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STANDARD ARTICLE: II SOP: 2904

OPERATING SECTION: 2900 EMS

PROCEDURES SUBJECT: Controlled Substance Program

DATE APPROVED: December 18, 2024

APPROVED:

#### Scope

This standard operating procedure (SOP) is established to ensure that Scotts Valley Fire District (SVFPD) adheres to all laws regarding the possession and use of controlled substances.

#### Purpose

The SVFPD is committed to developing, implementing, maintaining, and re-evaluating a Controlled Substance Program. The EMSIA established the Program to ensure that the participating Fire Agencies adhere to Federal law regarding the possession and use of Controlled Substances. The Santa Cruz County Emergency Medical Services Medical Director has approved the EMSIA Controlled Substance Program. The Program also meets the standards set forth by the California Controlled Substance Act and Regulations, Division of Control Amendments of 1984, Registrant Protection Act of 1984, Health and Safety Code Section 11122, and the California Board of Pharmacy. This SOP explains the procedure for implementing and maintaining the SVFPD Controlled Substance Program.

#### **Definitions**

- Controlled substance: Schedule II-IV medications as defined by the federal Controlled Substance Act of 1970.
- Operative IQ: A web-based system that tracks the cradle-to-grave history of each controlled substance from initial receipt, movement, audit, and administration to final disposition, verifying each action with a pin and password, biometric fingerprint scan, or digital signature. It also manages medication expiration dates, incident forms, and safe audits.
- Control number: A unique identifier assigned to each unit of a controlled substance, enabling tracking and accountability throughout its use and disposal. The control number signifies proper authorization and documentation for the handling and administration of the controlled substance.

#### Responsibilities

All SVFPD employees, as mandated by the scope and/or application of their job duties, must adhere at all times to all procedures contained in this Standard Operating Procedure. This clarity in roles and responsibilities ensures that each one of us is aware of our part in maintaining the integrity of the Controlled Substance Program.

#### **Procedures**

- 1. Storage of Controlled Substance
  - SVFPD Controlled Substance Administrative Inventory Safe (Administrative Inventory Safe).



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SVFPD's controlled substance reserve inventory will always be secured in a fireresistant safe located in the Battalion Chief's office. Only Chief Officers and Acting
Battalion Chiefs are permitted access to the Administrative Inventory Safe. Each
will be given a numeric access code that allows the safe to be opened via an
electronic PIN pad. A digital record of employees accessing the safe will be
recorded and reviewed periodically.

#### 2. ALS Engine Inventory (First Out Apparatus)

• Controlled Substances disbursed to first-out ALS Engines will be stored in a clear plastic box secured with a numbered plastic seal and placed inside a medical lock vault on the ALS Engine. The controlled substance must remain secured in the medical lock vault except when it is in the immediate possession of a Firefighter/Paramedic who is either transferring possession of a controlled substance or administering a controlled substance to a patient. Any firefighter, engineer, Captain, or chief officer will be permitted to access medical lock vaults. These individuals will be given a numeric access code that allows opening the safe via an electronic PIN pad. A digital record of employees accessing the safe will be downloaded and reviewed periodically. In the event a lead engine is put out of service, the narcotics shall move to the engine being placed into service.

### 3. Reserve ALS Inventory

• When a reserve ALS engine or Utility Vehicle is put into service, the engine paramedic shall be issued a narcotic box from the Administrative Inventory Safe by the on-duty Battalion Chief. When the reserve engine goes out of service, the paramedic shall return the narcotic box to the on-duty Battalion Chief, who will then secure the narcotic box in the Administrative Inventory Safe.

#### 4. Firefighter/Paramedic Daily Verification Procedure

- Firefighters and paramedics must inspect and count the contents of each controlled substance narcotic box at the beginning and end of their shift, and anytime there is a Firefighter/Paramedic exchange. Each controlled substance must be inventoried for proper control numbers. Each and every Firefighter and paramedic who signs for controlled substances is responsible and personally accountable for the controlled substance count. At shift change, the on-coming Firefighter/Paramedic will meet with the off-going Firefighter/Paramedic and unlock the medical lock vault containing the controlled medications. Each Firefighter/Paramedic will visually inspect the controlled medication narcotic box for:
  - An intact container is sealed with a numbered plastic lock, and the container has not been tampered with.
  - Verify that the numbered seal corresponds with the control number records.

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- That the appropriate amount of controlled substances and combination of controlled substances are used.
- Control number tags are affixed to each vial and match the control number records.
- The expiration dates of the controlled substance shall be checked for currency.
- Once the controlled substance narcotic box has been properly inspected, the container will be secured in the engine's medical lock vault.
- The off-going Firefighter Paramedic will initiate a transfer of the controlled substances to the on-coming Firefighter/Paramedic through the EMSIA web-based narcotic tracking system known as Operative IQ.
- Both the on-coming and off-going Firefighter/Paramedics will then dually verify and sign, via electronic signature, the transfer of narcotic box(s) and controlled substances.
- Once the transfer is complete, the oncoming firefighter or paramedic will verify that the narcotic box(s) and control numbers have been successfully transferred electronically to Operative IQ.
- A Controlled Substance narcotic box may not be accepted from SVFPD personnel
  who are being relieved of duty if any irregularity or discrepancy is noted. The onduty Captain will notify the on-duty Battalion Chief if an irregularity or discrepancy
  is apparent.
- The Firefighter /Paramedic being relieved of duty may not leave or transfer possession of the Controlled Substance narcotic box to another Firefighter/Paramedic until authorized by the on-duty Battalion Chief.
- In circumstances where the off-going Firefighter/Paramedic did not or could not initiate a transfer of controlled substances, the on-coming Firefighter/Paramedic shall perform a "pick up" in Operative IQ to record and facilitate a digital transfer.
- The on-coming Firefighter/Paramedic shall document the circumstances surrounding the pick-up in Operative IQ.
- The pick-up will be witnessed by an on-duty crew member, whose name will be documented in the transaction.
- 5. Administration of Controlled Substance
  - Authorization to Open a Controlled Substance Container.

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- The administration and use of controlled substances shall be limited to the following scope and application. Firefighter/Paramedics are not authorized to break the lock and open the controlled substance container to administer the drug unless the following requirements are met:
  - The Firefighter/Paramedic has received a base order for the specific controlled substance.
  - The Firefighter/Paramedic is administering the controlled substance under a specific standing order.
  - The Firefighter/Paramedic has established a route for administration as appropriate.
- When the above requirements have been met, the Firefighter/Paramedic is authorized to break the lock on the container. The controlled substance removed from the container must be inspected for all of the following:
  - Appropriate labeling for the type, amount, and concentration to be used.
  - An intact ampule or vial.
  - The ampule or vial shall be removed and inspected for discoloration, cloudiness, or particulate matter.
  - The controlled substance has not expired.
- If there is any irregularity, the Controlled Substance may not be used.
- Once the controlled substance has been inspected, the ampule or vial may be opened, and the medication may be administered to the patient as ordered or as specified in the standing order.
- An SVFPD Paramedic shall never release any amount of Controlled Substance to the transport paramedic. SVFPD narcotics shall always be administered by an SVFPD paramedic.
- 6. Controlled Substance Administration Documentation
  - Anytime a controlled substance is used, the Firefighter/Paramedic shall at the earliest convenience, record the administration in Operative IQ. Items to be documented include the following:
    - Date of administration
    - Engine/Unit

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- Control number given
- Incident number (FFD)
- Dosing
- Base order, yes/no
- Witness to administration
- Any additional pertinent information
- The Firefighter/Paramedic shall verify that the associated control number's administration record is appropriately reflected in Operative IQ.

#### 7. Reverse Distribution of a Controlled Substance

- All controlled substance vials, whether fully used, partially used, or expired, must be returned by the Firefighter/Paramedic having possession to the on-duty Battalion Chief. Before return, used or expired controlled substance medications shall be placed inside the narcotic box, sealed, and secured in a medical lock vault.
- Controlled substance medications are not to be discarded or wasted in any form.
- The on-duty Battalion Chief will remove any used, partially used, or expired controlled substance from the Firefighter/Paramedic's narcotic box during the restock process. The controlled substance will be placed in a red bag and secured in the Administrative Inventory safe.
- The on-duty Battalion Chief will transport any used, partially used, or expired controlled substances to the EMSIA Administrative Headquarters for restocking. Final destruction and third-party auditing of controlled substances is the responsibility of the EMSIA. All controlled substances transported during restocking shall be secured in a portable safe.

#### 8. Restock of Controlled Substance

- After Patient Administration
  - The on-duty battalion chief shall be notified when a controlled substance is administered during a patient's treatment.
  - The Battalion Chief will initiate the transfer of the narcotic box from the Firefighter/Paramedic to the Administrative Inventory Safe.

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- The Battalion Chief will verify that the record of administration form for the administered control number in Operative IQ has been completed.
- The Battalion Chief will verify that the completed controlled substance record of administration form accounts for the correct amount of administered and returned controlled substances.
- If documentation is accurate and complete without discrepancy, the Battalion Chief shall restock the narcotic box with the appropriate amount of controlled substance from the SVFPD Administrative Inventory safe.
- The affected narcotic box shall be restocked from the SVFPD Administrative Inventory Safe and documented using the controlled substance restock/replacement form in Operative IQ. The narcotic box will then be issued to the Firefighter/Paramedic. Both the Battalion Chief and Firefighter/Paramedic will verify the issued control numbers and sign via digital signatures to complete the transfer. The Battalion Chief shall secure the used, partially used, or expired controlled substances in the restock safe for future restock from the EMSIA at a later date.

### 9. Restock of Controlled Substance Inventory

- The inventory safe shall be restocked by contacting the EMSIA Battalion Chief between 0800 and 1700 Monday through Friday. If after-hours restocking is necessary, the on-call Central Fire District Battalion Chief 3505 can be contacted.
- 10. Exchange of Used, Partially Used, or Expired Controlled Substance
  - Once restock arrangements have been made with the EMSIA Chief, the on-duty Battalion will bring all used, partially used, and expired controlled substances to the EMSIA administrative headquarters. The controlled substances will be transferred to the EMSIA chief for final destruction.
  - All controlled substances transported during restocking shall be secured in a portable safe.

#### 11. Controlled Substance Discrepancies

• Strict adherence to the Controlled Substance SOP will prevent most discrepancies. In any system, the potential for human error and abuse exists. This includes errors in procedure, accidents, negligence, tampering, and diversion. Any discrepancy involving Controlled Substances shall result in the immediate, mandatory notification of the on-duty Station Captain and Battalion Chief. Should a discrepancy occur, it should be classified as either a Minor Discrepancy or a Serious Discrepancy.

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#### Minor Discrepancies

• Defined as incomplete or omitted documentation on a Patient Care Report, Controlled Substance Administration Record, Daily transfer of controlled substances, or other Controlled Substance written documentation. Or a witnessed accidental breakage of an ampule or vial containing a Controlled Substance. The shift Battalion Chief shall determine the appropriate action to resolve the minor discrepancies. A written incident report shall be added to the control numbers record in Operative IQ detailing the circumstances surrounding the discrepancy. The District's EMS Program Manager or EMSIA QA Manager must report all minor discrepancies to the County EMS Medical Director. This notification can be done by either e-mail or voice mail within 48 hours.

### Serious Discrepancies

Defined as accidental loss of a Controlled Substance, an error in the administration of a Controlled Substance, theft thereof, tampering (open packaging, broken seals, and broken locks), missing ampules or vials, or missing Controlled Substance Administration records. and other documentation as specified in this SOP. In the event of a severe discrepancy, the following procedure shall take place: The employee discovering any discrepancy shall immediately notify the shift duty Captain and Battalion Chief. Under no circumstances may any employee responsible for Controlled Substances involved in a discrepancy be released from duty until the Shift Duty Battalion Chief approves such release. All evidence must be retained for the shift duty Battalion Chief's inspection. Any broken vials shall remain undisturbed until inspected and verified by the duty Battalion Chief. The employee(s) involved must complete a Controlled Substance Serious Discrepancy Report (Form 2904A). A copy of the report is attached to this SOP. On-duty and off-going personnel must submit all patient care reports and apparatus-controlled substance logs for the entire shift before discovering the discrepancy. A complete report of the discrepancy, including its resolution, must be completed and submitted to the EMS Program Manager and the EMSIA QA Officer. If, in the opinion of the on-duty Battalion Chief, a satisfactory resolution to the discrepancy is not possible, the Fire Chief and the appropriate law enforcement agencies will be notified, and a formal investigation will commence. All serious discrepancies will be reported to the County EMS Medical Director.

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#### 12. Security Control

- Only the SVFPD Chief Officers and Acting Battalion Chiefs shall have access to the Administrative Inventory Safe.
- Only Firefighters/Paramedics, Engineers, Captains, and Chief Officers can access the ALS engine medical lock vaults.
- If an electronic keypad fails on any safe, the on-duty Battalion Chief can use or assign an emergency backup key until a repair can be made.

#### 13. Audits and Reports

- The Controlled Substance Administrative Inventory Safe Inventory Log will be reviewed on demand by the Santa Cruz County EMS Medical Director, DEA (with administration permission), SVFPD Battalion Chiefs, or the EMSIA QA Manager. Such information can be downloaded from the EMSIA narcotic tracking system Operative IQ.
- The county EMS Medical Director, DEA (with administration permission), Battalion Chiefs, and the EMSIA QA Manager will review random audits of ALS apparatus on demand.

#### 14. Quality Assurance

• The following procedure shall be performed to maintain Quality Assurance for the Controlled Substance Program: The EMS Medical Director, SVFPD Battalion Chiefs, the SVFPD EMS Program Manager, or the EMSIA QA Manager can perform random audits of the ALS apparatus logs, inventory, and related materials. Logs will be signed digitally and dated to indicate that an audit has been performed. Such information can be downloaded from the EMSIA narcotic tracking system Operative IQ. The EMS Program Manager will make the appropriate notifications for minor or serious discrepancies.

#### 15. Control Number Audit Procedure

Battalion chiefs will audit the agency restock safe every month. Additionally, firefighters must conduct periodic audits of their narcotic boxes to ensure accurate inventory and adherence to protocol. These audits must be performed monthly at a minimum and documented in Operative IQ to maintain thorough record-keeping and accountability.

#### Forms

1. Serious Controlled Substance Deviation Report - Form 2904A

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