

POLICY AND PROCEDURE

REACH for Tomorrow

Policy Title: Expiration Date Tracking and Removal Procedure

Effective Date: 08/15/2025

Approved By: Director of Medical and Clinical Services

Review Schedule: Annually or as Needed

Applies To: All Programs — Outpatient MH/SUD, IOP, PHP, and Integrated Primary Care/Behavioral Health

I. Purpose

To ensure that all medications stored, dispensed, or administered at REACH for Tomorrow are safe, effective, and within manufacturer expiration dates, and to establish a standardized process for tracking, removing, and disposing of expired or soon-to-expire medications in compliance with CARF, DEA, and Ohio Board of Pharmacy standards.

II. Scope

This procedure applies to all medication storage locations across REACH for Tomorrow, including controlled, non-controlled, sample, and refrigerated medications. It covers all authorized staff involved in medication handling and inventory.

III. Policy Statement

REACH for Tomorrow maintains a continuous system to monitor expiration dates of all medications. Expired or compromised medications are promptly labeled “Do Not Use” and stored in a secure, segregated area pending destruction. Expired medications are never administered or dispensed. All actions are documented and reviewed monthly by the Director of Medical and Clinical Services.

IV. Definitions

- Expiration Date: The date after which a medication may not be safely used as determined by the manufacturer.
- Quarantine Area: Locked and clearly labeled area for storing expired or damaged medications pending destruction.
- Authorized Staff: Individuals trained and approved to handle medication storage and disposal.

POLICY AND PROCEDURE

REACH for Tomorrow

V. Procedure

A. Tracking and Monitoring

1. Each medication entry on the Medication Receipt & Inventory Log must include its expiration date.
2. Authorized staff review expiration dates monthly as part of the regular inventory process.
3. The Medication Expiration Tracking Log is used to record medications that are expired or due to expire within 60 days.
4. Staff identify medications nearing expiration for timely removal or replacement.

B. Labeling and Segregation

1. Expired or soon-to-expire medications are labeled “Do Not Use – Expired” or “Do Not Use – Pending Destruction.”
2. Expired medications are stored in a locked, designated “Expired Medication Quarantine” area separate from active stock.
3. Controlled substances awaiting destruction are secured under double lock conditions.

C. Removal and Disposal

1. Expired medications are removed from active stock during monthly inventory or as soon as identified.
2. Disposal follows the Medication Destruction Policy:
 - Two authorized witnesses must be present for destruction.
 - Controlled substances destroyed per DEA 21 CFR §1317.90–1317.95.
3. Destruction documented in the Medication Destruction Log including name, strength, quantity, lot number, expiration, and reason.

D. Documentation

1. All expired and soon-to-expire medications are documented on the Medication Expiration Tracking Log.
2. The Director of Medical and Clinical Services reviews the log monthly for accuracy and completeness.
3. Records must include medication name, expiration date, status, actions taken, and initials of the reviewing staff.

E. Quality Assurance

1. The Medication Management Committee reviews expiration tracking reports quarterly.
2. Recurrent patterns of expired medications or storage concerns trigger corrective actions and staff retraining.
3. Data is included in the organization’s Quality Improvement reports per CARF Section 1.M.

POLICY AND PROCEDURE

REACH for Tomorrow

VI. Training

All staff handling medications receive initial and annual training on expiration date tracking, removal, labeling, and destruction procedures.