

Opioid prescribing review and diversion monitoring

Standard operating procedure (SOP) | MNP-SOP-001

Document type	Standard operating procedure (SOP)
Title	Opioid prescribing review and diversion monitoring
Document ID	{{facility.code}}-MNP-SOP-001
Version and status	1.0 Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
Reviewed by	{{roles.clinical_director.name}}, Clinical director Date: _____
Approver and signature	{{roles.clinical_director.name}}, Clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	None (new document)
Standards and criteria supported	Standard 3 (Medicines and Pain), criterion 3.2
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Review each opioid prescription at the set review date.
2. Compare the amount given with the amount prescribed.
3. Check the controlled drug register each month for patterns.
4. Report any concern to the steward and the chief pharmacist the same day.

Stop and get help straight away if: a concern about diversion is found and not reported the same day.

1. Purpose

To keep opioid prescribing under review and to find misuse early (3.2).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of {{facility.legal_name}}
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions and abbreviations

Term	Meaning in this SOP
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background and rationale

To keep opioid prescribing under review and to find misuse early (3.2).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Designated opioid steward	Runs the monthly review	Clinician
Pharmacist	Checks the register each month	Pharmacist

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Review.	• At the review date, record the pain score, the dose used and whether the opioid is still needed (MNP-FRM-001).	Need is checked, not assumed.
2	Count.	• Compare the amount given with the amount prescribed, and check the controlled drug register.	Counts match.
3	Report.	• Report any concern to the steward and the chief pharmacist the same day.	Same day.

Decision points

- No decision points in this procedure.

10. Special situations

Situation	What to do
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Monthly register checks done	100%	Monthly	Chief pharmacist	Escalate to chief executive

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_}}

Record	Where it is kept	Kept for
		years}} years

14. Training and competence

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

15. Related documents

ID	Title	Relationship
MNP-FRM-001	Opioid prescribing review record	Form
HOS-REG-001	Controlled drugs register	Register

16. Evidence

ID	Source and status
E-009	Based on the CDC Clinical Practice Guideline for Prescribing Opioids for Pain (2022).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval