

Sample

Drug Diversion Core Team Investigation Notes/Report

Instructions:

All potential incidents should be reported to the applicable Pharmacy site lead regardless of the source. The Pharmacy site lead will notify the applicable HR Generalist and department manager of the potential incident as well as the Drug Diversion Program Manager and other applicable Leadership via Compliance 360. The Site Core Team (Manager, Human Resources designee, and Pharmacy designee) must be pulled together to discuss the situation and form a plan as soon as reasonably able. The Core Team will conduct the investigation and determine:

- (1) if we are able to substantiate either by admission, direct evidence or indirect evidence that indicates high probability of diversion/theft or
- (2) if we are able to substantiate either by admission, direct evidence or indirect evidence that indicates high probability of a policy/procedure violation,
- (3) Determines the appropriate level of corrective action (if applicable) and
- (4) Completes both internal and external reporting requirements as appropriate

A copy of this Drug Diversion Core Team report must be loaded into Compliance 360 in addition to any other investigation reports/documentation.

Section 1: BACKGROUND			
Employee/Suspect Name	Employee ID	Job Title	Incident Date(s)
Business Unit		Location/Department	Union
HR Generalist Name		Phone #	
Pharmacy Lead Name		Phone #	
Manager Name		Phone #	
Other Core Team Members – Role – Phone # (if applicable)			
Section 2: INVESTIGATION REPORT			
Source of reported Incident (e.g. Integrity Line, peer reported, Pharmacy Monitoring, etc)			
Incident/Investigation Details			

<p>Potential For Patient Harm</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>Describe Yes:</p>
<p>Concern for Employee Safety</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>If Yes: Test for Cause</p>
<p>Placed on Administration Leave</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>
<p>Investigation Results</p> <p><input type="checkbox"/> Direct Evidence of Diversion</p> <p><input type="checkbox"/> Indirect Evidence of Diversion</p> <p><input type="checkbox"/> Evidence of Policy/Procedure Violation</p> <p><input type="checkbox"/> Other</p> <p>Describe Other:</p>
<p>Investigation Preliminary Findings</p>
<p>Tentative Employee/Suspect Meeting/Interview Date</p>
<p>Meeting/Interview Key Points/Questions</p>
<p>Section 3: CORRECTIVE ACTION</p>
<p>Factors Assessed in Determining Corrective Action</p>
<p>Potential Corrective Action Based on Investigation Findings and/or Policy</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Coaching</p> <p><input type="checkbox"/> Verbal</p> <p><input type="checkbox"/> Written</p> <p><input type="checkbox"/> Final Written</p> <p><input type="checkbox"/> Suspension</p> <p><input type="checkbox"/> Termination</p> <p><input type="checkbox"/> N/A</p> <p>Rational for N/A:</p>
<p>Are there other HR issues pending for this employee</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>Describe Yes:</p>

Final Corrective Action Outcome After Employee Meeting/Interview (including other pending matters if applicable)

- None
- Coaching
- Verbal
- Written
- Final Written
- Suspension
- Termination

Section 4: REPORTING

- N/A
- C360
- DEA
- FDA
- BOP
- BON
- Other Professional Board
Describe Other:

Local Law Enforcement – Case #: _____ Agency: _____
Contact: _____ Phone: _____

Section 5: ADDITIONAL DOCUMENTS

List of additional documents (List not all inclusive - please also attach to C360 Incident)

- ADC Transaction Audit Findings
- Chart Audit Findings
- Patient Safety Visitor Reports
- Video Surveillance
- Copies of forged prescriptions
- Other (list):

Report Completed By

Date