



**Regulation Matters:
a CLEAR conversation**

Episode 83: CLEAR Awards Recipients - Demonstrating Regulatory Excellence (Part 1) November 12, 2024

Line Dempsey: Welcome back to our podcast, Regulation Matters: a CLEAR conversation. Once again, I'm your host, Line Dempsey. I'm the chief compliance officer with Riccobene Associates Family Dentistry in North Carolina, South Carolina, and Virginia. And I've also been a board member and president of CLEAR. As many of you are aware, the Council on Licensure, Enforcement and Regulation, or CLEAR, is an association of individuals, agencies, and organizations that comprise the international community of professional and occupational regulation.

This podcast is an opportunity for you to hear about current topics in our regulatory community. Now, each year, CLEAR considers nominations in several CLEAR award categories. The 2024 awards were presented in Baltimore during the Annual Educational Conference. While in Baltimore, I had the opportunity to chat with our award recipients. I'm excited to share those conversations with you.

I got to chat with Daniel Roukema representing MDR Strategy Group, along with a couple of his colleagues, and he is the recipient of the Regulatory Excellence Team Award. This award recognizes a team or agency demonstrating an outstanding contribution to the enhancement of occupational or professional regulation, regulatory processes, or consumer and public protection. The team or agency must have demonstrated exceptional leadership, vision, creativity, results, and outcomes above and beyond the regular functions of the job or expectations and beyond what is normally achieved. Let's hear about the team's accomplishments.

Line: So Daniel, congratulations to the team of the award and thanks for chatting with me. It's always great to spend time with you and to actually be in person. This is always great. So thank you for you and Colette and Melissa for joining us today.

Daniel Roukema: Always happy to be on this podcast. Always happy to hang out with you, my friend.

Line: Well, thank you. So, can you, Daniel, start by giving us a little bit of information about your organization and its mission in this realm of regulatory communications and consumer protection?

Daniel: I would absolutely love to, Line. MDR Strategy Group is an organization that specializes in providing strategic communications, public engagement, and organizational design solutions to nonprofit organizations and also public sector organizations. Our real focus, our area of expertise really is the regulatory sector in Canada for whom we have provided a lot of different services in communications, public engagement, and organizational design since about 2017.

The reason this organization was created was I came from the regulatory sector. I was a director of communications, and I was with several different organizations. And my business actually started because of CLEAR in 2016 when I was at the CLEAR conference in Portland, Oregon, sitting there with a bunch of regulatory communications professionals, and we really talked about what was missing in the sector.

It was a delightful conversation with some really, really great people. And one of the things was somebody said, we should communicate more. We all seem to be doing the same thing, but we don't know what the other person is doing. We don't know what the other organization is doing. And I kind of thought, note to self: We should do a magazine at some point in time. And we also talked about [how] regulators do the same thing when it comes to communications, but yet we don't really know what the other is doing in terms of communications. So I said, you know what, note to self: Let's start working on consistent messaging. And when I left my regulatory body at that time, the very next day, I started this consulting business providing communications to Canadian regulatory bodies.

And it's been amazing because the sector's quite tight. Everybody knows everybody, and it wasn't that hard for this business to get started. There were no real cold calls. It was really reaching out to people who I knew. And we were able to start the work, and people were just so supportive. And all these years later, you know, with this award, the support has continued, and I'm just so touched by that.

Line: Well, it's fantastic. I've known you all that time and it's been watching a rocket kind of take off, which is, you know, fantastic. And kudos to your company. Colette, let me ask you this. The MDR strategy group has been recognized for its innovative contributions, such as regulatory communications, audit processes, and the CORE program. So, could you elaborate on how those initiatives were developed, and maybe some of the impacts that they've had on some of your clients?

Colette Deschenes: Definitely. Happy to. Thanks, Line. So, MDR's Communication Audit Framework was really developed to help regulators identify their communication gaps and challenges and opportunities for improving and enhancing their communications. So, overall the framework not only assesses their external communication strategies, but it also provides actionable recommendations. And so, it's identifying those gaps and then supporting regulators in terms of how they can actually address those gaps, and overall supporting them to enhance their communication clarity and foster trust and transparency with their stakeholders.

And from the work that we've done, the impact is significant. So really, in the end, our clients have an

actionable plan for how to improve and enhance their communications. But also they end up with a baseline of stakeholder insights, so then they can use the insights to inform their communication strategy. So, it's really driven by stakeholder needs and an understanding of their stakeholders.

As Daniel mentioned, he's a former regulator as a director of communications. Myself, I also worked, previously to my role at MDR, for a variety of regulators in Canada in a communications role. So, we really understand the gaps and challenges in filling resources when it comes to communications. So, the communications on retainer program, which is CORe, as you mentioned, was designed to specifically support regulators with managing all their communications effectively. So, we support everything from development to deployment of all communications. So, that's obviously outreach campaigns, refining and supporting with messaging, stakeholder engagement, social media strategy, just overall ensuring that they have continuity in their communication.

And so that. You know, it looks like gaps in their resources or transition, but also just overall, from my perspective, supporting these regulators to improve and enhance their communications, whether or not they have the existing resources, I think we help regulators to do that.

Line: That's fantastic. And the term is, you know, we're 'recovering regulators.'

Colette: Exactly. [laughter]

Line: We have a group meeting here in Baltimore, and so we'll be sure to invite you to that.

Colette: Thanks!

Line: Well, Melissa, you know, the creation and relaunch of regulatoryjobs.ca and the regulatoryjobs.org, along with the regulatory jobs executive recruitment service have addressed significant needs in the regulatory sector. What are the challenges you aim to address with these initiatives, and how have they kind of evolved over time?

Melissa Peneycad: Yeah, thanks, Line. I'm really happy to address this. The regulatoryjobs.org website - the .org is the new part because it is now a site for worldwide opportunities in licensing and professional regulation. And you know, I'm really very proud to see how it's gone from Canada centric to now a more global site. And it's really a site for regulators, by regulators. With our deep expertise in the sector, we came to realize pretty quickly that regulators have had a hard time finding talent. You know, it's a very unique and very specific sector that requires certain skills. And let's face it, when you're bringing new people into your organization, you want them to walk in already having an understanding of what regulation actually means. So ultimately, the site aims to solve that challenge. Recognizing that regulators have had challenges finding top talent, we launched this site. Other general job sites, you know, yes, regulatory jobs are posted there, but you have to just sift through a mountain of jobs before you find one that is regulatory specific. And same thing when regulators post jobs on these general job sites - they are inundated with potentially hundreds of applications from

applicants who aren't qualified. And so, this really brings talent and talent seekers together into one hub.

Line: That's fantastic. And it's a great website. I've been able to visit it. So Daniel, the Canadian Regulatory Guide and the Registrar magazine and the podcast are notable efforts to enhance public understanding and engagement with regulatory bodies. But how have these resources been received by the public and the regulatory community? I have a feeling I know. But what feedback have you found most impactful?

Daniel: Well, first of all, you and I keep having conversations about the Registrar podcast, and I keep promising that I'm going to invite you to be a guest. So, [laughing] note to self, as I've said many times before, Line, you need to become a guest on the show.

Let me begin with the Canadian Regulatory Guide. That was really built and it is a public register of regulatory bodies. So in Canada, a lot of regulatory bodies are required to have a public register of their license holders, or their members, or their registrants, whatever they call them. And when the Canadian Regulatory Guide was kind of conceived, the idea was there needs to be a hub for all regulators so that the public can very easily identify the regulatory bodies, they can very quickly figure out what the regulatory process is, they can file complaints, and they can also find discipline decisions within seconds.

So, this guide was created, and it was just this product that we just kind of put out there in the ether and we just said, 'Let's see what happens.' What happened was that the site is still out there. We're not doing a lot with it. We update some news items in there from time to time. But it gets a lot of hits. A lot of people in the public look at that site. And I have even hired somebody actually, a graphic designer, who said, 'I didn't realize that that was you. I actually used that when I was looking for a doctor for my daughter.' So, this is a great public resource, and members of the public have responded to that.

Very quickly, I can tell you a story about the Regulatory Guide that myself as a member of the public came to use. I had a kitten once years ago that was really, really sick, and we had to take this little thing to the vet. And we went to one of those really seedy 24-hour vet clinics where you're not quite sure if your cat comes out at the other end. So, we brought this kitten in, my wife and I, and I'm pacing and I'm just really, really concerned about this cat. And she said, 'Why are you so nervous?' And I said, 'Well, because I don't know anything about this vet.' And she said, 'Oh, he's totally okay.' I said, 'Okay, how do you know?' And she shrugged her shoulders and she said, 'I checked the Canadian Regulatory Guide.' So, she actually used the resource for exactly what it was for.

Line: [Laughing] That's fantastic.

Daniel: So, the public responds very positively to that. With respect to the Registrar magazine, that's not so much a tool for the public. It really is for regulators to share stories. A lot of sectors have trade

publications. The Registrar magazine really started as the Registrar newsletter, where we just wanted regulators to share some ideas. And it just grew, and it grew, and it grew, and now it really is the trade publication for the sector. It is in, I think, 25 countries.

Line: Wow.

Daniel: When it comes out every three to four months, we have regulators that reach out to us and beg us to put their registrar on the cover. We have vendors that approach us and want to advertise in the publication. It's just becoming a really, really good tool. And, you know, going to what I had said before, it's actually answered the thing that we as communications professionals sat around and talked about in 2016 at that CLEAR conference. Here it is. This is exactly what it was that we talked about, and it's doing much better than I could have possibly imagined.

Line: That's fantastic. Well, as the leader for your organization, you've been described as a driving force in regulatory innovation. What personal experiences or philosophies have kind of influenced your approach to leadership and your commitment to regulatory excellence?

Daniel: I don't know about driving force.

Line: I like that though. Yeah. Well, you are a driving force. It's sort of like when you said when you got the award, you know, you don't like to be recognized for that; you just want to do the job.

Daniel: Yeah, yeah. Whoever said that, I appreciate that. Thank you very much. The reason why, and I did mention it today, you know, MDR is all about social impact. It's very, very personal to me. I am somebody, you know, without delving too deeply in my personal life, I have had a lot of ups and downs, and a lot of us, of course, everybody has, but there's some things that have just really defined my life and I find that I see myself as a member of the public, I am a marginalized person. I am somebody who has had to really, you know, go two steps forward and then fall one step back. And since I was a young adult, I always felt, you know, I just wish there was just a little bit more there for us. I just wish there was a little bit more help. I just wish that I didn't have to always start kind of one step behind the starting line. And that really also defines MDR because, you know, it's almost instinctive that we hire people who also have either personal or systemic challenges to access the labor market equally or equitably.

So, I'm a member of the public who just really wants the public to have just a little bit more help. When I found out that regulators' role is to protect the public - Wow, those words are so important, "to protect the public." If I can help an organization whose role it is to protect the public, you got me. That's why I'm here. And if we have even with one organization been able to make just a little bit of change, and that one person in the public is now helped a little bit more because of that, my job is done.

Line: Amen to that, brother! I appreciate that. Well, looking ahead, what are some of the key goals or

projects MDR aims to achieve? And, I guess, how do you plan to continue setting new standards in regulatory communications and support for both regulators and for the public? And Melissa, let me start with you. Since I've been chatting with Daniel a little bit, I'll let you go first.

Melissa: Yeah, no, thank you. And this is super exciting for me personally, but also for us as a company. So, one of the things that we're going to be doing is launching a national dialogue series, starting with a real focus on AI in licensing and regulation. AI is here. It's not going to go away. And organizations in all sectors, including ours, are grappling with, what are we going to do? How is this going to impact our work? What are the ethical challenges associated with integrating AI into what we do? So, I'm very excited about this.

And the first event that we're going to hold is in February, February 11th, 2025 in Toronto. And the purpose of this event is to convene regulators from across Canada, but also across the US and internationally to come together and have that very focused dialogue around AI and regulation. We are anticipating that some folks will come who have not even remotely dabbled in anything related to AI, partially maybe out of fear, maybe out of just not having had the opportunity yet. And we're also anticipating folks who are actively using AI already, whether personally or in the workplace. So, I think it's going to be a very interesting discussion because we're all trying to figure out this new AI-driven world and how we fit into it and how it's going to affect us personally and professionally. Oh, and I just want to say this, super excited that Paul Byrne is going to be one of our keynotes at this first event. So that is super exciting. And we'll be announcing more speakers in the coming months and really hope that folks will join us at this event.

Line: That's great. You know, and I've certainly had plenty of opportunities to chat with Paul about AI and its impact and, you know, certainly using it as a tool instead of a crutch, right? I think that's going to be the key to success with that. Um, Daniel?

Daniel: Yeah, well, what Melissa said [laughter]. It's a big undertaking. It's one more thing that MDR is picking up in national dialogue. In addition to the Registrar Magazine, the Registrar Podcast, the Canadian Regulatory Guide, and regulatoryjobs.org. Recently, we have started thinking about something that's also quite new, and that is evaluating existing communications of regulatory bodies. We've seen a shift where regulatory bodies are actually realizing that communication is absolutely crucial to effective regulation. I actually love to say, if you're not communicating, you're not regulating. And I'm thinking, I'm feeling, and I'm seeing that regulators are beginning to believe that.

So, what MDR has worked on is creating a scorecard where regulators can actually evaluate where their communications are at this very point. So do a current state analysis of where they stand. Why? Because there's so much more to communication than, 'Let's put something out on X. Let's just put out a message on LinkedIn, or let's put a video together.' So really, the scorecard is an assessment tool where we have four main pillars of communication with a number of tenets below it, and it's a self-evaluation tool that regulators can look at and say, we have this, we have this, we have that. And then the end and it gives you a score, literally of 0 to 100 and A to F of where you stand and what's left with

that, it essentially gives you the foundation of a roadmap or strategic plan to effectively start your regulatory communications.

It's new. We don't know of any other regulatory communication scorecard that's out there or any other communication scorecard. And we've had two regulators that have tested it so far, and they very quickly, with the action plan that they have from this, will 100 percent become best practice regulatory communication organizations. So, I hope others will jump on that bandwagon so that they will have something to start with.

Line: That's super exciting. Awesome. Well, it is certainly great to hear how MDR is contributing to the enhancement of professional and occupational regulation. I've been a fan of yours from the beginning and I want to thank you guys for chatting with us, Colette, Melissa, Daniel. And again, congratulations on the Regulatory Excellence Group Award. Well-deserved.

Daniel: Thank you so much, Line. Thank you so much.

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Line: The Investigations Bureau with the New Hampshire Office of Professional Licensure and Certification is the recipient of the Investigative Excellence Team Award. This award recognizes an investigative team in occupational or professional regulation that has demonstrated exceptional performance in a particular case or a history of excellent performance beyond what is expected or required that resulted in a direct and significant impact to the protection of the public or consumer interests. Let's hear about this team's successful case.

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Line: Well, Mike, congratulations to the team on this award and thanks for speaking with me.

Mike Porter: Thank you. Thanks for having me. This is great.

Line: Absolutely. Well, can you maybe start by giving us kind of an overview of the case? I know it involved the large-scale diversion and loss of, I think it was like, 1.6 million micrograms of medical grade fentanyl, right? What were the initial reports that kind of triggered this investigation to start with?

Mike: Sure. So, boy! The way we were operating at the time was we have a complaint inbox that individuals can file complaints. And I remember this one came in from a director of nursing at Cheshire Medical Center, which outlined the loss of controlled substances. I believe simultaneously our pharmacy compliance inspectors who work under the Division of Enforcement received what's called the New Hampshire controlled drug loss form. And so when that happens, the first thing we look at is who's reporting this, what's the amount, and what do we need to do?

And so initially, I thought there was a typo. I thought, well, at first it was 23 bags of medical grade fentanyl. And I thought, well, it's got to be 2 or 3, not 23, right? And these are 50 microgram per ml, 50 ml bags. The first thing I did is I went to our pharmacy compliance inspectors and said, 'Have you ever seen a loss of this significance?' The answer to that was, 'No.' So the first thing we did is we opened up the complaints, but we sent our pharmacy inspectors up to Cheshire Medical Center to basically do a knock and talk, right? We're going to go in, talk to the pharmacist, find out what's going on. While that was occurring, we reached out to the- in the original complaint, there was a name of a nurse that was given to us. And so, we wanted to reach out to her and just find out what's going on here. And we had some difficulty initially communicating with her.

Ultimately, at that point I, as part of leadership, made a decision that this was going to be an emergency, which meant all hands on deck. We had five investigators at the time, myself, three pharmacy inspectors, one paralegal, and believe it or not, the administrative assistants. We needed people coordinating for us. And so we called a meeting, got together, and came up with a game plan. What are we looking at here?

And so, the first was to- at the time we used to issue what's called preliminary agreements not to practice. I had spoken directly with the nurse who was alleged to have taken the 23 bags and explained there's two choices. We can do this preliminary agreement, or we're going to have to go forward with a potential emergency suspension pending the outcome of the investigation. This nurse did sign the preliminary agreement. Unfortunately, within about two or three days later we learned that she committed suicide. And I won't speculate as to why, but our investigation at that point was ongoing.

Pharmacy inspectors came back and said, this is worse than 20, this is a lot worse than we initially contemplated. The fentanyl, the medical grade fentanyl, is what was reported to us. But then we started recognizing a number of other controls in smaller amounts were also missing. So now we focused at that point, we were looking at the pharmacy, wondering, 'Somebody had to know about this loss early on. Somebody had to know something.' We wanted to find out why was this reported now when we know this has been ongoing for months leading up to this.

So, the first thing we did is we looked at the pharmacist. There was a director of pharmacy who was also what they call the PIC, the pharmacist in charge, as well as her assistant. Once we realized that they had not for many months provided, as required by law, New Hampshire controlled drug loss reports to us, we actually filed for emergency suspensions of both of their licenses. So now we're working on the nursing and we're working on the pharmacy end. The result of those two suspensions ultimately were settlement agreements. The pharmacist in charge agreed to a reprimand, but also agreed to not be a pharmacist in charge in a hospital setting. Her assistant also agreed that he would not work in a pharmacy in a hospital setting. What we found was a lot of these discrepancies were noted, but never reported to us.

Had this been told to us in August of 2021, for example, we might've been able to put some

parameters up that could prevent future loss. But because the failure to report occurred, that allowed this large volume. As we were working on the pharmacy investigation, we started identifying additional losses while our investigation was active and ongoing.

Line: That seems a little bold!

Mike: It was, right! We're trying to figure out how to stop this – where's the source? The problem was it wasn't until later in the investigation. We started February 2nd, and I think by mid-March, end of March, we were already in talks. What we found out was, at a time that there was a surge in COVID patients, and so there was a lot more medical grade fentanyl being ordered due to patients being placed on ventilators. However, what we noticed was security protocols were literally relaxed at that particular facility. We couldn't figure out why you'd be ordering more fentanyl than you normally would and then relaxing security protocol surrounding it. We were expecting those security protocols to be increased. So, one of the things we did is we went to local hospitals around New Hampshire and I think even into northern Massachusetts just to inquire were they seeing the same surge, which they were. Were they seeing the same increase in orders? And we actually spoke with the manufacturer, the wholesaler. They were. The difference was these other facilities actually strengthened their security protocols. Things such as double documentation when wasting.

There was more access at the time, and I have to mention this. The facility was also changing over, I believe from Omnicel to Pixis machines, so there was a lack of training at the staff level. That lack of training, in conjunction with relaxed security protocols, allowed this particular nurse to our final count was close to 400 bags she had diverted, like physically carried out of the facility. That we were able to attribute to her based on surveillance from the med rooms. We were able to isolate that. So, we had actually assigned one investigator the task of reviewing all the video for quite a while until we were satisfied that we could at least identify one person. She was deceased. And so, we thought, okay, this is gonna end.

Now in the interim - this is very important - we worked with the local drug enforcement agency as well as the keen New Hampshire Police Department. And our concern was, were they notified? We notified them, but they had also received the initial report. So, what we decided to do was work together. There's been a relationship with them for years but never on this large scale. At one point we had agreed that we were gonna let the DEA refer this to their criminal division and work with them while they were doing that. At the same time, they have their diversion unit, which worked with us. And we were holding I wouldn't say daily meetings, but two to three times a week, we would be meeting with each other to review, what do we have? What are we looking at? And at that point, we turned over all the information we had. We had subpoenaed policies, procedures, we subpoenaed video, PIXIS machine reports, omni cell reports, everything. We didn't have the manpower to sift through that, but the DEA did. I think, I want to say they used a company out of Texas to ultimately be able to gather all this information and, you know, collate it to so that we could come back with a fine description of what we're looking at.

In the interim, we had received reports that the hospital administration had been working on additional protocols. So, we reviewed those. And what we found was there was additional fentanyl missing, ongoing, upwards of, I think the total amount of bags were close to 700 plus. We're not exactly sure. We know at least

Line: In addition to the 400 that you were able to attribute to the nurse, another 300 are missing?

Mike: Another 300 plus went missing.

Line: Was she working with somebody like, was this you know - no spoiler alerts here - but I guess, how did that come about?

Mike: We were told by the administration there that, 'Oh no, this is just a failure to record waste.' I said, 'Well, wait a minute. A 50 ml bag of liquid. Now, 50 micrograms per ml, so 2500 micrograms. That's a lot of wasting not being recorded.' They stood by their story. They were talking about outstretched tubes. Individuals didn't have time to have a two-person sign off. And we said, 'Wait a minute. You were aware of the diversion that had happened and are you telling us that you still weren't tightening your security program?' It was frustrating. I will tell you that.

One of the things I won't do is go too far into the criminal side, because that investigation is still ongoing on the DEA end. I can say that we are fairly certain that at least a majority of this was a direct diversion involving outside parties. And I can say that confidently. Some of it could be attributed to waste, but when we're talking bags. . . . And that's where we differed with the facility - we were talking in amounts of bags; they were talking about it in milligrams and how much would be wasted and not properly recorded.

So, one of the things I did is I tasked to investigators to interview nurses. We interviewed at least 20 plus nurses just to find out, what do you know, when did you know it, who did you report it to? And some of the things we found during that part of the investigation was shocking. One nurse, for example, was aware that the original diverter had left the facility with a bag, but just didn't report it for two days because she was off. And we said, 'Well, that's just not an excuse.' So ultimately, we decided to do something that had not been done before is we went towards the C suite. I drafted the petition and we'd filed a petition with the Board of Nursing to suspend the chief nursing officer. Now, ultimately the board, about a year and a half later, dismissed that complaint. Nurses just weren't coming forward and supporting the information that was needed. But this particular chief nursing officer remained under suspension for quite some time. And yes, it was a difficult decision to make. But when we look at the policy makers who, in our opinion, reduced security protocols and allowed this to happen, they should bear the brunt, as well as the people responsible for diverting.

Ultimately, we were still investigating this, but then the facility came forward and said, 'Look, there's a lot of mistakes that were made here. We want to correct those. How do we resolve this matter?' At that point, and that was, I think, end of May, beginning of June, we started talking about possible

settlement because the spigot, the flow stopped. We were getting reports of maybe less than a microgram, might've been failure to document. So, we went from massive diversion/loss to literally zero in a matter of three months time. And as a result of that, we felt confident that the facility had brought in outside assistance as well. We felt very, very secure at that point that there was no more leak. Anybody who was diverting either was no longer working there, deceased, or retrained. So we did decide to settle with the pharmacy permit. We were actually building up our case to do another suspension, which would not have been a popular decision. I'll tell you a little bit about that. In order to dispense controls, the hospital has to have a pharmacy permit. And our inspectors were very frustrated with the fact that it was still this loss/diversion ongoing. We started making noise about suspending the pharmacy permit to operate. The impact that would have had on the hospital would have just been

Line: Oh, huge!

Mike: Huge! They would not be able to prescribe. They would have to rely on an outside source. And so I think that's when the parties all got together and said, 'What do you want us to do?' And so the agreement that we issued with them required them to have a restricted pharmacy permit, which, for their ordering purposes, is actually challenging. But that restriction came with three years of, I believe, quarterly reports by an outside, I think Ernst and Young was doing that at the expense of the hospital itself. The administrative fine was about \$200,000. We're capped on the state level. And from that, we said, fine, we'll suspend the rest; pay \$45,000, but keep that suspension over their head, the suspended fine, in the event this continues, then obviously we have recourse.

The other part of this case was \$10,000 for community outreach, because our concern is where did this fentanyl go? Did it hit the streets? And we actually had the state police involved at one point looking at overdose rates or any stops that were made on the interstate between New Hampshire and Vermont just to see, was there any pattern? And there was not, which was good. But we had reason to believe the fentanyl was leaving the area. We believe some of it was loss, true loss as a result of poor and sloppy record keeping. But a lot of this diversion went somewhere, and we just don't know exactly where. So we had worked very closely with the DEA. And I would say that I was a little suspect at first, like, are we really going to have cooperation? And because of the magnitude of this case, it actually helped forged- the relationship we have with them today is stronger as a result of working together, as is law enforcement. And then I believe a year later, the US attorney's office entered into a settlement agreement with Cheshire for, I believe, it was a \$2 million civil penalty from the federal level.

Line: Wow!

Mike: That's a nutshell. How's that?

Line: That's good. Well, you know, I think it's great that you had such good relationship with DEA. You know, when I worked for the North Carolina Dental Board, our North Carolina DEA diversion guys are top notch. I worked many investigations with them and so much to know that you know I still have

them on cell phone speed dial and call them on a regular basis when I run into a question in my line of work now but still have those relationships. Now there was a story, and I'll briefly tell it, of one time, early on, some type of drug diversion was going on and at that point in time I was brand new. And they sent me up to a door to knock on it, and they told me I could put my badge in my jacket pocket. You know, and they're just back in the car laughing as I walk up to this door. They knew I wasn't gonna get shot, but still letting the newbie guy on there. So I think once forged that relationship, they were really great to work with.

Well, I guess my good question for you is, what are some of the lessons that maybe you've learned from this investigation that you feel like other investigators could benefit from? Maybe like, how did this case impact your team, both professionally and personally?

Mike: So that's a really good question only because this was the first large-scale case we had like this; we've had big cases. But we actually did a debrief after this was over several months later. And what we found was - communication. Actually, in the beginning, there was a little bit of a communication gap. Who's gonna do what? Was there a little bit of crossover? What it taught me as a leader within our division is to really know the impact that this has on staff. And by that I mean, they were carrying regular caseloads while still doing this emergent investigation. That's something that we worked on and said, 'look, if something like this was to happen again, we're just gonna pump the brakes on all cases, period, until we can get through this emergency.' Because the other cases, while important, were not emergency.

Number two, we realized that we are very understaffed to take on. And I will tell you on the heels of this case about four months later, we had a large nursing home matter involving suspensions of the nursing home administrator, nurses, serious health jeopardy, on the heels of this, the same investigative core was investigating that. So, understanding the importance of communication, not overworking somebody, realizing symptoms of burnout, being stressed and tired. These guys, men and women were coming in nights, weekends. They were working and I have to say the administrative assistants they were jumping in to really help organize. And for example, the pharmacy inspectors were on the road. They would reach out to the administrative assistants who would capture the information and then relay it on to me because I might've been in a meeting somewhere else, dealing with the pharmacy side. We learned we needed to have a central processing point for all information so that we're all getting the same information. We did have a lot of overlap where I think there were a few times during the investigation we had to just stop and say, 'Wait a minute, we've already covered that area. You know, don't go down that path again.' So staffing levels - big lesson.

But as a team leader, recognizing when your team needs a break. And that was a hard lesson. Thankfully nobody quit. But also letting them know, their families are just as important to them. This is work, right. And knowing how to separate the two. The stress level was very high and understanding just when to recognize that and how to take a step back. I would hope we don't repeat the same mistakes we made, but I know we've made steps, hopefully to not do that.

Line: Excellent! Well, I think that's great. And it's really great to hear about the experience that you guys had. And congratulations again on winning this Investigative Excellence Team Award. We're super proud of you guys. And especially if we can stop that fentanyl from getting out or continue to get out, right? Obviously, some got out, possibly impacted the public, but knowing that we've cut that off to make sure that it doesn't impact these families is fantastic. So, thank you again for all the work that you've done in that.

Mike: I did want to add one thing too and I want to include our prosecutors. So, we have a prosecution unit within the Division of Enforcement. We got them involved with the very first emergency suspension because they're the ones that have to prosecute it. One of our prosecutors, he actually had spent time at the New Hampshire Department of Justice and the Attorney General's Office. So, having his expertise prosecuting criminal matters was extremely beneficial in that he was able to help - while we're getting the evidence, he and his legal team were able to go through and determine, okay, what's relevant and what's not, what do we need to get to prove? So as a unit together, I couldn't have been more proud. And I know about a month or two later I remember, after everybody left one night, I just looked, we call it the bullpen. Everybody has their cubes, right? And it was very quiet, and that was the first time in months. I just looked out and just thought, wow, this team! Everybody talks about teamwork. If one of the spokes in our wheel crashed, this investigation never would have been a success.

Line: That's awesome. Thank you so much for joining us. And again, congratulations on the award.

Mike: Thank you guys. Thank you so much. Anytime.



Line: It was a lot of fun to sit down with our award recipients while we were in Baltimore. We hope these conversations have given you some ideas, techniques, and skills that you can focus on in your regulatory role as we all pursue regulatory excellence. I want to thank our listeners for tuning in for this episode. Tune in next month for part 2 of our conversations with the 2024 award recipients.

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Finally, I'd like to thank our CLEAR staff for making it a great conference experience in Baltimore. It was fantastic! Once again, I'm Line Dempsey, and I'm happy to be speaking to you again very soon.

The audio version of this podcast episode is available at https://podcast.clearhq.org/e/clear_awards_2024_part1/.