Characteristics of State Monitoring Programs

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Review of Monitoring Program Attributes

Purpose of research

- How similar/dissimilar are state monitoring programs across their characteristics?
- What attributes constitute the core of a program?

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Methodology

- Review of NCSBN Substance Use Disorder in Nursing, Appendix A: Guidelines for Alternative Programs and Discipline Monitoring Programs

- Collect program materials
  - Policy/Procedure documents
  - Blank contracts
  - Participant manuals

- Compare program materials to each other

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Data

The data presented here are preliminary and developing (N=18 programs)

- Alabama
- Arizona
- California
- Colorado
- DC
- Idaho
- Illinois
- Iowa
- Florida

- Mississippi
- North Carolina
- Oklahoma
- Oregon
- South Dakota
- Tennessee
- Utah
- Washington
- Wisconsin

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Program attributes revealed 9 Categories and 160 Attributes

❖Programs and the Public/Participants

❖Entry to Program

❖Program Details and Definitions

❖Drug Screening

❖Travel

❖Violations

❖Transitional Monitoring

❖Restrictions (Practice and Self-Medication)

❖Actions on Licensure, Participant Termination and Completion)

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Results

Interestingly the attributes across programs are individualized to the participant on a **case-by-case basis.**

Program policy and procedures often indicate variability in program requirements on a case-by-case basis including:

- Required treatment program
- Length of time in program
- Type and number of peer support and/or case manager meetings
- Required therapy
- Drug testing frequency
- Workplace restrictions & monitoring
- Other requirements

Most program attributes are detailed in the individual's contract.

Results

Dynamic attributes, that may differ among participants, discussed here:

- Monitoring contract length
- Drug screen frequency

Static program attributes are, on average, consistent for all participants in a given program. Static attributes include definitions of:

- Noncompliance
- Relapse
- Medication Assisted Therapy

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Results:
Monitoring contract length/# programs

Minimum Length	Programs	# of Programs
6 months	D	1
1 year	B, K	2
2 years	C, I	2
3 years	A, E, H, L, N, Q	6
4 years	J	1
5 years +	F, G, O	3
Other	M, P, R	3

Results:
Drug screen frequency/# programs

Min. Tests Per Month	Programs	# of Programs
1	C, F, K	3
2	A, I	2
3	J	1
4	G, L, Q	3
CBC	D, M, P, R	4
N/A	B, E, H, N, O	5

Medication Assisted Therapy (MAT)
References to MAT within the documents of all 27 programs:

- 6 programs mention *naltrexone/vivitrol*

- 6 programs mention *buprenorphine*

  ➤ 5 programs mention both *naltrexone and buprenorphine*

All language used by the programs place the responsibility of prescribing MAT on a licensed physician with expertise in Addictionology.

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Results:
Naltrexone/Vivitrol in documents / # programs

Naltrexone/Vivitrol is/has/will:	# of Programs
Clinical evidence for efficacy for lower relapse rate	4
Required for "High-Risk" participants (1-2 years)	3
A substitute for a "key/narcotic restriction"	2
If appropriate, will be required (1-2 years)	1
Case-by-case	2

Results:
Buprenorphine in documents / # programs

Buprenorphine is/has/will:	# of Programs
Result in increased meetings/contract changes	3
Efficacious in the short-term *only*	1
Be cleared by case managers before drug screen	1
Mentioned only: no discernable policy	1

Program noncompliance defined

Program noncompliance is defined by various violations of the program contract or policies:

- Drug test
- Attendance
- Other drug violation
- Violation of law or contract
- Other
- Consequences

Results:
Drug test violation considered noncompliance/# programs

Drug Test Violation	Programs	# of Programs
Failed to Submit/Missed	A, B, D, E, H, M	6
"Positive Test"	B, D, H, M, Q	5
Substituted/Altered Specimen	B, D, E, Q*	4
Unauthorized Use	D	1

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Results:
Other drug violation considered noncompliance/# programs

Other Drug Violation	Programs	# of Programs
Fail to Obey Access Restrictions	B, D, Q	3
Admitted/Confirmed/Diagnosed Relapse	B, L, Q	3*
Diversion	B, D	2
Ingestion/Failed Abstinence	B, D	2
Possession	B, D	2
Prescription Forgery	B, D	2
Arrests	B, D	2
Failure to Take Prescribed Meds	B	1

* One of these three Programs does not define "Relapse"

Results:
Other violation considered noncompliance/ # programs

Other Violation	Programs	# of Programs
Refusal or Failure to Respond	B, D, J, Q	4
Pattern of Behavior	D, L	3
Unable to Practice Safely	B, I	2
Accepting Position w/o Approval	D, Q	2
Report Late/Missing/Poor	M, Q	2
Deemed noncompliant	B	1
Failure to Complete Education	C	1
Failure to Pay Fees	K	1
License Lapse	J	1
Failure to Notify	B	1

Results:
Program noncompliance

- Two noncompliance violations are broad; no common characteristics across programs:
  - ➤ Attendance
  - ➤ Violation of law or contract

- Some programs imply noncompliance by indicating the "Consequences" a participant may face for noncompliance.

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Results:
Program noncompliance

Program violation	# of Programs where this violation may be considered as noncompliance	# of Programs where this violation is the only consideration for noncompliance
Failed Drug Test	A, B, D, E, H, M, Q	A, E, H
Other	A, B, C, D, I, J, K, L, M	
Violation of Law or Contract	C, D, I, L, M	O
Other Drug Violation	B, D, L, Q	
Attendance	B, D, J, Q	
Consequences	D, E, F, H	F

Results:
Response to Noncompliance / # programs

Noncompliance Consequences (May be considered)	Programs	# of Programs
Discharge	D, E, H	3
Cease Practice	D, F	2
Increase Contract Length	D, F	2
Increase Drug Screen Frequency	D, F	2
Evaluation for SUD	D	1
Return to Treatment	D	1
Impose Access Restrictions	F	1
Increase Support/Sponsor/Case Manager Meetings	F	1
Not defined	*Remainder*	14

Results:
Response to Noncompliance / # programs

Noncompliance Consequences (Required)	Programs	# of Programs
Referral to Discipline	D	1
Increase Contract Length	E	1
Written Warnings of Noncompliance	H	1

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Results:
Definition of Relapse / # programs

Relapse Is:	# of Programs
Positive Screen for Any Unauthorized Substance	2
Return to Use of Substances that Impedes Safe Practice	1
Return of Signs and Symptoms After Apparent Recovery	5
Return to Drug/Alcohol After Abstinence	1
Return to Drug/Alcohol After Abstinence <u>or</u> Failure to Submit Fluid Under Suspicion	1
Return to Drug/Alcohol/Prescription or Admitted Use After Abstinence	1
Relapse Determined by Evaluation	1
Not Defined	6

Results:
Response to Relapse / # programs

Relapse Consequences	Programs	# of Programs
Cease Practice	A, B, D, E, F, I, O	7
Evaluation for SUD	A, E, F, H, I, O	6
Increase Drug Screen Frequency	A, F, I, J	4
Increase Contract Length	D, E, F, H	4
Increase Support Meetings	A, F	2
Impose Access Restrictions	A, F	2
Not defined	C, G, K, L, M*, P	6
Case-by-case	A, D, I, N, Q, R	6

*Program M has a definition for relapse

Recap

- **Attributes** across programs are individualized to the participant on a *case-by-case basis*

  - Often determined by the severity of diagnosed SUD
  - Some programs determine SUD severity by
    - evaluator recommendations
    - use of DSM-5 SUD levels of Mild/Moderate/Severe

Recap

Program noncompliance definitions

- vary across programs

Relapse definition

- Generally defined as a return to substance use in 7 programs

- Determined by evaluation in 1 program

- Not defined in program materials for 5 programs

Further study

- Include data from remaining 9 state programs

- Evaluate relationship of larger range of characteristics across programs

- Determine how policies are put into practice by each program

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