



Missouri Board Of Pharmacy

Drug Diversion From Within The Pharmacy

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Presenters

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Webinar Objectives

- Describe types of internal diversions
- Provide prevention/detection tips
- Explain diversion investigations
- Answer questions



Types Of Internal Diversions



It won't happen to me...

- Retail
- Mail-Order
- Long Term Care
- Hospital Pharmacies



It won't happen to me...

- Pharmacists
- Technicians
- Unlicensed: owners, drivers, cashiers
- Long term employee vs. new hire



It won't happen to me...

- Personal use
- Supplying family/friends
- Sale/trade



Commonly Diverted Drugs

- Narcotics
- Benzodiazepines
- Cough Syrups
- Other: Tramadol, Zolpidem, Carisoprodol

Manipulation

- Situations
- Records
- Products



Situations

- Environment
- Hours
- Tasks



Concealment

- Clothing
- Personal Items
- Trash, cardboard boxes



Audience Question?

How many dosage units of alprazolam and hydrocodone will a 44 ounce soda cup hold?





Answer

- * 517 Hydrocodone/Acetaminophen
- * 499 Alprazolam

Total pharmacy losses:

- * 20,000 Alprazolam
- * 41,000 Hydrocodone



Prescription Records

- Fraudulent prescriptions
- Transfer of controlled substance Rx
- Intentional sale to wrong person
- Theft of hard copy



Pharmacy Records

- Perpetual inventory
- Return to stock



Product Manipulation

- Dilution
- Intentional errors in counting



It CAN happen to me...

"As I told our Board of Pharmacy inspector, before this incident I would have invited anyone to examine our processes to see how thoroughly we were in protecting and preventing (security camera, double counts, etc.) After this happened we found out how easily X got away with this I mused that I might as well have put a "Steal Me" sign on our controlled substance cabinet."

Total losses: 6,000 Hydrocodone



Prevention and Detection



Who is Responsible?

Pharmacy law and regulations

- Board of Pharmacy
 - ✓ Pharmacist-in-charge
 - ✓ Permit holder
- DEA and BNDD
 - ✓ Registrant
- DEA
 - ✓ Employees



Prevention

- Employees
- Drug security
- Ordering
- Dispensing
- Other measures



Employees

Hiring process

- Background checks
 - ✓ DEA/BNDD waiver requirements
- Previous employment
- References
- Pre-employment drug screen
- Board licensure



Employees

Education

- Diversion is a crime
- Active detection program
- Report suspicious activity
 - ✓ DEA requirement
- Policies and procedures



Employees

Ongoing process

- Retraining
- Drug screens
 - ✓ Random
 - ✓ For cause
- Be vigilant



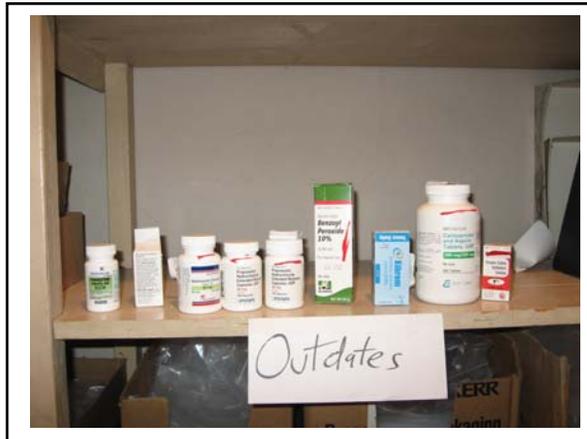
Employees

Technician registration

- Required
 - ✓ Assisting in practice of pharmacy
 - ✓ Independent access to drug stock
- Ok to register others
 - ✓ Drivers
 - ✓ Cashiers
- Registration ≠ No criminal/substance abuse history

Drug Security

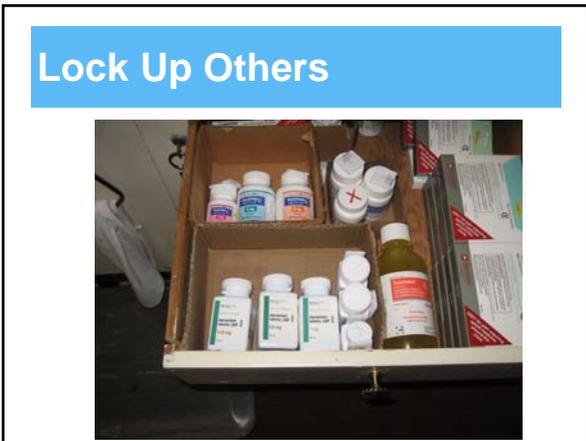
- Active inventory
- Overstock
- Outdates
- Returns
- OTC pseudoephedrine
- Filled prescriptions



Drug Inventory

- BNDD requirements
 - ✓ C-II stored under lock
 - ✓ C-III to C-V dispersed or stored under lock
 - ✓ It is ok to lock up others.
- Product placement
 - ✓ Blind spots
 - ✓ Camera
 - ✓ Highly diverted





Limit Access to Drug Stock

Review who has access

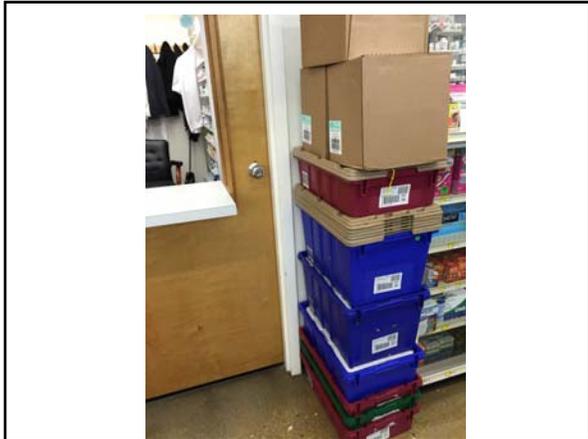
- Employees
- Non-employees
 - ✓ Visitors
 - ✓ Customers
 - ✓ Other professionals
- After hours



Drug Ordering

- Review the entire process
- Drug security throughout
- Employee responsibilities
- Oversight by pharmacist or management
- Review invoices
- Access to computer inventory data
- CSOS passwords
- Return process



Prescription Processing

- Review dispensing process
 - ✓ Physical movement of drugs
 - ✓ Who is involved
 - ✓ Who is responsible
- Return to stock process



Don't Forget Automation



Prescription Processing

No access drug stock ≠ No diversion

- Fraudulent prescriptions
- Unauthorized refills
- Employee, family, friends
- New and refills transfers
- Sale to patient



Video Surveillance

- Recommended
- Make sure it is recording
- Positioned correctly
- Change locations



Keys and Passwords

- Protection
- Review who has access
- Keep key log
- Change when needed
- Alarm codes



Personal Articles & Trash

- ❑ Limit in pharmacy
 - ✓ Coats, purses, backpacks
 - ✓ Employee purchases
 - ✓ Check items
- ❑ Review trash procedures



Policies and Procedures

- ❑ Drug screens
- ❑ Involvement in dispensing own prescription
- ❑ Inventory access
- ❑ Personal items in pharmacy area
- ❑ Passwords and keys



Detection

- ❑ Ongoing process
- ❑ Review records
 - ✓ Compare purchase and dispense records
 - ✓ Perpetual inventory
 - ✓ Compare to on-hand
 - ✓ Back count stock bottle
 - ✓ Inventory adjustments
 - ✓ Review security video
- ❑ Reconcile inventory



Inventory Reconciliation

- ❑ Annual inventory
 - ✓ Not enough
 - ✓ One time snap shot
 - ✓ Will not detect diversion
- ❑ Reconciliation
 - ✓ Specific time period
 - ✓ What you have vs. what you should have



Reconciliation



Reconciliation

Drug	Beginning Inventory	+ Drugs Received	= Drugs Dispensed & Distributed	= Expected Inventory	- Physical On-Hand Inventory	= Difference Positive = Shortage Negative = Overage
Example 1	220	+ 200	= 280	= 280	- 220	= 20 shortage
Example 2	225	+ 200	= 280	= 85	- 220	= 250 overage
		+ 0	= 0	= 0	- 0	= 0
		+ 0	= 0	= 0	- 0	= 0
		+ 0	= 0	= 0	- 0	= 0
		+ 0	= 0	= 0	- 0	= 0

Diversion Investigations



Two Investigations

- Internal pharmacy investigation
- Board of Pharmacy investigation



Internal Investigation

- Identify culprit(s)
- Determine losses
- Identify pharmacy weakness
- Correct weakness
- Document your internal investigation



Identify culprits

- Detective work
 - ✓ Undercover
 - ✓ Video surveillance
 - ✓ Review work schedules and access
 - ✓ Time specific audits
 - ✓ Review
 - ✓ Computer records
 - ✓ Alarm reports for suspicious activity
- Drug screens
- Interviews
- Review pharmacy processes



Determine Losses

- Conduct audit
 - ✓ True audit—reconcile inventory
 - ✓ Verifying perpetual not enough
 - ✓ Admitted drugs not enough
 - ✓ Time period selection
- Conduct follow-up audit
 - ✓ Rule out continued losses



Identify Pharmacy Weakness

- Review all processes
- Determine any weaknesses
- Action plan to correct



Root Cause Analysis

- Deviation from written policy
- Camera placement and pharmacy layout
- Who orders and who checks in products
- Proper storage and who has the CII access
- Perpetual inventory or control substances room needed
- Purses, coats, opaque cups allowed in the pharmacy

Reporting

- Required**
 - ✓ Loss reports
 - ✓ Board of Pharmacy reporting
- Highly recommended**
 - ✓ Law enforcement



Loss Report Requirements

- DEA**
 - ✓ Initial within one business day
 - ✓ Final Form 106
 - ✓ All employee diversion/theft is "significant"
- BNDD Loss Report**
 - ✓ Initial upon discovery
 - ✓ Loss report within 7 days
- Amend reports as needed
- Keep copies



Notification to the Board of Pharmacy

Technician Discipline/Action Reporting

Technician Discipline/Action Form	
Pharmacy Name:	Required
Pharmacy Address:	Required
Pharmacy City:	Required
Pharmacy State:	Required
Pharmacy Zip:	Required
Pharmacy County:	Required
Pharmacy Phone #:	Required
Pharmacy Hours #:	Required
Name of Notifying Person:	Required
Local Address:	Required
Name of Technician:	Required
Technician Registration #:	Required
Date of Discipline/Action:	Required (mm/dd/yyyy)
Reason for Discipline/Action:	
Submit	



Notification to the Board of Pharmacy

Pharmacist Discipline/Action Reporting

Provide the following information about the person making this report:	
Name of Person Making This Report:	
Address of Person Making This Report:	
Telephone # of Person Making This Report:	
E-Mail Address of Person Making This Report:	Optional
Provide the following information about the subject of this report:	
Name of Pharmacist Who is the Subject of This Report:	
Address of Pharmacist Who is the Subject of This Report:	
Telephone # of Pharmacist Who is the Subject of This Report:	
E-Mail Address of Person Subject of This Report:	Optional



Board of Pharmacy Investigation

- Visit to the pharmacy
- Collect internal reports, admission statements, video
- Interview of all persons
- Review of all internal audits
- Conduct a controlled substance audit
- Copy of loss reports and police report
- Corrective action plan
- Submit investigative report to Board



Missouri Case

- ❑ Technician was solely responsible for:
 - ✓ Placing drug order with wholesaler
 - ✓ Checking in/stocking drug order
 - ✓ Handling invoice paperwork
- ❑ No pharmacist/management oversight
- ❑ Technician took home empty boxes daily
- ❑ On HB 600 Suspension List last four months of employment

Missouri Case

- ❑ Teenager hospitalized from drug overdose
- ❑ Criminal trail lead back to technician
- ❑ 14 months of diversion
- ❑ Hydrocodone/APAP, Alprazolam, Diazepam, APAP/Codeine, Hydrocodone Elixir
- ❑ 297,467 tablets/capsules
- ❑ 8,229 ml liquid
- ❑ Other non-controls found at residence



Missouri Case

- ❑ DEA civil settlement: \$450,000
- ❑ DEA cited
 - ✓ Weak security
 - ✓ Poor recordkeeping and audits
- ❑ Pharmacy sold shortly thereafter



Questions & Discussion

