

SANTA CLARA VALLEY HEALTH & HOSPITAL SYSTEM DEPARTMENT OF ALCOHOL & DRUG SERVICES	METHADONE TREATMENT POLICY & PROCEDURE MANUAL
DATE: NOVEMBER 30, 2016 SUBJECT: ANNUAL INTERNAL REVIEW: COMPLIANCE WITH DEA AND TITLE 9 REGULATIONS	REPLACES: 835 PAGE: 1 OF 3

POLICY

- A. The Senior Program Manager, or designee will conduct an annual internal review at each clinic to determine compliance with DEA and Title 9 Regulations. (See procedure A of 830)
- B. The person, conducting the review, will complete a checklist and place it in a folder specific for this purpose at each clinic. The review will include the following:
 - 1. Alarm system
 - 2. Clinic and medical licenses
 - 3. Methadone inventory and audit comparison
 - 4. Annual inventory of methadone and other drugs
 - 5. Power of Attorney forms
 - 6. DEA-222 order forms
 - 7. Methadone take-out labels
- C. The person who conducts the review of the methadone inventory and audit comparison will be familiar with the Narcotic Medication Reconciliation Procedures memorandum, dated January 28, 1998. The memorandum is a joint effort between the Drug Enforcement Administration and the State Department of Alcohol and Drug Programs to provide clarification for Narcotic Treatment Programs that the DEA accepts “no allowable percentage loss” in accountability investigations of registrants. Attachment A-1&2

PROCEDURE

- A. Alarm System
 - 1. A copy of the contract with the alarm company which states the type of system, where it terminates, and whether it is supervised for opening and closing of business, will be kept on file in the clinic.
- B. Clinic and Medical Personnel Licenses
 - 1. The clinic licenses and the licenses of medical personnel will be reviewed to determine if they are current and accurate, a copy of each license is kept on file in each clinic DEA binder and in each employee’s file.
- C. Methadone Inventory and Audit Comparison
 - 1. The reviewer will choose one day from each quarter of the past calendar month.
 - 2. The reviewer may elect to use the same format as the State ADP in doing the Methadone

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inventory and audit comparison. Attachment A-3. The reviewer will use copies of the total dispensed report, methadone usage report and bottle inventory report for the dates correlating with the reconciliation timeframe to obtain information for the comparison.

D. Annual Inventory of Methadone and Other Drugs

1. Records of Methadone Inventory will be maintained for each clinic in the DEA binder. - methadone will be reviewed to determine that the inventory was completed properly and within the time frame. (See Section 830)
2. Records of other drugs dispensed (such as INH) will be kept in a file at each clinic dispensary for a designated period of time.

E. Power of Attorney Forms

1. The review applies to the Methadone clinics and to the Adult Custody Health
2. Services/Jail Medication Unit. The Powers of Attorney forms for physicians and pharmacists must be current and accurate. (See Section 815).

F. DEA - 222 Order Forms

1. The Sr. Program Manager or designee will review the Methadone Order files (clerical and dispensary) which will contain executed DEA-222 (blue) forms and copies (no freight bills) packing lists, (no green orders) and purchase order confirmations, for each shipment of methadone received, and executed DEA-22 (brown) forms for each transaction of methadone supplied or transferred. (See Sections 805, 810, 820, 825 and 845).
2. The State ADP form *Inventory Recap-DEA 222 + Shipping Receipt* may be used to facilitate the review. Attachment A-4
3. Executed DEA-222 purchaser forms will be checked for the following on a quarterly basis:
 - a. An original **blue** purchaser's form (copy 3) is on file for **each** shipment of methadone **received**.
 - b. Each executed blue 222 is properly completed:
 - 1) Pre-printed with name, address and DEA license number of the receiving clinic
 - 2) Supplier's correct name, address, and license number
 - 3) Name of drug, finished form of the drug, volume of the containers, total number of milligrams, and number of containers ordered
 - 4) Date ordered correlates to the date received
 - 5) Shipment received corresponds with the order on the 222 forms
 - 6) Signature of purchaser or his attorney is present; and

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7) Date and amount received and the signature and title of the individual receiving the shipment is noted.

4. Executed DEA-222 supplier forms will be checked for the following on a quarterly basis:

- a. An original **brown** supplier's form (copy 1) is on file for **each** transfer of Methadone to another clinic, or the transfer of Methadone to the Adult Custody Health Services/Jail Medication Unit, or the transfer of Unwanted Controlled Substances to a DEA registered disposal firm. (See Sections 820, 825 and 845).
- b. Each executed brown 222 form is properly completed:
 - 1) Pre-printed with name, address, and DEA license number of the receiving clinic, jail unit, or disposal firm
 - 2) Supplier's correct name, address and license number
 - 3) Name of drug, finished form of the drug, volume of the containers, total number of milligrams and number of containers ordered/transferred
 - 4) Date ordered/transferred correlates to the date received
 - 5) Signature of purchaser or his attorney is present; and
 - 6) Date and amount received and the signature and title of the individual receiving the shipment/transfer is noted

G. Methadone Take-out Bottle Labels

The reviewer will pull three or more random methadone take-out labels and check to see that the following items are present on each label:

1. The name of the person receiving the medication.
2. The date of issue of the medication.
3. The name of the prescribing Medical Doctor.
4. The name strength of the medication dispensed.
5. The date the dispensed medication is to be taken.
6. The name and phone number of the dispensing clinic.
7. A 24-hour emergency contact phone number.
8. A safety warning.

Attachment: DEA and State ADP Narcotic Medication Reconciliation Procedures joint memorandum, dated January 28, 1998 (A)