What is the Recovering Nurse Program?

The Recovering Nurse Program (RNP) may be a confidential, voluntary alternative to formal disciplinary action for nurses whose practice may be impaired due to the habitual or regular use of drugs and/or alcohol. Nurses may also be ordered into the RNP for monitoring when there is disciplinary action.

Why was the Recovering Nurse Program established?

It is estimated that 10 to 14% of nurses are dependent on alcohol and/or mood altering drugs.

A nurse who habitually or regularly uses alcohol and/or other drugs presents a potential danger to his/her patients because the use of chemicals can impair the nurse’s ability to safely practice nursing.

How does the RNP work?

Refers nurses to community-based rehabilitation programs for evaluation and continued services.

Establishes statewide nurse recovery groups as the need develops. These groups provide on-going support and assistance in recovery issues specific to health care professionals.

Refers nurses with special needs to individual counseling.

Requires random drug screens.

Assists nurses in the development of a relationship with AA, NA, or other 12-step support groups.

Provides structure to ensure a safe work environment for the nurse in rehabilitation.

Maintains contact with employers of RNP participants.

Maintains privacy for the nurse while actively involved in the monitoring program. Treatment providers and employers are actively involved in the monitoring process.
The Objectives of the Recovering Nurse Program are:

1. Ensure the health, safety and welfare of the public through a program that closely monitors registered nurses chemically impaired or with physical or mental conditions.
2. Promote safe nursing care by preventing and/or restricting the practice of the chemically, physically and/or mentally impaired nurse.
3. Implement a plan for identification, referral to treatment facilities and monitoring of the chemically, physically and/or mentally impaired nurse.

What Services does the Recovering Nurse Program provide?

FOR THE PUBLIC:
Immediate intervention to protect the public, as an effective alternative to longer disciplinary process.
Confidential consultation with the concerned public, employers, co-workers, family members, friends and consumers of nursing care.
Assistance in preparing to talk to a registered nurse about an apparent problem.
Consultation with employers to assure a safe and smooth transition back to nursing practice for the nurse participant.
Ongoing monitoring of the chemically dependent nurse to ensure public safety.
Education of nurses, employers of nurses, and other pertinent groups about chemical dependency and the RNP.

FOR THE REGISTERED NURSE:
Consultation when considering entering the program.
Assessment and referral for appropriate detoxification and/or treatment.
Monitoring the registered nurse and referral to further treatment, as necessary.
Random body fluid testing.
Referrals to local support services.
Encouragement, support, and guidance to the registered nurse in recovery as an effective alternative to disciplinary action, and determination that the registered nurse is able to resume nursing practice.

Who is eligible for confidential alternative?
REGISTERED NURSES WHO:
Are licensed in LA or eligible to be licensed in LA.
Are mentally ill or abuse alcohol or drugs to the extent that their nursing practice may be affected, and,
Voluntarily agree to enter the program and provide consent for appropriate medical and psychiatric evaluations.
Have no prior disciplinary actions by this or another licensing Board.

Registered Nurses are INELIGIBLE for confidential alternative to disciplinary action if they have:
A criminal conviction or pending criminal charges.
Been previously disciplined by the Board.
Been terminated previously from this program, or any other diversion program, for non-compliance.
Sold drugs, or
Caused significant patient harm or death.

How is a nurse referred to the RNP?
A nurse who is believed to be practicing nursing while impaired should be referred the RNP. Referrals most often come from the Board of Nursing, employers, professional associations and organizations, co-workers, family and friends. Self-referrals occur least frequently, but the nurses who refer themselves have a much greater likelihood of successful recovery. Most important is early intervention. The earlier in the disease process that a nurse receives treatment, the greater the chance of success for the nurse, and the less likely it is that a patient will be harmed by an impaired practitioner.

What are some of the signs and symptoms of an impaired nurse?

A nurse whose practice may be impaired by chemical dependency might exhibit these signs:

Some signs of Alcohol Dependency are:
1. Excessive absenteeism or tardiness.
2. Irritability or mood swings; tendency to isolate
3. Elaborate excuses for behavior; unkempt appearance.
4. Blackouts (periods of temporary amnesia)
5. Impaired motor coordination, slurred speech, flushed face, bloodshot eyes.
6. Numerous injuries, burns, bruises, etc., with vague explanations.
7. Smell of alcohol on breath, or excessive use of mouthwash, mints, etc.
8. Job shrinkage, does minimum work necessary.

Some signs of Drug Dependency are:
1. Rapid mood and/or performance changes.
2. Wears long sleeves at all times.
3. Frequent absence from unit, frequent use of restroom.
4. Excessive overtime, usually arriving early and staying late.
5. Increased somatic complaints with an increase in pain medication prescriptions.
6. Consistently signs out greater amounts of controlled drugs than anyone else; excessive drug wastage.
7. Often mediates others’ patients.
8. Patients complain that pain medication is inadequate or deny receiving it.

Please contact us if you:
- Want to refer a nurse.
- Have any questions about our program.
- Would like more information.
- Would like for us to present an educational program for your facility, organization or school of nursing.

225-755-7546

Recovering Nurse Program