

NOAP Research Archive

May 2022

Geuijen, P.M. et al (2021). Success Rates of Monitoring for Healthcare Professionals with a Substance Use Disorder: A Meta-Analysis. *Journal of Clinical Medicine*.

<https://www.mdpi.com/2077-0383/10/2/264>

Abstract:

In the past decades, monitoring programs have been developed for healthcare professionals with substance use disorders. We aimed to explore estimates of abstinence and work retention rates after participation in such monitoring programs. A literature search was performed using PubMed, Embase, PsycINFO, and CINAHL. Twenty-nine observational studies reporting on success rates (abstinence and work retention) of monitoring for healthcare professionals with a substance use disorder were included in the meta-analysis. Quality-effects models calculated pooled success rates and corresponding 95%-Confidence Intervals (CI), with subgroup analyses on monitoring elements and patient characteristics. Pooled success rates were 72% for abstinence (95%-CI = 63–80%) and 77% for work retention (95%-CI = 61–90%). Heterogeneity across studies was partly explained by the starting moment of monitoring, showing higher abstinence rates for studies that started monitoring after treatment completion (79%; 95%-CI = 72–85%) compared to studies that started monitoring with treatment initiation (61%; 95%-CI = 50–72%). About three-quarters of healthcare professionals with substance use disorders participating in monitoring programs are abstinent during follow-up and working at the end of the follow-up period. Due to selection and publication bias, no firm conclusions can be drawn about the effectiveness of monitoring for healthcare professionals with SUD.

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Foli, K.J. et al (2020). Substance Use in registered Nurses: “I Heard About a Nurse Who...”. *Journal of the American Psychiatric Nurses Association*, 26(1) 65-76.

<https://alternativeprograms.org/resources/Documents/I%20heard%20about%20a%20nurse%20who.pdf>

Abstract:

BACKGROUND: Estimates of substance use (SU) in nurses is on par with that of the general population: between 6% and 8%. However, collecting sensitive information such as SU is difficult based on social desirability and fears of disclosure. **AIMS:** Part of a larger study surrounding nurses’ self-reports of SU (n = 1,478), the purpose was to explore open-ended responses of nurses (n = 373) who were invited to “Please add any additional comments related to substance or alcohol use that you have experienced or witnessed in registered nurses.” **METHOD:** This qualitative study employed a content analysis of 373 nurses’ open-ended responses collected via an online survey. **RESULTS:** The majority of nurses (n = 250) forwarded comments that described SU in other nurses, while 24 comments reflected the nurse’s past or current SU. Content analysis revealed the following four themes: (1) differing social network proximity to SU; (2) individual process: vulnerability to adaptive/maladaptive coping resulting in positive and negative outcomes; (3) bedside, system, and organizational spaces and effects; and

(4) there are no SU issues in nursing. CONCLUSIONS: Although direct reports of SU constitute approximately one quarter of the comments forwarded, nurses reported peers' struggles with SU, including observing nurses working in patient care while impaired and the use of substances to cope with work and personal stressors. Individual factors and system-related failures appear to be contributors to SU in nurses.