Alternative to Discipline Programs:
Florida’s Intervention Project for Nurses

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NCSBN - IRE
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Objectives

• Recognize the scope of the problem of impaired nursing practice
• List two common types of nursing impairment
• Describe colleagues legal and ethical responsibilities
• Identify appropriate action steps when impairment is observed
• Identify three primary components of an effective alternative to discipline program.
• List three benefits of an ATD like IPN
Self Reflection-Attitudes

• What did you think/feel about Tammy’s story? Empathy? Compassion? Judgment?
• Did you know that fear of being stigmatized is a major factor which affects a nurse’s willingness to seek help.
• Our attitudes (our perception) affect our behavior and decision-making when addressing impairment.

Formed by:
  Experience
  Education-language
  Exposure
Nurse Personal Risk

• Substance use disorders are about the same as general public however ANA reports 6-8% of nurses use substances to the extent that performance is affected.
• Greater risk of using prescription drugs than the general population
• Nonmedical opiate, stimulant, and anti-anxiety drug use (due to easy availability)
• 9.8% among nurse anesthetists

## Risk & Protective Factors

### Risks

#### Individual
- Age
- Injuries
- High stress
- Family history

#### Organizational
- Inconsistent policy
- Access to medications

#### Team
- Low team cohesion
- High tolerance for deviance
- Low psychological safety

### Protections

#### Individual
- Taking action to improve personal health
- Learning about risks

#### Organizational
- Fairness & transparency
- Health promotion resources

#### Team
- Mutual support for standards
- Timely feedback
- Debriefing with colleagues
Vulnerability to drug addiction and alcoholism depends on the individual and the interplay of genetic, environmental, and societal factors. The National Institute of Drug Abuse estimates that genetic factors account for 40-60 percent of a person’s vulnerability to addiction.

Nora D. Volkow, MD, Director NIDA
Addiction

A primary, chronic, progressive disease of the brain, motivation, reward, memory and related circuitry

- The compulsive use of a substance
  - Even in the case of negative consequences
- Loss of control
- Attempts to stop initiate withdrawal
## Addiction’s Similarities to other Chronic Diseases

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Drug Dependence</th>
<th>Diabetes, Asthma, and Hypertension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well studied</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Chronic disorder</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Predictable course</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Effective treatments</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Curable</strong></td>
<td><strong>NO</strong></td>
<td><strong>NO</strong></td>
</tr>
<tr>
<td>Heritable</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Requires continued care</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Requires adherence to treatment</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Requires ongoing monitoring</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Influenced by behavior</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Tends to worsen if untreated</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

Substance Use & Brain Function

Drug use impairs brain functioning.

- Problem solving
- Decision making
- Communication

Performance & Safety Concerns
Hangover & Performance

- Alcoholic hangover
  - Younger licensees ↑ risk

- Binge drinking related to several performance deficits*
  - Memory
  - Vigilance
  - Sustained attention
  - Planning capacity

According to SAMHSA's 2014 National Survey on Drug Use and Health (NSDUH) (PDF. 3.4 MB) an estimated 43.6 million (18.1%) Americans ages 18 and up experienced some form of mental illness.
“Hi. My name is Barry, and I check my E-mail two to three hundred times a day.”
What is Impaired Practice?

- Practice is impaired when the licensee is unable to meet:
  - Requirements of professional code of ethics
  - Standards of practice

- Because impacted:
  - Physically
  - Emotionally
  - Cognitively
  - Observable unsafe or unprofessional practice
Affects on Performance

<table>
<thead>
<tr>
<th>Change in performance and behavior</th>
<th>Substance use</th>
<th>Depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decrease or inconsistent productivity</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Absenteeism, tardiness</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Increased errors, diminished work quality</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Overly sensitive and/or emotional reactions</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Difficulty learning and remembering</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Confusion and difficulties with decision making</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Withdrawal from co-workers</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Impairing conditions can mimic one another
Don’t diagnosis-focus on job performance

Adapted from ORCAS supervisor training online version
Addressing Impairment

1. Know legal and ethic responsibilities
2. Observe – is practice unsafe or unprofessional?
3. Document objective data (see, smell, hear, touch)
4. Determine risk
5. Share the risk
6. Take appropriate action
Interpretive Statement 3.6 (Addressing *impaired* practice)

- Must be **vigilant** to protect patient, public & profession
- Duty to **protect** patients
- And, assure the nurse receives **assistance**
OBSERVE
Subjective vs Objective

Objective
- See
- Hear
- Smell
- Touch or feel
- Descriptions won’t vary

Subjective
- Opinions
- Emotional reactions
- Conclusions
- Theories
- Descriptions will vary

Separate facts from opinions!
Over-React/Under-React
Focus on Performance!

Supervisors are most effective when they keep the focus on licensee performance.

“Is their practice safe and professional?”
Risk Determines Action

<table>
<thead>
<tr>
<th>RISK</th>
<th>ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsafe Practice</td>
<td>Contain the Risk</td>
</tr>
<tr>
<td>Early Warning Signs</td>
<td>Correct Early</td>
</tr>
<tr>
<td>No Warning Signs</td>
<td>Check-In Regularly</td>
</tr>
</tbody>
</table>

Determine risk and share the risk
Recognize that nurses do not seek help on their own....

Self treat

STIGMA

FEAR

Can’t ask for help!
Denial

Most striking and characteristic symptom of impairing conditions

• An *unconscious* defense mechanism that allows a person to avoid the full realization of an emotionally painful fact
• Denial is most likely to occur when reality becomes too threatening to endure.
• Denial is often manifested in *minimization, rationalization, and projection*. 
Spring Hill nurse found dead in car

By CHUCK MURPHY
Times Staff Writer

NEW PORT RICHEY — A nurse from Spring Hill was found dead Thursday morning in her car, which was parked in front of a New Port Richey convenience store. Detectives don’t know how she died but do not suspect she was murdered.

Don’t assume it’s just a “bad day”
Timely action protects everyone

Patients & colleagues from safety risks
Coworkers from anxiety related to unresolved issues
Supervisors from accusations of negligence
Employers from legal exposure
The profession from loss of public respect
Licensees from a downward health spiral and/or loss of career

You’re not alone. Use the chain of command and share the risk!
Grounds for disciplinary action:

(k) Failing to report to the department any person who the licensee knows is in violation of this part of the rules of the department or the Board; however, if the licensee verifies that such person is actively participating (or willing to participate) in a board-approved program (IPN) for the treatment of a physical or mental condition, the licensee is required to report such person only to an impaired professionals consultant.
Referral and Reporting Options

**IPN**
- Disciplinary Alternative
- Referral Call
- Consultation/Intake
- Intervention/Evaluation
- Appropriate Treatment
- IPN Monitoring 2-5 years

**DOH**
- Discipline
- Investigation
- Legal
- PCP
- A/C
- Formal Hearing
- Informal Hearing
- Disciplinary Action

Refusal to Participate/ Failure to progress
IPN Mission Statement

The Mission of the Intervention Project for Nurses is to ensure public health and safety by providing education, monitoring and support to nurses in the State of Florida.
IPN

- DOH contracts with IPN to administer services to nurses. DOH contract outlines very specific expectations and deliverables for IPN. (F.S. 456.076 and Contract COMX8)
- IPN has provided services to nurses via DOH contract since the mid-eighties
- IPN is funded by license renewal fees and is a line item in the FBON budget.
- IPN provides services to over 400k licensees (ARNP, CRNA, RN, LPN, CNA and students).
Monitoring and Recovery Support

- Appropriate treatment referral (approved provider network)
- Execution of IPN Advocacy Contract
- Structured Nurse Support Groups
- Mutual Support Groups
- Quarterly Progress Evaluations
- Practice-setting Reports
- Relapse Prevention Groups
- Random Toxicology testing
Nurse Support Groups: Story telling and building community

- 148 Nurse Support Groups
- 82 Facilitators
- 39 Co-Facilitators

I am no longer alone.
What happens when a nurse fails to adhere with program stipulations?

Should a nurse fail to satisfactorily progress, discontinue treatment, and/or fail to comply with program stipulations, the IPN immediately provides this information to the DOH to initiate swift action to ensure the health, safety and welfare of the citizens of Florida.

(Florida Statute 455)
IPN Referrals over Time

<table>
<thead>
<tr>
<th>Year-1</th>
<th>Year-2</th>
<th>Year-3</th>
<th>Year-4</th>
<th>Year-5</th>
<th>Year-6</th>
<th>Year-7</th>
<th>Year-8</th>
<th>Year-9</th>
<th>Year-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/07</td>
<td>07/01/08</td>
<td>07/01/09</td>
<td>07/01/10</td>
<td>07/01/11</td>
<td>07/01/12</td>
<td>07/01/13</td>
<td>07/01/14</td>
<td>07/01/15</td>
<td>07/01/16</td>
</tr>
<tr>
<td>1043</td>
<td>1025</td>
<td>1182</td>
<td>1302</td>
<td>1135</td>
<td>929</td>
<td>1160</td>
<td>1033</td>
<td>1198</td>
<td>469</td>
</tr>
</tbody>
</table>

- 06/30/07 - 06/30/16
IPN Participants
Total 1,349

RN 78% 1,053
ARNP/CRNA 5% 65
Student/Grad. 3% 42
CNA 3% 47
IPN Participants by Primary Diagnosis
N= 1,349

- Substance Use Disorder: 27%
- Dual Diagnosis: 13%
- Mood Disorders: 2%
- Other: 58%
## Gender & Age

<table>
<thead>
<tr>
<th>Age ranges</th>
<th>All ages</th>
<th>20-29</th>
<th>30-39</th>
<th>40-49</th>
<th>50-59</th>
<th>60-69</th>
<th>70 +</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>264</td>
<td>17</td>
<td>84</td>
<td>82</td>
<td>58</td>
<td>22</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td>851</td>
<td>46</td>
<td>266</td>
<td>246</td>
<td>228</td>
<td>64</td>
<td>1</td>
</tr>
<tr>
<td>Totals</td>
<td>1115</td>
<td>63</td>
<td>350</td>
<td>328</td>
<td>286</td>
<td>86</td>
<td>2</td>
</tr>
</tbody>
</table>
Benefits of ATD Programs like IPN

1. Enhance safety to the public
2. Retention of nurses in the profession
3. Reported healthier and grateful nurses
Enhance Public Safety

• Earlier Identification and Swifter Intervention
• Refrains the Nurse from Practice Immediately
  Disciplinary Process: Takes on average 6-12+ months:
    IPN: Nurse refrained within 1-3 days

• Standardized, Comprehensive Fitness to Practice Evaluation
• Comprehensive Monitoring
• Collaborative Effort and Involvement by Employers (Double Safety Net)
• Standardized random toxicology testing
• Quicker Identification of Relapse Behaviors Resulting in Intervention
Retain Nurses in the Profession

DOH Employment Report 2015-2016

<table>
<thead>
<tr>
<th>Profession</th>
<th>Total</th>
<th>Not Employed</th>
<th>Employed</th>
<th>Clinical</th>
<th>Non-Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing</td>
<td>1349</td>
<td>337 (25%)</td>
<td>1011 (75%)</td>
<td>980 (97%)</td>
<td>31 (3%)</td>
</tr>
</tbody>
</table>

Currently refrained by IPN - 108
What is the Benefit to Nurses?

“I will always be grateful for the second chance”
“I learned I was not alone”
“When I walk into the room, there is a comfort and peace that comes over me. I have a sense of well being”
“By the grace of God and with your help, I was referred to a treatment program”
“I can honestly say I am a healthier and better person”
“I hope that I was able to encourage other members as much as they have encouraged me”
“I have never been a better and safer nurse, this is truly a gift”
“I have been highly blessed”
“I have the good fortune to have risen from the darkest moments of my life”
“My tragedy has turned into a blessing”
“I learned the lesson of hope and renewed faith”
“I have become a woman I am proud of”
“I am so grateful for this opportunity to change my life for the better”
“The past many months have been a journey that has changed my life”
“I feel stronger, wiser, more confident, and a safer nurse”
“Where there was only isolation and no joy, has turned into joy”
“You never gave up on me”
“That precious gift gave me the courage to persevere”
Current Research Projects

- NCSBN

- Fit to Perform evidence based training - increases confidence and decreases stigma (courses for students, staff, worksite monitors and supervisors)
  IPN in partnership with Oregon Nurses Foundation
Evidence-Based Fit to Perform Training

- Skills and knowledge development include:
  - Documenting the facts
  - Identifying risky behaviors that can lead to unsafe practice
  - Identifying the best course of action based on the level of risk
  - Correcting substandard performance issues early
  - Redirecting sidetracking behaviors

- The course will offer **4.0 contact hours** of approved continuing education credit. **Nurse supervisors, Pharmacists, Employee Assistance Program Managers, HR Managers, Security and Risk/Compliance Management, Diversion Officers, Department Heads** will benefit from this training.
Thank you for listening
Questions?

IPN  1-800-840-2720

www.ipnfl.org
References


References


• Substance Abuse and Mental Health Services Administration, Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration
