Guidelines for Monitoring Substance Use Disorders in Nurses

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Introduction

- Substance use disorder (SUD) is the most common reason that disciplinary actions are taken against a nurse.

- SUD monitoring programs are engaged by boards of nursing to encourage successful treatment of the nurse's condition and to return the nurse to safe and competent practice.

- SUD monitoring programs may include frequent and random drug tests, attendance at mutual support groups, caduceus meetings with other health professionals, worksite monitoring, and random check-ins.

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Background

- SUD programs for physicians are affiliated with the medical licensing board and are known as Physician Health Programs (PHP).

- PHPs refer patients to abstinence-oriented residential treatment followed by outpatient treatment and substance monitoring for five or more years.

- A longitudinal study of 16 PHP programs showed that over 90% of the physicians who had completed the program returned to practice

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Methods

Study Purposes

- Assess the completion rates of nursing SUD monitoring programs

- Identify the most important program characteristics associated with program completion

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Methods

- Retrospective longitudinal cohort study of nurses participating in SUD programs between the years 2007-2015

- Data collected from programs in 13 states monitored by Affinity Online Solutions; resulting analysis file = 7,737 nurses

- Study assumed that program completion is in and of itself a good outcome that is correlated with successful return to practice

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Methods

Program Factors Considered

- Length of Stay in Program
- Drug Testing Frequency
- Non-Compliance History
- Relapse History
- Meeting Attendance
- Check-in History
- Drug Test History

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Results

- Overall program successful completion rate was 61.5%

- For programs in the sample with at least 50 nurses, successful completion rates varied from 51.9% to 69.1%

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Those who had any relapse were much less likely to complete the program

Percent Successful Completion by Total Number of Relapses

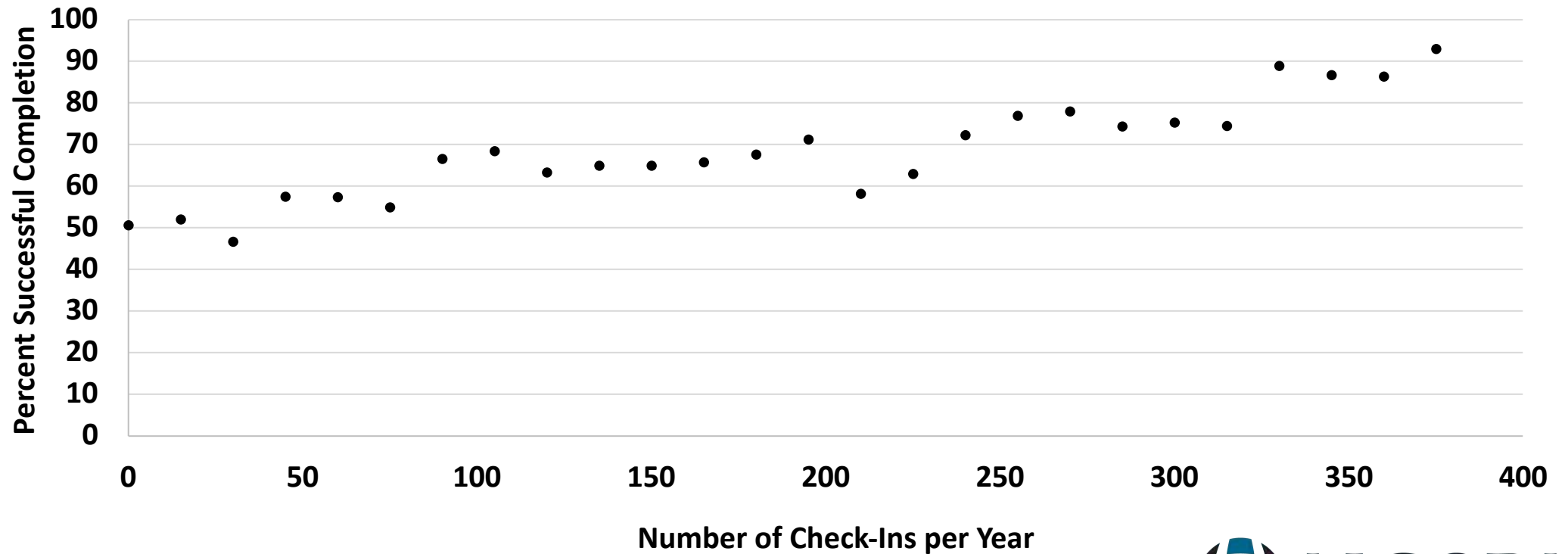Y-axis: Percent Successful Completion (0–100)
X-axis: Number of Relapses (0–8)

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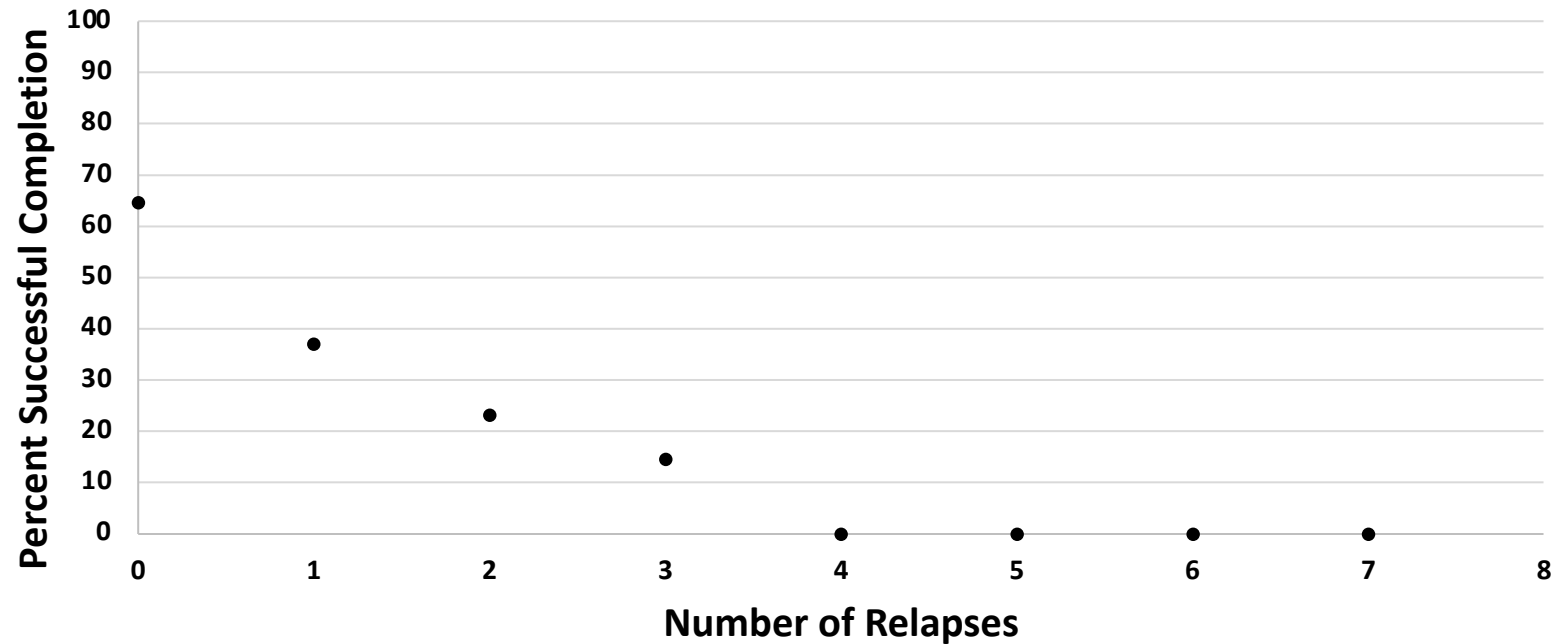
The Percent of Successful Completions Peaks and Stabilizes at Two Structured Support Group Meetings Attended per Month

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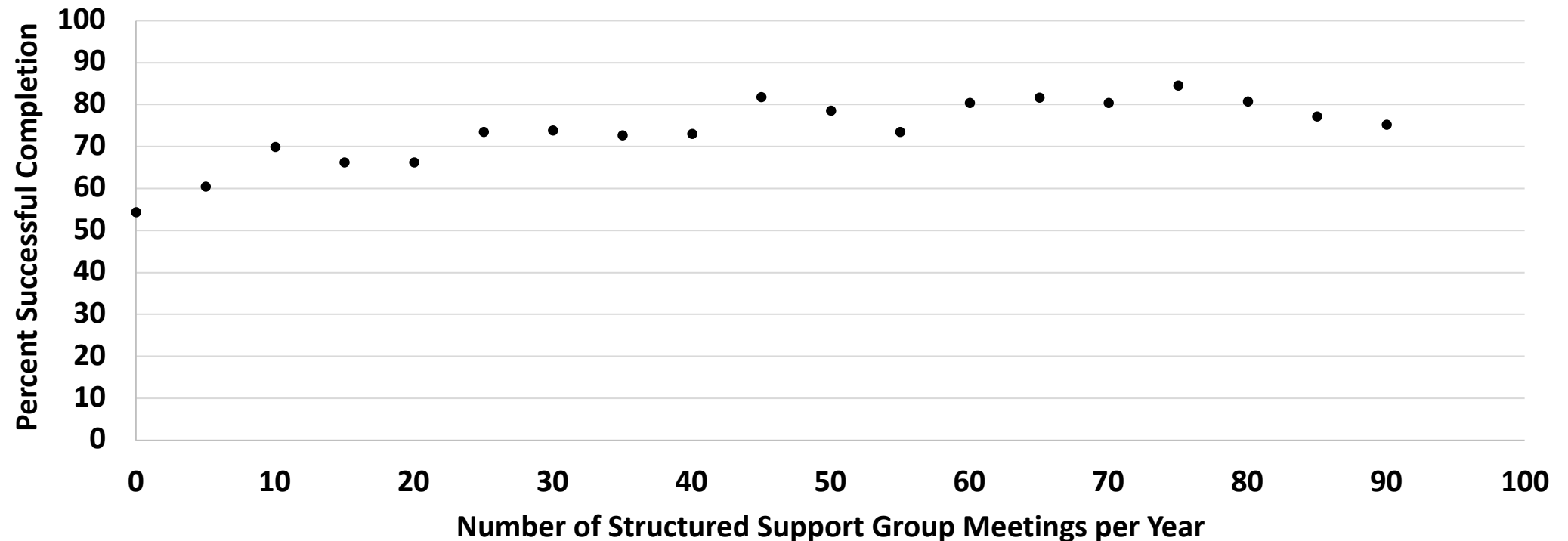
The Percent of Successful Completions Peaks and Stabilizes at One Mutual Support Group Meeting Attended per Week

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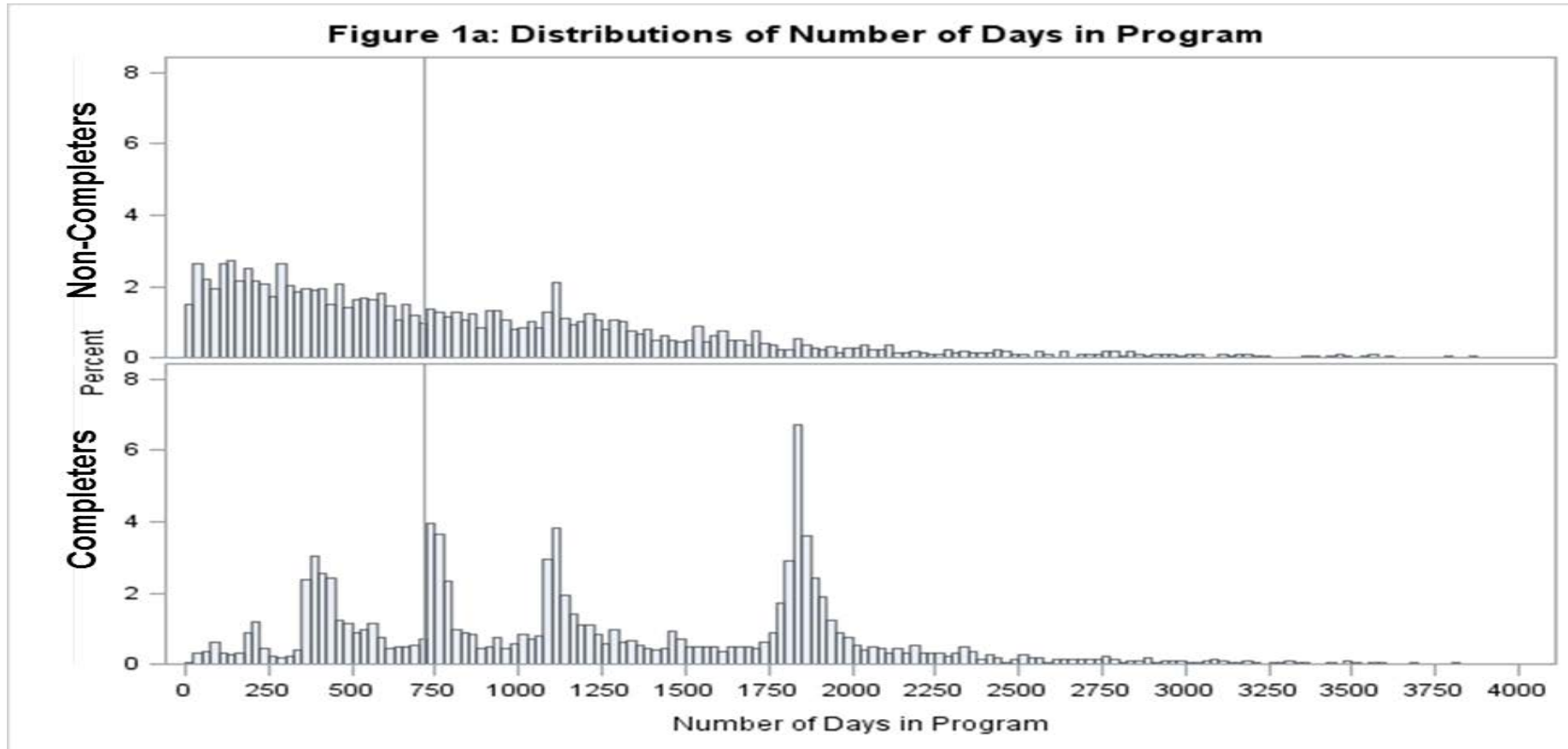
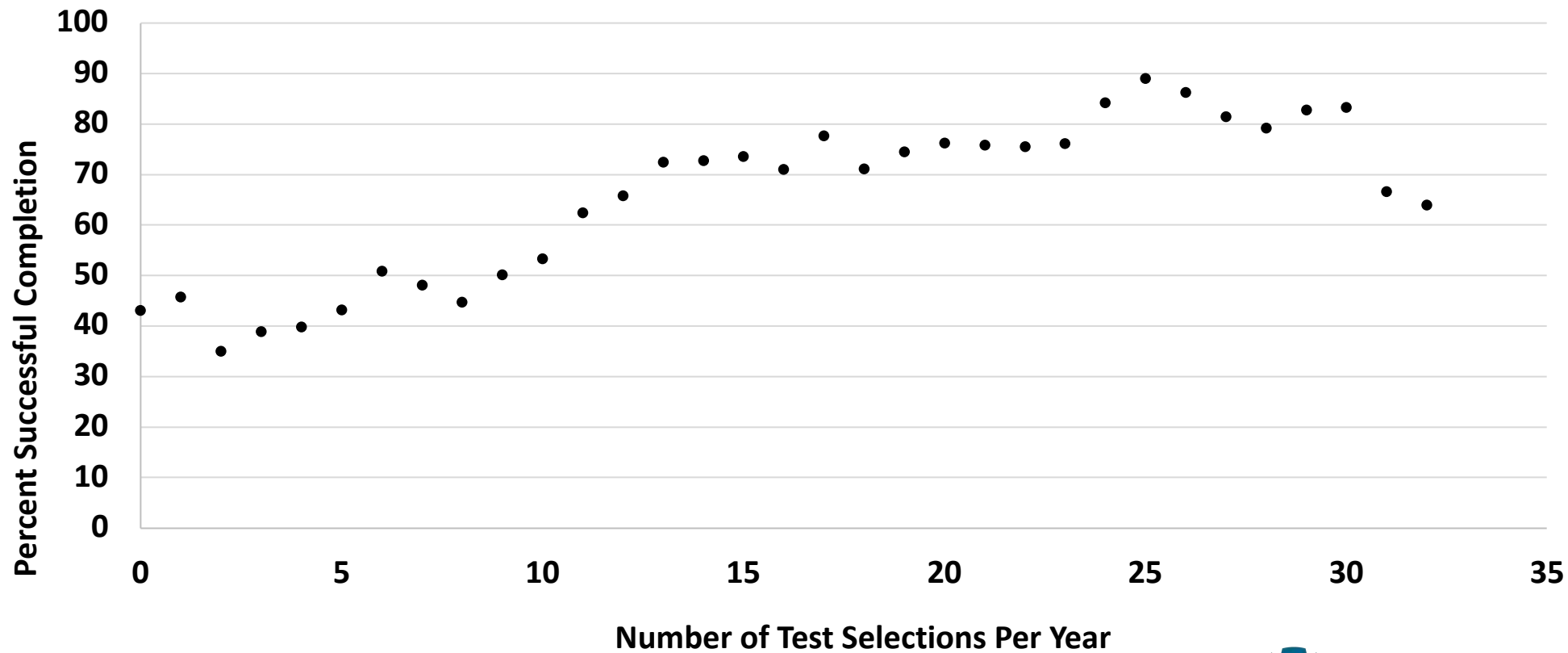**The Percent of Successful Completions Stabilizes after Two Years in the Program and Peaks at Five Years in the Program**

Percent Successful Completion vs. Number of Years in Program

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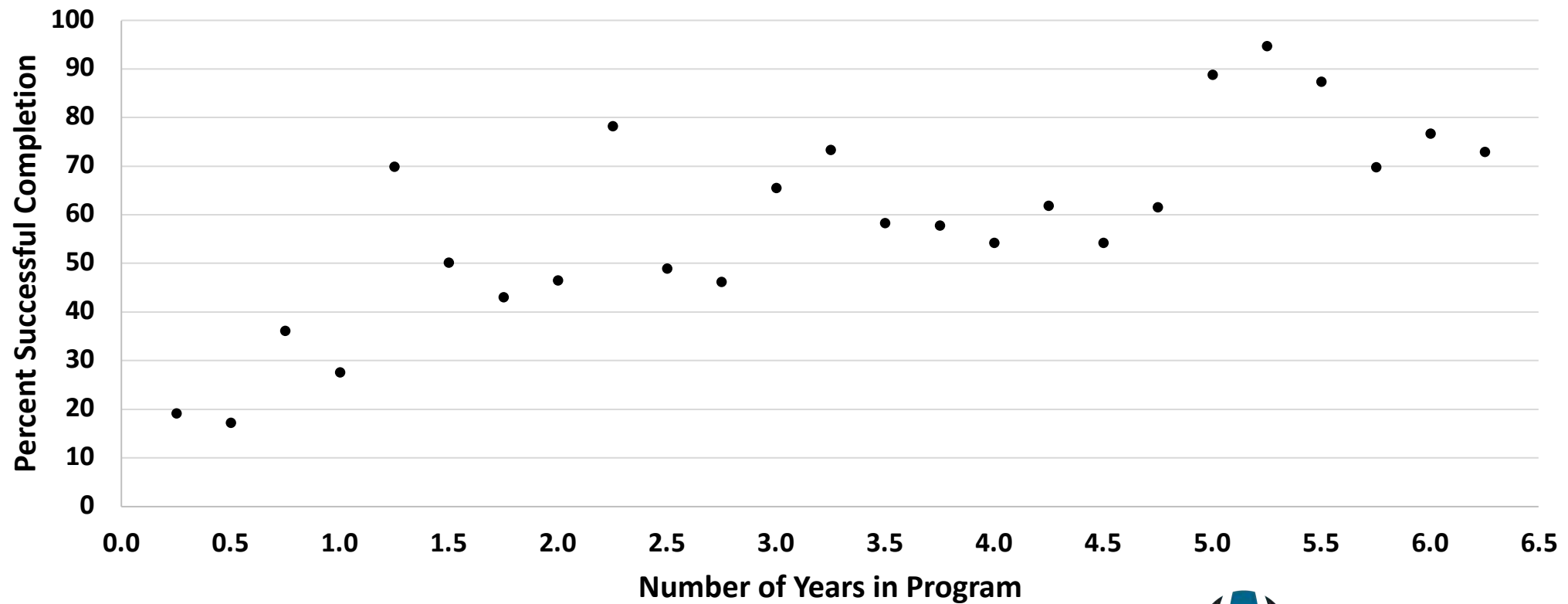
An ROC Analysis Identified a Cut Point at Two Years

Figure 1a: Distributions of Number of Days in Program

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The Percent of Successful Completions Peaks at Two Tests per Month

Percent Successful Completion (y-axis: 0 to 100)

Number of Test Selections Per Year (x-axis: 0 to 35)

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For those who were selected for drug tests at least twice a month, Most Program Failures occurred within the First Two Years

Figure 1b: Distributions of Number of Days in Program (24 or more tests per year)

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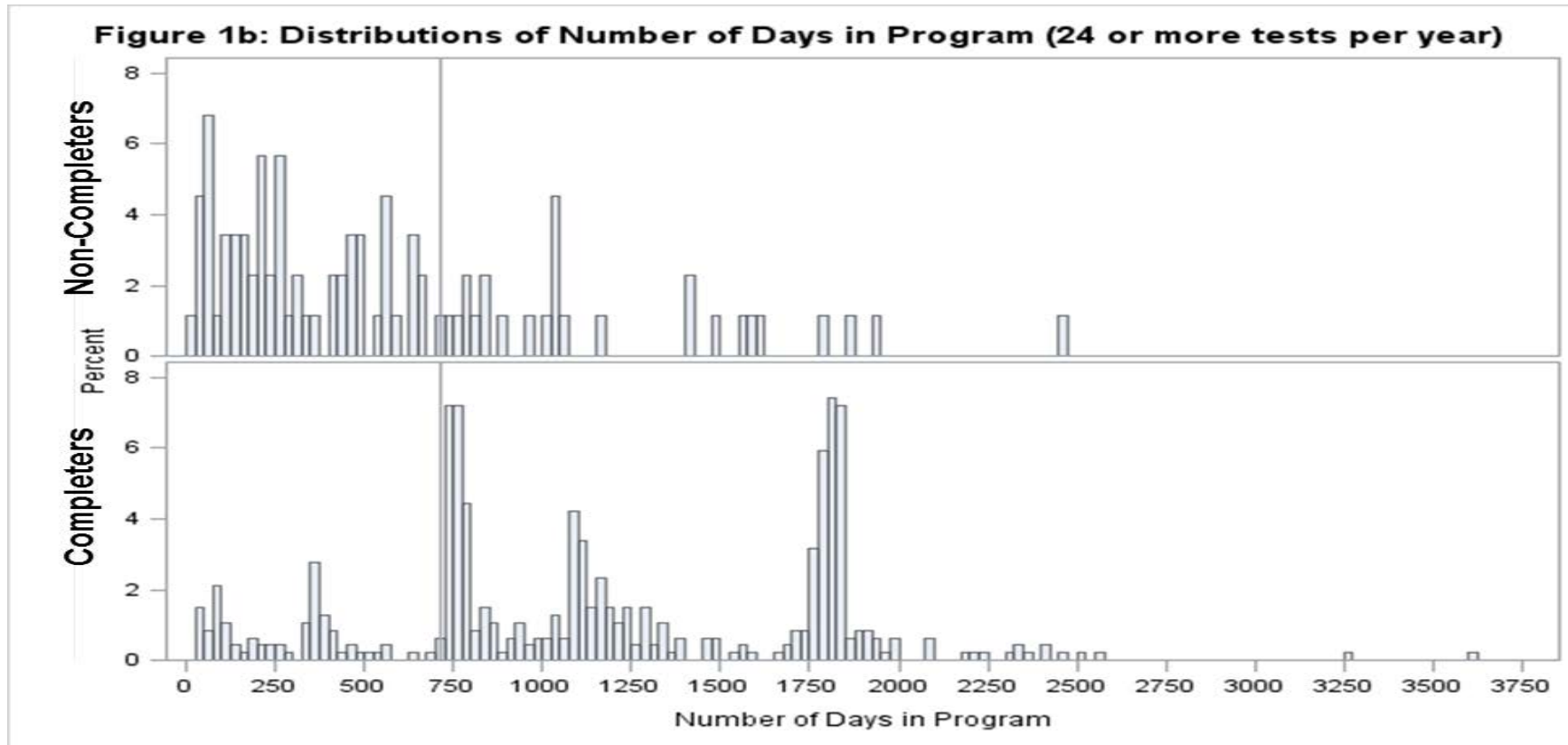
For those who were in a program at least two years, all program completion percents were extremely high for those tested at least twice a month
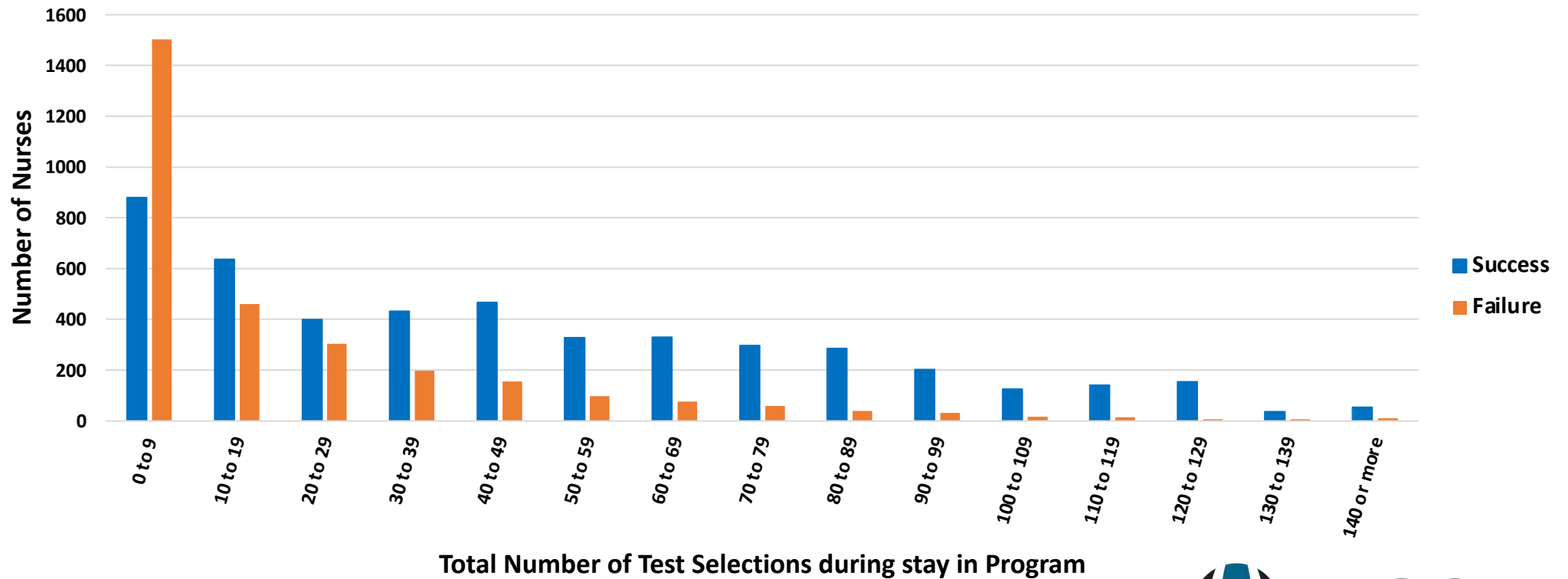
	Number of Test Selections per Year		
Number of Years in Program	**Less than 12**	**12 to less than 24**	**24 or more**
Less than two years	37.2%	53.5%	56.9%
Two to less than three years	47.0%	78.3%	91.2%
Three to less than four years	58.6%	70.6%	96.3%
Four to less than five years	62.7%	74.4%	95.5%
Five years or more	72.4%	89.9%	95.3%

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For those who had a relapse and were in a program at least two years, program completion percents were still high for those tested at least twice a month
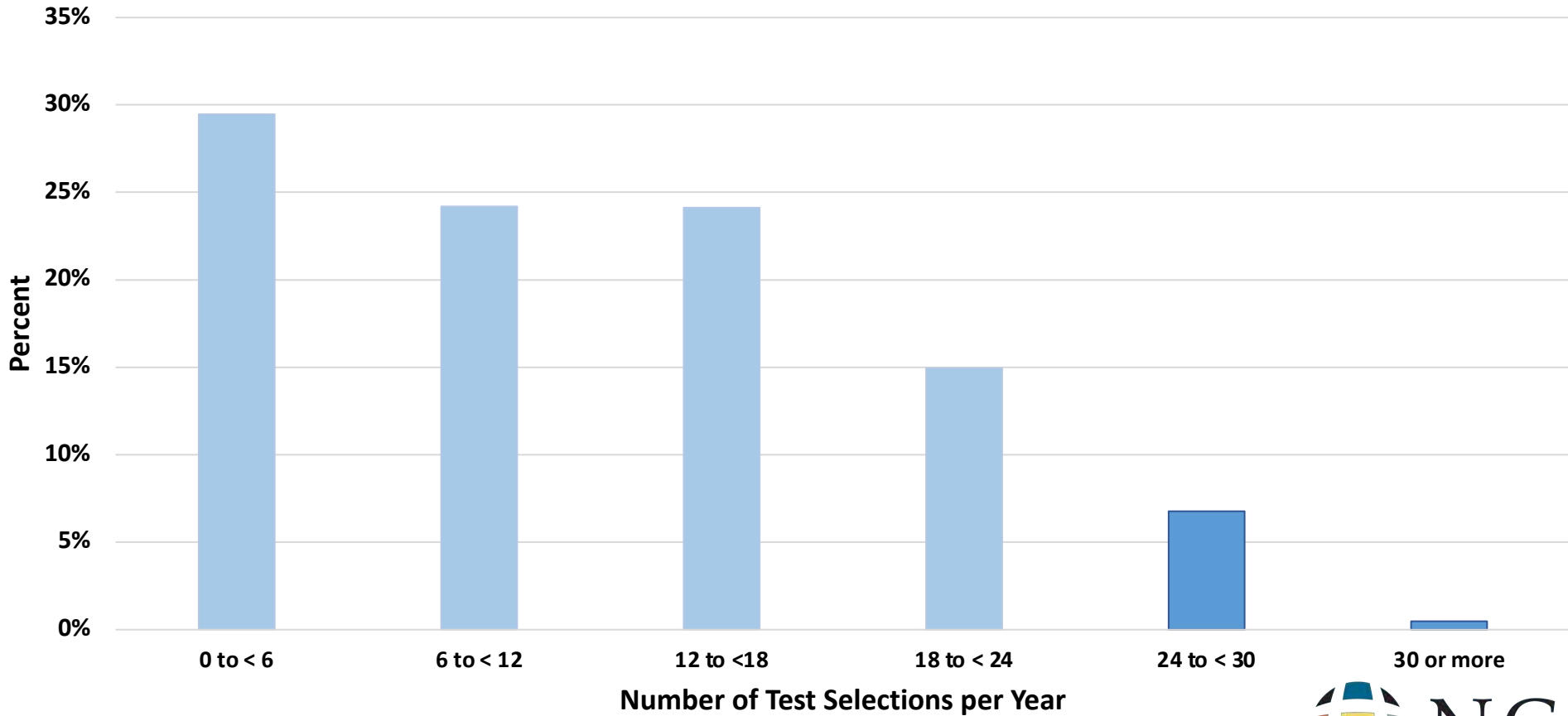
	Number of Test Selections per Year		
Number of Years in Program	**Less than 12**	**12 to less than 24**	**24 or more**
Less than two years	1.7%	4.8%	0.0%*
Two to less than three years	11.7%	43.9%	75.0%*
Three to less than four years	21.4%	45.1%	75.0%*
Four to less than five years	30.6%	31.8%	75.0%*
Five years or more	46.9%	71.2%	92.9%

* = limited data (n < 10)

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The median number of Test Selections for those who completed the program was 40; The median number of Test Selections for those who did not complete the program was 9

Only 7% of Nurses in the Analysis File were tested at least Twice a Month

Results - Summary

- Overall program completion rate was 61.5%

- **The positive factor most associated with program completion was the number of times/per year a nurse was selected for a drug test.**

- Other factors positively associated with program completion were:
  - number of check-ins
  - number of days in the program
  - attending structured support group meetings
  - attending mutual support group meetings

- Those who had a relapse were much less likely to complete the program.

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Conclusions – Program Set Up

Program length	• 3 years without a relapse is sufficient length
Frequency of check-ins	• Daily • Including holidays & weekends
Frequency of drug testing	• At least 2 tests/month • Random in time and type of test
Structured support group	• At least 2 meetings/month
Mutual Support Group	• At least 1 meeting/week

Conclusions – Publication

Results of the study appeared in the July 2020 issue of the *Journal of Nursing Regulation* in an article titled "Outcomes of Substance Use Disorder (SUD) Monitoring Programs" by Richard Smiley and Kyrani Reneau.

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Questions?

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