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Recognizing Impairment in the Workplace

The purpose of this continuing education course may allow nursing professionals to understand that the health care environment requires one to be accurate, and precise. Impairment from using mind-altering medications in the workplace can cause serious accidents, and interfere with the accuracy and efficiency of work. Understanding the signs and symptoms of chemical dependency, and the use of mind-altering medication can aid in the prevention of grave ramifications for the user of the drug and the patients under his or her care.

Objectives

1. Describe the incidence of drugs or alcohol abuse United States.
2. Understand the mandatory reporting law, Section 464.018, F.S.
3. List the signs of impairment in the workplace.
4. Describe the essential steps to make a report or referral.
5. Identify employers initiatives to promote safety and provide assistance
6. Describe treatment programs for impaired practitioners, Section 456.076, F.S.; and, Impairment treatment.



Department of Health and Human Services (2015) illustrates that addiction affects a significant number of health care professionals because, they prescribe, administer and dispense mind-altering medications daily. Regular exposure and accessibility to mind-altering medications, and pharmacological knowledge of these medications can fosters a false sense of control. Having this false sense of control may lead individuals to self-medicate (Department of Health and Human Services, 2015). In addition to drug access and a social environment promoting drug use, people who choose nursing as a profession may report a higher rate of family history of alcoholism and drug abuse than other health care provider groups (Trinkoff, Zhou, Storr, and Soeken 2009); (Kenna, and Wood, 2005). Healthcare provider that use mid-altering substances in the workplace compromises patient care.

The Intervention Project for Nurses (2015) illustrates that impairment occurs when a nurse is unable to provide safe patient care due to using a mood or mind altering substance, or having a physical condition or a distorted thought process from a psychological condition. The American Medical Association (AMA), (2015) code of medical ethics supports Intervention Project for nursing by also emphasizing that it is unethical for any health care provider to care for patients while under the influence of a controlled substance, alcohol, or other chemical agents which impair the ability to provide patient care.



Incidence

It is estimated that more than 22,000,000 people in the United States abuse drugs or alcohol. 3,000,000 are classified with a dependence or abuse both alcohol and illicit drugs. On the other hand 4,000,000 are dependent on or abuse illicit drugs but not alcohol and, 15,000,000 are dependent on or abuse alcohol but not illicit drugs (SAMHSA, 2008). Alcohol and drug dependence affects all parts of the population. Nurses are not invulnerable to substance use. There is a growing concern that there is an increasing number of nurses that are using substances for a variety of reasons. Accurate data on how many nurses are chemically dependent or use substances in various forms is unknown. However, recent statistics in state Boards of Nursing clearly define an upward trend. The two most common issues for chemically dependence nurses have been accessed and availability (Tsindoff, Storr and Wall, 1999). Nurses being vulnerable to substance abuse in the workplace compromises patient care. Furthermore, the negative consequences of drug abuse and alcoholism affect not only individuals who abuse drugs, but also their families and friends and various businesses and government resources.

Data gathered from reporting state agency on disciplinary action show that the majority of healthcare professional license revocations are related to alcohol or drug addictions. Many health care professionals do not receive the appropriate intervention and treatment needed due to the lack of proper identification in the workplace of abuse or addiction. Furthermore, data available for abusing or addicted healthcare professionals are limited or inaccurate because, reports of abuse or addiction are usually not revealed accurately for fear of disciplinary action against ones license to practice.



Most importantly, it is also difficult to gather accurate statistics on health care professional that abuse mind-altering medication because employers often fail to recognize the signs and symptoms of these disorders. Nonetheless, available literature on the subject estimates that between 10% to 15% of health care professionals are afflicted with alcohol or drug addiction, and an estimated that 29% of full-time workers engage in binge drinking, 8% engage in heavy drinking and 8% have used illicit drugs in the past month (Levy-Merrick, Volpe-Vartanian, Horgan, & McCann, 2007). Because of these reasons it is important for all health care providers to identify the signs of impairment in the workplace.

The Nurse Practice Act (NPA), and the Florida Nurse Practice Act, 464.018 - Disciplinary action documents activities surrounding drug and alcohol use that are grounds for the denial of a licensure or disciplinary actions that includes:

- a. Sale, distribution or possession of a controlled substance
- b. 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. 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.
- c. The board should not reinstate the license of a nurse who has been found guilty on three different instances for violations on using drugs or narcotics when the offense included drug or narcotic diversion from the patient to the nurse or any other health care provider.

Signs of impairment in the workplace

Physical and Behavioral Indicators of Alcohol or Drug Addiction:

Personal

- Deteriorating personal hygiene
- Multiple physical complaints
- Accidents
- Personality and behavior changes
- Many medication prescriptions for self and/or family members
- Emotional or mental crises
- Deceit, lying, or denial
- Using behaviors excused by family and friends

Work Place

- Medication and documentation errors
- Poor work quality
- Alcohol smell on breath
- Arriving to work late or leaving early
- Difficulty meeting deadlines or schedules
- Excessive use of sick time

- Poor charting
- Many mistakes
- Absences
- Mood changes after breaks
- Rounding at odd times
- Suspicious attitude toward others
- Frequent patient complaints of not receiving documented narcotic pain medication or not getting adequate pain relief
- A large number of wasted narcotics
- Not verifying wasted narcotic with another nurse or health care provider as per organizational policies and procedures
- Not performing narcotic counts
- Maximal use of as needed pain medications for their patients
- Offering to medicate other nurse's patients
- Obsession with narcotics or the Pyxis machine
- Discrepancy between the narcotic record and patient record
- Unexplained need for money
- Dishonesty
- Increased narcotic sign outs

Medical/Physical signs that may increase the suspicion of impairment include:

- Atypical weight changes
- Pupils either dilated or constricted; face flushed or bloated

- Sleepiness
- Sweating
- Fatigue
- Diminished alertness
- Change in appearance
- Drug seeking behaviors,
- Frequently seeking medical treatment for migraines, back or other pains or illnesses.
- Emergency-room treatments for:
 1. Overdose
 2. Cellulitis
 3. Gastrointestinal problems
 4. Systematic infections
 5. Unexplained injuries and accidents.
- Inability to mentally focus and keep track of a conversation
- Shakiness, tremors of hands, agitation
- Slurred speech
- Unsteady gait, falls
- Runny nose and constant sniffing
- Nausea, vomiting, diarrhea
- Watery eyes
- Shakiness/tremors
- Frequent use of gum, mints or mouthwash



- Frequent nausea, vomiting or diarrhea
- Observed occurrences of intoxication, or hypersensitivity during work hours

Social

- Neglect of social commitments
- Embarrassing social behavior
- Driving while intoxicated or drug impaired
- Alcohol/drug related legal problems
- Unpredictable behavior, such as impulsive spending or missing dates with friends

Noted Professional Problems that should send up a “red flag”

- Impatience for state licensure by endorsement prior to verification of credentials
- Frequent job changes or relocations
- Unusual medical history
- Vague letters of reference
- Inappropriate or inadequate qualifications
- Deterioration of professional reputation
- Increasing malpractice claims
- Licensure issues



The Department of Health and Human Services (2011) indicates that the most critical component in identification of addiction is to identify the personal and practice baseline from which a person has normally functioned. Clear indicators that appear to be related to the use of alcohol or drugs are negative behaviors and practice that deviates from previous behaviors and practices.

Employer initiatives to promote safety and provide assistance

American Nurses Association (ANA) estimates that six to eight percent of nurses use alcohol or drugs to the extent that is sufficient to impair professional performance. Managing the problems of substance use and abuse at work are some of the most challenging issues in the health care arena. The law imposes on employers the obligation to provide a safe, healthy and productive work environment for employees, and patients. Understanding what laws apply in this area and the contours of an employer's legal obligations will go a long way to mitigating legal risk when handling, and providing assistance for substance abuse problems (Dwoskin, Squire, and Burdick, 2011). It is important for healthcare organizations to educate employees on signs of an impaired nurse or employee due to using a mood or mind altering substance prior to a patient crisis occurring.

Each state follows their own initiatives govern by statutes for investigating and disciplining its nurses, or health care providers who are practicing impaired. The Florida State legislature grants the Florida Board of Nursing the authority to hear and decide cases against nurses who have been accused of violating their state practice act. Laws related to the various grounds for disciplinary action include:

Chapter 464, Florida Statutes (Florida Nurse Practice Act)



Chapter 456, Florida Statutes (applies to all licensed health professionals)

Chapter 64B9, Florida Administrative Code (Rules adopted by the Board of Nursing)

The Florida Nurse Practice Act describes disciplinary actions that can be imposed against a licensed nurse in Florida. The Florida Nurse Practice Act outlines specific acts that constitute grounds for denial of a license or disciplinary action and are as follows:

Denial of a License or Disciplinary Action

According to section 464.018 of the Florida Statutes, the following acts constitute grounds for denial of a license or disciplinary action:

- Procuring, attempting to procure, or renewing a license to practice nursing by bribery, by knowing misrepresentations, or through an error of the department or the board.
- Having a license to practice nursing revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, territory, or country.
- Being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the practice of nursing or to the ability to practice nursing.

In addition, being found guilty, regardless of adjudication, of any of the following offenses:

1. A forcible felony as defined in chapter 776
2. A violation relating to:



- a. theft, robbery, and related crimes (chapter 812)
- b. fraudulent practices (chapter 817)
- c. lewdness and indecent exposure (chapter 800)
- d. assault, battery, and culpable negligence (chapter 784)
- e. child abuse (chapter 827)
- f. Protection from abuse, neglect, and exploitation (chapter 412)
- g. child abuse, abandonment, and neglect (chapter 39)

Other violations that can result in a disciplinary action include:

- E. Having been found guilty of domestic violence.
- F. Making or filing a false report or record.
- G. False, misleading, or deceptive advertising.
- H. Unprofessional conduct, as defined by board rule.
- I. Engaging or attempting to engage in the possession, sale, or distribution of controlled substances as set forth in chapter 893, for any other than legitimate purposes authorized by this part.
- J. Being unable to practice nursing with reasonable skill and safety to patients by reason of 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.



- K. Failing to report to the department any person who the licensee knows is in violation of this part or of the rules of the department or the board; however, if the licensee verifies that such person is actively participating in a board-approved program for the treatment of a physical or mental condition, the licensee is required to report such person only to an impaired professionals consultant.

- L. Knowingly violating any provision of this part, a rule of the board or the department, or a lawful order of the board or department previously entered in a disciplinary proceeding or failing to comply with a lawfully issued subpoena of the department.

- M. Failing to report to the department any licensee under chapter 458 or under chapter 459 who the nurse knows has violated the grounds for disciplinary action set out in the law under which that person is licensed and who provides health care services in a facility licensed under chapter 395, or a health maintenance organization certificated under part I of chapter 641, in which the nurse also provides services.

- N. Failing to meet minimal standards of acceptable and prevailing nursing practice, including engaging in acts for which the licensee is not qualified by training or experience.

- O. Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto.

The direct link to view the entire chapter 464.018 disciplinary actions for the License nurse in the state of Florida [Disciplinary Actions Against Nurses License in the State of Florida](#)



Florida's Mandatory Reporting Law

FS 464.018-Florida Nurse Practice Act

Failing to report to the department of health any person who he or she licensee knows is in violation of this part of the rules of the department or the Board; **however, if the license verifies that such person is actively participating in a board-approved program for the treatment of a physical or mental condition, the licensee is required to report such person only to an impaired professional consultant (IPN).**

There are 2 ways to report impaired healthcare practitioners in the State of Florida:

1. Directly to IPN.
2. To the Department of Health (DOH), the administrative investigative body of the Florida Board of Nursing.
 - Other healthcare provider can be reported to 1-800-888-8PRN (8776)
www.flprn.org

The major ethical issue in impaired practice is the conflict between the rights of the nurses for fair and humane treatment and the rights of the patients for safe and competent care. When a nurses rights are in opposition to patients' rights, ethical dilemmas surface Sullivan, 1994). Patient safety is an essential and vital component of quality care. When an impaired nurse cares for a patient, these components (patient safety and quality) are breached. Often times we try to make excuses or cover for an impaired nurse. However, we must understand that covering up for the impaired nurse can lead to very dangerous consequences because patients are at risk. Therefore, any nurse suspected of being impaired should be reported to the supervisor



immediately to prevent grave ramifications that may proceed. In other words, an impaired nurse; working impaired must be ready to deal with the negative consequences he or she may cause. Any person suspecting impairment of a nurse's ability to provide safe, and quality nursing care should report this nurse to Intervention Project for Nurses (IPN) and/or the Department of Health (DOH). Under Florida's Mandatory Reporting Law, all licensed nurses must report any suspected impairment in practice to IPN and/or the DOH (Intervention Project for Nurses (IPN), 2016).

It is important to remember that one of the major goals of the IPN is to enhance public health and improve safety by offering an opportunity for quick intervention/close monitoring. IPN is available to support nurses whose practice may be weakened from the use, misuse or abuse of alcohol or drugs or a mental/physical condition (Florida Nurse Practice Act, Chapter 455.261) (Iengel, 2016). Nurses who have a problem with substance abuse should be offered an opportunity for rehabilitation.

IPN is the alternative for disciplinary action. The process is as follows

1. Referral Call
2. Consultation is performed
3. Intervention and evaluation
4. Appropriate treatment is designated
5. The impaired nurse will be monitored for a total of 2-5 years.



Intervention Project for Nurses (IPN)

The IPN program allowed a nurse to enroll in a program that provides treatment options for the impaired nurse. Mandatory reporting falls under the umbrella of IPN. The mission of the IPN is to ensure consumer health and safety by providing education, monitoring and support to nurses in the State of Florida (<http://www.ipnfl.org/>). The requirements for mandatory reporting of nurses by nurses differ from state to state. However if a nurse observes a colleague engaged in “impairment suspicious activity”, it is the nurse’s role to report it to a supervisor.

In the state of Florida, under the Nurse Practice Act (Florida Statutes 464.018 1k) states "Failing to report to the department of health 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 in a board-approved program for the treatment of a physical or mental condition, the licensee is required to report such person only to an impaired professionals consultant." Florida Statute 464.018 allowed the option of an impaired nurse to seek treatment (enroll in a program to help) instead of disciplining the nurse considered to be impaired. The program that eventually became known as the IPN was established in 1983. The IPN offers multiple benefits including (Intervention Project for Nursing, 2015):

Implementation of an IPN contract

Evaluations on progress

Suitable referrals



Random urine drug screens

Recovery support

Monitoring

Support groups

Relapse prevention groups

Determines fitness to practice (Intervention Project for Nurses, 2015).

The IPN determines fitness to practice by assessing the nurse's judgment, problem-solving abilities, stability in recovery, support systems, decision making capacity, coping ability and cognitive function (Smith, 2013).

The following are the Nursing professionals IPN assist and monitors

- Nursing Students
- Graduate Nurses – exam candidate
- Certified Nursing Assistants (CNAs)
- Licensed Practical Nurses (LPNs)
- Registered Nurses (RNs), Registered Nurses with Bachelor of Science in Nursing (RN, BSNs)
- Advanced Registered Nurse Practitioners (ARNPs)
- Certified Registered Nurse Anesthetists (CRNAs)
- Doctoral level nurses (PhDs or other doctoral degrees)



Essential steps to create a report or referral

Steps to consider prior and up to making a referral:

1. Monitor Performance (Do not cover-up any Mental or Physical signs of impairment)
2. Keep well-informed with the signs and symptoms of impairment.
3. Remember that under Florida's Mandatory Reporting Law (Nurse Practice Act, Florida Statutes 464.018 1k) any person who suspects a nurse is impaired must report the nurse to the Intervention Project for Nurses (IPN)
4. Do not allow yourself to be manipulated or fear confronting a nurse if patient safety is in jeopardy.
5. Notify your supervisor.
6. Keep a trail of detailed documentation of patient safety incidences.
7. Any person who suspects a nurse is impaired should report the nurse to the Intervention Project for Nurses (IPN) and/or Florida Department of Health. To make a referral to the IPN and/or confidential consultation - Call the IPN at 1-800-840-2720.

Treatment, and Treatment Programs for Impaired Practitioners, Section 456.076, FS

Nurses who seek treatment have a good opportunity for successful recovery. Treatment can be effective in reducing substance use and improve health, social, and occupational well-being.

Many organizations offer alternative treatment programs instead of drastic action such as termination. However, in the State of Florida, according to Rule 64B31-10.001, an approved impaired practitioner program is chosen by the Department of Health with a consultant to initiate



intervention, recommend evaluation, and refer impaired practitioners to a treatment program.

These program providers will monitor the development of the impaired practitioner without the provisions of medical services.

Often times an individual may see a nurse or co-workers with a chemical impairment and make every effort to protect them. Nurses and co-workers do have the potential to recover from a chemical impairment, live productive lives, and return to work. Currently, 37 states offer some form of a substance abuse treatment program to direct nurses for treatment, monitor their re-entry to work, and continue their license according to the National Council of State Boards of Nursing.

Alternative programs monitor and support the recovering nurse for safe practice. Strong recovery programs offer a comprehensive, bio-behavioral, individualized treatment plan. The phases include in-treatment or outpatient detoxification in a safe environment; education about the disease; group, individual, and family therapy; and most importantly a relapse prevention program. However, boards of nursing have a responsibility to safeguard the public, so they may suspend the nursing license of an identified impaired nurse if they suspect he or she may pose a danger to patients.

The American Nurses Association (ANA) is a strong supporter of alternative or peer assistance programs that monitor and support safe rehabilitation and the eventual return to the professional workforce. While relapse is high, the goals for the substance-abusing nurse is to seek treatment, reach recovery, and re-enter the workforce.



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