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Impaired Nursing Practice: Michigan's Response

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Impaired Nursing Practice: Michigan's Response

Judith A. Floyd, RN

In recent years organized nursing has begun to address health problems that compromise the nurse's ability to function within the standards and code of conduct for professional practice. Several state nurses' associations including those in Georgia, Illinois, Maryland, Ohio, Tennessee, New Jersey, and Pennsylvania began considering the problem of impaired nursing practice in the middle and late 1970's. By 1980, the Ohio State Nurses' Association brought the problem of addiction and psychological dysfunction to the attention of the national association when the resolution "Peer Assistance Program for Nurses Impaired by Illness or Chemical Abuse" was presented to the American Nurses' Association House of Delegates (ANA, 1984).

The ANA responded by forming the Task Force on Addictions and Psychological Dysfunctions which combined the interests and expertise of three groups: the ANA Division of Psychiatric and Mental Health Nursing Practice, the National Nurses Society on Addictions (NNSA), and the Drug and Alcohol Nursing Association (DANA). This national Task Force has subsequently formulated ANA's approach to impaired practice. A published monograph of their work provides an overview of the issue of impaired practice within nursing and offers direction to individuals, groups, and organizations wishing to address the problem of impaired nursing practice. The monograph, "Addiction and Psychological Dysfunction in Nursing: The Profession's Response to the Problem," is available from the ANA at a cost of \$12.00.

In 1982, the Michigan Nurses' Association adopted a resolution which called for action in addressing the problem of impaired nursing practice in Michigan. At the 1984 MNA Convention, the House of Delegates reaffirmed MNA's support of a comprehensive approach to the problem of impaired

practice including (a) education of Michigan nurses about the problem, (b) research to establish a data base on the size and nature of the problem, and (c) strategies for providing assistance and support for nurses in treatment.

A Task Force on Impaired Practice was established within the MNA Division of Psychiatric and Mental Health Nursing Practice. Over the past three years this MNA Task Force has studied the problem of impaired nursing practice and made a number of recommendations regarding how MNA might address the problem. Since the majority of disciplinary actions taken against nurses in the state of Michigan were a result of chemical dependency problems rather than mental or physical illness, the MNA Task Force has focused on impaired practice due to the use of alcohol and other drugs. The status of the MNA Task Force's work in each of the three areas—education, research, and assistance—is discussed below.

Education

In recent years there have been rapid advances in the understanding of chemical dependency. It is important for all nurses to possess an up-to-date knowledge base on the impairment problem as well as on alcoholism and substance abuse. To assist with that aim, MNA Task Force members have recommended that educational materials be developed and made available to Michigan nurses. The development of a slide presentation on the chemical dependency problem in nursing was proposed with the thought that institutions involved in the basic or continuing education of nurses could rent this material from MNA. Since financial support for educational materials is limited at this time, the development of this audio-visual resource is not yet available. However, the Task Force has developed a "Fact Sheet on Chemical Dependency of Nurses," (MNA, 1984) which is available from MNA free of charge. In addition, the MNA Division of Administration has developed guidelines for reporting drug abuse and/or diversion by nurses or other employees in health care settings. These guidelines

also can be obtained from the MNA office (MNA, 1982). In addition to working on written materials, MNA Task Force members have made presentations about the impairment problem at workshops, conferences, and agency inservice programs around the state.

Research

Research aimed at determining the scope, nature and outcomes of impaired practice problems is sorely needed. Planning with regard to impaired practice is hampered by the lack of a data base on the prevalence of chemical dependency among nurses, the effect of impairment on patient care, the attitudes and beliefs of practicing nurses regarding this problem, and the extent to which the members of the discipline are ready to deal with the problem. The MNA Task Force has developed a questionnaire suitable for surveying nurses regarding their opinions about chemical dependency and the impairment problem. Funding for the survey is currently being sought.

Assistance

The development of a program to assist nurses who are practicing while impaired required an understanding of relevant laws and legal practice and available mental health resources. Because of the complexity involved in providing direct assistance, the Michigan Nurses' Association currently is limiting its efforts to helping nurses find appropriate treatment programs through the usual community referral services available in their own districts.

An example of the type of program which can be very helpful to chemically dependent nurses is the Nurses' Peer Assistance Network (N-PAN) of Metropolitan Detroit. The Detroit area N-PAN is a new program sponsored by the Personalized Care Corporation directed by Marcia Andersen, PhD, RN. Under the sponsorship of Personalized Care, the Detroit metropolitan area N-PAN is able to provide treatment referral information, a peer support group for addicted and recovering nurses, and speakers who will address the subject of impaired

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nursing practice. Information about N-PAN services in the Detroit area is available daily from 9 a.m. to 5 p.m. at (313) 446-6811. Persons interested in working to assist addicted nurses meet monthly at the Personalized Care offices in the Renaissance Center. At these planning session approaches to the problem of impaired practice due to chemical dependency are discussed and the rationale for action concerning this problem is developed. It is hoped that the experiences of this group of nurses with providing assistance and support in the Detroit area will be useful to individuals and groups who wish to set up Nurses' Peer Assistance Networks in their own areas of the state. Nurses interested in setting up a nurses' peer assistance network can work with their local Office of Substance Abuse Services (OSAS), Council on Alcoholism, or mental health center to arrange sponsorship as well as contact N-PAN of Metropolitan Detroit for guidance in how to initiate a self-help group and/or referral program for nurses. Nurses engaged in an effort to assist or support their chemically dependent peers are encouraged to contact

the MNA Task Force on Impaired Practice to share information about their activities so that MNA can alert other nurses in that area to the help available.

Although the problem of impaired nursing practice due to chemical dependency involves a relatively small percentage of nurses, these nurses are at high personal risk and are also at risk for compromising professional standards and decreasing the safety of practice. Thus, all nurses have a stake in assisting peers whose health is in jeopardy. To learn more about the problem of impaired practice and how one can be of help, contact any member of the MNA Task Force on Impaired Practice. The members are: Judith Floyd (chairperson), Carol Crew, Barbara Hill, Helen Perrot, Eileen Rodgers, and Gay Winter.

References

- American Nurses' Association (1984). *Addictions and Psychological Dysfunctions in Nursing: The Professions' Response to the Problem.*
- Michigan Nurses' Association (1982). *Recommended Guidelines for Reporting Drug Abuse and/or Diversion by Employees Within Hospitals, Nursing Homes and Other Health Care Facilities.*
- Michigan Nurses' Association (1984). *Fact Sheet on Chemical Dependency in Nurses.*

CE Regional Councils Elected

The Council for Continuing Education's Task Force on Statewide Planning for Nursing Continuing Education is pleased to announce regional councils have been elected for the two pilot project areas.

Elected to the Upper Peninsula Regional Council are: Theresa McKnight, Florence Buhrman, Patricia Webber, Mary Snitgen, Eunice Casey, Mae Belle Kessel, Gloria Clocklin, Sandra Spoelstra, Beth Willis and Mary Martin. Ann Arbor Regional Council members are Judy Fry, Lorelei King, Barbara Walton, Penny Hoffman, Bob Ferns, Betty Gudmundson and Rosaline Fantone.

The regional council in each pilot area will determine ways and means of providing quality continuing education in the area without gaps and overlaps. Some goals related to this purpose include developing human and physical resource lists and sharing evaluation tools.

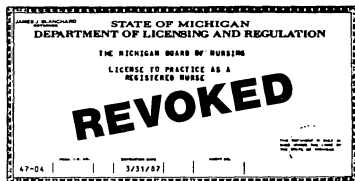
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- Revoked for repeatedly reporting to work under the influence of alcohol.

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