

# STUDENT DRUG TESTING IN NURSING EDUCATION

VALERIE T. COTTER, DRNP, CRNP, FAANP\* AND  
MARY ELLEN SMITH GLASGOW, PhD, RN, ACNS-BC†

Nursing faculty and administrators have a responsibility to keep abreast of current research, legal regulations, and professional standards that affect students in the classroom and clinical setting. The purpose of this article is to examine whether empirical research supports the current trend of mandatory drug testing, provide a synopsis of current practice, and discuss the legal and ethical implications for nursing faculty. (Index words: Substance abuse; Nursing education; Drug testing) *J Prof Nurs 28:186–189, 2012. © 2012 Elsevier Inc. All rights reserved.*

**M**ANDATORY DRUG TESTING for students is now required in many schools of nursing across the United States either during the admissions process or prior to entering clinical rotations in health care facilities. This has occurred because of increasing state and federal regulations and professional standards, concern for the welfare of the nursing community, and protection of the public (American Association of Colleges of Nursing [AACN], 1996; Burns, Frank-Stromberg, Teytelman, & Herren, 2004; The State of Texas, 2009). Increasingly, the potential liability from an injury or accident involving an impaired nursing student poses a financial risk to the university (Griffin, Keller, & Cohn, 2001). This article examines whether empirical research (a) supports this trend, (b) provides a synopsis of current practice, and (c) discusses the legal and ethical implications for nursing faculty.

## Review of the Literature

According to the most recent National Survey on Drug Use and Health, an estimated 20.4 million Americans or 8.3% of the population aged 12 years or more were current (past month) illicit drug users (Substance Abuse & Mental Health Services Administration [SAMHSA], 2006). Although the prevalence of illicit drug use has declined among 8th–12th graders (National Institute on

Drug Abuse, National Institutes of Health, & U.S. Dept of Health & Human Services, 2010), the rates were highest for young adults aged 18 to 25 years (19.8%) than for youths aged 12 to 17 years (9.8%) and adults 26 years or older (6.1%; SAMHSA, 2006). The rate among full-time college students (19.2%) was lower than among other persons aged 18 to 22 years, which includes part-time college students, students in other grades, and non-students (22.6%); current illicit drug use among college students and other 18- to 22-year-olds did not change between 2005 and 2006 (SAMHSA, 2006). Of the current illicit drug users 18 years or older in 2006, 13.4 million (74.9%) were employed either full- or part-time (SAMHSA, 2006).

The prevalence of substance abuse in the nurse population is believed to be similar to that of the general population (Dunn, 2005); however, nurses' easy access to narcotics and other psychoactive substances in the workplace is known to increase risk (Johnson Talbert, 2009; Trinkoff, Storr, & Wall, 1999; Trinkoff, Zou, Storr, & Soeken, 2000). Substance abuse among nursing students has not been well studied but suggests that experimentation and frequent use of drugs and alcohol occurs during the college experience (Ahmadi, Maharlooy, & Alishahi, 2004; Coleman et al., 1997; Kornegay, Bugle, Jackson, & Rives, 2004). Kornegay et al. (2004) found that 50% (163) of the faculty in this survey study had been in a situation when they encountered a student who exhibited characteristics that strongly suggested a chemical dependency. Another survey found rates of lifetime use by nursing students ranged from 5.9% for cocaine and sedative hypnotics to 39.2% for opiates, but monthly use frequencies ranged from 0% for sedative hypnotics to 5.9% for stimulants (Kenna & Wood, 2004). Wiater, Davies, Mengel and Jasinski (2006) found that the incidence of substance abuse reported among student

\*Advanced Senior Lecturer, University of Pennsylvania School of Nursing, Claire Fagin Hall, Philadelphia, PA.

†Associate Dean for Undergraduate Programs, MSN Programs & Continuing Nursing Education, Drexel University College of Nursing & Health Professions, Philadelphia, PA.

Address correspondence to Dr. Cotter: University of Pennsylvania School of Nursing, Claire Fagin Hall, 418 Curie Blvd, Philadelphia, PA 19104. E-mail: cottervt@nursing.upenn.edu  
8755-7223/11/\$ - see front matter

RN anesthetists was 3.75%, as compared with 0.0048% reported by program directors.

Substance abuse is a problem that nursing faculty encounter with students (Buckner, 2002; Kornegay et al., 2004; Spier et al., 2000). Clear guidelines that protect patients, the student, the faculty, and the school are warranted (Griffin et al., 2001). In 1996, the AACN recommended that schools of nursing adopt a written, comprehensive, and equitable substance abuse policy for students, faculty, and staff (1996). In 2001, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) required hospitals and other health facilities (home health care agencies, rehabilitation and hospice care facilities, and nursing homes) to identify and monitor substance abuse by health care professionals, including students involved in patient care (Kenna & Wood, 2004). The JCAHO standards have required nursing programs to comply and be responsible for enforcement of drug testing prior to clinical placements. Many nursing programs with established student drug testing policy have it clearly posted on their Web sites.

The American Nurses Association (1994) supports drug screening for health care workers in situations when there is reason to believe drugs or alcohol is affecting work performance, however not as a random procedure or general policy. Presently, there is little evidence of the effectiveness of university- or school-based random drug testing in the scientific literature (American Academy of Pediatrics (AAP), 2007; Spier et al., 2000; Yamaguchi, Johnston, & O'Malley, 2003). Some argue that learning to recognize the common behavioral symptoms of drug and alcohol use is a more effective detection method than random drug testing (AAP, 2007; Kern et al., 2006). Table 1 details the common physiological and behavioral signs of drug use.

### Legal/Ethical Implications

State legal protections for the safety of the public can be in conflict with the nursing student's fundamental right to privacy under the Fourth amendment of the United States Constitution, notably informational privacy or the dissemination of personal information (Drake & Fedde, 2001). When courts consider a plaintiff's interests in

keeping information private against a defendant's interest in obtaining the information, they typically look at "1) what kind of information is being requested; 2) how harmful it would be if the information were subsequently and nonconsensually disclosed; 3) whether the defendant has effective mechanisms in place to prevent such disclosures; 4) the degree of defendant's need for the information; and 5) whether an express statutory mandate, articulated public policy, or other recognizable public interest warrants access" (Drake & Fedde, 2001). Drug testing is not considered medical testing under the Americans with Disability Act (ADA); thus, the ADA's requirements about confidentiality of medical records do not apply to drug tests (Drake & Fedde, 2001). Although students can exercise their right to privacy by refusing to be tested, they could be dismissed if university or school policy is in effect, in the same way that employers can terminate an employee who refuses to be tested or the National Collegiate Athletic Association (NCAA) can prevent a student athlete from participating in intercollegiate athletics if they fail to sign the drug-testing consent form each academic year, which subjects each athlete to periodic, unannounced random testing as required by university policy or NCAA rules (NCAA, 2010).

The duty to report nursing students who are believed to be impaired by chemical dependency varies by nursing program, university policy, and individual state nurse practice acts. For example, Texas is one of the few states that require the nursing educational program to file a written report that includes the identity of the student to the state board of nursing when a nursing student is suspected of being impaired by chemical dependency (The State of Texas, 2009, p. 48). In most states, the state board of nursing is only involved with licensed nurses who are reported and agree to voluntary drug and alcohol screening and evaluation associated with a voluntary treatment program.

For nursing faculty who assume responsibility for students, there is a duty to supervise and safeguard the health and safety of a patient. Analyzed through the doctrine of the affirmative duty to protect another's safety, faculty must call attention to substance abuse

**Table 1.** Signs of Drug Use

| Physiological                                 | Behavioral  |
|---|---|
| Slurred or erratic speech                     | Problems with performance, decreased participation, or falling grades |
| Pupillary constriction or dilation            | Unprepared or poorly prepared for class/clinical                      |
| Red, watery eyes                              | Absent, missing or tardy to class/clinical                            |
| Tremors, shaky                                | Sleeping during class   |
| Tachycardia                                   | Elaborate excuses for behavior  |
| Red nose, rhinorrhea, or sniffing             | Anger, hostility, or aggressiveness                                   |
| Excessive talkativeness or hyperactivity      | Mood swings and irritability  |
| Flushed or pale face                          | Manipulative or dishonest   |
| Smell of substance on breath, body or clothes | Change in dress or appearance   |
| Unsteady, ataxic gait                         | Trouble concentrating, short attention span                           |
| Malaise                                       | Frequently leaving the clinical area                                  |

Note. Adapted from Kornegay et al. (2004) and Monroe (2009).

Download English Version:

<https://daneshyari.com/en/article/2667594>

Download Persian Version:

<https://daneshyari.com/article/2667594>

[Daneshyari.com](https://daneshyari.com)