

Alternative to discipline (ATD) programs are evidence-based treatments that help healthcare providers rehabilitate back into their career and protect their license when battling a SUD. Specifically those practicing anesthesia, such as CRNA's, have one of the highest rates of SUD due to the high stress environment and access to controlled medications. Oregon no longer has an ATD program. This leaves all RNs, including APRNs and CRNA's, unable to seek a third party program for assistance and rehabilitation with a SUD. The OSBN now has control to revoke licenses and deliver repercussions as they see fit, without an alternative option for nurses struggling with SUDs. Oregon must reinstate a third party ATD program to protect nurses and offer a non-punitive option to rehabilitate without fear of losing licensure.

Problem Description

June 2021:

→OSBN removed coverage for CRNAs from the ATD program.

September 2021:

 \rightarrow OHSU DNP students attempted to regain CRNA coverage into the ATD program. Instead of revising the program, the OSBN removed the ATD program for all RNs.

September 2022:

 \rightarrow Access to an ATD program in the state of Oregon was revoked by the OSBN, effective date, January 1, 2023. This decision by the OSBN leaves all RN's, APRN's and CRNA's in the state of Oregon unprotected from the effects of SUDs on their careers, licenses, and patients within their care.

Our role in re-establishing an ATD program in Oregon

November 2022:

 \rightarrow A coalition was formed to help reinstate an ATD program. The coalition consists of CRNAs, OHSU DNP students, The Oregon Nurses Association, and the prior third-party monitoring company, HPSP.

December 2022 - March 2023:

→ DNP students collected data from ATD programs across the country to determine what a successful and financially stable program consists of.

April 2023:

→ OHSU DNP students presented a policy to the OSBN panel advocating for the reinstatement of an ATD program.







Reinstatement of an Alternative to Discipline Program in the State of Oregon

Emily Closs BSN, RN OHSU DNP Student & Lyndsay Prinz BSN, RN OHSU DNP Student

Abstract

History and Background

Anesthesia providers have a 5x higher likelihood of using opioids and controlled substances compared to the general public.

> Prior to 2016, a state-run discipline-based program for nurses was overseen by the OSBN. During their tenure, 25 RNs died from addiction related causes while enrolled in their program and only 42% completed the 5 year recovery program.



ATD programs have increased retention and recovery rates for APRNs with SUDs. They promote rehabilitative effort for license retention, an optimal state of health, and safe reentry into the workplace.

> Within the United States, 40 out of the 50 states have a current ATD program, leaving Oregon as one of the few outliers without an adequate resource.

ATD programs use professionals in the treatment of SUDs who can determine whether an individual is safe to practice during their admittance in the program or determine if they should be removed from practice for the duration of treatment.

> ATD programs have been implemented since the 1980s to protect health care workers and the public. They display high evidence of benefit by utilizing the expertise of ATD-trained program professionals and promoting early intervention and quick admission.

Although enrollment has decreased, this should not eliminate the need for an ATD program. Success of an ATD program is not defined by participation but rather, the safe completion and return to the profession, and survival of those suffering with SUDs.

Reinstating an ATD program for all nurses is the most appropriate intervention for the safety for patients in the community and the nurses that serve them on the frontlines.

Proposed Change & Recommendations

→ Oregon must reinstate a third party ATD program to protect their nurses.

→ Oregon must have an equitable and consistent policy that provides uniform coverage for <u>all</u> RNs and APRNs in the ATD program, including CRNAs.



Advocacy for Change

The unintentional consequences of not having an ATD program may result in impaired providers in the workplace while contributing to an increased safety risk to patients.





Scan for a full list of References

Scan for link to full DNP Paper