

# NOAP RESEARCH COMMITTEE

## Project Proposal

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**Submitted by:**

NOAP Research Committee

**Project Title:**

Recommendations for the use of standardized performance measures among substance use monitoring programs for nurses

**Principle Investigators:**

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**Abstract:**

Alternative to Discipline (ATD) substance use monitoring programs began to be utilized by state nursing boards in the early 1980s. The adoption of an alternative to discipline approach to substance misuse was primarily driven by the recognition of substance use disorder (SUD) as a clinically defined disease, the need to retain skilled nursing professionals, and the realization that public protection was best served when nurses were provided an opportunity for monitored rehabilitation.

Today approximately 42 states have ATD programs in place (NCSBN). While all have public safety as their primary mission, they take on various forms (compliance focused, peer assistance, health promotion) and have unique relationships with their oversight boards. In addition, state laws and regulations may have significant influence on program structure and policies.

This wide variation has given root to a common description of ATD programs – “When you have seen one program, you have seen one program”. Consensus is that adoption of best practices and increased standardization across programs will result in better outcomes. One problem with this is due to wide program variation on what constitutes a successful completion of a monitoring agreement and a safe return to practice without the scrutiny that is provided by monitoring. What considerations and benchmarks are utilized to conclude completion is appropriate? What sorts of written recommendations are required? (For example, nurse support group facilitator, employer, therapist if indicated, etc.) Is a minimum length of sobriety required? A literature review found scant comparable research. This is a significant knowledge gap.

In 2011, the National Council of State Boards of Nursing (NCSBN) published its Substance Use Disorder in Nursing: A Resource Manual and Guidelines for Alternative and disciplinary Monitoring Programs. This remains the primary guidance for ATD and discipline monitoring programs. Recently the NCSBN has taken additional steps by publishing a study assessing program characteristics and completion rates (Smiley), along with a companion paper on the components of state ATD programs. While the NCSBN resources are of value they suffer a glaring weakness. The inability to conduct strong comparative research and measure outcomes to identify best practices.

The value of Peer Assistance Programs (PSA) is also recognized. PSA programs are typically associated with state nursing associations. PSAs provide peer support services to nursing boards and a “safe haven” for nurses who may be struggling. Specific performance measures for PSAs will be developed.

This project will begin the process of developing formalized guidance on program performance evaluation. Creating common terms, measures, and reports to be used both internally and comparatively between programs. Adoption of a common set of program measures and shared language will begin to establish informed baselines, mutually accepted best practices, and enhance the standing of ATD programs.

**Project Aim:**

There is an identified gap in ATD monitoring program’s ability to evaluate performance. This project aims to provide a standardized approach to ATD program performance evaluation to allow for comparative data collection.

**Strategy:**

We will conduct a comprehensive literature search on ATD programs, physician health programs, and related evaluation and outcome measures. Literature searches will include the use of electronic databases such as Cochrane Library, PubMed, and PsycINFO. Relevant findings will be placed in a comparative database and ranked in regards qualities such as commonality, clarity, comparability, and relevance. Additionally, ATD programs will be approached to share their program measures and quality improvement structures. Programs will be contacted directly by telephone, email, and through the NOAP Discussion Forum.

Findings will be compared to existing measures developed by the NCSBN and FSPHP, along with other relevant measures i.e., the ASAM Performance Measures for the Addiction Specialist Physician. Final recommendations will be based on a consensus between existing recommendations and program practice.

The logistics of data collection, analysis, and reporting is an important consideration. Therefore, we will engage directly with major Third-Party Administrators to ensure the feasibility of our recommendations.

A written Guidance document will be produced and published on the NOAP website.

**Costs:**

Only identified startup cost is access to pay-for-view research documents. Fortunately, FSSolutions has agreed to sponsor.

It is anticipated that a statistician or like professional be contracted to help develop strong data collection structures, performance measures, and analytics. Sponsors may be solicited to provide or support this service.

**Timeline:**

- Project start date is November 1, 2021.
- Time to final Draft is estimated to be 6-8 months.
- Preliminary work should be ready to present during the 2022 NOAP Annual Conference.

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