

A new waste stream and risk management strategy for hospitals: safe controlled-substance disposal

Many different types of regulations face hospitals and healthcare facilities. This is especially true when it comes to managing pharmaceutical waste, specifically controlled substances.

Hospitals today manage large formularies ranging up to 4,000 drugs. On average, about 5 percent are regulated under the Environmental Protection Agency as hazardous materials and less than 1 percent are controlled substances. Hospitals and offsite facilities have a new responsibility to safely manage this waste stream as many pharmacy leaders seek diversion prevention strategies to combat healthcare workers and staff taking used or expired drugs.

Recently *Health Facilities Management* magazine featured: [“Safely Managing Controlled Substances: Effective strategies to help facilities maintain regulatory compliance.”](#)

As the use of pharmaceuticals increases, [health leaders](#) are recognizing the need for new strategies due to healthcare workers having numerous opportunities to access medications during patient care and drug waste disposal.

This article discusses four factors that make the initiative challenging, ranging from complicated regulations, abuse of controlled substances, lack of processes for proper disposal, and current practices that may harm the environment.

When surveyed about pharmaceutical waste, many hospital leaders cite the complexity of regulations as their No. 1 concern, closely followed by staff training to help clear up perceived contradictory federal, state and local regulatory requirements for management and disposal. These leaders understand that there is significantly increased risk without a proactive plan for making sure that leftover or unused drugs end up with the intended patient or in a secure waste container.

The first challenge to properly handling and disposing of controlled substances to avoid fines and reputational risk is understanding the regulatory requirements indicated in a 2014 regulation by the Drug Enforcement Agency.

Diversion risks are too high for providers to wait for government agencies to provide more clarity on handling disposal. Janice Vadas, inpatient pharmacy manager, Indiana University Health North, describes how even though government agencies do not prohibit flushing or require a formal process for controlled-substance waste occurring on the floors, she wants to proactively prevent incidents and to safely manage the disposal of controlled substances because it “affects anyone who walks through the facility’s doors.”

Practitioners who focus on patient care are finding it increasingly difficult to adhere to current regulations. Pharmacists are considering disposal services designed to change human behavior, starting with documented training and then building a comprehensive program.

Components of a controlled substance disposal program should include: deactivating controlled substances; deterring ingestion; and applying specifically labeled and secure controlled-substance containers which is new to most facilities.

Read about the steps you can take [here](#) and about [two hospitals](#) taking an active approach to managing this important new pharmaceutical waste stream.