Knowledge and Behaviors Related to Willingness to Report an Impaired Nurse

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Abstract

Nurses work in an environment that is both physically and emotionally stressful. They have one of the highest rates of abuse with drugs or alcohol accounting for approximately 10%-15% of the nursing workforce (Thomas & Siela, 2011). Impairment manifests as performance and behavioral symptoms due to a pattern of substance abuse resulting in the inability to provide patient care or practice according to accepted standards; thus it is a growing threat to patient safety and to the health of the impaired nurse (Baldisseri, 2007 & ANA, 2015). Peers or coworkers may not be aware of the profile of substance abuse and may not recognize or know when to report, or feel comfortable reporting a coworker suspected of substance use to their manager or supervisor. This study evaluated an educational intervention based on the impaired nurse profile.

Purpose

- To assess the nurses' understanding of the substance abuse nurse profile;
- To determine if nurses are willing to inform nurse management when they suspect a nurse is impaired while providing patient care; and
- To determine if the perceptions and attitudes held by nurses toward nursing impairment are correlated with knowledge and willingness to report.

These aims were evaluated by pre- and post-tests and surveys.

Research Questions

RQ1 - Is there a significant difference in direct care nurses' knowledge about the impaired nurse profile before and after receiving a nurse-led educational intervention?

RQ2 – Is there a significant difference in non-direct care nurses' knowledge about the impaired nurse profile before and after receiving a nurse-led educational intervention?

RQ3 –Is there a significant difference in direct care nurses' willingness to report an impaired nurse before and after receiving a nurse-led educational intervention on impaired nurse profile?

RQ4 -Is there a significant difference in non-direct care nurses' willingness to report an impaired nurse before and after receiving a nurse-led educational intervention on impaired nurse profile?

RQ5-Is there a relationship between knowledge related to impaired nurse profile and willingness to report an impaired nurse?

Research Design

This research implemented a quantitative, quasi-experimental, cross-sectional pre-test/post-test design, with two groups comparing knowledge and willingness to report of two nursing groups following a nurse-led educational intervention. Direct care nurses and non-direct care nurses (approximately 70 participants) were asked to complete a pre-test and an anonymous survey utilizing the Perceptions of Nurse Impairment Inventory (PNII) tool distributed via Survey Monkey,® view a 12 minute YouTube video developed by the National Council for State Boards of Nursing (NCSBN), and complete a post-test and survey using the same tools. Participation was completely voluntary and no personal identifying information was collected. The surveys were available to participants for a four-week period. Upon completion of the enrollment period, 35 nurses (50%) completed the surveys.

Study Variables

Nurse-led educational intervention (independent variable)

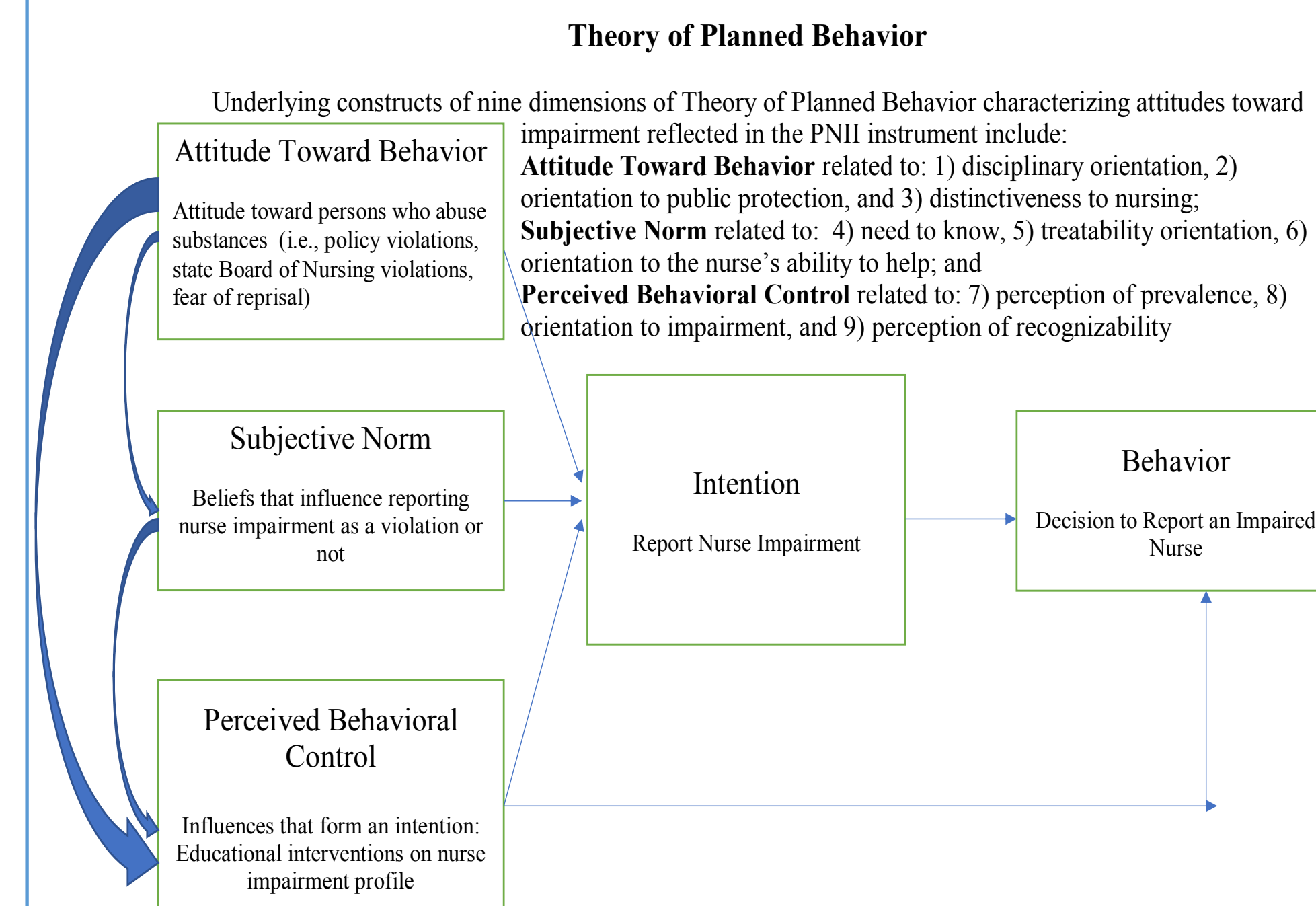Knowledge of nurse impairment profile (dependent variable)

Willingness to report nurse impairment (dependent variable)

Operational Considerations

Knowledge and Willingness: determine if knowledge gained from educational intervention influenced willingness to report an impaired nurse

Perceptions and Attitudes: evaluate nurses' understanding and beliefs about peers who abuse substances based on nursing impairment through participants' scores on PNII tool

Theoretical Model

Theory of Planned Behavior

Survey Tools

Demographic Survey:
- Male/Female
- Age range
- Nursing role (Direct Care or Non-Direct Care)
- Marital status
- Education level
- Years experience as a nurse

Intervention*:
- Commercially prepared Substance Use Disorder video by National Council State Boards of Nursing (NCSBN).

*Verbal permission to use video and test questions obtained

Knowledge pre-test and post-test:
- Researcher-designed from content presented in the NCSBN commercially-prepared YouTube video.
- Consists of a 14 pre-test questions and a 14 post-test questions.

Perceptions of Nurse Impairment Inventory (PNII)**:
- Multidimensional 31 item instrument using 4-point Likert format (strongly agree, agree, disagree, strongly disagree).
- Measures nurses' behaviors toward reporting an impaired nurse and is based on a research study by Hendrix, et. al. (Hendrix, Sabritt, McDaniel and Field, 1987).

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Sample Demographics

Socio-Demographic Data	How Recorded	Combined Nurses (n=54) N	Percent
Gender	Female	53	75.7%
	Male	1	1.4%
Age	Age	Mean: 44.49 years	
		Range: 47 years	
	22-39	20 participants	
	40-54	21 participants	
	55-69	12 participants	
Ethnicity	African American	6	11.1 %
	Caucasian	37	68.5 %
	Asian	7	13.0%
	Hispanic	1	1.9%
	Other	3	5.6%
Education Level	Associate (ADN)	9	16.7%
	Baccalaureate (BSN)	31	57.4%
	Masters (MSN)	11	20.4%
	Doctorate/PhD	1	1.9%
	Other	2	3.7%
Experience as an RN	Years	Mean: 18.83 years	

RQ1 and RQ2: Difference in Knowledge After Educational Intervention

	Mean Difference	Std. Deviation	Std. Error Mean	t	df	Sig. (2-tailed)
Knowledge (Post-test minus Pre-test Score)	-2.34286	-1.98439	.33542	-6.985	34	.000

The difference in *Knowledge of the Impaired Nurse Profile* after receiving the educational intervention was statistically significant (*p*=.000) using a paired *t*-test.

RQ3 and RQ4: Difference in Willingness to Report After Educational Intervention

Ability to Recognize Impaired Nurse by Behavior	Value	df	Significance (2-sided)	Exact Sig. (2-sided)
Pearson's Chi-Square	5.411	1	.020	
Fisher's Exact Test				.038
Linear-by-Linear Association	5.256	1	.022	
N of Valid Cases	35			

The difference in *Ability to Recognize an Impaired Nurse* after receiving the educational Intervention was statistically significant (*p*=.038) using a Chi-Square test.

Responsibility to Help Impaired Nurse Receive Assistance	Value	df	Significance (2-sided)	Exact Sig. (2-sided)
Pearson's Chi-Square	6.585	1	.010	
Fisher's Exact Test				.026
Linear-by-Linear Association	6.391	1	.011	
N of Valid Cases	34			

The difference in *Responsibility to Help an Impaired Nurse Receive Assistance* after the educational intervention was statistically significant (p=.026) using a Chi-Square test.

RQ5: Relationship Between Knowledge and Willingness to Report an Impaired Nurse

Association	Test	Sig.	Decision
Ability to Recognize and Responsibility to Seek Help	Related Samples Contingency Coefficient	.628	Reject the Null Hypothesis

The *Ability to Recognize an Impaired Nurse* is positively associated with *Responsibility to Help an Impaired Nurse Receive Assistance* (p=.628).

Limitations

Participation was limited to only one hospital within a 12 hospital healthcare system.

The convenience sample was small (70 participants started the survey; 35 completed the survey). Survey completion was longer than expected which may have contributed to a high dropout rate.

The 101 item questionnaire did not include a specific question that addressed willingness to report an impaired nurse; inferences were based on specific "proxy" items from the Perceptions of Nurse Impairment Inventory (PNII).

Data was obtained using self- report , which may have reflected bias due to the small sample size and individual attitudes, perceptions and values on substance use impairment.

Social norms and the organization's culture of safety, and core values expected of its employees, leadership and managers may have influenced the actual self- reported behaviors.

Implications

Nurses are not immune to substance use and need to know the signs of nurse impairment. This research study highlighted the need for more education and research regarding substance use among nurses and the nurse impairment profile.

Raising awareness regarding the problem of nurse impairment, and the responsibility of nurses to take appropriate action, will have a positive impact on individual nurses and the nursing profession.

Nurses' attitudes towards substance use and impaired nursing practice vary. Recognizing the profile and behavioral characteristics is key to influencing the intention of reporting.

Perceptions toward nurse impairment and willingness to report a peer is more critical today than in the past. Further research is needed to identify proactive solutions, guidance and educational interventions to combat this ever-increasing problem within the nursing profession.