent on type, etc.) in their personal storage and take the medication as directed on the label without being observed by staff (WAC 246-337-105 (4)(f)(iii)).
- "Observed self-administration" per the instruction and approval of the RTF prescriber, the resident may obtain their container of medication from the medication storage area, remove the dose needed, ingest or otherwise take the medication as directed on the label while being observed by staff. (WAC 246-337-105 (4)(f)(ii))

Nursing requirements

If the RTF health care prescriber initiated or adjusted the medication for residents, directing "Staff-administration" according to the resident's individual service plan, the RTF must have a registered nurse or licensed practical nurse available on-site during "Staff administered" medication administration. (WAC 246-337-080 (3))

If, however, the RTF health care prescriber initiated or adjusted the medication for residents, directing "Independent Self-administration" or "Observed Self-admiration" according to the resident's individual service plan, The RTF must have a registered nurse or licensed practical nurse available at least by phone twenty-four hours per day, seven days per week.

Professions That May Administer Prescriptions Ordered by Authorized Providers:

(Note-for prescriptions only)

- Licensed Practical Nurse (LPN) (chapter 18.79 RCW, chapter 246-840 WAC) – Administer prescribed drugs within scope of practice under the general direction of an ARNP, MD, DO, DPM, DDS, PA, or ND, and under the direction or supervision of a registered nurse.

Standing Orders and Verbal Orders NCAO 6.0 (PDF).

Dispensing Mediations/Devices for Prophylactic and Therapeutic Treatment of Communicable Diseases and Reproductive Health by Public Health Nurses NCAO 9.0 (PDF).

- Medical Assistant (MA) - Certified, MA-Registered and MA-Hemodialysis Technician (chapter 18.360 RCW, chapter 246-827 WAC) – Administer prescribed drugs within scope of practice (see RCW 18.360.050) and under the supervision of a healthcare practitioner as defined in RCW 18.360.010(3). MA-registered may administer eye drops, topical ointments, and vaccines, including combination or multidose vaccines. See WAC 246-827-0240 for MA - certified.
- Nursing Technician (NT) (chapter 18.79 RCW, chapter 246-840 WAC) – Must be enrolled in a commission-approved nursing program and meet other requirements may administer medications within the limits of their education, skills, and knowledge under the direct supervision of a RN. The NT may not administer chemotherapy drugs, intravenous medications, or scheduled drugs (see chapter 18.79.350 RCW and WAC 246-840-870).
- Occupational Therapist (chapter 246-847 WAC, RCW 18.59.040) – May purchase, store, and administer certain topical drugs as prescribed by an authorized healthcare practitioner.
- Pharmacist (RPh or PharmD) (chapter 18.64 RCW) – Administer prescribed drugs.
- Pharmacy Technician (RCW 18.64A.010(6), RCW 18.64A.030, RCW 18.64A.060, RCW 18.64.011) – May provide administration of medications or devices under the immediate supervision of a pharmacist and if the Pharmacy Quality Assurance Commission has authorized the pharmacy technician to administer medications or devices by approving an ancillary personnel utilization plan (AUP).
- Physical Therapists (PT) (chapter 18.74.160 RCW) – May purchase, store, and administer certain drugs as determined by law and may administer such other drugs or medications as prescribed by an authorized healthcare practitioner for the practice of physical therapy.
- Registered Nurse (RN) (chapter 18.79 RCW, chapter 246-840 WAC) – Administer prescribed drugs within, scope of practice, under the general direction of an ARNP, MD, DO, DPM, DDS, PA, or ND, and under the direction or supervision of a registered nurse.

Examples of Professions That May Not Prescribe, Administer, or Dispense Prescriptions:

- Counselor, Licensed Marriage and Family Therapist, and Licensed Marriage and Family Therapist Associate – Chapter 18.225 RCW
- Counselor, Licensed Mental Health Counselor, and Licensed Mental Health Counselor Associate – Chapter 18.225 RCW
- Counselor, Certified Counselor, Certified Adviser, Agency Affiliated Counselor, and Hypnotherapist – Chapter 18.19 RCW
- Counselor, Licensed Social Worker Advanced, Licensed Social Work Associate Advanced, Licensed Social Work Independent Clinical, and Licensed Social Work Associate Independent Clinical – Chapter 18.225 RCW
- Pharmacy Technician – Chapter 18.64A RCW (may assist pharmacist)
- Psychologist – Chapter 18.83 RCW
- Recreational Therapist – Chapter 18.230 RCW
- Sex Offender Treatment Provider and Affiliate Provider – Chapter 18.155 RCW
- Substance Use Disorder Professionals and Substance Use Disorder Professional Trainee – Chapter 18.205 RCW

Definitions:

1. "Health care prescriber" or "prescriber" means an allopathic physician, osteopathic physician, naturopathic physician, allopathic physician's assistant, osteopathic physician's assistant, or advanced registered nurse practitioner licensed under Title 18 RCW: operating within their scope of practice who by law can prescribe drugs in Washington state. All RTFs must have at least access to a qualified "health care prescriber" (see WAC 246-337-080(1)(b) and WAC 246-337-105)
2. Automatic Drug Dispensing Device (ADDD) - ADDD includes, but is not limited to, a mechanical system controlled remotely by a pharmacist that performs operations or activities, related to the storage, counting, and dispensing of drugs to a credentialed health care professional consistent with their scope of practice. "ADDD" does not include technology that solely counts or stores, kiosks, robots, emergency kits, supplemental dose kits, or automation for compounding, administration, or packaging. ADDDs can be used for prescriber owned drugs under certain circumstances. (WAC 246-337-105 (2)(b)
3. A health care entity (HCE) is a type of license issued by the pharmacy commission that allows an RTF to purchase and possess legend drugs that has been granted an additional license. With an HCE license, the risk and responsibility for the purchasing, storage, and administration of medications lay with the facility rather than a provider.

4. “Over-the-counter” medications (WAC 246-945-001(59)) "Over-the-counter drugs" or "OTC" means "non-legend" or "nonprescription" drugs, and any drugs which may be lawfully sold without a prescription.
5. "Legend drugs" means any drugs which are required by state law or regulation of the pharmacy quality assurance commission to be dispensed on prescription only or are restricted to use by practitioners only (RCW 69.41.010(13))
6. "Controlled substance" means a drug, substance, or immediate precursor included in Schedules I through V as set forth in federal or state laws, or federal or commission rules, but does not include hemp or industrial hemp as defined in (RCW 15.140.020). (RCW 69.50.101)
7. “Noncontrolled legend drugs - drugs that are not subject to the Federal Food, Drug, and Cosmetic Act and are any drugs which are required by any applicable federal or state law or regulation to be dispensed on prescription only or are restricted to use by practitioners only.
8. “Stock” drug is a bulk medication inventory in a pharmacy or healthcare facility, not initially labeled for a specific patient, but for general use by licensed professionals for general inventory and multiple patients referred to generally under medications (WAC 246-337-005 (19)) Stock medications can be OTC not needing a prescription and provided per policy or by prescription.,(Controlled substances, or legend drugs. (WAC 246-945-001(66)
9. "Prescription drug" means any drug, including any biological product required by federal statute or regulation to be dispensed only by a prescription, including finished dosage forms and bulk drug substances subject to section 503(b) of the Federal Food, Drug, and Cosmetic Act. Prescription medications can be controlled substances, or legend drugs.
10. “Patient-owned” medications are medications that have already been dispensed to a patient and the patient brings it with them to the RTF. (WAC 246-945-440) Patient-owned medications can be OTC, controlled substances, or legend drugs.