

MDS Alert

Industry Realities: What You Need To Know About Staff Substance Abuse In Your Facility

Staff may be using and suffering, even while at work.

Substance abuse, especially opioid addiction, makes the news most nights these days, and your facility's staff may not be immune to the power of substances - even while at work. In fact, the **American Nurses Association** estimates that as many as one in 10 nurses struggles with substance abuse issues, a number in line with the rest of the population.

Long-term care facilities require a lot of staff, and often employ people from many walks of life in an environment that is often stressful and on a schedule that is constantly changing.

Beware: Some motivated attorneys are looking to explain resident abuse by pinning the negligence on SNF staff addiction issues or nailing facilities for failing to provide comprehensive care that includes managing substance abuse within the resident population.

Here's what you should know about substance abuse amongst your facility's staff, what policies your facility should have in place, and how your actions can help those afflicted seek treatment.

Beware of Medical Professionals Knowing What to Hide

Because nurses and other staff members are so familiar with assessing signs and symptoms and others' well-being, they may be particularly adept at hiding their own symptoms.

"Because nurses are in the medical field, and they are aware of the signs of substance abuse, they are often very good at hiding the signs and symptoms of their own use from others - sometimes for extended lengths of time. However, there are some things, physical and behavioral, that may point to a problem with substance use or abuse," according to **Footprints Behavioral Health**, an addiction treatment center in Mission Viejo, California.

"It may be easiest for coworkers of a nurse to notice signs and symptoms first. For example, if you are a fellow nurse and you dread going to work because you know that the nurse on the previous shift will leave you with charts that are incomplete and patients who are complaining about pain, that could be an indicator," Footprints adds.

Check in With Colleagues, Who May Suspect First

The **National Council of State Boards of Nursing** (NSCBN) offers a pamphlet for nurses with the express aim of helping them notice potential substance abuse disorder (SUD) issues in their colleagues.

"Concerned and preoccupied with your own responsibilities and duties, you may not always recognize the warning signs of a SUD in a nurse co-worker or colleague," the NSCBN pamphlet says. "You may misread cues and look for other explanations for behaviors. That's why many nurses with SUD are unidentified, unreported, untreated and may continue to practice where their impairment may endanger the lives of their patients."

"SUD among health care providers also creates significant legal and ethical responsibilities for colleagues who work with these individuals. You have a professional and ethical responsibility to report a colleague's suspected drug use to your nurse manager or supervisor, and in some states or jurisdictions, to the board of nursing. You have a vital role in helping to identify nurses with SUD, so it is necessary for you to be aware of the indicators that may signal that a nurse has a problem. It can be hard to differentiate between the subtle signs of impairment and stress-related behaviors, but there are three things to watch for: behavior changes, physical signs and drug diversion," the NSCBN pamphlet states.

Don't Let Your Facility Get Sued

Some resident families may pursue lawsuits against nursing homes if staff substance abuse is suspected. Facilities should incorporate background checks and drug testing into their hiring procedures, and consider regular, random drug testing of established employees, as well, to help weed out possibilities of substance abuse amongst staff members.

"Nursing homes and other long-term care facilities have a duty to provide reasonable care to their residents, and they can't shirk this responsibility by blaming their employees. A nursing home must adequately supervise its staff, and it must not negligently hire unqualified employees. Anyone who actively abuses drugs is certainly unqualified to work with vulnerable residents," says **Matthew A. Dolman, Esq.**, president and managing partner of **Dolman Law Group** in Clearwater, Florida.

"Nursing homes can meet their legal obligations to provide reasonable care by running criminal background checks on all of their new hires as part of the hiring process. By doing so, they can catch whether police have ever arrested prospective employees for drug possession and avoid hiring those people. However, nursing homes that fail to perform background checks have engaged in negligent hiring practices," Dolman says.

"A long-term care facility should also perform drug screenings before hiring. Any applicant who currently uses drugs presents a serious risk for continuing to use drugs while working at the nursing home," Dolman adds.

Substance abuse among residents is a growing problem as well - look for an article in the next issue of MDS Alert for more information.