

Nurses' Practices with Persons Experiencing Opioid Use Disorder

IntNSA/PCSS Webinar, March 17, 2023

Timothy Joseph Sowicz, Ph.D., RN

Assistant Professor

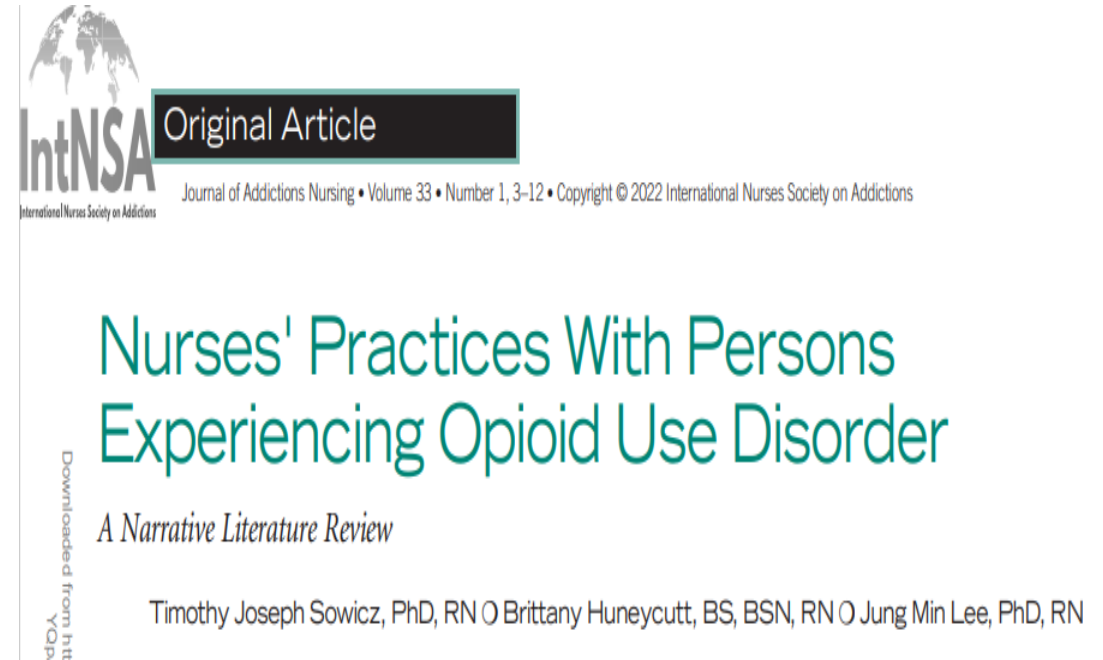
The University of Arizona College of Nursing

Disclosures

- The authors report no conflicts of interest.
- Dr. Sowicz alone is responsible for the content and writing of this presentation.

Presentation Purpose & Reference

- Present the findings from a narrative literature review that was conducted to understand nurses' practices with persons with opioid use disorder (OUD).



Educational Objectives

1. Discuss the methods used for conducting this synthesis research.
2. Summarize at least two findings from the review.
3. Analyze professional scope of practice standards for nurses' work with people with opioid use disorder.

Narrative Literature Review Purpose

Primary Purpose

- Identify how nurses' actions, practices, and work have been presented in the literature.

Secondary Purpose

- Summarize the characteristics of the research studies in which these appear.



Literature Search & Selection

- **Timeline:** June – December 2019

- **Databases:**

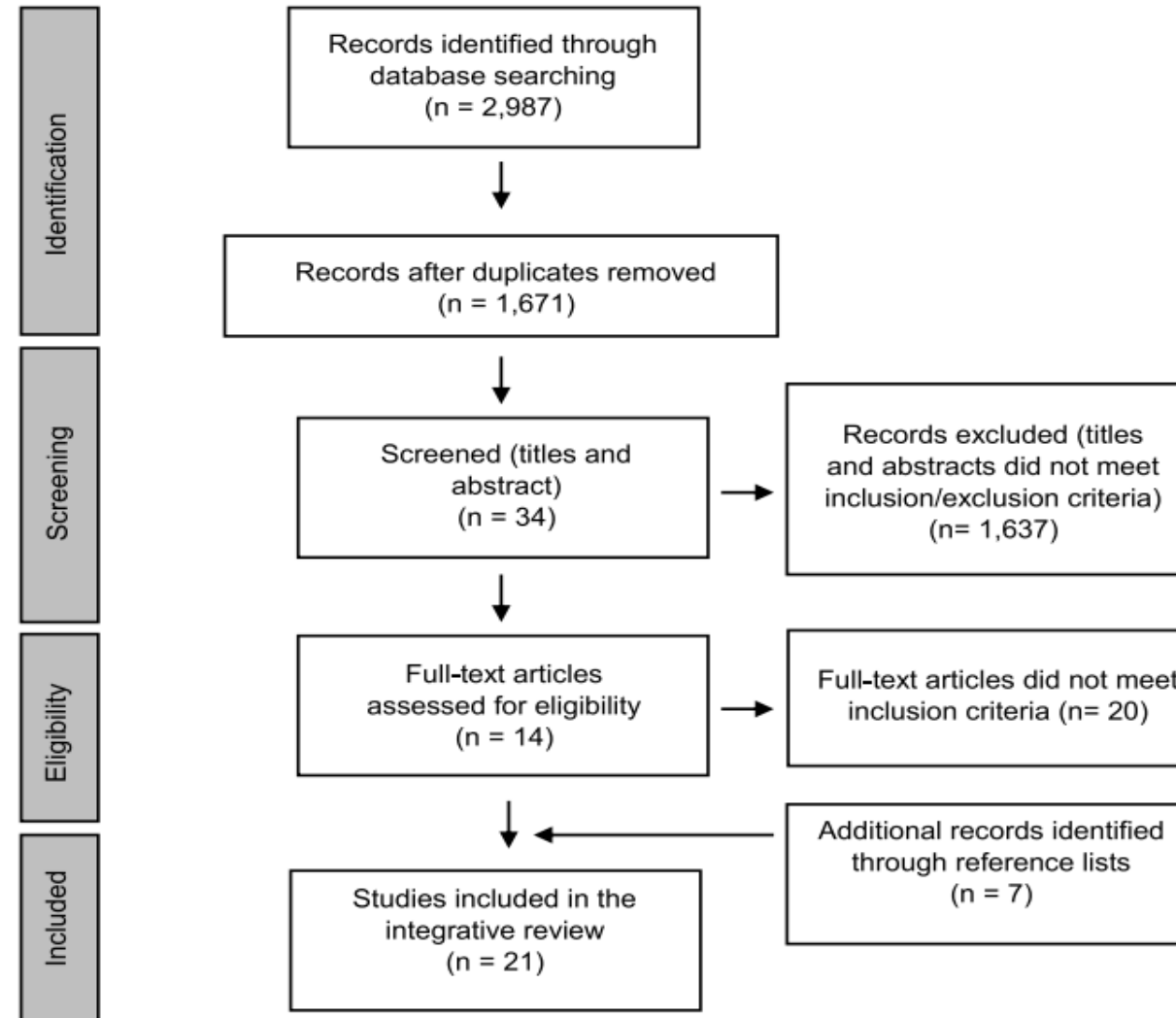
- CINAHL
- PubMed
- PsycINFO
- Scopus

- **Inclusion criteria:**

- English, human subjects
- Research with APRNs, LPNs, RNs
- Full-text available

Search Terms			
<u>Initial Searches</u>		<u>Additional Searches</u>	
<ul style="list-style-type: none">• Nurses• Nursing• Nurse actions• Nursing practice• Nurses' work	<ul style="list-style-type: none">• Opioids• Opioid use disorder• Heroin	<ul style="list-style-type: none">• Nurse participation• Nursing care• Nurse skills	<ul style="list-style-type: none">• Opioid• Opioid addiction

Literature Selection





Analysis

- Entire articles read.
- Evidence table created.

<u>Author(s); Location</u>	<u>Purpose</u>	<u>Design; Data Collection</u>	<u>Theory</u>	<u>Sample (Nurses only); Setting</u>	<u>Results: Practice Standard(s)</u>
Chenitz (1989); US	Nurses' behaviors	Qualitative, grounded theory; participant observation, interviews, reviewing documents	Theory of managing vulnerability developed	N/A; methadone clinic	A, P, I, CoC
Natan et al. (2009); Israel	Nurses' views	Quantitative; surveys	Theory of reasoned action	135 nurses; hospital	A, D, E

Analysis – Purpose Statements

- Identified key words from purpose statements, aims, or research questions.
 - Key words categorized & described.
 - “Perceptions/views/perspectives”: An examination (exploration, description) of nurses’ perceptions, views, or perspectives toward persons who use drugs.
- **Four main categories:**

Nurses’ views
toward persons
with OUD

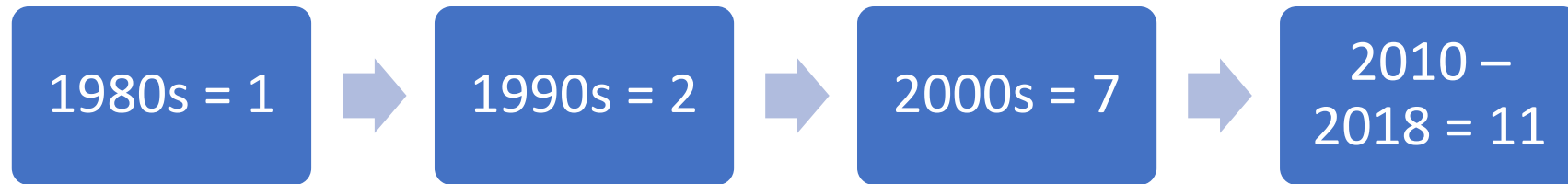
Nurses’ roles,
experiences, &
behaviors toward
persons with OUD

Quality of Services
& caring

Competencies

Findings

- Articles published between 1989 & 2018.
 - Most per year = 3 (in 2009).





Findings – Purpose Statements

- Two studies *exclusively* about describing nurses' actions, practices, or work.
 - Both qualitative.
 - Aims included *roles, skills, & psychosocial procedures*.
- Others included purposes, aims, or research questions related to the four main categories.

Findings – Designs & Data Collection

Designs

- 15 qualitative studies.
 - Action research.
 - Ethnography.
 - Grounded theory.
 - Phenomenology.
 - “Qualitative exploratory.”
- 6 quantitative studies.
 - Nonexperimental (5).
 - Quasi-experimental (1).

Data Collection

- Consistent with designs.
 - Paper- & web-based surveys.
 - Interviews (focus groups, individual).
 - Observations.
 - Field notes.
 - Documents review.
 - Video recordings.

Findings – Theory

- 6 studies included a theory.
 - 3 qualitative studies; 3 quantitative studies.
- 4 articles included designated sections for theory.
- Theory purpose not always explicit.
- 2 theories created.
 - Managing vulnerability.
 - Nursing attitudes toward patients with SUD & pain.

Findings – Samples & Settings

Samples

- Nurses.
 - RNs.
 - Midwives.
 - Public health nurses.
 - Community addiction nurses.
 - District nurses.
 - Staff nurses.
 - Nurse educators & managers.
 - Nurse practitioners.
- Other health professionals.
- Patients.

Settings

- 8 from Europe.
- 7 from North America.
- 2 from Asia.
- 3 from Australia.
- 1 from New Zealand.
- Clinical settings varied.
 - 43% hospital/medical center.

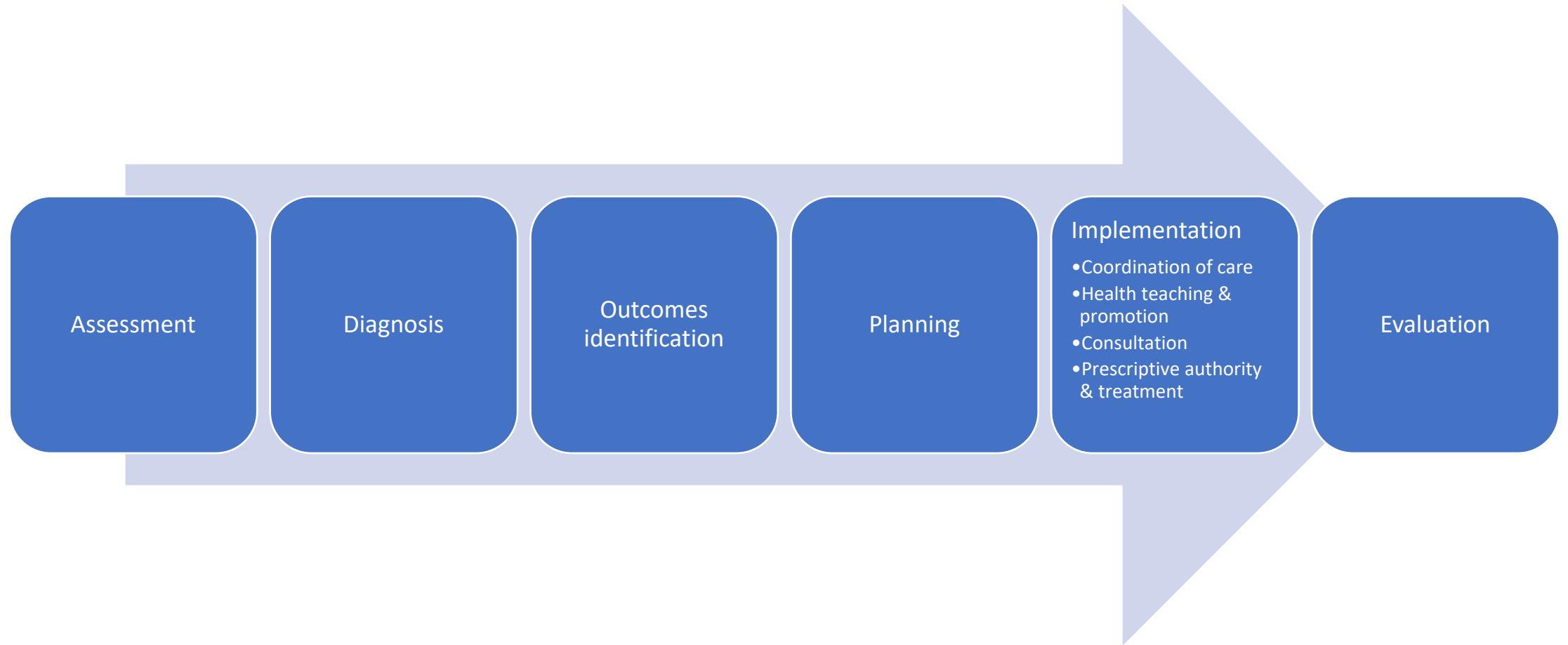



Findings – Results (of studies)

- Single words or phrases (authors' or participants') about nurses' practices.
 - Labeled using ANA & IntNSA standards of practice for addictions nursing (2013).
 - All were referenced *except* "prescriptive authority and treatment."



ANA & IntNSA Standards of Practice for Addictions Nursing (2013)





Findings – Results of Studies

	# of Studies (%)	Examples
Implementation <ul style="list-style-type: none">▪ CoC▪ HT & HP▪ Consultation	18 (86%) <ul style="list-style-type: none">▪ 15 (71%)▪ 8 (38%)▪ 1 (5%)	Preparing, administering medications; conducting group therapy; managing an overdose.
Assessment	14 (67%)	Monitoring signs of neonatal abstinence syndrome; measuring vital signs; recognizing signs of intoxication.
Evaluation	8 (38%)	Of care; surveillance; follow-up; use of sedation checklist.
Diagnosis	4 (19%)	Diagnosing intoxication, overdoses, or problematic drug use.
Planning	4 (19%)	Discharge planning; planning nurse-led interventions.
Outcomes identification	1 (5%)	Behavior change (which and how measured not specified).

Limitations

- Other keywords not included: behaviors, competencies, management, norms, procedures, roles, or strategies.
 - Keywords from standards of practice not included.
- Only published research
- Only articles in full-text format.

Discussion

- Increase every decade in number of published studies since the 1980s.
 - 52% published between 2000 & 2018.
 - Few designed to describe nurses' practices.
- Practice standards served as useful framework.
 - Their ubiquity may impact knowledge development about their use during practice.
- Specificity of practices varied.
 - Need to differentiate nurses' work from others.



Discussion

- Collecting data about and from patients & implementing treatment plans most common practices.
- Near absence of identifying outcomes.
 - Competencies: formulating, documenting, & modifying them.
 - Skills & behaviors not taught or practice in education programs?
 - Nursing diagnoses may promote identifying, acting for, and measuring outcomes.
- APRNs underrepresented.
- African and South American not studied.
 - Geographical diversity important for understanding influence of different regulatory bodies and practice settings.

Discussion

- [Nursing] theories infrequently used.
 - Two new theories developed.
 - Need to create new middle-range theories to guide practice.

Conclusions

- “Knowing what nurses *have been* doing is essential for envisioning how these practices may be expanded and refined.”
- “Practices could be further examined (e.g., developing situation-specific theories) and tested (e.g., the association between time spent with patients during telephone triage and retention in OUD treatment.”
- “Articulating specific competencies associated with each practice standard is essential for identifying nurses’ unique knowledge base, contributions to the treatment of persons with OUD, and uncovering ways in which this large sector of the healthcare workforce can contribute to tackling the U.S. opioid epidemic.”

Thank you!

- Email: sowicz@arizona.edu