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Chief inspector of Hospitals  
Care Quality Commission  
Chief Inspector of Hospitals  
Care Quality Commission (CQC)  
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Dear Professor Richards,

The Resuscitation Council (UK) has received a number of queries regarding the storage and availability of emergency drugs. For example, following a CQC inspection, one acute Trust in the South West was criticised for failing to ensure that resuscitation trolleys were locked to prevent public access to drugs and prevent tampering:

*'The trolleys contained medication that was to be used in the event of a cardiac arrest; however, none of the trolleys were able to be locked, and they were stored in public areas. This meant medication could have been accessed by unauthorised personnel.'*

In light of recent events, we can understand the concerns of the Inspectors, but to imply that drugs needed in the extreme emergency of a cardiac arrest need to be locked away will cause unacceptable delays in treatment and jeopardise patient safety.

Our understanding is that this has already been addressed in detail in a revision of the Duthie Report (1988), 'The Safe and Secure Handling of Medicines' published by the Royal Pharmaceutical Society of Great Britain, March 2005 (<https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/the-safe-and-secure-handling-of-medicines.pdf>).

Section 9 clearly states:

**9.9.2.8** For clinical emergencies, e.g. cardiac arrest, all wards should have a source of urgent medicinal products.

**9.9.2.9** These should be held in boxes clearly marked "for emergency use".

**9.9.2.10** These boxes should be tamper-evident and should not be held in a locked cupboard, but at strategic and accessible sites (see also 5.5).

**9.9.2.11** Once a box has been opened, a replacement should be provided by the pharmacy and the opened box returned to the pharmacy.

There is no mention that individual drawers must be tamper-evident if there are boxes that are tamper-evident inside. The Resuscitation Council (UK) therefore does not concur with the CQC stance on this issue.

For Trusts to be faced with a recommendation that all emergency drugs be locked away will involve major changes to operational procedures, substantial costs in purchasing lockable emergency trolleys and, in the opinion of the Resuscitation Council (UK), is detrimental to patient safety and emergency care.

The Resuscitation Council (UK) is always happy to provide advice on CPR related issues. We are proposing to issue the following guidance on our website and in the next update of the Resuscitation Council (UK) document 'Quality Standards for Cardiopulmonary Resuscitation Practice and Training' and would appreciate your opinion as to whether the CQC has any reason why this guidance should not be adopted.

1. All resuscitation drugs must be stored in tamper-evident containers, either as supplied by the manufacturer or produced locally by the pharmacy service.
2. All resuscitation trolleys must have their contents checked daily with documentation of the check and any action taken.
3. Any evidence of tampering must be reported immediately to the Trust and appropriate measures to investigate instigated.
4. The vulnerability of resuscitation trolleys must be recognised by Trusts and this should form part of their risk register, with appropriate policies and procedures to manage the risk.

We would be grateful if you would look into this matter and look forward to your considered reply.

Yours sincerely

Carl Gwinnutt  
President

Matt Griffiths  
Executive member