



SAINT MARY-OF-THE-WOODS COLLEGE

# Prevention of Substance Abuse Among Registered Nurses

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## Introduction

### Problem

- Substance abuse among registered nurses in the United States

### Purpose

- Reduce substance abuse among registered nurses
- Help identify early signs and symptoms
- Determine interventions that may help reduce the number of cases
- Develop responsibility

## Materials and Methods

### Evidence Based Practice

- Cumulative Index to Nursing and Allied Health Literature (CINAHL)
- Google Scholar
- Saint Mary of the Woods database

Keywords: Alcohol, brief intervention, drugs, referral, SBIRT, screening, substance abuse, tobacco, analgesics, healthcare failure mode and effect analysis, medication systems, opioid, pharmaceutical services, prescription drug diversion, addiction / substance use, health care, health care professionals, nurses, work environment, Alternative-to-discipline program, licensure

### Materials

- Failure Mode & Effects Analysis (FMEA)
- Screening, Brief Intervention and Referral to Treatment (SBIRT)
- Court Documents
- Questionnaires

## Results & Discussion

### Results

Out of 30 sub steps in place by the hospital policies, the FMEA group found 103 failure modes (Nolan et al., 2019, p. 1160).

Pre-post differences using SBIRT were clinically meaningful and statistically significant. Greater intervention intensity was associated with a greater decrease in substance use. Brief intervention and brief treatment were associated with positive outcomes, however the brief intervention proved to be more cost-effective in most cases (Babor et al., 2017).

Nurses' substance use, willingness to seek help, and coping mechanisms are heavily influenced by the way substance use is discussed among co-workers (Ross et al., 2018).

In a study regarding substance use and mental health among nurses, the results showed that 55% of participants in the study reported using alcohol and 50% reported using opiates. The participants reported that they got 25% of the drugs from their workplace. In addition, 48% reported using while on the clock, and 50% stated that they were too scared to ask for help (Cares et al., 2015, pp. 59-61).

From the data five themes emerged from the nurses: (a) critical junctures experienced by RNs during the disciplinary process; (b) emerging groups who appear before the ISBN; (c) individual contexts versus standardized discipline; (d) deliberate diversion, deceit, and deception; and (e) significant threat to public safety and quality healthcare (Foli et al., 2019).

### Discussion

The FMEA group focused on finding and assessing failure modes, prioritizing the 24 highest-risk failure modes.

Using screening and treatment referral tools helps decrease the incidence of substance use among nurses.

Nurses who use substances are not likely to openly seek help or acknowledge their problem and may benefit from a private screening.

These results revealed that substance use is a significant issue among nurses. The majority of participants reported drinking alcohol, and half report use of opiates. Half of the participants said that they felt too scared to openly ask for help with their substance use disorder. As so many report a fear of publicly outing themselves by voluntarily seeking professional help, a yearly required screening tool for all employees may make for an easier way to acknowledge the problem and get help for it.

The ISBN offers confidentiality for nurses that self report, although this has proven to be under used. The key for nurses is not prosecution, but instead is rehabilitation.

## Conclusions

- Substance use is a pertinent issue
- Most registered nurses admit to substance abuse
- Hospital policies influence its prevalence
- Over 100 possible failures in hospital policies were found
- Failures can be controlled by altering existing policies and adding new procedures

## Future Work

Annual mental health and substance use questionnaires for early detection of substance abuse problems in healthcare professionals

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## Acknowledgments

On behalf of Elizabeth Riddle, Emily Palmer, Alexandria Jackson, and Kaylie Meehan, we would like to give a special thank you to Dr. Marcia Miller for all of her wisdom and unwavering support in the creation of our project, and to our fellow classmates for their encouragement in our endeavors.