

A Peer Health and Self-Care Module for University Nursing Programs

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Introduction: More health professions' academic programs in the United States are integrating education on alcohol and other drugs, including screening and brief intervention, into their curricula. This presents an opportunity to educate future health professionals on self-care, peer health, and how to intervene when a colleague exhibits signs or symptoms of a condition that could lead to unsafe practice.

Background

- More than 2/3 of participants in a nursing peer health assistance program in Colorado reported that their substance use or mental health problem could have been recognized earlier. The most common barriers to seeking assistance were fear of losing one's license and embarrassment.¹
- Nurses in the U.S. may be at higher risk than the general population for depression.^{2,3}
- Nurses in the U.S. have a similar risk for a substance use disorder as the general population.⁴
- Risk factors for substance use disorders that *are* more common among health professionals:
 - Stressful work environments, including long hours and caring for very ill patients
 - Access to prescription medications at work
 - A culture of drinking as a way to socialize
- Signs that a nurse may be experiencing a problem:
 - Absenteeism
 - “Presenteeism” (working while ill or otherwise unable to fulfill responsibilities)
 - Changes in mood
 - Inconsistent work quality
 - Unexplained changes in work patterns
 - Relationship problems at work
- Peer Assistance Services, Inc. has more than 30 years of experience providing case management to Colorado health professionals receiving “alternative to discipline” services.

Compassion Fatigue:
*Physical, emotional and spiritual depletion associated with caring for patients in significant emotional pain and physical distress.*⁵

*Nurses must be vigilant to protect the patient, the public, and the profession from potential harm when a colleague's practice, in any setting, appears to be impaired.*⁶

- American Nurses Association

Peer Health and Self-Care Online Learning Module Developed for the University of Colorado College of Nursing

1. Compassion fatigue and self-care
2. Risk factors for substance use disorders and mental illness that are more common among health professionals
3. Signs that professional practice may be compromised
4. Ethical responsibility to intervene
5. How to intervene with a colleague and provide help
6. Overview of Peer Health Assistance Programs

Videos:

- True story of a nurse with a substance use disorder
- Difficult conversation between two nurses

*The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.*⁶
- American Nurses Association

Self-Care Plan

What do you want your life to look like (physically, mentally, spiritually, love relationships, financially) when you are 60? 70? Be as specific as you can.

What kinds of **behaviors, actions** and **responsibilities** will be necessary to support your future desired outcomes?

What might you have to give up?
What don't you want to give up?

Are there specific things in your life, relationships, or work that would need to change to bring about the desired outcomes?
What are they?

What are the obstacles keeping you from changing those things?
How can you effectively address those?

What are you currently doing for yourself that you feel is “on-track?”
What is missing?

Is what you are doing addressing **the important or the urgent** within your life?
Should you make a change?

Name **one thing** you can do starting **tomorrow** that would represent you taking a step in the right direction when it comes to your self-care.

References

1. Alexa Cares, Elizabeth Pace, Jean Denious, and Lori A. Crane. Substance Use and Mental Illness Among Nurses: Workplace Warning Signs and Barriers to Seeking Assistance. Substance Abuse. 2015; 36(1): 59-66.
2. Welsh D. Issues Ment Health Nurs 2009; 30(5):320-6.
3. Letvak, S., Ruhm, C. J., McCoy, T. (2012). Depression in Hospital Employed Nurses. Clinical Nurse Specialist, 26(3), 177-82.
4. National Council of State Boards of Nursing, Inc. Substance Use Disorder in Nursing: A resource Manual and Guidelines for Alternative and Disciplinary Programs. 2011
5. Figley, C.R. (1995). *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*. New York: Brunner-Mazel.
6. American Nurses Association. *Code of Ethics for Nurses with Interpretive Statements*. 2015.

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