

POLICY AND PROCEDURE

REACH for Tomorrow

Policy Title: Limited Access Policy with Key and Card Control List and Audit Trails

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 HealthPr

I. Purpose

To ensure that access to medication storage areas is strictly limited to authorized personnel through a limited access door code system, including audit trails to ensure compliance with CARF, DEA, and Ohio Board of Pharmacy requirements.

II. Scope

Applies to all REACH for Tomorrow facilities, programs, and staff who are authorized to access areas containing medications, including controlled substances, samples, and refrigerated stock.

III. Policy Statement

Access to medication storage areas is restricted to authorized staff listed on the Medication Access Authorization Roster. Physical keys and access cards are tracked using the Key and Card Control Log, and all audit trails are maintained for accountability. The log is stored in the administrative office under the custody of the Director of Medical and Clinical Services.

IV. Definitions

- Authorized Personnel: Trained and credentialed staff approved to handle or access medications.
- Audit Trail: A written record of issuance and changes of door codes.
- Access Point: Any door, cabinet, refrigerator, or secure storage unit containing medications.

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V. Procedure

A. Authorization and Assignment

1. Access granted only to staff approved by the Director of Medical and Clinical Services.
2. Each code is recorded on the master list.
3. Log entries must include staff name, title, access area, issue date, return date, and verifying signatures.
4. Controlled substance access requires additional approval from the Director of Medical and Clinical Services.

B. Termination of Access

1. Codes will be changed immediately upon staff resignation, termination, or reassignment.
2. The Director of Medical and Clinical Services verifies the change and updates the master list..

E. Record Retention

All master lists are retained for at least six (6) years and stored securely in the administrative office under the custody of the Director of Medical and Clinical Services.

VI. Oversight and Quality Assurance

Monthly log audits conducted by the Director of Medical and Clinical Services; quarterly MMC review of findings, discrepancies, and corrective actions.

VII. Training

All authorized staff complete annual training on access control, key and card accountability, and reporting of security breaches.