NANB

Fact Sheet: Drug Diversion

Drug diversion is an emerging issue in healthcare. Drug diversion is defined as, "the unlawful misdirecting or misuse of any medication" (NSCN, 2016, p. 2) and can lead to negative consequences for patients, nurses, and employers (Berge et al., 2012). Nurses[1] are responsible for safe, competent, compassionate and ethical nursing practice, to maintain fitness to practice, and are accountable to the client, the public, the employer, and the profession. Diverting medication goes against the Code of Conduct for Registered Nurses and Nurse Practitioners and can potentially impact the nurse's ability to practice safely, competently, compassionately and ethically. Nurses who suspect drug diversion activity must report this activity. Visit duty to report for more information of on when and how to report.

Nurses play an important role in recognizing and reporting drug diversion behaviour; therefore, it is important to be aware of the signs of drug diversion. Signs to watch for include:

- performing narcotic counts alone and failing to ensure observation or co-signing for narcotic wastage;
- offering to hold keys for narcotics storage cabinets;
- tampering with vials or packages;
- waiting until alone to access and draw up narcotics;
- inconsistencies between narcotic records and patient's medication administration record;
- frequent reports of lost or wasted medications;
- excessive administration of PRN medications and reports of ineffective pain relief from the same patient;
- reports that medications from home have gone missing;
- defensiveness when questioned about medication errors;
- showing up when not scheduled and hanging around the drug supply;
- requesting assignment to patients with large amounts of prescribed pain medication; and
- using fictional client names on narcotic records (NSCN, 2016).

If you suspect a nurse is diverting medication, certify that the nurse's patients are safe, and then report to your supervisor. It is crucial to document your observations, and to follow-up with your supervisor to verify that action is taken (NSCN, 2016). Some employers have specific policies regarding reporting of drug diversion, ensure that you are aware of your employer policy when reporting.

Early identification that a nurse may be diverting and using drugs can lead to a better chance of recovery and returning to work (NCSBN, 2018). The ultimate goal of reporting medication diversion is to initiate assessment and treatment, if necessary. It is important to note that nurses can and do return to practice upon recovery.

New Brunswick is not immune to this issue; NANB received ten alleged complaints of drug diversion from December 1, 2018 to November 30, 2020 (Nurses Association of New Brunswick [NANB], n.d.).

If you have questions regarding drug diversion, please contact CNNB by e-mail at consultation@cnnb-opinb.ca or by phone at 506-458-8731 / Toll-free (NB): 1-800-442-4417. Additional resources for nursing practice, including the Code of Conduct, standards of practice, practice guidelines, and fact sheets may be found via the CNNB webpage: Professional Practice.

[1]*For the purpose of this document, the term "nurses" refers to all NANB members, including graduate nurses, registered nurses, and nurse practitioners.*

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References

Berge, K. H., Dillon, K. R., Sikkink, K. M., Taylor, T. K., & Lanier, W. L. (2012). Diversion of drugs within health care facilities, a multiple-victim crime: Patterns of diversion, scope, consequences, detection, and prevention. Mayo Clinic proceedings, 87(7), 674–682. https://doi.org/10.1016/j.mayocp.2012.03.013

Nova Scotia College of Nursing. (2016). *Problematic substance use: A guide for nurses.* Bedford: Author.