

LEADERSHIP ACADEMY EXAMINATION  
TIER 1: MODULE 4  
**Helping nurses with alcohol or drug-related problems**

Scenario #1:

Helen is a 45 year-old nurse, married with three children. She is a well-respected clinical nurse who has worked in the ED for the past 15 years. Helen developed back problems several years ago and was prescribed Lortab by her physician which she was initially prescribed to take prior to and after her spinal surgery. There is a notable history of addiction in Helen's family, but that question never came up since it was not a part of the admission assessment prior to the healthcare provider writing the prescription for the opiate pain medication.

Helen ran out of Lortab and started diverting unused PRN medication from her workplace. She was caught when the employer conducted a random audit and realized that, in her role administering PRN medications, she had been removing more PRN medications than any of the other nurses. The hospital put Helen out on a disability leave since she freely admitted that she was addicted to medication and agreed to get treatment.

**Please utilize the information provided in the module as well as the scenario to answer the following:**

1. What should Helen do immediately after going out on disability?
  - a. Resign from her position in the ED as soon as possible.
  - b. Call the 1-800 number for SPAN to request services.
  - c. Surrender her nursing license to the NYS PAP.
  - d. Get into a detox program near her home.
  
2. What regulatory agency or agencies should be notified in Helen's case scenario?
  - a. No agency needs to be notified since the nurse agreed to get treatment.
  - b. The NY State Police since the nurse was diverting drugs for her own use.
  - c. The Professional Assistance Program (PAP).
  - d. The Office of Professional Discipline (OPD).
  
3. What would be the advantage(s) for Helen to temporarily surrender her nursing license to the Professional Assistance Program? Helen would be:
  1. Granted immunity from professional misconduct charges related to being a habitual user.
  2. Guaranteed her nursing position back when she completes treatment.
  3. Provided with monitoring and structure for at least 2 years after returning to the workforce.
  4. Unlikely to relapse or return to drug use.
  - a. Both 1 and 2
  - b. Both 2 and 3
  - c. Both 1 and 3
  - d. All of the above.

Scenario #2:

Jeff is a 38 year-old nurse who has worked in the ICU for 12 years. His dad was an alcoholic and has been in recovery for several years. Jeff's wife died 6 years ago from her injuries after a motor vehicle accident. Following that tragedy, Jeff started to drink more and more to cope with his feelings of grief and loss. He began to isolate himself from his co-workers and was often irritable at work. When confronted by a friend and colleague about his self-destructive behavior, Jeff decided to contact SPAN.

After meeting with the Regional Coordinator, Jeff was enthusiastic about the peer support meetings but unsure about getting involved with PAP.

**Please utilize the information provided in the module as well as the scenario to answer the following:**

4. Would Jeff be a good candidate to apply for the Professional Assistance Program?
  - a. Yes, Jeff needs to surrender his nursing license and be monitored.
  - b. No, there is no evidence of professional misconduct.
  - c. No, Jeff is motivated to seek services to end his self-destructive behavior.
  - d. Yes, Jeff might benefit from being monitored.
  
5. Jeff has disclosed his increased drinking to his peers in the support group. Does the Regional Coordinator (RC) have a responsibility to inform Jeff's employer of his dependence on alcohol?
  - a. No, information shared in all aspects of the SPAN is confidential.
  - b. Yes, since Jess shared the information, the RC is obligated to discuss it with the employer.
  - c. Yes, Jeff could pose a danger to his patients and be a liability to his employer.
  - d. No, but Jeff should be pressured to share that information on his own.
  
6. Responsibilities of SPAN Regional Coordinators (RC) include all of the following except:
  - a. Providing educational presentations about addiction to nursing students and hospital staff.
  - b. Supervising peer support groups that occur weekly or bi-weekly in their region.
  - c. Accompanying nurses to meetings with state agencies such as the Office of Professional Discipline.
  - d. Providing legal advice to nurses in making decisions that impact their nursing license.
  
7. How many peer support groups are there currently in New York State?
  - a. None
  - b. 25
  - c. 50
  - d. 100
  
8. What kind of behavior should I report to my supervisor if I suspect a nurse colleague I work closely with may be impaired by alcohol or drug use? If I identify that:
  - a. The suspected nurse's work is not as good as it used to be.
  - b. Patients of the suspected nurse complain their pain is unrelieved.
  - c. The suspected nurse has numerous unexplained absences from the unit.

d. All of the above.

9. If I want to be a volunteer advocate for the SPAN program, what are the requirements?

1. Experience with group facilitation.
2. A valid NYS nursing license.
3. Eight hours of advocate activity each month.
4. Knowledge of addiction treatment.

- a. Both 1 and 4
- b. Both 2 and 4
- c. Both 2 and 3
- d. Both 3 and 4

10. How is the SPAN program funded?

- a. Each nurse is required to pay for individual services.
- b. There is no cost for the SPAN program.
- c. A surcharge is assessed during licensure registration.
- d. The State Education Department pays for the program.