Substance Use in the Nursing, the Dirty Little Secret Utilizing Simulation to Educate Nursing Students: A collaborative project

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CU and PAS Collaboration

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CON team members

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CU and PAS collaboration

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Nurses Helping Colorado - Regional SBIRT (Screening, Brief Intervention, and Referral to Treatment) Training Program from SAMSA 9/2013 – 9/2016

CU SBIRT grant team partnered with PAS SBIRT team

One arm of the grant: SBIRT content threaded across CON undergraduate curriculum.

Simulation developed in collaboration with PAS as part of the SBIRT grant: Substance use in Healthcare Workers

Learner Outcomes of the Session

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Session Title: Healthcare Providers with Substance-Related Issues
Learning Outcomes:

Learner will:

1. Analyze a situation of decompensation from substance use disorder in the practice setting
2. Employ empathy of healthcare workers with substance use disorders.
3. Construct a plan of care based on understanding of how to address a situation of impaired practice
4. Discuss ethical imperatives from the CO State of Nursing and ANA related to substance use disorders in Nursing
5. Demonstrate appropriate communication methods ("I statements") in peer-to-peer difficult conversations.

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Online learning module
- Caring for the caregiver
- Health and wellness in the workplace
- Substance use and mental illness among nurses
- How to help a colleague
- Guide to effective communication
- Peer Health Assistance Programs

A Nurse's Guide to
Substance Use Disorder in Nursing

NCSBN

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Self-Assessments
- ACE Study Questionnaire (Felitti et. al.)

Early Death
Disease, Disability, and Social Problems
Adoption of Health-risk Behaviors
Social, Emotional, and Cognitive Impairment
Disrupted Neurodevelopment
Adverse Childhood Experiences

Death

Conception

Mechanism by Which Adverse Childhood Experiences
Influence Health and Well-being Throughout the Lifespan

- Self-Care Assessment (Saakvitne et. al.)

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ANA Code of Ethics (2015)

Self-care is not selfish It's self-respect

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"We all know what we're *supposed* to do to take of ourselves: eat right, exercise, get enough sleep, learn to say "no", be involved in spiritual activities, and spend time with the people we love. However, doing good things for oneself does not occur easily. When entering into a healthcare field that will challenge you physically, emotionally, and spiritually, a solid Self-Care Plan is no longer an option, it is REQUIRED."

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What do you want your life to look like (physically, mentally, spiritually, relationally, financially) in ten/twenty years? Be as specific as you can.

What kinds of **behaviors**, **actions** and **responsibilities** will be necessary to support your future desired outcomes?

What might you have to give up? What don't you want to give up?

Are there specific things that would need to change to bring about the desired outcomes? What are they?

What are the obstacles keeping you from changing those things? How can you effectively address those?

What are you currently doing for yourself that you feel is "on-track?" What is missing?

Is what you are doing addressing **the important** or **the urgent**? Should you make a change?

Name **one thing** you can do starting **tomorrow** that would represent you taking a step in the right direction when it comes to your self-care.

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Students spend 2 of a 4 hour session in Simulation

Simulation Scenario:

- The patients that the student will care for today will be from a variety of clinical settings. The student is a float nurse providing care across settings.
- The student will have a clinical nurse, Sally Lawrence, as a preceptor which they will be partnered with to provide care.
- The scenarios will take place over a 6 month period of time as the student is becoming familiar with their professional role.

Content: Simulation

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Classroom Activity (45 minutes)

- "Donna's story"
- Stages of decompensation/Signs and symptoms of impaired practice
- SBON Nurse Practice Act, ethical imperatives
- Communication strategies
- Video clip of "Dance of Addiction" and diversion examples
- Discussion regarding how to address impaired practice

Content: Simulation

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Scenario #1 - Pediatric patient

Time of Day: May 1 at 1100 on a Saturday

RN nursing staff: Sally Lawrence

- Irritable, unprofessional, aggressive
- Very little make-up; maybe smudged make up
- Hair disheveled/messy
- Scrubs wrinkled, half tucked in
- Mouth wash breath
- Slouchy, poor posture

Debrief led by Peer Assistance Services staff:

How did you feel about working with Sally?

Did you have any concerns regarding her actions/behaviors? What did you notice?

Did you feel something was "awry"? Where in your body?

Describe a communication method you would consider using with Sally as she escalates in the scenario.

Content: Simulation

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Scenario #2 - OB patient

Time of day: August 1 at 1400 on a Friday
RN nursing staff: Sally Lawrence

- Trouble concentrating on conversation
- Word slurring
- Alcohol smell (scrubs smell of beer/alcohol)
- No/smudged make-up
- Hair disheveled/messy
- Scrubs wrinkled, half tucked in
- Breath smells of mouthwash
- Slouchy, poor posture
- Staggering

Now at a further point in time; starting to show decompensation

Start of the scenario will have the RN pulling up medication from a vial (Fentanyl per order). There will also be 2 "flush" syringes on the med cart for the students to see. RN will then intentionally place syringe in pocket, then ask the Student Nurse to "waste" medication; though it is not the Fentanyl. Intent is to see what the student reaction is with this inappropriate process.

As the scenario progresses, RN stumbles in room, acting visibly impaired, then sits on a chair and puts her head on the patient bed, as if about to pass out.

Debrief led by Peer Assistance Services staff

Content: Simulation

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Scenario #3: Adult Patient

Time of day: November 1 at 1900 on a Sunday

RN nursing staff: Sally Lawrence

- Primary nurse, Sally Lawrence will be found in corner next to patient simulated to have a PIV in right arm connected to IV tubing, IV bag of narcotics
- Group of student nurses go in to see patient who states, "I have been on my call light. My nurse has not answered at all. Can meds?! I have not gotten anything for hours." Students walk into patient stating, "someone please just give me my pain medication". They are with the patient in room for 3-4 minutes before noises come from corner. Students look into the noises and find Sally.

Debrief led by Peer Assistance Services staff:

- Reinforce the use of "I" statements as a communication tool with the obviously unsafe RN.
- What did the group do well? What would you have done differently?
- How did the nurses work as a team? Tell me about their communication?
- What is your responsibility as an RN when you see a colleague like what you saw in the scenario?
- What is the policy for a person who is clearly impaired and has obvious evidence of using non-prescribed meds for the RN's personal use?
- What is your responsibility to the patient as it relates to an RN who is actively diverting?
- What should be done first? Second? Third?

Anecdotal Evaluation of the Session

Direct feedback quotes from students:

"Today's Simulation Scenario was very important, memorable and educational. It unabashedly brought to light real human challenges that are all-too-often ignored and shamed. Substance abuse and mental illness have major individual and societal implications and it's only through discussions that we can truly addresses these issues. Please consider implementing this course on a standard nursing school curriculum".

"This simulation helps bring to the forefront SUD, mental illnesses, etc. that we may encounter in the workplace. It helps to do this activity integrated with patient simulations, because it brings out of being strictly task/patient focused and increased our awareness of other things going on around us".

"I thought that was a helpful experience. It was very unique and not anything like our other simulations. I thought it was helpful that we were able to engage in real life situations that many people don't talk about. It would be great to do similar simulations in other subject areas".

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