

Substance Use Disorder Toolkit for Graduate Health Professional Students

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Objectives

- ❑ Describe current research and existing programs addressing alcohol and drug use among students enrolled into institutions of higher learning.
- ❑ Identify gaps in the current Rosalind Franklin University (RFUMS) drug and alcohol policy and contrast those policies with existing evidence regarding substance use disorder (SUD)
- ❑ Outline a structured approach to implementing a Substance Use Disorder Toolkit to institutions of higher learning.

Background

- ❑ At approximately 12 % of physicians and 15% of Certified Registered Nurse Anesthetist will abuse substances at some point in their career.
(Flaherty & Richman, 1993, Valdez, 2014).
- ❑ Healthcare professionals (HCPs) with SUD are a particular group that may present with workplace impairment and a decreased capacity to deliver safe, high-quality care to their patients.
- ❑ Health profession students have an increased risk of substance misuse and drug abuse due to high stress associated with their training and their close proximity to narcotics during clinical rotations.

Current Research and Programs on Alcohol and Drug Use in Higher Education

- Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery
- Association of Recovery in Higher Education
- Transforming Youth Recovery



Transforming Youth Recovery



Higher Education Center
for Alcohol and Drug Misuse Prevention and Recovery

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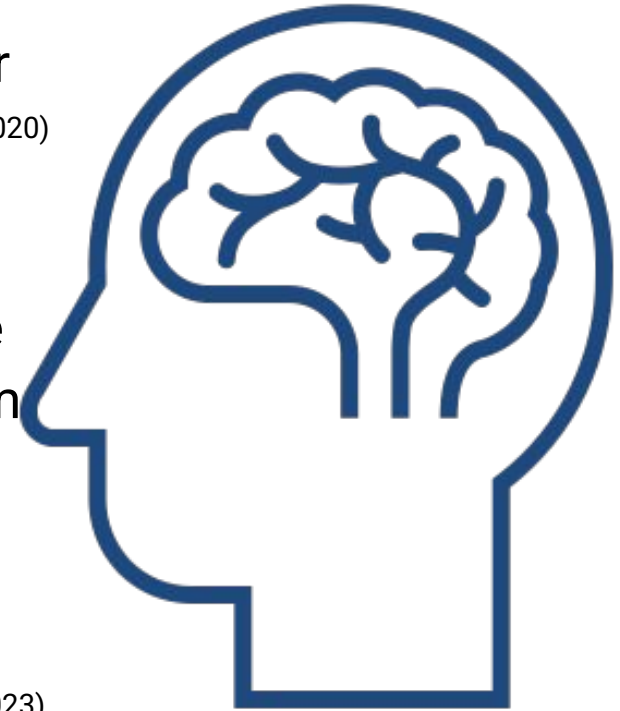
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SUD and Professional Healthcare Workers

- Professional doctoral students report higher levels of stress and substance use. (Allen et al., 2020)
- Social, self, and structural stigma each have a negative impact on people recovering from opioid use disorder. (Judd et al., 2023)
- 70% of anesthesiologists considered their hospitals' drug control policies fair or poor. (Fitzsimmons et al., 2023)



Obstacles to Addressing SUD

- ❑ Limited literature available that provides information about the onset of substance abuse in a person's career, whether it occurs during the clinical education phase or clinical practice.



Federal and State Regulations



Stigmatization

- ❑ RFUMS drug and alcohol policy exhibits notable gaps that necessitate improvement and clarification- specifically in addressing substance use and its adjacent issues.



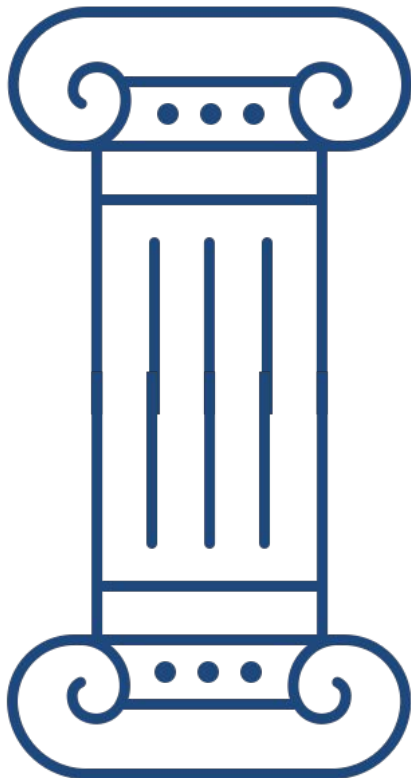
Insufficient education surrounding topic



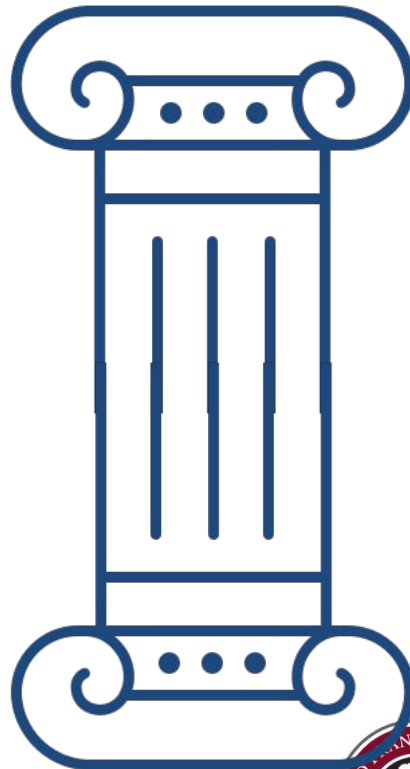
Ambiguity amongst policy and books specific to colleges (i.e. college of nursing differs from medical college and college of health professions)

4 Pillar Framework for Addressing Substance Use Disorder

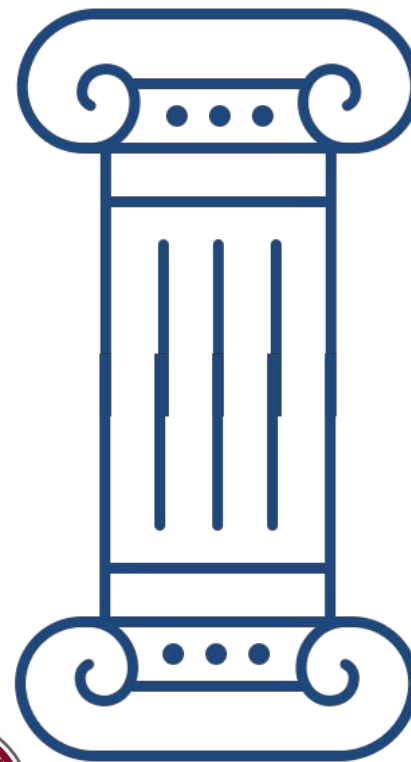
Education



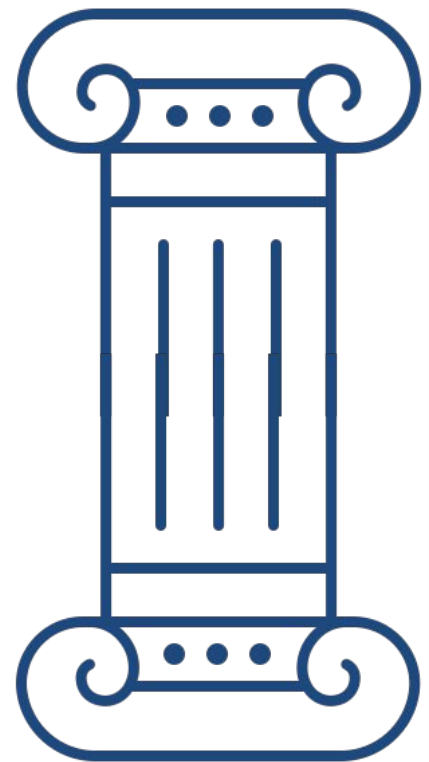
Early
Identification



Intervention



Reentry



Project Aims

Aim 1: Establish a comprehensive understanding of the RFUMS Drugs and Alcohol Policy to address organizational needs.

Aim 2: Understand the federal and state procedures, laws, and regulations that affect the university's management of drug use among students and staff.

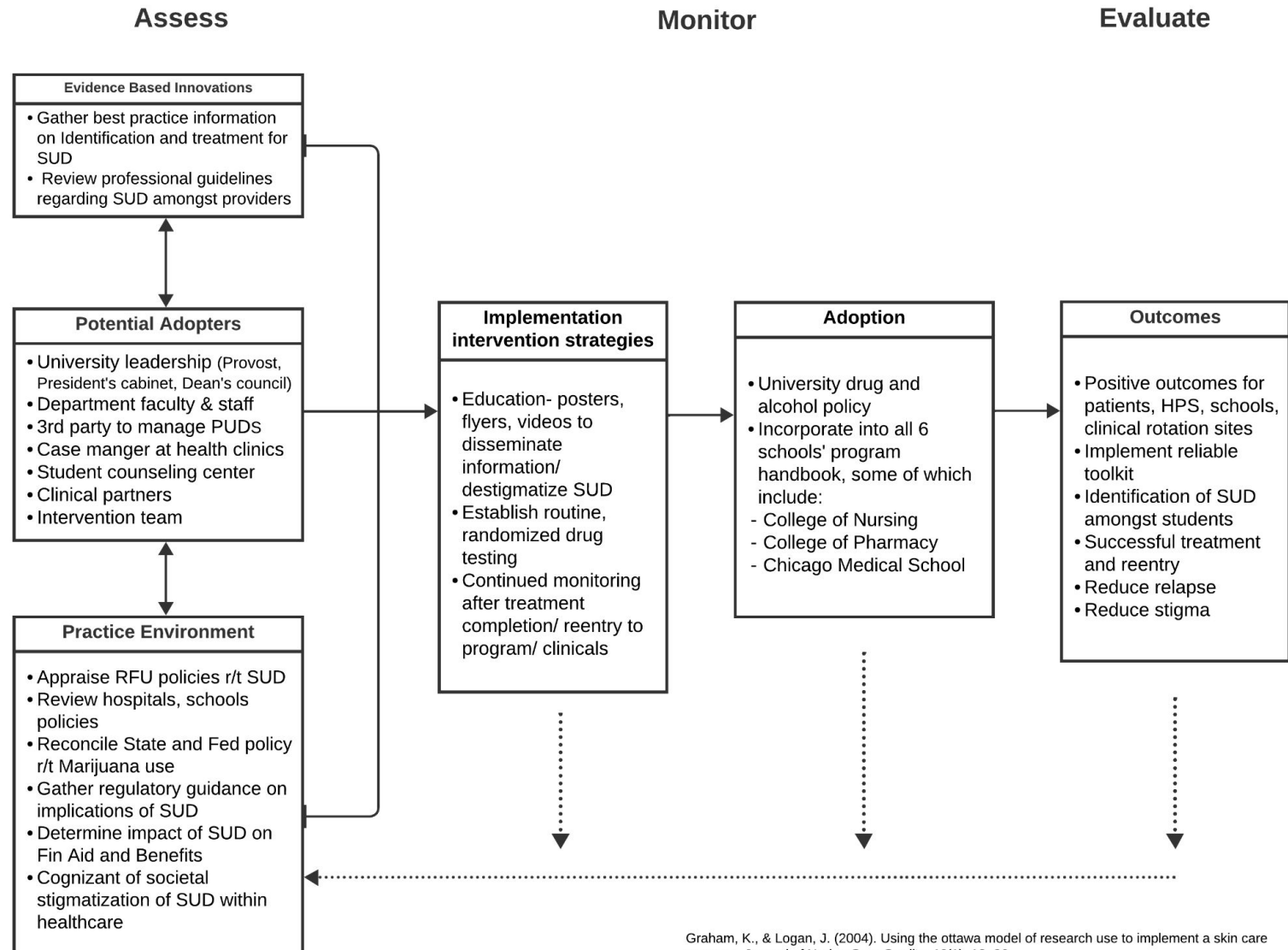
Aim 3: Identify and engage key stakeholders to understand their contributions and gain buy-in for implementing the SUD toolkit.

Aim 4: Analyze collected data on university policies and procedures and compare findings with existing literature.

Aim 5: Recommend Enhancements to RFUMS Drug and Alcohol policy by integrating a comprehensive SUD Toolkit.



Ottawa Model for Evidence Based Change



Graham, K., & Logan, J. (2004). Using the ottawa model of research use to implement a skin care program. *Journal of Nursing Care Quality*, 19(1), 18–26.
<https://doi.org/10.1097/00001786-200401000-00006>

Aim 1: Establish a comprehensive understanding of the RFUMS Drugs and Alcohol Policy to address organizational needs.



Organizational Needs Assessment

Review University Handbook

Thorough assessment of policy, focusing on mention of available resources, drug testing protocols, disciplinary actions, and reentry procedures.

Analyze College-Specific Handbooks

Examined handbooks through Insite access, and by directly contacting deans, program directors, and associate professors.

Comprehensive Data Table

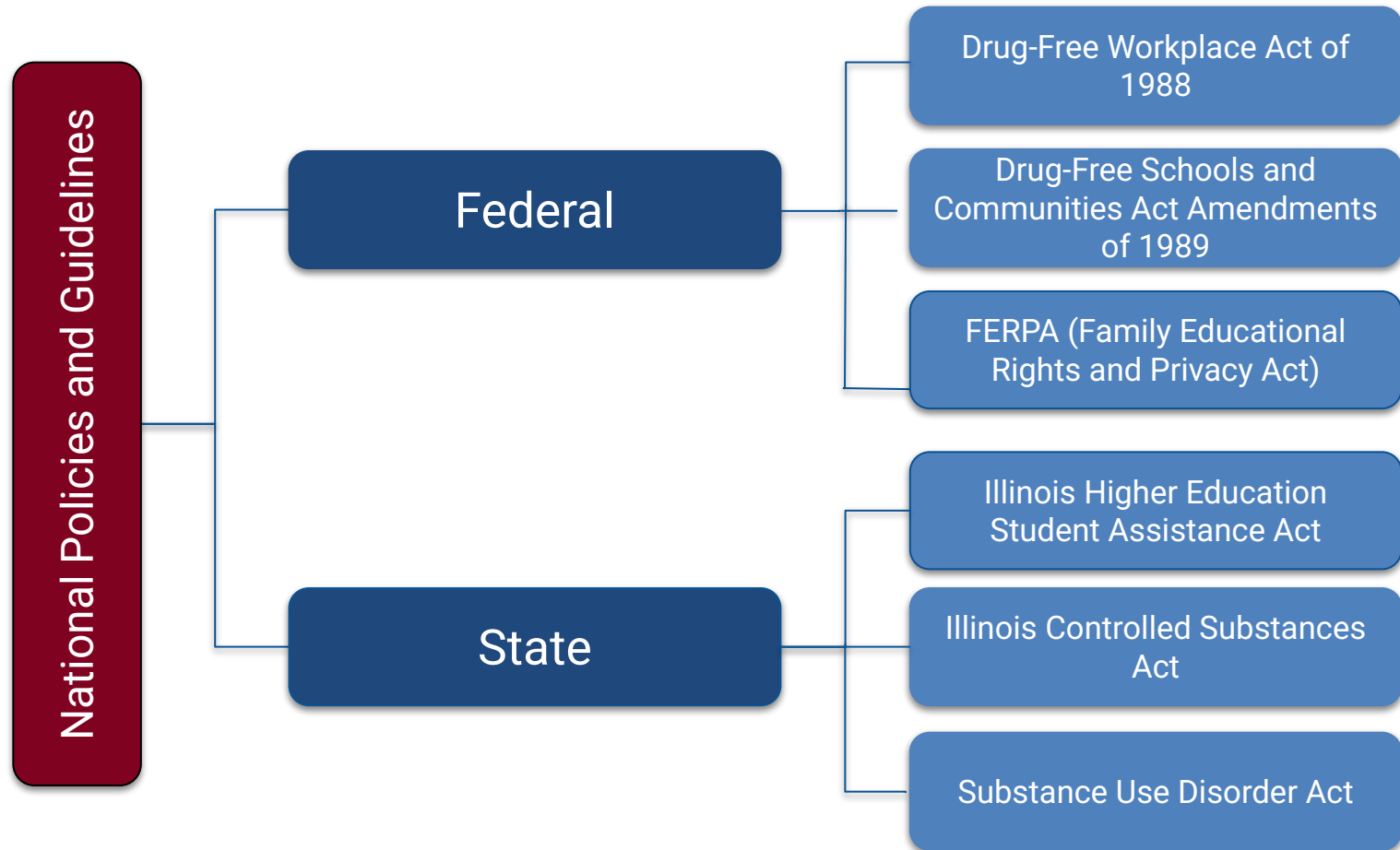
Analysis of college-specific SUD education, policies, and management, including data on education, drug testing, and reentry.



Aim 2: Understand the federal and state procedures, laws, and regulations that affect the university's management of drug use among students and staff.



Federal & State Laws and Regulations

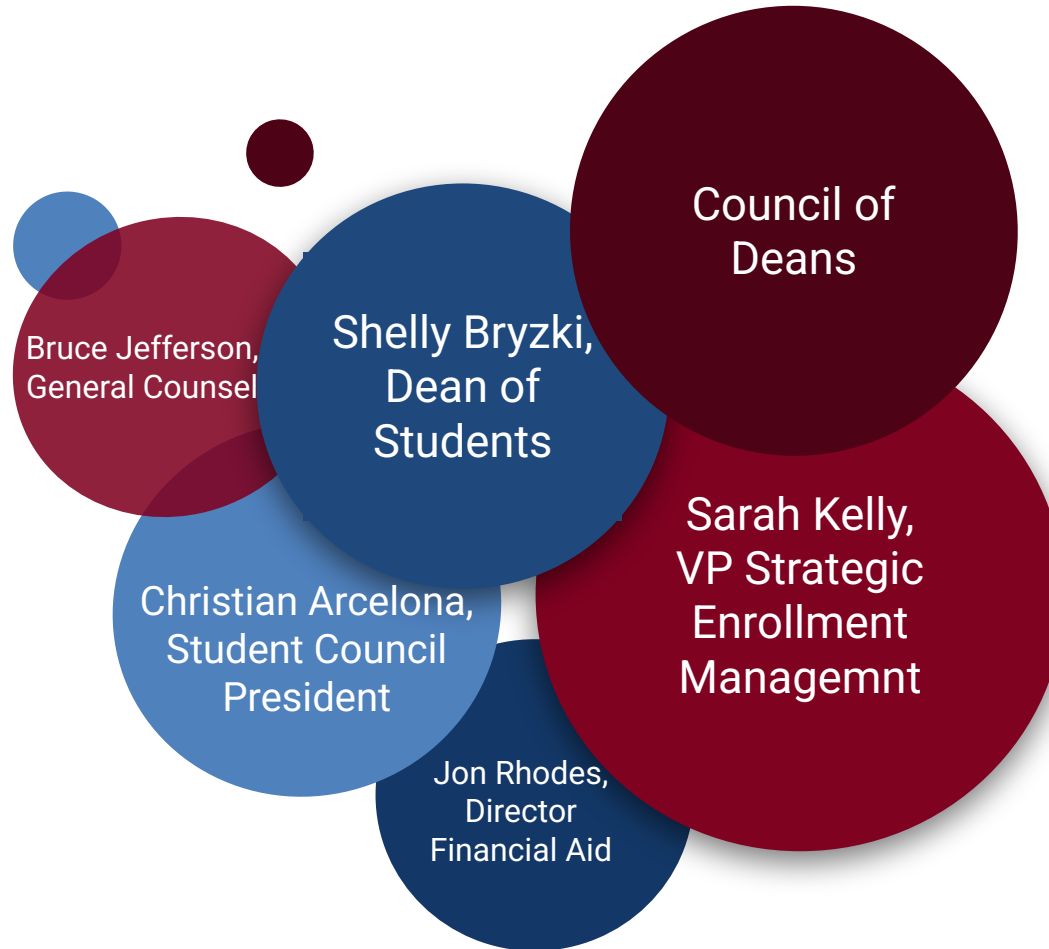


Aim 3: Identify and engage key stakeholders to understand their contributions and gain buy-in for implementing the SUD toolkit.



Stakeholder Group Meetings

Meetings held between January 2024- June 2027



(Rosalind Franklin University of Medicine and Science, 2024)



(Rosalind Franklin University of Medicine and Science, 2024)



Results

Stakeholder Meetings

- ❑ University resources supports students who undergo substance use rehabilitation
- ❑ Some Program/Colleges have created a separate drug and alcohol policy different from RFUMS policy
- ❑ Could randomized drug screens serve as a barrier for student enrollment ?
- ❑ Financial Aid is unaware of student-positive drug screens or the purpose of students taking leave of absence
- ❑ All Colleges showed interest in participating in educational modules
- ❑ Discuss barriers
- ❑ Ideas for implementation
- ❑ Suggestion for SUD Toolkit contents

Aim 4: Analyze collected data on university policies and procedures and compare findings with existing literature.



Overview of SUD Education at RFUMS

College	Program	Education on SUD in curriculum	SUD in Program level Student Handbook	Recommendations
CON	NA	Art Zwierling modules hours, webinar	Y	Standardize SUD education and destigmatization university wide to ensure all students receive the same level of evidence based information (orientation, online modules, ect.)
	PMH	3 credit course - NPMH 783: Assessment, Diagnosis, Management of Addictive Disorders	Y	
	MENP	NNEP 509 - Mental Health, lecture on substance abuse disorders and a simulation of alcohol withdrawal.	N	
CMS	MD	<ul style="list-style-type: none"> <u>Phase I</u>: Lectures and workshops on opioid pharmacology, safe prescribing, and SUD. Forum on Physician Impairment. Optional SUD scholarly assignment. <u>Phase II</u>: Patient encounters, Neurobiology and Neuroanatomy of SUD review, and online opioid training. <u>Phase III</u>: SP tele-simulation on opioid prescribing and addressing opioid use disorder. 	No. Defer to RFUMS student handbook	
COP	PharmD	<ul style="list-style-type: none"> SUD education and training longitudinally through the curriculum but with increasing assessment/simulation in P2-P3 years. Pharmacotherapy and Professional Development course lectures/cases (5 hours) Skills Lab lectures (2 hours) Skills Lab workshops (3 hours), Simulation (2 hours) More advanced training offered in electives (Mental Health, Toxicology) 	Y	
POD	DPM		N	
CHP	PTA			
	DPT		N	
	PA	<ul style="list-style-type: none"> 10 hours of lecture content and activities provided in didactic phase (General Medicine and Infectious Disease course, Clinical Decision-Making course cases, Pharmacotherapy course) During clinical phase, students complete 24 hours of SUD and MAT Training 	N	
	BMS	N	NA	
SGPS	MS			
	PhD	N	No. Defer to RFUMS Student Handbook.	

Drug Testing Amongst Colleges at RFUMS

College	Program	State reporting requirement	Drug test at Matriculation	Recurring drug testing interval	Recommendations
CON	NA	Y	Y	Yearly	Implementation of randomized drug screenings to function as a barrier to substance use and abuse
	PMH	Y	Prior to entering the program and before clinicals	Yearly	
	MENP	N	Y	Per clinical site	
CMS	MD	N	Y (all M1 students go to the FHCC as part of the Clinical Foundations of Medicine course and this is an FHCC requirement.)	UDS is required prior to M3 and M4 year. Additional testing per University Policy and clinical site	
COP	PharmD	N	Y; and prior to start of each year	Yearly	
POD	DPM	N	Y	N	
CHP	PTA	N	N	Per clinical site	
	DPT	N	N	Per clinical site	
	PA	N	N	Per clinical site	
	BMS		N	NA	
	MS	N	N	N	
SGPS	PhD	N	N	N	

RFU Data Comparison With Existing Literature

SUD Education:

Research: High stress and substance use among professional students suggest the need for broad SUD education (Allen et al., 2020).

RFUMS: Limited SUD education, with only half of the programs offering drug awareness training.

Drug Screening:

Research: Randomized drug testing reduces incidence of positive screens (Fitzsimons et al., 2018).

RFUMS: Drug screening is done at clinical rotation start, but it is inconsistent and lacks random, ongoing testing.

Interventions and Resources:

Research: Accessible online resources (e.g., BASICS, AlcoholEDU) help reduce stigma and promote self-reflection (Fachini et al., 2012).

RFUMS: Lacks a centralized webpage for SUD resources, hindering easy access for students.

Reentry:

Research: Peer mentoring and abstinence contracts enhance retention and reduce relapse (Beeson et al., 2017).

RFUMS: RFU lacks formal peer support groups and university-wide mandatory training on drug and alcohol issues.

Aim 5: Recommend Enhancements to RFUMS Drug and Alcohol policy by integrating a comprehensive SUD Toolkit.



4 Pillars SUD Toolkit

Pillar 1 – Education

Emphasize prevention, enhance awareness, promote wellness, destigmatize SUD.

- Establish a student organization to promote SUD awareness and recovery support.
- Hold awareness campaigns throughout RFU.
- Incorporate and update SUD education modules into curriculum for all programs.
- Openly provide self-screening tools and resources on the RFU webpage to destigmatize SUD.
- Create and distribute leaflets, flyers, and videos focused on awareness, stigma reduction and available resources at RFU.

Pillar 2 – Early Identification

Higher occurrence of substance use noted during the didactic phase of training.

- Make RDS applicable university-wide for all colleges and programs.
- Begin screening during didactic phase to deter the development of a SUD.
- Implement drug screens at random; eliminate 10-day advanced notice.
- Implementing RDS demonstrates the university's commitment to addressing substance abuse seriously.

Pillar 3 – Intervention

Publish clear local, state, federal laws on RFU website in addition to university policies to establish clear understanding of rules.

- Post mandatory reporting requirements for licensed professionals.
- Outline common sanctions for violations as it pertains to alcohol and other drugs.
- Include links to self-screening tools for alcohol and drugs.
- Feature programs such as AlcoholEDU to encourage self-reflection on drinking patterns.
- Highlight support services on student health and wellness page.

Pillar 4 – Reentry

Streamline return to didactic/ clinical training throughout university.

- Eliminate ambiguity regarding reentry to practice qualifications in the university student handbook.
- Establish clear guidelines for reentry in each program handbook.
- Referral to RFU support services for peer mentoring and allyship on campus.
- Randomized screenings to promote continued maintenance.
- Establish contract agreements with clinical sites in accordance with privacy laws.
- Outline readily available financial aid implications for taking a break and returning to school for treatment.

Culture of Safety

Lack of addressing SUD amongst healthcare students jeopardizes the safety and quality of care for patients and the well-being of the provider.

Institutions of higher education have a responsibility to holistically educate, support, and counsel their student body regarding these affairs



Next Steps

- Establish SUD Taskforce, identify and appoint key champions and change agents to oversee the SUD toolkit's implementation and long-term sustainability within each program at the university.
- Collaborate closely with the Division of Student Success and Wellness to prioritize SUD initiatives.
- Raise awareness of SUD, provide education, and make all related resources available to students during the Admitted Student Visit Day orientation and through a new wellness website.
- Distribute feedback surveys to students and staff to continuously improve educational campaigns and interventions.

References

