Senate Bill 437  

Guidelines for Required CE

, known as “the Governor’s Substance Abuse bill”, includes the requirement for licensees who participate in prescribing, dispensing or administering controlled substances to have a continuing education requirement related to drug diversion and best practice prescribing of controlled substances. The Board is to establish guidelines for this requirement. Those guidelines are provided below along with several continuing education suggestions that will meet these requirements. The Board offers these links as suggestions. There is no requirement to attend these specific programs. Each nurse may choose what program to attend provided it meets with the guidelines provided below. Licensees who do not prescribe, dispense or administer controlled substances are not required to take this specific continuing education although it may be helpful in working toward a West Virginia with few substance abuse issues. If you do no prescribe, dispense, or administer controlled substances you will be required to attest to this on the renewal application. Falsification of the application may lead to disciplinary action.

West Virginia Board of Examiners for Registered Professional Nurses Guidelines for Continuing Education Requirements for Drug Diversion Training and Best Practice Prescribing of Controlled Substances Training in Senate Bill 437

The West Virginia Board of Examiners for Registered Professional Nurses (Board) guidelines for continuing education (CE) requirements for drug diversion training and best practice prescribing of controlled substances. Drug Diversion training is defined as educational offerings that include information about the use of licit drugs for the illicit purpose of abuse or misuse (NADDI, 2012). Best practice prescribing of controlled substances training is defined as education offerings that include information for nurses and other health care providers about the safe and effective prescribing, administration and dispensing of controlled substances in patient care.

Specific Board guidelines include the following:

1. The initial course(s) is at least a total of 3 hours and may be counted as part of the current 12 hour annual CE requirement and must be completed on or before October 31, 2012.
2. After the first 3 hour course, subsequent updates must be at least 1 hour and may be counted as part of the current 12 hour annual CE requirement, and must be completed on or before October 31 of each year.
3. The training may be in 1 or 2 courses or a portion of a longer program provided the brochure or agenda describes the content and the number of hours related to the requirements.
4. Courses must meet the following specific requirements:
   A. Best practice prescribing of controlled substances training means training which includes all of the following:
      a. Patient evaluation, including addiction risk assessment;
      b. Treatment plans that incorporate functional goals;
      c. Informed consent and prescribing agreements;
      d. Periodic review and monitoring of patients including pill counts and drug testing;
      e. Referral and patient management;
      f. Documentation;
      g. Compliance with state and federal laws;
      h. Patient education on safe use, storage and disposal of opioid medications;
      i. Termination strategies for chronic therapy;
      j. Compliance with controlled substances laws and rules; and,
      k. Registration with and use of the West Virginia Controlled Substances Monitoring Program established in West Virginia Code Chapter 60A, Article 9.

B. Drug diversion training means training which includes all of the following:
   a. Prescription drug abuse and misuse;
   b. Epidemiology of chronic pain and misuse of opioids;
   c. Indications for opioids in chronic pain treatment including general characteristics, toxicities and drug interactions;
   d. Initiation and ongoing management of chronic pain patient treated with opioid based therapies, including treatment objectives; monitoring an periodic review; referrals and consultations;

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informed consent; prescription of controlled substance agreements, urine screens and pill counts; patient education on safe use, storage and disposal of opioids; discontinuation of opioids for pain due to lack of benefits or increased risks; and, documentation in medical records;

e. Identification of diversion and drug seeking tactics and behaviors; and,

f. Best practice methods for working with patients suspected of drug seeking behavior and diversion.

5. All Program Providers must meet the provider requirements in the Board’s rule WV19CSR11 Continuing Competence

The following courses include content that will meet the above objectives. It may be necessary to take two of the courses to fully meet the requirements:

SB 437 CE Provider Resources for best practice prescribing of controlled substances and drug diversion training

Online courses that include required content:

- Diversion: Practical Approaches to Prevention and Management  
  [Link](http://www.cesearchengine.com/ce_details.php?ce_id=8676)
- Prescribing Controlled Substances  
  [Link](http://www.cesearchengine.com/ce_details.php?ce_id=5577)
- American Society Addictive Medicine Online Training at [Link](http://www.asam.org/education/e-live-learning-center-(cme-non-cme))
- SBIRT Clinical Skill Training for Substance Use Problems at [Link](http://www.sbirttraining.com/)

Conferences that may include programs meeting the requirements:

- West Virginia Medical Association Best Practice Prescribing of Controlled Substances and Drug Diversion Training Conference November 30 2012 Embassy Suites Charleston WV [Link](http://www.wvbom.wv.gov/Newsletter/2012/Sept12newsletter.pdf)
- National Association of Drug Diversion Investigators at [Link](http://www.naddi.org/aws/NADDI/pt/sp/resources_pain_management)