

Medication: Diversion

What's the Risk?

Drug diversion is “the unauthorized taking or use of any medication, including medication waste.”¹ Diversion can occur in any number of ways, including:

- A healthcare professional pilfering controlled substances from patients.
- Prescription forgery or theft by a patient, healthcare worker, staff member, or someone who has access to an office, such as cleaning personnel.
- Theft of controlled substances by a patient, healthcare worker, staff member, or someone who has access to an office, such as cleaning personnel.
- Operation of a “pill mill.”
- Illegal sale of prescriptions by a prescriber.
- Patients who doctor shop and receive prescriptions for the same complaint from numerous physicians.

Undoubtedly, drug diversion by healthcare professionals is a patient safety risk because of the harm it can cause. Patients may be harmed multiple ways, including receiving substandard care, suffering additional pain if a prescribed dosage of a narcotic analgesics is altered, or incurring a bloodborne illness from a sharp used on a drug diverter.²

Drug diversion is more than a patient safety issue, it is also a crime. The Drug Enforcement Administration (DEA) is responsible for administrative oversight of controlled substances and criminal enforcement for violation of controlled substance laws. The DEA maintains a [list of investigations](#) that resulted in the arrest and prosecution of registrants.

For more information on reporting criminal behavior associated with drug diversion, see the chapter titled [Reporting: Drug Diversion & Criminal Acts](#).

When Is This Risk an Issue?

To prevent diversion, federal and state regulations detail the proper handling, security, and inventory requirements for controlled substances. It is the responsibility of each practice that maintains controlled substances to prevent, detect, and report drug diversions.³

Narcotic Storage

Title 21, CFR Section 1301.71(a) requires that all registrants provide effective controls and procedures to guard against theft and diversion of controlled substances.⁴ The DEA requires [additional security requirements](#).

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Record-Keeping

One method to prevent drug diversion is to implement drug handling policies. These policies should address procedures for maintaining current and accurate records of the receipt and disposition of all controlled substances, reconciling controlled substance discrepancies, and appropriately reporting controlled substance losses.

The DEA Office of Diversion Control's Practitioners Manual contains a summary of record-keeping requirements [for pharmacists](#).

Prescription Pads

According to the DEA, prescription forgery commonly occurs by stealing blank prescription pads, altering prescriptions, or calling pharmacies for prescriptions without authorization from the physician.⁵ Prescription forgery occurs by patients as well as staff members. One way to prevent prescription drug abuse and diversion is to use tamper-resistant prescription pads. Laws vary by state; however, several states require tamper-resistant prescription forms to be used.⁶ There are [several safeguards](#) prescribers may follow to prevent prescription fraud.

Medication Handling

Strict and effective medication-handling policies that address count discrepancies for controlled substances, the wasting of controlled substances, and the storage of controlled substances in procedural areas are crucial for preventing drug diversion.⁷

Discrepancies in the controlled substances count can often be a red flag for diversion, so it is important to resolve discrepancies prior to the end of a shift. In a physician's practice, this is typically when the practice closes at the end of the business day.⁷

Waste is a common source for diversion and must be minimized to prevent diversion. When waste does occur, it must be physically witnessed by a second authorized user and documented at the time the medication is actually wasted.¹ It's important that organizations develop a system for tracking waste and for auditing waste documentation to determine if any of the following patterns are occurring, any one of which can be a sign that waste is being diverted:

- Removing larger doses than necessary.
- Giving less than ordered more frequently.
- Failing to waste.
- Frequently wasting an entire dose.
- Substituting a non-controlled substance for a controlled substance during waste.
- Removing unspent syringes from sharps boxes.⁷

Areas where procedures occur are also prone to diversion and necessitate strict policies that require locking controlled substances in the area and limiting access to staff members assigned to the procedure. If it is not possible to keep the controlled substances locked in a cabinet, then

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the ideal storage container is a readily visible Lucite or opaque storage box that is locked with a unique key.⁷

Automated Dispensing Cabinets (ADCs)

ADCs are becoming more common in outpatient settings as the primary method of drug delivery. It is important to establish security processes to ensure adequate control of medications and to prevent drug diversion.

Drug Addiction in Healthcare Professionals

Anyone can become addicted to drugs, including healthcare professionals.⁷ The DEA resource [Drug Addiction in Health Care Professionals](#) provides a wealth of information associated with drug diversion prevention. Additionally, the resource highlights behaviors and actions that drug addicted healthcare professionals may display.

How Can I Reduce Risk?

Use the following strategies to prevent diversion.

Develop Policies and Procedures

Implement medication-handling policies and procedures

- Develop and implement medication-handling policies and procedures for controlled substances that address the following:
 - How controlled substances are ordered.
 - Where controlled substance orders are received and how incoming shipments are processed.
 - How controlled substances are stored.
 - Rules for dispensing, administering, wasting, and returning controlled substances, including time frames for these actions to occur.
 - Requirements for witnessing of wasting and returns.
 - Application, documentation, and wasting of fentanyl patches.
 - Documentation requirements for administration of controlled substances.
 - Expectations for resolution of discrepancies in the controlled substance count.⁷
- Review [Controlled Substance Access and Handling Policy – SAMPLE](#).

Develop Policies and Procedures

Use the following strategies to prevent diversion.

- Recognize the signs of medication abuse among employees. Develop policies and procedures for identifying, reporting, and evaluating impaired staff members.

Implement Security Measures

Lock medication room or cabinet

- Store stocks of Schedule II through Schedule V controlled substances in a securely locked, substantially constructed cabinet.⁸

Limit access to narcotics

- Ensure that only licensed healthcare professionals have access to narcotics.
- Minimize the number of keys and strictly control who has access to the keys.
 - Periodically evaluate the system for securing controlled substances.

Conduct a daily inventory of controlled substances

- Take a daily inventory of controlled substances. Check state and federal regulations for specific inventory requirements. Federal record-keeping requirements are detailed in the [DEA Practitioner's Manual](#).

Resolve inventory discrepancies

- Develop a process to investigate and resolve inventory discrepancies. Require generation of an event report when a discrepancy is unresolved.

Monitor compliance

- Monitor compliance with medication security policies and procedures.

Secure prescription pads

- Store prescription pads in a secure, locked cabinet/drawer when not in use.

Use tamper-proof prescription pads

- Use tamper-resistant prescription forms that have features to prevent counterfeiting, unauthorized copying, erasures, and changes.
- Check state laws to determine what, if any, tamper-resistant prescription form regulations are in place.

Establish a Security Process for ADCs

Implement ADC system security recommendations

- Implement ADC system security recommendations from the [Institute of Safe Medication Practices \(ISMP\)](#)

Establish a Security Process for ADCs

[Guidance on the Interdisciplinary Safe Use of Automated Dispensing Cabinets.](#)

- Require users to sign out of the ADC**
 - Require users to sign out of the ADC each time a transaction is complete and any time the user steps away from the cabinet during a transaction. Ensure that the ADC has a 30-second time-out feature to prevent unauthorized access.¹
- Seek additional information**
 - For more information on dispensing, see the chapter titled [Medication: Dispensing](#).

References:

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