

# Best Practices in Controlled Substance Diversion Surveillance

Amisha Arya, PharmD, BCSCP, CJCP

Director of Pharmacy, Regulatory and Compliance

NYU Langone Health

[amisha.arya@nyulangone.org](mailto:amisha.arya@nyulangone.org)



# Disclosures

- ◆ No conflicts of interest to disclose

# Objectives

- ◆ Discuss drug diversion and associated risks to health care providers, patients, and health systems
- ◆ Review considerations as part of developing a complete controlled substance process
- ◆ Discuss the composition and organization of an interdisciplinary Drug Diversion Compliance Steering Committee and Response Team.
- ◆ Consider best practice strategies to improve diversion visibility, surveillance, investigation, and response
- ◆ Review a sample investigation and response process

# Definitions and Acronyms

- ◆ Controlled Substances (CS)- a drug whose manufacture, possession, and use is regulated by the government (DEA). Classified into schedules I-V.
- ◆ Drug Diversion- the transfer of a legally prescribed controlled substance from the individual for whom it was prescribed to another person for illicit user.
- ◆ Health Care Workers (HCW)
- ◆ Health Care Systems (HCS)
- ◆ Controlled Substance Diversion Prevention Program (CSDPP)

# Commonly Diverted Drugs

- ◆ Opioid pain relievers, such as: Codeine, Fentanyl (Duragesic®), Actiq®), Hydromorphone (Dilaudid®), Meperidine (Demerol®), Morphine (MS Contin®), Oxycodone (OxyContin®), Pentazocine (Talwin®), Dextropropoxyphene (Darvon), Methadone (Dolophine®), Hydrocodone combinations (Vicodin, Lortab, and Lorcet)
- ◆ High-cost antipsychotic and mental health drugs, such as: Aripiprazole (Abilify®), Ziprasidone (Geodon®), Risperidone (Risperdal®), Quetiapine (Seroquel®), Olanzapine (Zyprexa®)
- ◆ Benzodiazepines, such as: Alprazolam (Xanax®), Clonazepam (Klonopin®), Lorazepam (Ativan®)

10-15% of healthcare workers misuse alcohol or drugs at some point in their careers

- ASHP

10% of nurses are thought to be abusing drugs and may be caring for patients while impaired

– American Nurses Association

1 in every 10 health professionals is struggling with addiction or abusing drugs not prescribed for them

– US Substance Abuse and Mental Health Services

Drug overdoses are the leading cause of accidental death in the US and opioid addiction is driving this

– National Center for Health Statistics

The overall pattern of drug abuse and dependence with healthcare professionals is unique

- ISMP

The major factors impacting the incidence of drug misuse by healthcare professionals are access and availability of controlled substances

-AANA

# What is the Cost?

## Cost to HCW

- Health
- Employment
- Licensure

## Cost to Patient

- Care may be impaired
- Poor pain management
- Medical records may be inaccurate
- Risk of infection

## Cost to HCS

- Patient Harm (Hep C)
- Regulatory penalties
- Legal implications
- Reputation





# NYULH's Compliance Journey

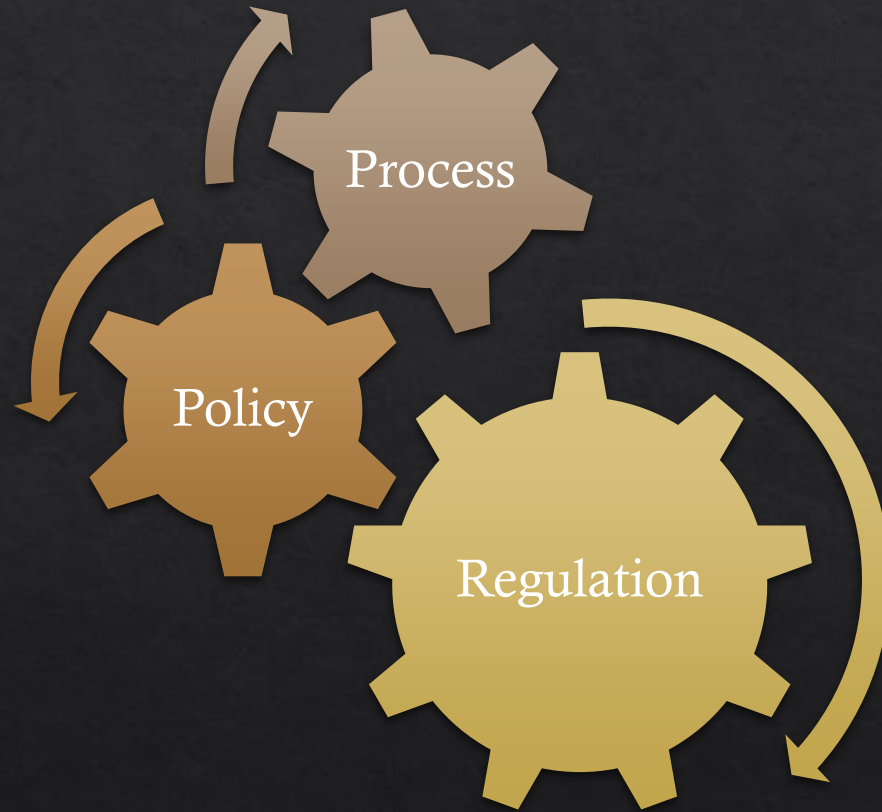
- ◆ Standardize process
- ◆ Shift culture
- ◆ Improve accuracy
- ◆ Increase visibility
- ◆ Save time
- ◆ Streamline Audit



# Best Practices

- ◇ Regulation -> Policy -> Process
- ◇ Committee Structure
  - ◇ Organizational Buy-In / Culture
- ◇ Training
- ◇ Auditing/Surveillance
- ◇ Response/Investigation

Compliance =



# Regulation



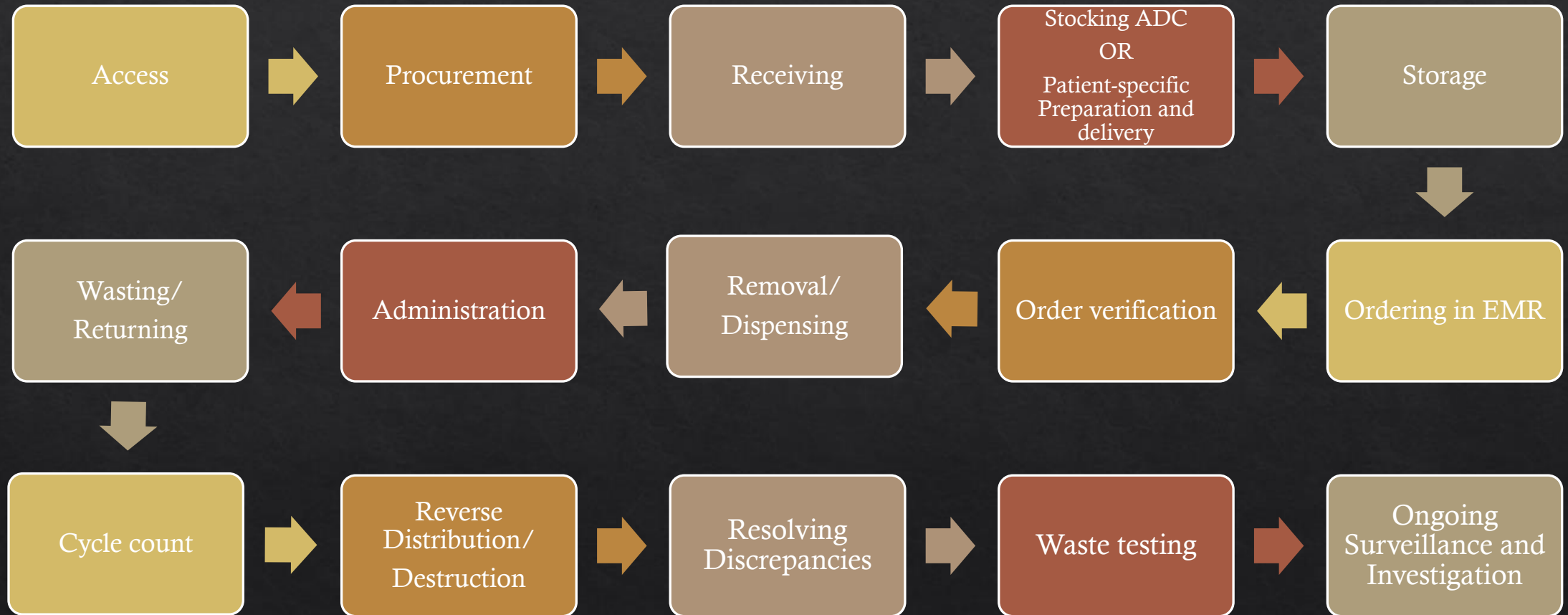
## ◇ Regulations

- ◇ DEA: Title 21 CFR Part 1300-1399 *Controlled Substances*
- ◇ NYS DOH BNE: Title 10, Part 80 *Rules and Regulations on Controlled Substances*
- ◇ NYS BOP: Education Law, Article 137 *Pharmacy*
- ◇ CMS: Title 42 CFR 482 *Conditions of Participation (CoP) for Hospitals*
- ◇ TJC: MM.08.01.01 *The organization evaluates the effectiveness of its medication management system*

## ◇ Best Practice Resources

- ◇ American Society of Health System Pharmacists. *ASHP Guidelines on Preventing Diversion of Controlled Substances*
- ◇ Institute for Safe Medication Practices. *Best practices for the safe and cost-effective management of controlled substances and Prevention of Drug Diversion in the Healthcare Setting*
- ◇ Minnesota Hospital Association: *Road Map to CS Diversion Prevention 2.0*

# Process



# Policy

- ◇ Consolidate
- ◇ Interdisciplinary
- ◇ Standardize across sites
- ◇ Ongoing review
  - ◇ Change in process
  - ◇ Addition of service, site
  - ◇ At least every 3 years, ideally annual
- ◇ Should include all steps of the CS process
- ◇ Identify risk points and reduction strategies



# Process Risk Points



# Controlled Substance Compliance Steering Committee and Drug Diversion Response Team





# Controlled Substance Compliance Steering Committee and Drug Diversion Response Team



# Education/Training

- ◇ Content
  - ◇ Definition and prevalence of diversion
  - ◇ Consequences
  - ◇ Signs of abuse and diversion
  - ◇ Policies
    - ◇ Controlled substance processes
    - ◇ Reporting and investigation workflow
- ◇ Consider tailoring training to role
  - ◇ End user vs. manager with oversight
- ◇ User acknowledgment statement

# Education/Training

- ◇ How to deliver
  - ◇ Computer based
  - ◇ New employee orientation
  - ◇ CE
  - ◇ Grand rounds
  - ◇ Handouts
  - ◇ One on one
- ◇ Frequency considerations
  - ◇ Initial and ongoing

# Auditing/Surveillance

- ◇ Automate, automate, automate
  - ◇ ADC
    - ◇ Removal
    - ◇ Wasting
    - ◇ Waste witnessing
- ◇ Barriers
  - ◇ Lack of automation
  - ◇ Lack of interoperability
  - ◇ Lack of resources



# Auditing/Surveillance

## Basic ADC Reports

- CS usage trends
- CS waste trends
- Null transactions
- Discrepancies
- Dispense after discharge
- Patterns of removal
- Waste/witness buddies

## Advanced ADC Reports

(In addition to basic ADC reports)

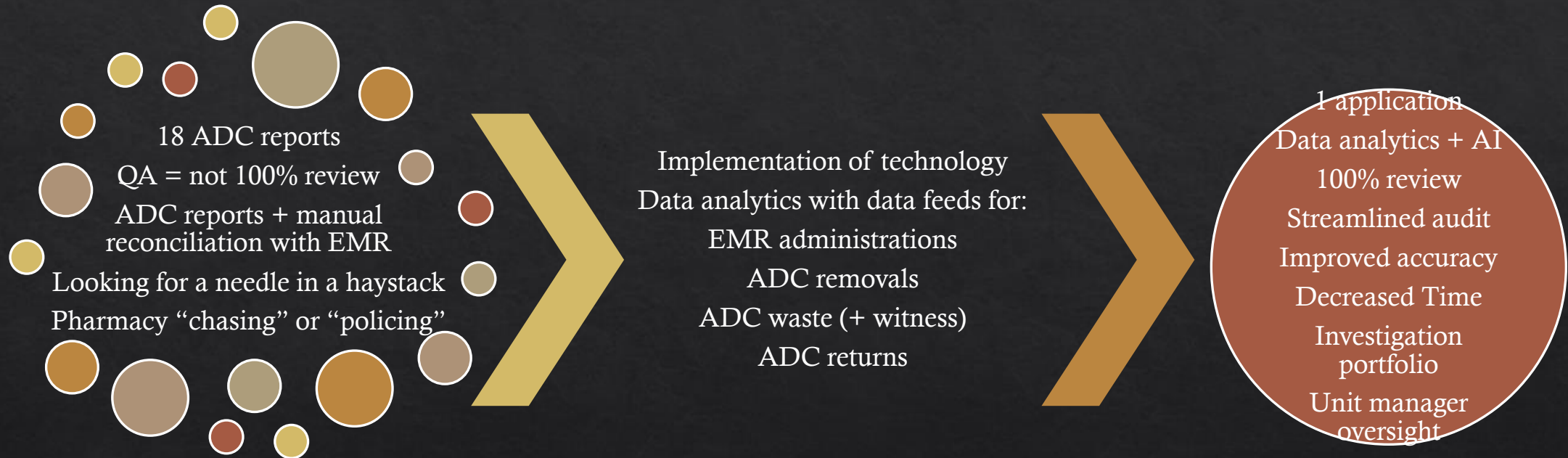
- Discrepancy resolution auditing
- Timely and appropriate wasting
- ADC access and activity
- ADC override audits
- BCMA
- Reconciliation audit
- Random waste testing

## Data Analytics

(Usually replaces basic and advanced ADC reports)

ADC and EMR feeds

# ADC Report Auditing -> Data Analytics/AI



# Takeaways

- ◇ Continually reassess your policies, process, training
  - ◇ New sites
  - ◇ New services
  - ◇ New personnel
  - ◇ New technologies, solutions
  - ◇ Current regulations and best practices
  - ◇ New ways to “game the system”
- ◇ Track and trend data

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- Mayo Clinic: Diversion of Drugs Within Health Care Facilities, a Multiple-Victim Crime: Patterns of Diversion, Scope, Consequences, Detection, and Prevention - [Link](#)
- Joint Commission: Medication Management Countering Drug Diversion - [Link](#)
- Do You Know About Drug Diversion - [Link](#)
- Holland and Hart Drug Diversion Webinar – [Link](#)
- Institutional Diversion Prevention, Detection, and Responses – [Link](#)
- One and Only Campaign – [Link](#)
- Code N – [Link](#)



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