

## Division 46

# Standards for Nurse Monitoring Program

### Statement of Purpose and Intent

#### 851-046-0000

- (1) The Oregon Board of Nursing recognizes that alcoholism and drug addiction are primary, progressive, chronic diseases.
- (2) The Board recognizes that problems resulting from the diseases of substance dependence or abuse, psychiatric or physical disorders may impair the nurse's ability to safely practice nursing.
- (3) The Board believes that nurses who develop these diseases can, with appropriate treatment, be assisted with recovery and return to the practice of nursing.
- (4) It is the intent of the Board that nurses who have the diseases of substance dependence/abuse and psychiatric or physical disorders be given the opportunity to seek treatment and return to or continue the practice of nursing in a manner which benefits the public health, safety and welfare, as well as benefits the nurse's recovery.
- (5) It is the intent of the Board to fully cooperate with employers of these nurses in order to facilitate the nurse's return to nursing practice. It is also the intent of the Board to closely monitor the nurse's ability to practice safely.
- (6) It is the intent of the Board that any nurse with no disciplinary action taken by the Board shall have the opportunity to enter the Nurse Monitoring Program regardless of the number of treatment programs the nurse has attended.
- (7) Any nurse with three or less disciplinary actions for substance dependence/abuse in Oregon or in any state is eligible for the Nurse Monitoring Program provided the nurse has not been previously enrolled in the program and discharged for non-compliance.
- (8) It is the intent of the Board that all information related to treatment for substance dependence/abuse, psychiatric, or physical disorders and monitoring of these nurses be kept confidential. The Board may disclose general information regarding the nurse's participation in treatment and in the Nurse Monitoring Program only to those in the employment setting who are in a position of direct or general supervision of the nurse and need to know to ensure adequate monitoring, with the consent of the nurse. Information regarding the nurse's participation in treatment and in the Nurse Monitoring Program may be disclosed only with the nurse's written consent. The Board expects the employer to protect the confidentiality of information supplied by the Board regarding participants in the Nurse Monitoring Program.
- (9) The Board of Nursing supports a voluntary Nurse Monitoring Program for nurses who would otherwise be charged with violating the Nurse Practice Act due to substance dependence/abuse, psychiatric or physical disorders.
- (10) It is the intent of the Board that any nurse with the disease of substance dependence/abuse, a psychiatric disorder or a physical disorder may have the opportunity to enter the voluntary Nurse Monitoring Program. The nurse will not have the opportunity to enter into the Nurse Monitoring Program if the nurse's circumstances disqualify him or her as outlined in OAR 851-046-0005.
- (11) The Nurse Monitoring Program is an alternative to formal disciplinary action against the nurse's license but is not a treatment program. The purpose of the Nurse Monitoring Program is to monitor the nurse's compliance with treatment and ability to safely practice nursing. Investigation for possible disciplinary action will be initiated when the nurse fails to comply with the requirements of the Nurse Monitoring Program.
- (12) Participation in the Nurse Monitoring Program does not shield the participant from formal disciplinary action not related to the participant's substance dependence/abuse, psychiatric disorder or physical disorder.

**Stat. Auth: ORS 678.112**

**Stats. Implemented: ORS 678.112**

## **Criteria Which Disqualify Nurses from Admission to or Continuation in the Nurse Monitoring Program**

### **851-046-0005**

- (1) Persons with criminal histories which involve injury or endangerment to others.
- (2) Persons diagnosed as requiring treatment because of sexual offenses/misconduct.
- (3) Persons previously enrolled in the Nurse Monitoring Program and referred to the Board for disciplinary action, including voluntary surrender of their nursing license due to noncompliance with the Nurse Monitoring Program. However, a person may be re-admitted for a condition other than the condition for which the person had previously been enrolled in the Nurse Monitoring Program.

**Stat. Auth: ORS 678.112**

**Stats. Implemented: ORS 678.112**

## **Definitions**

### **851-046-0010**

For the purpose of the rules in Division 46, the following definitions apply:

- (1) "Abstinence" means the avoidance of alcohol, mind-altering, or potentially addictive drugs.
- (2) "Approved Treatment Program" means an organized program that meets the Board's standards, in an inpatient, outpatient, or residential setting whose primary function is the evaluation and treatment of clients with substance dependence/abuse, psychiatric or physical disorders. The treatment program shall meet the following criteria:
  - (a) Employ staff qualified by education and experience to treat the client's disorder;
  - (b) Have a formalized plan of care which includes:
    - (A) Assessment and diagnosis;
    - (B) Treatment goals including establishing and evaluating treatment outcomes;
    - (C) Discharge criteria;
    - (D) Guidelines for continuing recovery; and
  - (c) Provide a written report addressing all parts of the plan of care.
- (3) "Body Fluid Testing" means the collection of blood, urine, or by other means utilized for the purpose of evaluating the presence of prescription or non-prescription drugs and alcohol. The collection and testing shall be performed by a preapproved laboratory, in a manner which preserves the integrity of the specimen.
- (4) "Confidentiality of Records" means that no information pertaining to the nurse's participation in the monitoring program is subject to discovery, subpoena, or public disclosure.
- (5) Confidentiality of records may be waived by a written release signed by the nurse on a Board of Nursing approved form. The signed release must specify what information and to whom the information will be disclosed. Treatment records shall not be redisclosed.
- (6) "Contract" means an individualized written agreement between the nurse and the Nurse Monitoring Program. The contract shall include the criteria for entrance and the terms and conditions for successful completion of the Nurse Monitoring Program.
- (7) "Intake Evaluation" means an assessment of the nurse's disorder by a qualified health care professional for the purpose of treatment recommendations and referral.
- (8) "Nurse Monitoring Program" means a program administered by the Board which allows nurses with substance dependence/abuse, psychiatric or physical disorders to voluntarily seek treatment and participate in monitored practice without formal disciplinary action by the Board for such substance dependence/abuse, psychiatric or physical disorder.
- (9) "Qualified Health Care Professional" means an individual who has specialized education/training to diagnose and treat the condition for which the nurse is seeking an assessment.
- (10) "Relapse" means the use of alcohol, mind altering, or potentially addictive drugs for non-therapeutic reasons after sobriety has been demonstrated.
- (11) "Relapse behavior" means a series of events that point towards a potential return to inappropriate use of substances. Examples include, but are not limited to, failure to follow the terms and conditions of the Nurse Monitoring Program contract; mood swings, unpredictability or changes in behavior in the employment setting; decreased participation

in recovery activities; and avoiding contact with treatment personnel or the Nurse Monitoring Program coordinator.

- (12) "Substance" means alcohol and other depressants, cannabis, cocaine and other stimulants, opiates, hallucinogens, inhalants and abusable gases, and over-the-counter drugs with a potential for abuse.
- (13) "Substance abuse" means a pattern of substance use leading to clinically significant impairment or distress as manifested by one or more of the following within a 12-month period:
- (a) Recurrent substance use resulting in failure to fulfill obligations at work, school or home;
  - (b) Recurrent substance use when such use is physically hazardous;
  - (c) Recurrent substance-related legal problems; or
  - (d) Continued substance use despite recurrent consequences socially or interpersonally.
- Substance abuse, if left untreated, may progress to substance dependence.
- (14) "Substance dependence" means a pattern of substance use leading to clinically significant impairment or distress as manifested by three or more of the following, occurring at any time in the same 12-month period:
- (a) Increased tolerance to the substance;
  - (b) Withdrawal symptoms when not using the substance;
  - (c) Increased use of the substance;
  - (d) Unsuccessful efforts to decrease or eliminate use;
  - (e) Increased time spent either obtaining the substance or recovering from its' effects;
  - (f) Decreased social, occupational or recreational activities because of substance use; or
  - (g) Continued use of substances despite evidence of physical or psychological harm or consequences.
- (15) "Substance Dependence/Abuse Specialist" means a health care professional who has specialized education in the evaluation and treatment of substance dependence/abuse and other addictive disorders. They may include, but are not limited to:
- (a) Certified alcohol and drug counselor;
  - (b) Nurse Practitioner;
  - (c) Physician;
  - (d) Psychologist.
- (16) "Support Group" means an organized meeting of individuals with similar disorders for the purpose of encouraging wellness and continued recovery.
- (17) "Voluntary Participation" means that the nurse requests admission to the Nurse Monitoring Program or agrees to enter the Nurse Monitoring Program upon identification of a substance abuse, substance dependence, psychiatric, or physical disorder.

**Stat. Auth: ORS 678.112**

**Stats. Implemented: ORS 678.112**

**Criteria for Admission and Completion of the Nurse Monitoring Program for Nurses with Substance Dependence and/or Substance Abuse  
851-046-0020**

- (1) A registered nurse or licensed practical nurse may seek admission to the Nurse Monitoring Program in one of the following ways:
- (a) By self-referral or admission to the addiction to alcohol or prescription drugs, the diversion and use of unauthorized drugs, or the abuse of other potentially addicting substances;
  - (b) By identification of substance dependence/abuse in conjunction with a complaint filed against the licensee;
  - (c) By referral from a family member, friend, nurse peer, or employer.
- (2) Upon identification of a problem of substance dependence/abuse, and the nurse's admission to the same, the nurse shall:
- (a) Obtain an intake evaluation from a substance dependence/abuse specialist;

- (b) Enter an approved treatment program specific for substance dependence/abuse.
- (3) The nurse shall enter into a contract with the Nurse Monitoring Program which shall include, but is not limited to:
- (a) Successful completion of an approved treatment program and continuing care or approved alternative for a period of one year;
  - (b) Continued abstinence from mind-altering or potentially addictive drugs, including both over-the-counter and prescription drugs;
  - (c) The Board may require an additional evaluation from a substance dependence/abuse specialist or other qualified health care professional if the nurse continues to use prescription drugs from a valid prescription to determine whether the prescribed drug is the treatment of choice for the nurse's condition, for a relapse, or if there is evidence of relapse behavior.
  - (d) Random body fluid testing. The Board may require that urine collection be witnessed;
  - (e) Attendance at support groups, e.g., 12-Step groups and nurse support groups;
  - (f) Notification of all his/her health care providers of the nature of the nurse's addiction;
  - (g) Agreement to cease nursing practice if necessary, and not return to practice until the Nurse Monitoring Program, in consultation with the substance dependence/abuse specialist, determines that the nurse is able to safely return to practice;
  - (h) Notification to the current employers and to a school of nursing, if applicable, of participation in the Nurse Monitoring Program and of any practice restrictions in the nurse's contract with the Nurse Monitoring Program;
  - (i) Disclosure to a prospective employer of participation in the Nurse Monitoring Program once a job offer has been made or to a school of nursing upon acceptance into the program;
  - (j) Notification to the Nurse Monitoring Program if the nurse is hospitalized or must undergo any surgical procedure;
  - (k) Notification to the Nurse Monitoring Program of relapse, use of prescribed drugs or use of over-the-counter drugs that may affect recovery (within 24 hours);
  - (l) Regular contact with the Nurse Monitoring Program;
  - (m) A signed release of information with treatment and aftercare providers or counselors so the Nurse Monitoring Program may receive and provide information;
  - (n) Notification to the Nurse Monitoring Program if the nurse applies for endorsement to any state;
  - (o) Notification to all states of current licensure of participation in the Nurse Monitoring Program;
  - (p) Disclosure of participation in the Nurse Monitoring Program when the nurse applies for licensure in any other state either by endorsement or renewal.
  - (q) Agreement that the nurse will cease practice for failure to comply with the terms and conditions of the contract pending further action by the Board or following the third relapse.
- (4) The Board shall enter into a separate contract with the nurse's employer to address conditions of the workplace, confidentiality of information, reporting requirements and other conditions necessary for the nurse to successfully complete his/her participation in the Nurse Monitoring Program. For a nurse who is enrolled in a nursing education program, the Board shall enter into a contract with the school of nursing to address conditions of clinical experience, confidentiality of information, reporting requirements and other conditions necessary for successful completion of the Nurse Monitoring Program. The contract shall address the following issues:
- (a) Access to narcotics;
  - (b) Level of supervision;
  - (c) Worksite and working conditions;
  - (d) Immediate notification to the Nurse Monitoring Program by the employer regarding any change in employment status, e.g., resignation, termination or change in

position/responsibility.

In addition to the contract, the Board will supply the employer or school of nursing with a summary of the nurse's history and reasons he/she is in the Nurse Monitoring Program to assist the employer or school of nursing in their supervision of the nurse.

- (5) The nurse is financially responsible for all costs of participation in the Nurse Monitoring Program, including the cost of random body fluid testing and the cost of treatment.
- (6) The length of time in the Nurse Monitoring Program shall be a minimum of five years with a yearly review of the content of the nurse's contract with the Nurse Monitoring Program. Of the five years, at least three years must include monitored nursing practice. Participation in a monitoring program in another state may be credited towards the five year period in Oregon.
- (7) Participants in the Nurse Monitoring Program and their records may be referred to an investigator for the Board for investigation and possible disciplinary action under the following conditions:
  - (a) Failure to comply with the terms and conditions of the contract;
  - (b) Failure to correct deficiencies in the nurse's recovery program which lead to relapse;
  - (c) The occurrence of a third relapse after receiving treatment specific for substance dependence/abuse.
- (8) Successful completion of the Nurse Monitoring Program is contingent on a minimum of five years participation, of which three years must be monitored nursing practice and compliance with all terms and conditions of the contract. If a nurse does not practice nursing during the five year period, participation in the Nurse Monitoring Program will resume upon entrance into a re-entry program and/or employment in nursing.
- (9) Relapse during the final year of participation in the Nurse Monitoring Program will extend the period of participation in the program for a minimum of an additional year.
- (10) Any exception to the minimum of five years of participation in the Nurse Monitoring Program shall be considered on an individual basis and may be granted by the Nurse Monitoring Program under one or more of the following conditions:
  - (a) The nurse has successfully completed a minimum of three years of monitored nursing practice;
  - (b) The public health, safety and welfare is not compromised by early release from the Nurse Monitoring Program.
- (11) A graduate of the Nurse Monitoring Program who has a relapse may be readmitted to the Nurse Monitoring Program for a minimum of one year. A nurse will be permitted a maximum of three admissions to the Nurse Monitoring Program.

**Stat. Auth: ORS 678.112**

**Stats. Implemented: ORS 678.112**

**Criteria for Admission and Completion of the Nurse Monitoring Program for Nurses with Physical Disabilities**

**851-046-0030**

- (1) A registered nurse or licensed practical nurse may seek admission to the Nurse Monitoring Program in one of the following ways:
  - (a) By self-referral or admission to a physical disorder which prevents the nurse from safely practicing nursing;
  - (b) By identification of a physical disorder which prevents safe practice in conjunction with a complaint filed against the licensee;
  - (c) By referral from a family member, friend, nurse peer, or employer.
- (2) Upon identification of a physical disorder which prevents safe practice, the nurse shall obtain an evaluation from a health care professional who is qualified to evaluate the nurse's physical disorder and make recommendations for treatment of the disorder.
- (3) The nurse shall enter into a contract with the Nurse Monitoring Program which shall include, but it is not limited to:
  - (a) Compliance with treatment recommendations including medication management;
  - (b) Agreement to cease nursing practice if necessary, and not return to practice until

the Nurse Monitoring Program, in consultation with the nurse's primary health care provider, determines that the nurse is able to safely return to the practice of nursing;

- (c) Random body fluid testing for compliance with medical management, if appropriate;
  - (d) Notification to the current employers or to a school of nursing, if applicable, of participation in the Nurse Monitoring Program and of any practice restrictions in the nurse's contract with the Nurse Monitoring Program;
  - (e) Disclosure to a prospective employer of participation in the Nurse Monitoring Program once a job offer has been made or to a school of nursing upon acceptance into the program.
  - (f) Regular contact with the Nurse Monitoring Program;
  - (g) A signed release of information with the primary health care provider or other health care professional so the Nurse Monitoring Program may receive and provide information;
  - (h) Notification to the Nurse Monitoring Program if the nurse applies for endorsement or renewal of licensure to any state;
  - (i) Disclosure of participation in the Nurse Monitoring Program when the nurse applies for licensure in any other state;
  - (j) Notification to all states of current licensure of participation in the Nurse Monitoring Program.
  - (k) Agreement that the nurse will cease practice for failure to comply with terms and conditions of the contract pending further action by the Board.
- (4) The Board shall enter into a separate contract with the nurse's employer to address conditions of the workplace, confidentiality of information, reporting requirements and other conditions necessary for the nurse to successfully complete his/her participation in the Nurse Monitoring Program. For a nurse who is enrolled in a nursing education program, the Board shall enter into a contract with the school of nursing to address conditions of clinical experience, confidentiality of information, reporting requirements and other conditions necessary for successful completion of the Nurse Monitoring Program. The contract shall address the following issues:
- (a) Level of supervision;
  - (b) Worksite and working conditions;
  - (c) Immediate notification to the Nurse Monitoring Program by the employer regarding any change in employment status, e.g., resignation, termination or change in position responsibility.

In addition to the contract, the Board will provide the employer or school of nursing a summary of the nurse's history and reasons for entrance into the Nurse Monitoring Program to assist in supervision of the nurse.;

- (5) The nurse is financially responsible for all costs of participating in the Nurse Monitoring Program, including the cost of random body fluid testing and treatment.
- (6) The length of time in the Nurse Monitoring Program shall be a minimum of five years, of which three years must be monitored nursing practice, with a yearly review of the content of the nurse's contract with the Nurse Monitoring Program.
- (7) Participants in the Nurse Monitoring Program and their records may be referred to an investigator for the Board for investigation and possible disciplinary action if the nurse fails to comply with the terms and conditions of the contract.
- (8) Successful completion of the Nurse Monitoring Program is contingent on a minimum of five years participation, three years of monitored nursing practice and compliance with all terms and conditions of the contract.
- (9) Any exception to the minimum of five years of participation in the Nurse Monitoring Program shall be considered on an individual basis and may be granted if the public health, safety and welfare is not compromised by early release from the Nurse Monitoring Program.

**Stat. Auth: ORS 678.112**

**Stats. Implemented: ORS 678.112**

**Criteria for Admission and Completion of the Nurse Monitoring Program for Nurses with Psychiatric Disorders**  
**851-046-0040**

- (1) A registered nurse or licensed practical nurse may seek admission to the Nurse Monitoring Program in one of the following ways:
  - (a) By self-referral or admission of a psychiatric disorder which prevents the nurse's ability to safely practice nursing;
  - (b) By identification of the psychiatric disorder in conjunction with a complaint filed against the licensee;
  - (c) By referral from a family member, friend, nurse peer, or employer.
- (2) Upon identification of a psychiatric disorder which prevents safe practice, the nurse shall:
  - (a) Obtain an evaluation from a health care professional qualified to evaluate psychiatric disorders and make treatment recommendations;
  - (b) Participate in a treatment program specific for the psychiatric disorder.
- (3) The nurse shall enter into a contract with the Nurse Monitoring Program which shall include, but is not limited to:
  - (a) Compliance with the treatment program recommendations, including medication management;
  - (b) Random body fluid testing for compliance with medication management, if appropriate;
  - (c) Agreement to cease nursing practice if necessary, and not return to practice until the Nurse Monitoring Program, in consultation with the nurse's mental health treatment provider, determines that the nurse is able to safely return to the practice of nursing;
  - (d) Notification to the current employer and to a school of nursing, if applicable, of participation in the Nurse Monitoring Program and of any practice restrictions in the nurse's contract with the Nurse Monitoring Program;
  - (e) Disclosure to a prospective employer of participation in the Nurse Monitoring Program once a job offer has been made or school of nursing upon acceptance into the program.
  - (f) Regular contact with the Nurse Monitoring Program;
  - (g) A signed release of information with the mental health treatment providers so the Nurse Monitoring Program may receive information upon request;
  - (h) Notification of the Nurse Monitoring Program if the nurse applies for endorsement or renewal of licensure to any state;
  - (i) Disclosure of participation in the Nurse Monitoring Program when the nurse applies for licensure in any other state;
  - (j) Notification of all states of current and past licensure of participation in the Nurse Monitoring Program.
  - (k) Agreement that the nurse will cease practice for failure to comply with the terms and conditions of the contract pending further action by the Board.
- (4) The Board shall enter into a separate contract with the nurse's employer to address conditions of the workplace, confidentiality of information, reporting requirements and other conditions necessary for the nurse to successfully complete his/her participation in the Nurse Monitoring Program. For a nurse who is enrolled in a nursing education program, the Board shall enter into a contract with the school of nursing to address conditions of clinical experience, confidentiality of information, reporting requirements and other conditions necessary for successful completion of the Nurse Monitoring Program. The contract shall address the following issues:
  - (a) Level of supervision;
  - (b) Worksite and working conditions;
  - (c) Immediate notification to the Nurse Monitoring Program by the employer regarding any change in employment status, e.g., resignation, termination or change in position responsibility.

In addition to the contract, the Board will provide the employer or school of nursing a

summary of the nurse's history and reasons for entrance into the Nurse Monitoring Program to assist in supervision of the nurse.

- (5) The nurse is financially responsible for all costs of participation in the Nurse Monitoring Program, including the costs of random body fluid testing and the cost of mental health treatment.
- (6) The length of time in the Nurse Monitoring Program shall be a minimum of five years, of which three years must be monitored nursing practice, with a yearly review of the content of the nurse's contract with the Nurse Monitoring Program.
- (7) Participants in the Nurse Monitoring Program and their records may be referred to an investigator for the Board for investigation and possible disciplinary action if the nurse fails to comply with the terms and conditions of the contract.
- (8) Successful completion of the Nurse Monitoring Program is contingent on a minimum of five years participation, three years of monitored nursing practice and compliance with all terms and conditions of the contract.
- (9) Any exception to the minimum of five years of participation in the Nurse Monitoring Program shall be considered on an individual basis and may be granted if the public health, safety and welfare is not compromised by early release from the Nurse Monitoring Program.

**Stat. Auth: ORS 678.112**

**Stats. Implemented: ORS 678.112**

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