

POLICY AND PROCEDURE

REACH for Tomorrow

Policy Title: Daily Temperature and Security Monitoring Logs

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 continuous daily monitoring of medication storage areas for proper temperature and security, maintaining compliance with CARF, DEA, and Ohio Board of Pharmacy standards.

II. Scope

Applies to all REACH for Tomorrow sites and staff responsible for medication handling, storage, and security monitoring, including controlled, non-controlled, and refrigerated medications.

III. Policy Statement

All medication storage areas are monitored daily for environmental control and physical security. Temperatures and lock verification are documented twice daily on the Daily Temperature and Security Monitoring Log. Logs are maintained for a minimum of six (6) years.

IV. Definitions

- Ambient Storage: Cabinets or rooms maintained between 68°F–77°F (20°C–25°C).
- Refrigerated Storage: Units maintained between 36°F–46°F (2°C–8°C).
- Security Check: Verification of lock integrity and restricted access to authorized staff.
- Authorized Personnel: Individuals listed on the Medication Access Authorization Roster.

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V. Procedure

A. Temperature Monitoring

1. Record AM and PM temperatures for all medication storage locations.
2. Use calibrated digital thermometers for accuracy.
3. Acceptable ranges:
 - Ambient: 68°F–77°F
 - Refrigerated: 36°F–46°F
4. If out of range:
 - Notify the Director of Medical and Clinical Services immediately.
 - Move affected medications to a safe location if required.
 - Document corrective action on the log.

B. Security Verification

1. Confirm all cabinets, refrigerators, and rooms are locked and intact.
2. Verify key/code access is limited to authorized staff.
3. Inspect for tampering, missing items, or evidence of forced entry.
4. Record Secure/Not Secure status on each shift.
5. Report security breaches immediately as a critical incident per Risk Management Policy.

C. End-of-Day and Oversight Review

1. Designated staff sign off daily verifying completion of temperature and security checks.
2. Nurse Manager reviews logs weekly for completeness and accuracy.
3. Director of Medical and Clinical Services reviews and signs off monthly.
4. All logs retained for a minimum of six (6) years.

VI. Quality Assurance and Training

1. Logs reviewed monthly by the Medication Management Committee for trends and compliance.
2. Any repeated deviations trigger a corrective action plan.
3. Staff receive annual training on temperature control, documentation, and security standards.