





Shocking Statistics Substance abuse is seen in all

- areas of nursing Most prevalent in Intensive care unit
- from drug or alcohol addiction Post-anesthesia unit
 - Emergency department



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It is estimated that;

10-15% of all nurses may be actively impaired or in recovery

29% of full time workers

engage in binge drinking 8% engage in heavy drinking 8% have used illicit drugs in the past month (Le







onecalicare According to the Nurse Practice Act (NPA) The Florida Nurse Practice Act, 464.018 - Disciplinary actions These activities include: Sale, distribution, or possession of a controlled substance Not being able to perform nursing duties with reasonable skill and safety due to illness or use of alcohol, drugs, narcotics or chemicals or any other type of material or as a result of any mental or physical condition A probable cause must exist to believe that the nurse in not able to practice nursing due to the impairment. The suspected impaired nurse has to submit to a mental or physical examination to a physician and this can be enforced by the circuit court after a petition is filed The accused nurse is given an opportunity to show he/she can resume competent nursing practice at reasonable intervals The board should not reinstate the license of a nurse who the board has found guilty on three different instances for violations for using drugs or narcotics when the offense included drug or narcotic diversion from the patient to the nurse

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Signs and symptoms suggestive of substance onecalicare abuse include Medication & documentation errors Not performing narcotic counts Frequent report of patients not Poor work quality getting adequate pain relief Leaving work early or arriving late Maximal use of prn medications Difficulty meeting deadlines or schedules for patients Offering to medicate other nurses patients Excessive use of sick time Poor charting
 Many mistakes Obsession with narcotics or Pyxis machine Absences from the unit Mood changes after break/lunch Discrepancy between narcotic record and patient record Rounding at odd times
Suspicious attitude towards Altered orders others Unexplained need for money Large number of wasted narcotics

Dishonesty

Increased narcotic sign outs



Employer Initiatives to Promote Safety and Provide Assistance

Nurses lack education regarding the addiction process, how to identify those with addiction and how to implement effective interventions

It is important that nurses receive education about substance use disorders. Employers can have significant impact in improving the nurse's knowledge and attitude toward substance abuse



Employers should implement strategies to promote safety and provide assistance

Guidelines should be developed to promote safety for nurses and their patients and offer assistance to nurses who suffer with substance abuse or other conditions that lead to impairment 10

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Employee Assistance Programs (EAP) US Department of Labor reports that 5 to 16 dollars are saved for every dollar spent in an EAP This is done through; A 75% reduction in inpatient substance abuse and alcohol treatment programs A 66% reduction in absenteeism related to alcohol abuse

- A 00% reduction in absenteeism related to alcohol abuse
 A 30% reduction in workers compensation claims
- A solve reduction in workers compensation claims
 While not illegal to drink alcohol, the effect of drinking off the job can adversely effect job performance
- Hangovers increase the risk of bad judgement, injuries, impair motor or cognitive function and reduce work productivity (neural film, 202)
- The ideal way to address off the job drinking is through alcohol educations programs at work through EAP

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Chronic work stress, large number of hours worked, unhealthy work groblems

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Employer Initiatives

- The employer has a responsibility to determine if risk factors are present within the work environment and attempt to modify the environment to reduce the risk of alcohol or drug use
- Employers may resist intervention programs for multiple reasons including
 - Concern that reducing alcohol problems will be costly and only benefit the individual and not the employer
 - A concern that preventions programs may suggest the employer is contributing to drug and alcohol abuse
 - Concern that those treating alcohol or drug use will not have the workplace's best interest in mind and will be unreasonable, costly and impede work productivity
- Of worksites with over 100 employees, 66% have EAP programs and 95% of Fortune 500 firms have similar programs (http://www.with.org/ http://www.aug/























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Section 456.076, F.S.- Treatment Programs for onecallcare

- For professions that do not have impaired practitioner programs provided for in their practice acts, the department shall, by rule, designate approved impaired practitioner programs under this section.
- The department may adopt rules setting forth appropriate criteria for approval of treatment providers.
- The rules may specify the manner in which the consultant, retained as set forth in subsection (2), works with the department in intervention, requirements for evaluating and treating a professional, requirements for continued care of impaired professionals by approved treatment providers, continued monitoring by the consultant of the care provided by approved treatment providers regarding the professionals under their care, and requirements related to the corevitant of the care. related to the consultant's expulsion of professionals from the program.
- https://m.flsenate.gov/Statutes/456.076

Impaired Practitioners



Job Performance	AND SYMPTOMS OF IM Personality/Mental	Physical	Diversion	474 m
Excessive sick time	Emotional lability	Smell of alcohol	Frequently volunteering to be the medication nurse	N AND
Callouts & absences	Inappropriate verbal/ emotional responses	Excessive perfume	Signing out more controlled drugs than coworkers	Li
Long breaks	Uncontrolled anger or crying	Excessive use of gum, mints, etc.	Frequently reporting med spills or waste	
"Disappearing"	Preoccupation	Increasingly disheveled	Failure to obtain cosignatures	
Underperformance	Diminished alertness	Ataxia, stumbling, staggering	Excessive use of as needed medications	
Inability to meet deadlines	Memory lapses	Changes in speech patterns	Medication count discrepancies	
Sloppy/illegible charting	Isolating from coworkers	Dilation or constriction of pupils	Evidence of prescription drug tampering	
Increased mistakes	Decreased ability to cope under stress	Nodding off or sleeping at work	Increased complaints of pain by patients	
Not following standard protocols	Defensive or aggressive responses to performance reviews	Fumbles with equipment	Loiters by medication supply	



