

**Update to Comparison of NCSBN Guidelines for Alternative Programs and Discipline Monitoring Programs and the Texas Peer Assistance Program for Nurses (TPAPN) Policies**

**Summary:**

Staff requests the Board review the documents provided.

**History:**

In 2009 the NCSBN Board of Directors charged the Chemical Dependency Committee to review existing guidelines for alternative programs and management of chemically dependent nurses. Michael Van Doren, Program Director of TPAPN, was a member of this committee.

The committee was asked to make revisions and recommendations based on state of the art practice. The committee brought together leading experts from all areas of substance use, treatment programs and alternative programs. The product developed expands the existing recommendations and provides readers with practical and evidence-based guidelines for evaluating, treating, and managing nurses with substance use disorders. At their December 2010 meeting the Board of Directors approved the final publication of this committee, *Substance Use Disorders in Nursing: A Resource Manual and Guidelines for Alternative and Disciplinary Monitoring Programs*. These were provided to the Board at the January 2011 Board meeting.

Texas Board of Nursing reviewed a comparison of TPAPN policies to the SUDS Guidelines in April of 2011 with a follow up verbal report in July 2011. The goal is to conform to evidence based national standards.

TPAPN staff have made additional changes to achieve compliance. Some items will require additional funding to achieve. Recommendations will be brought back to the Board at a future meeting.

Attachment A contains a table of changes that have been made to the Participant Handbook and the Forms Handbook to conform to the new standards.

Attachment B contains the remaining items for which TPAPN is not in compliance. Some of these items will require additional funding and may be included in the Board's Strategic Plan and Legislative Appropriations Request.

**Recommendation:**

Board discussion and input is requested. No action is requested at this time.

Important Changes made to TPAPN Handbook and Forms as  
of 9/1/11

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Notice of Important Participant Handbook & Forms  
Changes  
Effective as of 9/1/11

TPAPN has recently revised its Participant Handbook and Forms Handbook. Many of these changes reflect TPAPN's desire to meet as many of the recommended guidelines for alternative programs as possible that the National Council of State Boards of Nursing recently issued (<https://www.ncsbn.org/2106.htm>).

TPAPN Advocates need to know about these changes in order to assist their participants and others satisfactorily (see tables that follow, 7 pages total).

Both of the 2011 handbooks are available on the TPAPN website to view or download ([www.tpapn.org/](http://www.tpapn.org/)). If you have questions or concerns regarding these changes please contact Mike Van Doren, program director, at 1-800-288-5528 x 106 or by email: [mvandoren@texasnurses.org](mailto:mvandoren@texasnurses.org).

Thank you for your time, patience, understanding and assistance in this regard!

*TPAPN Advocates = Nursing Excellence!*

**2011 CHANGES TO THE TPAPN PARTICIPANT HANDBOOK**

<i>ITEM or STATEMENT</i>	<i>PAGE No.; SECTION</i>	<i>RATIONALE</i>
<i>1. "Participant has the right to seek legal counsel or a personal representative."</i>	<i>PARTICIPANT HANDBOOK; p. 4, <u>Rights and Responsibilities:</u> Participant has the right to:</i>	<i>Per NCSBN Guideline. Makes explicit what TPAPN had always assumed.</i>
<i>2. "Informing one's employer or school of nursing of participation in TPAPN and providing them a copy of the signed participation agreement and if applicable, any final order from the Texas Board of Nursing."</i>	<i>PARTICIPANT HANDBOOK; p. 4, <u>Rights and Responsibilities:</u> Participant has responsibilities to: Assume personal responsibility for one's participation and recovery by:</i>	<i>Per NCSBN Guideline. To help ensure those with a legitimate need to know are informed about these important matters.</i>
<i>3. "Participants are responsible for maintaining communication with TPAPN case manager ."</i>	<i>PARTICIPANT HANDBOOK; p. 5, <u>Sect. 1, Participant Communication</u></i>	<i>Per NCSBN Guideline. Makes explicit the time-frame in which participants must communicate critical</i>

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<i>. . including notifying the TPAPN office within 24 hours of: . . ."</i>		status changes to TPAPN
4. <i>"Participants must abide by recommendations in the event of a relapse or suspected relapse as deemed clinically appropriate."</i>	PARTICIPANT HANDBOOK; p. 6, <u>Sect. 2, Assessment and Treatment</u>	Per NCSBN Guideline. Makes explicit the need for additional evaluation and adherence to evaluator's recommendations - in the event of a relapse
5. <i>"Routine medication management is required at least quarterly."</i>	PARTICIPANT HANDBOOK; p. 6, <u>Sect 4, Self-Help Group Attendance</u>	Per TPAPN's need to ensure medication compliance

**2011 CHANGES TO THE TPAPN PARTICIPANT HANDBOOK**

ITEM or STATEMENT	PAGE No.; SECTION	RATIONALE
6. <i>"Psychiatric progress report is required quarterly and within a month prior to completion of TPAPN."</i>	PARTICIPANT HANDBOOK; p. 6, <u>Sect. 4, Self-Help Group Attendance</u>	Per TPAPN's need to ensure ongoing psychiatric care and evaluation
7. <i>"Positions must be approved by TPAPN Case Manager . . . , and return to work agreements are to be signed prior to commencement of nursing practice."</i>	PARTICIPANT HANDBOOK; p. 7, <u>Sect. 5, Returning to Work</u>	Per TPAPN's need to ensure participants are informed not to commence work in nursing prior to TPAPN's approval and our receipt of a signed return to work agreement
8. <i>"Nurses participating in TPAPN are required to identify a nurse supervisor (manager) and at least two additional nurses who will serve as workplace monitors. A workplace monitor is a nurse who: a) has a nursing</i>	PARTICIPANT HANDBOOK; p. 7, <u>Sect. 5, Returning to Work</u>	Per TPAPN's need to ensure that worksite monitors are defined for the sake of clarity

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<p><i>license in good standing . . . f) Exceptions are only made by the TPAPN Case Manager."</i></p>		
<p><i>9. "Unreported use of abusible medications or failure to disclose prescriptions within 24 hours from the time they are obtained is considered behavior inconsistent with good recovery and may result in . . . , or a renewal of the participation agreement."</i></p>	<p>PARTICIPANT HANDBOOK; p. 9, <u>Sect. 7, Abusable Drugs</u></p>	<p>Per NCSBN guideline, makes explicit the time limit for notifying TPAPN</p>
<p><i>10. "TPAPN participants are restricted from returning to nursing practice while using this medication and for approximately eight (8) weeks following discontinuation of medication."</i></p>	<p>PARTICIPANT HANDBOOK; p. 10, <u>Sect. 7 Abusable Drugs - Abusable Substance List</u></p>	<p>Per TPAPN's need to clarify the time that nurses are likely to be restricted from returning to work after their discontinuing their use of prescribed Suboxone</p>

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**2011 CHANGES TO THE TPAPN PARTICIPANT HANDBOOK**

ITEM or STATEMENT	PAGE No.; SECTION	RATIONALE
11. <i>"Participants must provide random specimens for drug tests as requested by the TPAPN office or the drug testing automated system including but not limited to urine, blood, hair, nail, and saliva."</i>	PARTICIPANT HANDBOOK; p. 11, <u>Sect. 8 Drug Screens</u>	Per TPAPN's need to ensure all manner of drug testing that may be required are listed
12. <i>"Failure to have a COC form while working, maintain an active drug test account, or provide specimens for drug testing on dates requested, may result in . . . or dismissal from TPAPN."</i>	PARTICIPANT HANDBOOK; p. 11, <u>Sect. 8, Drug Screens</u>	Per TPAPN's need to add maintaining an active drug test account as part of compliance - otherwise unable to test participants with appropriate test panels when needed
13. <i>"NOTE: Invalid, rejected, or adulterated specimens may result in additional drug testing and may affect continued participation."</i>	PARTICIPANT HANDBOOK; p. 11, <u>Sect. 8, Drug Screens</u>	Per TPAPN's need to elucidate additional conditions that may impact negatively upon nurses' drug test compliance and participation
14. <i>"Failure to obtain and sustain employment in nursing prior to the participation agreement end date."</i>	PARTICIPANT HANDBOOK; p. 12, <u>Sect. 10, Withdrawal and Dismissal from Program</u>	Per TPAPN's need to clarify criteria for program completion and the importance of re-entry to practice
15. <i>"Nurse Managers and/or peer review committees should ensure that they have met their mandatory report requirements per Sec. 301.402 . . . Nurse Practice Act."</i>	PARTICIPANT HANDBOOK; p. 17, <u>Employer Guide Working with the TPAPN Nurse - At a Glance</u>	Per NCSBN, attempt to inform those who have not reported the nurse as 3 <sup>rd</sup> party referral to do so

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<p>16. "If any signs of impairment or inappropriate behavior occur, request a drug screen 'for reasonable cause', suspend nurse from practice . . . for possible signs of relapse, i.e., return to use of alcohol or drug . . . or active psychiatric disorder."</p>	<p>PARTICIPANT HANDBOOK; p. 18, <u>Employer Guide: "After Return to Work"</u></p>	<p>Per TPAPN's need to help raise employers' awareness of relapse, i.e., exacerbation of the disease be it SUD or psychiatric disorder</p>
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**2011 CHANGES TO THE TPAPN PARTICIPANT HANDBOOK**

ITEM or STATEMENT	PAGE No.; SECTION	RATIONALE
17. "Possible Signs of Substance Use Disorders and/or Psychiatric Disorders."	p. 24, PARTICIPANT HANDBOOK; <u>Attachment D</u>	New item per TPAPN's desire to inform employers of signs of SUDs/Psych' D/Os & possible relapse

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**2011 CHANGES TO THE TPAPN PARTICIPANT FORMS HANDBOOK**

| ITEM or STATEMENT                                                                                                                                                    | PAGE No.; SECTION                                                                                    | RATIONALE                                                                                                                                                            |
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| 1. "These are your master forms. Please make copies as needed. If you need more forms, please access our website <a href="http://www.tpapn.org">www.tpapn.org</a> ." | PARTICIPANT FORMS HANDBOOK; <u>Table of Contents</u>                                                 | TPAPN's need to inform participants that if they use up the forms in their handbook, they can also download forms @ <a href="http://www.tpapn.org">www.tpapn.org</a> |
| 2. Read Before Signing the Participation Agreement - Abstinance Statement                                                                                            | p. 3, PARTICIPANT FORMS HANDBOOK; <u>Abstinance Statement</u>                                        | Was formerly an insert from TPAPN, now it is part of the handbook to help emphasize its importance                                                                   |
| 3. "I have read, understand and agree to adhere to the guidelines set forth within the "TPAPN Participant Handbook."                                                 | p. 4, PARTICIPANT FORMS HANDBOOK; p 1, 2 <sup>nd</sup> bullet, <u>TPAPN PARTICIPATION AGREEMENT</u>  | This all encompassing statement clearly stipulates what participants are agreeing to in toto                                                                         |
| 4. "I agree to refrain from nursing practice until I receive TPAPN's approval to practice."                                                                          | p. 4, PARTICIPANT FORMS HANDBOOK; p. 1, 4 <sup>th</sup> bullet, <u>TPAPN PARTICIPATION AGREEMENT</u> | NCSBN's guideline, to ensure that nurses refrain from practice until cleared by both an appropriate health care provider and the program                             |
| 5. #9. "Participants must secure and complete appropriate treatment . . . may be required to obtain assessment                                                       | p. 4, PARTICIPANT FORMS HANDBOOK; p. 1, #9, TPAPN PARTICIPATION AGREEMENT                            | TPAPN's need to stipulate that it may require assessment and/or treatment by specific individuals                                                                    |

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| <p>and treatment from TPAPN's participating assessors and treatment providers."</p>                                                                                           |                                                                                          | <p>or programs who have met criteria established by TPAPN</p>                                                                                             |
| <p>6. #13. "Before commencing nursing practice, participants must have a WORK RELEASE FORM from their healthcare providers . . . that includes restrictions on practice."</p> | <p>p. 5, PARTICIPANT FORMS HANDBOOK; p. 2, #13, <u>TPAPN PARTICIPATION AGREEMENT</u></p> | <p>TPAPN's need to make explicit the expectations for return to work in the participation agreement as well as in the return to work agreement itself</p> |

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**2011 CHANGES TO THE TPAPN PARTICIPANT FORMS HANDBOOK**

| ITEM or STATEMENT                                                                                                                                                            | PAGE No.; SECTION                                                                                  | RATIONALE                                                                                                                                                                                   |
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| 7. #18. Participants are responsible for maintaining communication . . . which may include appearing in person for any requested TPAPN appointment, given reasonable notice. | p. 5, PARTICIPANT FORMS HANDBOOK; p. 2, #18, <u>TPAPN PARTICIPATION AGREEMENT</u>                  | TPAPN's need to be able to have face-to-face meeting w/participants in cases where a legitimate need arises                                                                                 |
| 8. WITNESS STATEMENT<br><i>"I affirm I am Participant's TPAPN Advocate or a registered or licensed vocational nurse of Texas . . . that she or he signed the Agreement."</i> | p. 5, PARTICIPANT FORMS HANDBOOK; p. 2, (WITNESS STATEMENT ), <u>TPAPN PARTICIPATION AGREEMENT</u> | Per NCSBN guideline - however, because of difficulties experienced with this requirement <u>Advocates will not need to witness</u> & TPAPN will strike-out this section for the time being. |
| 9. Under #14<br><i>"Current health insurance coverage? . . ."</i>                                                                                                            | p. 6, PARTICIPANT FORMS HANDBOOK; p. 1, Under #14, <u>TPAPN PARTICIPANT HISTORY</u>                | To help identify nurses less likely to have financial concerns with treatment                                                                                                               |
| 10. #15 <i>"Do you have any present/outstanding financial problems? . . ."</i>                                                                                               | p. 6, PARTICIPANT FORMS HANDBOOK; p. 1, #15 of <u>TPAPN PARTICIPANT HISTORY</u>                    | To help identify nurses with likely financial concerns                                                                                                                                      |
| 11. #20 <i>"If you previously participated in TPAPN or other state alternative or licensing board program, . . ."</i>                                                        | p. 6, PARTICIPANT FORMS HANDBOOK; p. 1, #20, <u>TPAPN PARTICIPANT HISTORY</u>                      | NCSBN guideline to help ensure that nurses are identified who have participated in other states' peer programs                                                                              |
| 12. INSTRUCTIONS<br><i>"Submit monthly until returning to work in nursing; once working in nursing, submit . . ."</i>                                                        | p. 18, PARTICIPANT FORMS HANDBOOK; p. 1, INSTRUCTIONS, <u>TPAPN PARTICIPANT'S SELF -REPORT</u>     | Reflects TPAPN's change in requirements for turning in self-reports                                                                                                                         |
| 13. #2 <i>"During my</i>                                                                                                                                                     | p. 18, PARTICIPANT                                                                                 | NCSBN guideline to                                                                                                                                                                          |

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| <p><i>participation I agree to use one pharmacy only for all prescription medications as follows: . . ."</i></p> | <p>FORMS HANDBOOK ; p. 1, #2 of <u>TPAPN PARTICIPANT'S SELF - REPORT</u></p>                   | <p>help ensure that SUD participants ID/limit pharmacy - as a sound recovery practice</p>                       |
| <p>14. #4 "<i>During my participation I agree to use the following dentist only:</i>"</p>                        | <p>p. 18, PARTICIPANT FORMS HANDBOOK; p. 1, #4, <u>TPAPN PARTICIPANT'S SELF - REPORT</u></p>   | <p>NCSBN guideline to help ensure that SUD participants limit dentists - as sound recovery practice</p>         |
| <p>15. #4 "<i>Briefly describe your current treatment/relapse prevention plan:</i>"</p>                          | <p>p. 19, PARTICIPANT FORMS HANDBOOK; p. 2, #4 of <u>TPAPN PARTICIPANT'S SELF - REPORT</u></p> | <p>NCSBN guideline to help ensure SUD participants are cognizant of treatment &amp; relapse prevention need</p> |

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| ITEM or STATEMENT                                                                                                                                                                                                 | PAGE No.; SECTION                                                                                                                                              | RATIONALE                                                                                                                                                     |
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| 16. FOR PSYCHIATRIC AND DUAL DIAGNOSIS, #3 <i>"Has your psychiatrist sent a treatment progress report and prescription update..."</i>                                                                             | p. 19, PARTICIPANT FORMS HANDBOOK; p. 2, #3, <u>TPAPN PARTICIPANT'S SELF - REPORT</u>                                                                          | Per TPAPN's need to ensure participants send in ongoing psychiatric treatment and Rx updates                                                                  |
| 17. FOR PSYCHIATRIC AND DUAL DIAGNOSIS, #6 <i>"Has therapist sent a treatment update to TPAPN since . . ."</i>                                                                                                    | p. 19, PARTICIPANT FORMS HANDBOOK; p. 2, #6, <u>TPAPN PARTICIPANT'S SELF - REPORT</u>                                                                          | Per TPAPN's need to ensure participants send in ongoing therapy updates                                                                                       |
| 18. RETURN TO WORK - IMPORTANT POINTS <i>"TPAPN requires workplace monitors"</i>                                                                                                                                  | p. 26, PARTICIPANT FORMS HANDBOOK; 2 <sup>ND</sup> major bullet point to <u>RETURN TO WORK - IMPORTANT POINTS</u> (cover page of the return to work agreement) | TPAPN/NCSBN guideline to ensure monitors are prominently identified and defined                                                                               |
| 19. RETURN TO WORK - IMPORTANT POINTS - Note: <i>"Nurse Managers and/or peer review committees should ensure that they have met any prior mandatory report requirements related to this nurse per Sec. . . ."</i> | p. 26, PARTICIPANT FORMS HANDBOOK; <u>Note at bottom of cover page</u> to the return to work agreement                                                         | Per NCSBN, attempt to inform those who have not reported the nurse under State NPA as 3 <sup>rd</sup> party referral to do so                                 |
| 20. TPAPN RETURN TO WORK AGREEMENT: TERMS AND CONDITIONS OF EMPLOYMENT <i>"A nurse (other than an APRN) . . . who does not return to work in nursing by the end of their second year of</i>                       | p. 28, PARTICIPANT FORMS HANDBOOK, p. 2, Item #1.3, 3 <sup>rd</sup> sentence of the <u>RETURN TO WORK AGREEMENT</u>                                            | TPAPN's requirement for program completion and places an expectation upon participants to reduce the likelihood of them remaining in TPAPN without attempting |

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| <p><i>participation will be considered noncompliant...</i></p>                                                                                                                                                        |                                                                                     | <p>to practice</p>                                                               |
| <p>21. TPAPN RETURN TO WORK AGREEMENT: TERMS AND CONDITIONS OF EMPLOYMENT<br/> <i>"APRNs who do not return to work in their specialty area by the end of their third year . . . will be reported to the BON."</i></p> | <p>p. 28, PARTICIPANT FORMS HANDBOOK; p. 2, Item #1.5, RETURN TO WORK AGREEMENT</p> | <p>TPAPN requirement stated as an explicit part of RETURN TO WORK AGREEMENT.</p> |

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| ITEM or STATEMENT                                                                                                                                                                                                                                                | PAGE No.; SECTION                                                                                                                                              | RATIONALE                                                                                                                                                                                            |
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| <p>22. TPAPN RETURN TO WORK AGREEMENT: CONSENT FOR DISCLOSURE OF INFORMATION<br/><i>"Nurse agrees to disclose information about his/her participation in TPAPN to immediate coworkers who have a legitimate need to know."</i></p>                               | <p>p. 30, PARTICIPANT FORMS HANDBOOK; p. 4, Item #6.3, <u>RETURN TO WORK AGREEMENT</u></p>                                                                     | <p>Per TPAPN's need to ensure coworkers, such as house supervisors or those responsible for staffing/scheduling, are informed of nurse's participation and of all relevant practice restrictions</p> |
| <p>23. Addendum to TPAPN Return to Work Agreement For Student Enrollment in Nursing Academic Programs<br/><i>"Nurse and NAPRs agree to inform TPAPN of Nurse's ongoing academic pass/fail status by the end of each academic semester or quarter. . . ."</i></p> | <p>p. 40, PARTICIPANT FORMS HANDBOOK; p. 4, Item #6, <u>Addendum to TPAPN Return to Work Agreement For Student Enrollment in Nursing Academic Programs</u></p> | <p>Per NCSBN guideline to ensure participants are progressing satisfactorily through their academic clinical practice</p>                                                                            |

**Attachment B**

Agenda Item # 7.1.4

Prepared by: Katherine Thomas and Michael Van Doren  
Board Meeting Date: January 19 - 20, 2012

Update Provided by TPAPN

TPAPN lacks compliance with the following items (the first three items are the least critical in the program's view):

1. Obtaining admission from nurses that they have violated the NPA and any violation of the contract is a further violation of the NPA and grounds for referral to BON.
2. That the contract include: If any single part or parts of the contract is violated the remaining parts remain valid and operative.
3. Causing nurses to inactivate their license until approved to return to work. TPAPN now has wording in the participation agreement that they must refrain from practice until approved by TPAPN.
4. Permitting nurses discharged from the program (referred to BON) to continue being monitoring by the program .
5. Disclosure of participation to BON of self-referrals (nurses for whom the program has not received 3<sup>rd</sup>-party referrals).
6. Length of participation of minimum 3-5 years. APRNs are now required to complete 3 years whereas RNs and LVNs are required to complete only 2 years.
7. Facilitated support groups. TPAPN does have advocates and they are still attempting to engage treatment providers to assist in this endeavor.
8. Pain management/medication assisted treatment track. They are beginning to talk with associates of Texas Star Recovery and Restore Fx to develop a central resource for alternative pain management assessment/care should that become a requirement.
9. Approval of programs to provide treatment services for participants.