Massachusetts

Substance Addiction Recovery Program

(SARP)

Resource

2022

Introduction

Welcome to the Substance Addiction Recovery Program (SARP). Thank you for reviewing this resource. We recognize the conflicting feelings you may have as you consider enrolling in SARP. These feelings may range and waver between disappointment, anger, discouragement, frustration, helplessness, hopelessness, uncertainty, hope, gratefulness, optimism, and readiness for change. All of these feelings are normal and understandable: a substance use matter has impacted you; your hard-earned nursing career has an interruption, you have to provide for yourself and/or your family, and now you are considering enrolling in SARP perhaps with uncertainty for what the outcome might be.

The structure of SARP is centered around you and is made up of several parts. SARP is a confidential and voluntary program. Participants utilize an individualized approach to recovery that contains the utilization of therapy services and participation in problematic substance use recovery approaches such as attending sobriety focused groups and toxicology testing. SARP is designed to balance the protection of public health, safety, and welfare by establishing adequate safeguards to maintain professional standards of nursing by monitoring participants' ongoing recovery and their return to safe nursing practice. This resource further details the elements of SARP.

Please know that SARP staff, the Substance Addiction Recovery Evaluation Committee (SAREC), and the Board of Nursing welcome and applaud your participation in SARP. We recognize there may be challenges while you participate in SARP that may include being new to mental health treatment and feeling stigmatized amongst others. We also recognize that your team of treatment clinicians and supports are in place to help with the challenges as mentioned, but also to enhance coping skills, address possible underlying mental health needs, facilitate a supportive social network, and more and all with the aim of removing your use of a substance(s) while you prospectively return to nursing practice.

SAREC AND BOARD STRUCTURE

The MA SARP is established by M.G.L part I, Title XVI, Chapter 112, section 80F, the "Rehabilitation Program to assist nurses with substance abuse disorders; establishment; functions, rehabilitation evaluation committees, program participants." Section 80F communicates the structure of the Substance Addiction Recovery Evaluation Committee (SAREC) whose members are appointment by the Board of Nursing (Board). The Board delegates SARP participant matters to SAREC. SAREC is responsible for:

- Evaluating, according to guidelines prescribed by the Board, a participant's admission into SARP,
- Review and designate those treatment facilities and service to which rehabilitation program participants may be referred,
- Receive and review information concerns nurses participating in the program,
- To call meetings to consider reports regarding program participants,
- To prepare reports to be submitted to the Board,
- To set forth in writing for each participant and individualized rehabilitation program with requirements for supervision and surveillance. This is called the Consent Agreement for SARP Participation/Individualized Rehabilitation Plan (CASP/IRP) or "contract",
- To provide information to nurses requesting participation in the program.

All SAREC findings shall be submitted to the Board as recommendations and shall be subject to final approval of the Board. Any failure to comply with the provisions of the recovery program may result in termination of the participant from the program. The law also mentions the sealing of records post successful completion from SARP.

The Board, as recommended by SAREC, may modify, extend, or terminate a nurse's CASP/IRP agreement.

In sum, the SAREC reviews all matters pertaining to SARP participants including but not limited to admission into SARP, matters of non-compliance pertaining to the CASP/IRP, return to nursing practice privileges, termination, and discharge from SARP, and makes recommendations to the Board. The Board considers the recommendations of SAREC and determines an action. SARP participants have the right to appeal the Board's decision.

CONFIDENTIALITY

A nurse's participation in SARP is highly confidential and the sharing of information can be compared to the restrictive disclosure standards found in healthcare and legal settings. A Release of Information (ROI) is needed prior to SARP staff communicating with individuals such as therapists, providers, attorneys, prospective employers, and others. SARP staff only communicate regarding the matters at hand and do not disclose information regarding to the event(s) or situation(s) that to led to admission into SARP or compliance related matters that may occur while the nurse participates in SARP. Records pertaining to SARP participation are confidential and are not subject to public records requests, however, Board of Nursing staff emails are a matter of public record. SARP staff avoid communicating with SARP participants, employers, therapists, and others via email. SARP participant matters that are heard before SAREC and the Board are heard in an executive session meeting that is closed to the public.

PROGRAM STRUCTURE

A participant begins the SARP after the Consent Agreement for SARP Participation/Individualized Rehabilitation Plan (CASP/IRP) goes into effect. A participant is bound by the language in the CASP/IRP agreement, which includes but is not limited to:

- Daily check-ins between 4am and 2pm utilizing an app/call-in number,
- Subject to a minimum of 15 randomized and observed urine toxicology tests with the expectation that the toxicology results are free substances pursuant to those identified in the IRP and that the urine creatinine value is no less than (<) 20mg/dL,
- Subject to additional toxicology testing such as hair and blood pursuant as needed per programmatic policies,
- Weekly attendance of at least 4 meetings per week that include: 3 AA/NA meetings and 1 group meeting of choice per SARP approval,
- At least bi-weekly therapy sessions with a clinician,
- Submission of quarterly reports in February, May, August, and November of each year,
    - Quarterly reports consist of:
        - Self-assessment report,
        - Therapist report,
        - Employment report (if applicable),
        - Group attendance logs,
- Ensure that the nurses' license does not expire,
- Work as a nurse for at least one (1) year with at least basic medication handling,
- Responsiveness and communication with SARP staff.

Matters of non-compliance:

Matters of non-compliance may include:

- Missed check-in(s),
- Failure to submit a urine toxicology test when selected,
- Failure to submit hair and blood testing as directed,
- Submission of a urine toxicology screening with a creatinine value of <20mg/dL,
- Submission of a urine toxicology screen that detects a substance as listed in the IRP,
- Submission of a hair of blood toxicology screening that detects a substance listed in the IRP,
- Failure to submit quarterly documents,
- Failure to attend bi-weekly therapy sessions,
- Failure to attend the weekly group meetings,
- Failure to gain employment approval prior to starting work,
- Instances of a lapse or "relapse",
- Failure to gain approval from SARP prior to taking a substance as identified in the CASP/IRP due to medical or psychiatric necessity,
- Failure to adhere to policies that go into effect post the consent agreement that is in effect.

Matters of non-compliance are heard before SAREC and the Board to consider the matter and to determine an action, which may include:

- No action,

- Modification of the Consent Agreement,
- Extension of the Consent Agreement,
- Termination of the Consent Agreement.

Program Structure FAQ

What happens when someone use hand sanitizer or uses something they did not know had a substance in it and it triggers a positive test result?

Unintentional exposures to substances that can trigger a positive toxicology result may occur. Often, these exposures occur due to variety of reasons including but not limited to inhalation/ingestion of hand sanitizer (alcohol), second-hand exposure to smoke/vapor that contains the psychoactive compound (THC) in marijuana, ingestion/absorption of cannabidiol (CBD) products that contain THC despite being told they're THC free, consumption of Kombucha (alcohol), foods that contain alcohol as an ingredient, and use of over-the-counter medication that contains substances of potential misuse. In these instances, the Medical Review Officer (MRO) and SARP staff work with the participant to:

- Assess if a lapse/relapse occurred,
- Understand the circumstances of the event,
- Collect documentation as needed,
- Coordinate alternative testing such as a follow up urine toxicology test, hair follicle testing, and/or a blood test.

The aforementioned information is aggregated and supplied to the SAREC and the Board during meetings. SAREC and the Board will review the facts, deliberate, and determine an outcome. During the SARP orientation you are educated about what you can do to avoid unintentional exposures and this understanding is assumed when you sign the CASP/IRP.

What are SAREC and Board meetings like?

SARC and Board meetings are highly structured and confidential during executive session. Prior to the meeting you will receive a notice about your need to appear at the meeting with instructions about the meeting. SARP staff supply the SAREC and Board memos that contains your SARP profile and history and it contains relevant information regarding the matter at hand. SARP staff send these memos in advance of the meetings. During the meetings SARP staff briefly review the memo. SAREC and the Board consider the information and deliberate and ask the participants questions. SAREC and the Board make motions for an outcome that are voted on. SARP staff may reach out after regarding next steps.

Do I need an attorney?

SARP applicants and participants may choose to utilize legal services.

AFFINITY/SPECTRUM

Affinity/Spectrum is a vendor contracted by the Massachusetts Department of Public Health, Board of Registration in Nursing, that functions to:

- Coordinate toxicology testing such as urine, blood, hair,
- Supply a Medical Review Officer (MRO) service for the review of matters related to testing,
- Provide a platform for daily check-ins,
- Supply Chain of Custody forms for testing specimens,
- Provide a platform for a communication channel between the participant, SARP staff, and Affinity staff,
- Provide a platform for the sharing of documents,
- Provide a platform for the generation of reports by SARP staff.

SARP participants engage with Affinity/Spectrum via an App, or by calling their help-desk line at **(877)267-4304.**

Fees

SARP participants are responsible for the payment of fees. The fees below are an approximation and are subject to change:

$64.00	Urine Toxicology
	$40 Fee for dilute protocol testing, and/or Tube B testing
$140.00	Hair Follicle Toxicology
$110.00	Blood PEth test
$50.00	MRO Fee for positive result *Waived if there is a prescription on file and if the medication is approved for use while in SARP
$20.00 to $55.00	Range of collection site fees Fee amount is specific to the collection site

Example of cost: With an approximate cost of $100 per urine screen, a participant may expect to pay at least $4500 ($100 per urine screen x 15 urine screens per year x 3 years = $4500), for the minimum 3-year consent agreement.

Returning to Nursing Practice

CASP Amendment (CA) Levels

SARP participants engage in a process prior to returning to practice. This process is structured to allow the participant to focus on their recovery while safely returning to practice. The bulleted version of the process is below:

- SARP applicants are expected to refrain from working while they engage in the admission process,
- A participant who is admitted to SARP shall not practice for at least the first six (6) months starting at the time the CASP/IRP goes into effect,
- After six (6) months of full compliance with the CASP/IRP, participants may request an amendment to their CASP agreement for practice privileges. Below are the different CASP amendment levels:
    - CA1 = Practice without medication privileges,
    - CA2 = Practice with basic medication (non-controlled substances) privileges,
    - CA3 = Practice with full medication (including controlled substances) privileges.

    Below is sample summary of steps to advance through the CA amendment steps:

        - 6 months of full compliance,
            - May request a CA1 or CA2 amendment request,
        - 6 months of full compliance under a CA1 or CA2 and while working as a nurse for at least 6 months,
            - If previously approved CA1, may request a CA2 amendment,
            - If previously approved CA2, may request a CA3 amendment,
        - 6 months and beyond under CA3 amendment request,
            - Continued working under the CA3 amendment,

- Advanced Practice Registered Nurses (APRN) including Certified Registered Nurse Anesthetist (CRNA) engage in the CASP amendment step process with adjustments pursuant to APRN guidelines.

- A participant would need SAREC and Board approval for practice privileges if they are not in full compliance during the six (6) month practice privileges phases.

Conditions to Practice

Each amendment level has relatively the same conditions to practice. The conditions to practice are listed below:

- May not be responsible for the narcotic key or participate in the count of Controlled Substances (For CA1/CA2 amendment level),
- Practice Nursing only with direct supervision by a licensed Registered Nurse,
- All Nursing Supervisors must complete a Supervisor Verification Form,
- RN Supervisor must be on-site as a resource during all hours worked,
- Work a maximum of 40 hours per week. No 11pm-7am shifts, no overtime, no rotating shifts, no floating, and no working a shift within twelve hours of the previous shift.
- The nursing role shall be in a structured setting. Home Care and some school settings are not permitted.

Employment Approval

SARP participants shall gain approval from SARP staff prior to starting a nursing employment opportunity. Below is a process for employment approval:

- SARP Participant has an effective CA1/CA2 or CA3 CASP amendment,
- Participant pursues employment opportunities. Participant informs prospective employer about enrollment in SARP and provides prospective employer a copy of their CA amendment letter,
- Participant provides SARP staff a copy of the job description,
- Participant provides a Release of Information (ROI) for the individuals that they interviewed with,
- SARP staff reviews the job description to ensure it meets all the conditions to practice,
- SARP staff speaks with hiring personnel—e.g., DON/Nurse Supervisor, Nurse Manager, HR personnel, etc.—regarding the opportunity to ensure it meets respective conditions to practice and to establish the supervision structure and expectations,
- The prospective employer submits a job description with the specific conditions to practice language from the effective CA amendment,
- All Supervisors that provide daily onsite supervision during when participants are working submit Supervisor Verification Form(s),
- SARP staff conduct a final review of the employment review request,
- The participant is informed about the approval or denial.
    - If approved, the participant will be informed verbally and in writing. SARP staff may inform the employer verbally.
    - If denied, the participant may request to be heard before SAREC and the Board for the consideration of employment approval.

Employment FAQ

Why would someone want to do a CA1?

The CA1 amendment level is nursing practice without medication privileges. Some participants chose to re-enter practice without the stressor of managing medications to ease back into practice while attending to their recovery needs.

What kind of jobs can I get with the different amendment levels?

This varies. Participants have successfully secured employment in outpatient and ambulatory settings, inpatient settings, and other settings. Participants have had success securing positions after communicating with the employer about their participation in SARP and the sharing of their conditions to practice.

Do you tell employers about my history that led to my SARP participation?

SARP staff do not disclose the specific event(s) that led to SARP participation. This disclosure and the degree of details shared is left to the participant and the prospective employer.

How long does it take to get approved for an amendment request?

It depends. Employment review requests may range from one week to months and is dependent on several variables that includes and is not limited to:

- meeting full compliance of the CASP prior to the CASP amendment request process,
- full compliance up until the employment request, and
- the communication dynamics between SARP staff and the prospective employer, and the completion and submission of documents.

In some cases, participants may need SAREC/Board review to approve the employment request.

How will I know if my employment is approved?

SARP staff will specifically inform you and the employer of the approval. You will receive documentation reflecting this.

What if I find a job working remotely and I am not providing direct patient care?

Approval is needed for all employment opportunities that require a nursing license irrespective of the setting. Remote/telehealth working employment opportunities shall be approved by the SAREC and the Board as remote/telehealth working, in most situations, deviates from a condition to practice where a supervisor must be on site while the SARP participant is working. In these situations, alternative supervision plans are formulated and reviewed by the SAREC and the Board for consideration.

What do I do I am selected to test while I am at work?

Participants work with their employer to establish contingencies in the event selection to test occurs on a workday.

Travel

There are structures in place to allow for traveling. Traveling is either domestic or international. Below are the procedures for both:

Domestic travel: this pertains to the contiguous 48 United States.

1. Speak with Affinity staff about your travel plans before identifying flights and before securing your setting of stay.
    a. Identify the 2-3 possible testing sites in your area if you are selected to test
2. Inform SARP staff of your travel plans.
3. In the Affinity app, submit a monitoring interruption request for the actual dates of travel. Supply the times of travel, method of travel (plane, automobile, bus, etc.), and total length of travel.
4. Bring Chain of Custody forms with you for the trip,
5. Check-ins are required on all travel days unless otherwise approved by SARP staff

Hawaii, Alaska, Puerto Rico

- While these are U.S. states/territories, traveling to these locations may require an International Travel request per the international travel procedure below. SARP staff and Affinity will coordinate possible testing sites in these locations.

International Travel: this pertains to travel outside of the United States.

1. Inform SARP staff about your travel plans,
2. Completion of the International Travel Request Form understanding that,
    a. The request is for a time period of fourteen (14) days or less,
    b. Participant submits documentation regarding the trip length, dates, and location of the requested travel (plane tickets, reservations, etc.),
    c. The participant has been fully compliant with all the terms of the CASP, including toxicology testing, for the previous twelve (12) months prior to the request being submitted,
    d. If practicing nursing, all submitted employer evaluations received for the previous twelve (12) months have had acceptable feedback; and,
    e. The participant agrees, in writing, to submit to observed urine, blood, and hair follicle testing their return to the U.S.
3. Receive written approval from SARP staff prior to traveling,
4. If SARP staff cannot approve the travel request, the matter may be heard before SAREC/the Board.

MEDICAL WAIVERS

A SARP participant may request a temporary medical waiver if he/she will be temporarily unable to comply with his/her CASP requirements due to an acute medical or mental health condition(s) and respective treatment.

Once approved, the waiver shall not exceed thirty (30) days. The participant must:

1. Submit a complete, written waiver request with a signed medical release form authorizing Board staff to obtain all pertinent medical records related to the acute condition(s) related to the request,
2. Submit a letter of necessity from their licensed medical or mental health provider stating the diagnosis, treatment, and rationale for the needed temporary waiver from SARP,
3. Agree to an extension of the CASP for the duration of all waivers approved,
4. Agree to not engage in nursing practice for the duration of the approved waiver; a SARP participant may not practice nursing during any period in which a medical waiver is in effect, regardless of the type or duration of the waiver.

A participant may request a supplemental duration of her/his initial medical waiver, if the treatment for the SARP participant's medical or mental health condition(s) requires a period more than thirty (30) days but no more than ninety (90) days. The participant must submit a new written waiver request, and updated supporting documentation including but not limited to, all the requirements as set forth above for an initial waiver request.

Any supplemental medical waiver request will be reviewed and determined by the Board. Any treatment of any medical or mental health condition(s) that requires a medical waiver of more than (90) days will not be approved, and the participant will be terminated from the SARP program.

PRESCRIPTIONS

All prescriptions shall be authorized for use prior to SARP participation. Certain medications shall be reviewed by SAREC and the Board prior to entry into SARP for the consideration of use for duration of SARP participation. Suboxone/Subutex/Sublocade and Methadone are allowed for use while in SARP pursuant to current policy. Medications use while participating in SARP shall be reviewed and approved prior to use if the medication had not been previously approved.

DISCHARING FROM SARP

The Licensee may petition the Board for formal discharge from SARP. The Petition must be in writing, must include a sworn written statement that there are no pending actions or obligations, criminal or administrative, against the Licensee before any court or administrative body in any other jurisdiction and an authorization for the Board to obtain a Criminal Offender Record Information (CORI) Report of the Licensee conducted by the Massachusetts Criminal History Systems Board. The petition will be granted only upon:

i. Three (3) consecutive years of full and sustained recovery from a substance use disorder as evidenced by complete compliance with the terms and conditions of the SARP Agreement.

ii. At least one (1) year of safe and competent monitored nursing practice, which must include medication management, as evidenced by submission of *Nursing Supervisor Reports*; and

ii. Approval of the petition by the Board.

The complaint that preceded SARP participation would become sealed upon successful completion of SARP participation. If a Licensee is terminated or withdraws from SARP participation, the nursing license becomes Suspended, and the complaint is no longer sealed. A licensee may re-apply for entry into SARP after certain criteria are met, however, the original complaint remains unsealed despite successful completion of SARP after re-admission.