

# Institutional Policy Manual

## Drug Diversion Reporting and Response

Content Applies to Arizona, Florida, Rochester Scope

Arizona, Florida, Rochester Purpose

To provide guidelines for the identification, reporting, and investigation of suspected drug diversion by Mayo employees, patients, and visitors.

### Key Terms

**Drug Diversion:** Intentionally and without proper authorization, using or taking possession of a prescription medication or medical gas from Mayo supplies, Mayo patients, or through the use of Mayo prescription, ordering, or dispensing systems. Examples of drug diversion include, but are not limited to, the following:

- Medication theft
- Using or taking possession of a medication without a valid order or prescription
- Forging or inappropriately modifying a prescription
- Using or taking possession of medication waste, i.e., left over medication

**Prescription medication:** A medication that according to federal law requires a prescription prior to dispensing. Synonym: legend medication.

**Employee:** Any consulting staff, administrative staff, allied health staff, fellow, resident, student, volunteer, contract worker, or any other employee or individual who has received an appointment at Mayo Clinic.

**Controlled substance:** Medications classified as Schedule I through V by the Federal Drug Enforcement Agency and/or applicable state law:

Arizona: Arizona Revised Statutes 36-2512 through 2516

Florida: Florida Statutes 893.03

Rochester: Minnesota Statutes 152.02

**Licensed or registered health care provider:** Health care provider whose license or registration allows him/her to provide care and services within the scope of their respective practices and as authorized from respective regulatory agencies and Mayo Clinic departmental policies.

### Policy Statements

1. The prevention of drug diversion is essential to the safety of Mayo patients and is the individual responsibility of every Mayo employee.
2. Employees are required to report known or suspected incidents of drug diversion by employees, patients, and visitors.
3. All suspected incidents of drug diversion will be thoroughly investigated.
4. Suspicion of drug diversion may arise from a variety of circumstances, including, but not limited to, the following:
  - A witnessed incident of probable drug diversion

- Behaviors that may indicate an impaired individual ([Checklist of Unsatisfactory Job Performance](#))
  - Suspicious activity identified during routine monitoring and/or proactive surveillance
  - Self-disclosure of drug diversion by an individual
  - Notification of suspected drug diversion from an external source, such as local law enforcement or a family member of a suspected drug diverter
5. Any employee who reports suspected drug diversion honestly and in good faith will be protected from retaliation.
  6. The Drug Diversion Response Team (DDiRT) will manage the investigation of all reports of suspected drug diversion.
  7. Mayo Leadership will receive prompt notification of incidents of probable drug diversion.
  8. Drug diversion by a Mayo employee is grounds for corrective action. In most cases the expected outcome will be termination of employment or dismissal from the applicable school or training program.
  9. Drug diversion by a Mayo employee will be reported to all appropriate government, licensing, regulatory, and law enforcement agencies.
  10. Data relating to drug diversion reports and investigations will be analyzed to identify trends and opportunities for potential improvement in the medication use process.
  11. The Medication Diversion Prevention Subcommittee has responsibility for minimizing the frequency of drug diversion and will coordinate with the Mayo Clinic Clinical Practice Committee for enterprise management of medication use processes.

## Procedure Statements

### Initial Report and Investigation

1. Any employee who suspects that drug diversion has occurred should notify his or her supervisor. Alternatively, an employee may call the site Drug Diversion Pager at the following number:

Arizona     127-9371  
Florida:    127-0297  
Rochester: 127-02090

An employee may call the Drug Diversion Pager directly or do so anonymously. If there is no immediate risk to patient safety and an employee is not comfortable notifying his or her supervisor or calling the Drug Diversion Pager, the employee should call the Compliance Hotline at 888-721-5391 to make a confidential report.

2. Upon notification of suspected drug diversion, the supervisor will perform an initial safety assessment and promptly call the Drug Diversion Pager. Calls made to the drug diversion pager will be returned by a DDiRT representative.
3. The supervisor's initial safety assessment will include the following steps:
  - a) Determine whether any patient has been harmed or placed at risk of harm, and take appropriate action to treat the patient or remove the risk of harm. If a patient has been harmed or placed at risk of harm, the supervisor will notify the patient's primary staff physician.
  - b) Determine whether the suspected drug diversion involves an impaired employee or witnessed drug use by an employee. If so, follow the [procedure for managing an impaired employee](#).

4. The supervisor will take steps that are immediately necessary to preserve any readily apparent evidence, such as medication vials or syringes. If evidence involves an infusion pump, the medication will be removed from the pump and placed in a sealed plastic bag. The pump should not be cleared and should be sequestered. The supervisor should not engage in any additional evidence collection or investigation without consulting with the DDiRT representative.
5. Except as directed by the DDiRT representative or as necessary to conduct the initial safety assessment, the supervisor will not interview the individual suspected of drug diversion.
6. Upon notification of suspected drug diversion, the DDiRT representative will initiate a preliminary investigation and make the following notifications:
  - a) If a Mayo employee is suspected of diverting drugs while on duty, notify the Legal Department and the employee's supervisor and Human Resources (HR) service partner.
  - b) If a Mayo fellow, resident, or student is suspected of diverting drugs within the scope of their training, notify the Legal Department and the Dean or Administrator of the appropriate School.
  - c) To protect the confidentiality of medical information, if a patient is suspected of drug diversion, notify only the Legal Department and, as needed, the DDiRT. Notification will be limited to the Legal Department and DDiRT even if the suspected patient is also a Mayo employee, fellow, resident, or student.
    - I. If a patient suspected of drug diversion is also a Mayo employee, information regarding the suspected diversion should not be shared with the employee's supervisor or HR service partner without approval from the Legal Department.
    - II. If a patient suspected of drug diversion is also a Mayo fellow, resident, or student, information regarding the suspected diversion should not be shared with the Dean or Administrator of the School without approval from the Legal Department.
  - d) If a visitor is suspected of drug diversion, notify the Legal Department and any other resources necessary to assist in the investigation.
7. After the preliminary investigation, if reasonable suspicion exists that drug diversion may have occurred, the DDiRT representative will convene the DDiRT.
8. The DDiRT will review the evidence and determine next steps which may include further investigation, additional surveillance, witness interviews, or suspect interviews.

## **Internal Reporting**

9. If the DDiRT concludes that drug diversion has occurred or probably occurred, the DDiRT will notify the Legal Department for internal reporting pursuant to the Policy on Notification of Leadership Regarding Extraordinary Events.
10. The Legal Department will also notify the appropriate billing department to determine whether modifications should be made to bills related to affected medical care.

## **Employment Action**

11. If an employee is determined to have committed drug diversion, the employee will be subject to corrective action. In most cases the expected outcome will be termination of employment or dismissal from the applicable school or training program. Such action may be taken regardless of whether the diversion occurred within the scope of employment or training, or while the employee was off-duty as a patient or visitor.
12. Termination or dismissal due to drug diversion will be recorded in the employee's employment file or educational file. The specific reason for dismissal will be shared with prospective employers or educators who contact Mayo with appropriate authorization.

## **Reporting to Law Enforcement, Licensing Boards and other Government Agencies**

13. If a controlled substance is determined to have been diverted by any individual, the Director of Pharmacy will ensure that appropriate reports are made to the Drug Enforcement Agency (DEA) and the Board of Pharmacy.
14. If a Mayo employee is determined to have committed drug diversion, Mayo Security in collaboration with the Legal Department will report the diversion to the local police department. This report will be made regardless of whether the diversion occurred within the scope of the employee's employment or training, or while the employee was a patient or visitor.
15. In the event of drug diversion by a patient or visitor who is not a Mayo employee, the Legal Department in collaboration with Mayo Leadership will determine whether to report the diversion to the local police department.
16. When reporting incidents of drug diversion by a patient, the report will describe the facts of the diversion and will not disclose additional information regarding the patient's medical history, condition, diagnoses, or treatment.
17. In collaboration with the Legal Department, the following individuals will report drug diversion by licensed or registered health care providers to the appropriate State licensing board:
  - a) The Chair of the Department of Nursing will report drug diversion by nurses.
  - b) The Chair of the Personnel Committee will report drug diversion by staff physicians.
  - c) The Dean of the applicable School will report drug diversion by fellows, residents, or students.
  - d) The applicable Supervisor or other Departmental leader will report drug diversion by all other licensed or registered health care providers.
18. The Legal Department and the DDiRT will evaluate all incidents of drug diversion to determine whether additional external reports should be made, such as reports to the Department of Health or Food and Drug Administration.

## **Patient Notification**

19. If any patient is harmed by drug diversion, the patient will be informed of the circumstances of the drug diversion and its impact on the patient. The patient's primary physician will be responsible for ensuring that this communication occurs.
20. If drug diversion is confirmed but it is unclear whether the diversion caused patient harm or placed one or more patients at risk of harm, the DDiRT in collaboration with the Legal Department and Mayo Leadership will determine whether patient notification will serve the best interests of potentially affected patients.

## **Collection, Analysis, and Sharing of Drug Diversion Data**

21. The DDiRT will distribute a report of each incident of drug diversion to the designated individuals at all Mayo sites across the enterprise.
22. The Medication Diversion Prevention Subcommittee will perform the following functions:
  - a. Collect and analyze drug diversion data to identify trends and opportunities for potential improvement in medication use processes.
  - b. Share drug diversion data with the Mayo Clinic Clinical Practice Committee to facilitate enterprise management of medication use processes.

## Related Documents

[Allied Health Staff Employee Policy Manual -- Corrective Action](#)

[Arizona](#)

[Florida](#)

[Rochester](#)

[Allied Health Staff Employee Policy Manual — Alcohol, Drug and Chemical Abuse](#)

[Consulting/Voting Staff Policy Manual — Corrective Action](#)

[Consulting/Voting Staff Policy Manual — Alcohol, Drug and Chemical Abuse](#)

## References

NA

## Contact

Vice Chair, Medication Diversion Prevention Subcommittee (Kevin R. Dillon, Pharm,D.,R.Ph.)

## Approved By

Clinical Practice Committee - 10/31/2011

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