

# Alcohol Abuse in the Workplace and Patient Safety

Camille A. Servodidio, RN, MPH, CRNO, OCN®, CCRP

From 10%–15% of nurses will abuse alcohol during their professional careers. Oncology nurses may use alcohol to mask the stress they experience when caring for patients with cancer. This article will address strategies and support mechanisms for nurses who have issues with alcohol abuse.

M.C. is an evening shift nurse on a busy medical surgical oncology nursing unit in a large metropolitan hospital. She is one of seven nurses on the unit with less than two years of nursing experience. Her peer group has developed close relationships, and the group often meets after work for cocktails.

Many of her coworkers notice that M.C. drinks several cocktails per outing and is considered to be the life of the party when she appears intoxicated. Although some of her colleagues note that M.C. is getting close to the edge of what might be considered a problem behavior, no one ever mentions or discusses her drinking with her or considers a planned intervention, even if her drinking behavior could compromise her personal safety (i.e., impaired driving). M.C. is considered fun to be around, is perceived as an excellent nurse, and is a hard worker on the unit and volunteers for extra shifts. She even agrees to do day and evening double shifts when her colleagues are short staffed and the unit would otherwise have to rely on per diem nurses.

One Saturday morning, M.C. comes to work for an additional day shift, is irritable, has slurred speech and an unkempt appearance, and is clearly impaired from the past evening's drinking. R.H., the only other nurse on the unit for the weekend, has to make the decision of whether or not to confront M.C.

M.C. becomes adamant that she does not have a problem and denies intoxication. R.H. contacts the covering super-

visor who visits the unit, excuses M.C. from her shift, and initiates the help M.C. desperately needs (i.e., counseling or admittance to a rehabilitation program for nurses). In a debriefing session with her nurse manager, R.H. states that she felt she did not have the skills or expertise to deal with the situation. She was very uncomfortable with the impromptu confrontation that took place on the unit.

In this example, the unit nurses enabled M.C. and indirectly perpetuated her behavior (Markey, 1995; Tubbs, 1998) by not speaking directly with M.C. about her drinking. Nurses in situations like this one often feel guilty for tattling on their coworker and do not wish to get a nurse colleague in trouble (Markey, 1995; "Nurses and Alcohol," 1992). Nurses, in an unconscious manner, may deny the work unit's "family secret" of housing an alcoholic nurse (Gorman & MacDougall, 1998). Some nurses may not want to confront a colleague; therefore, they adhere to an informal nursing code of silence because they do not want to be the one who turned a nurse in and caused him or her to lose a job or nursing license (Casedone, 1994; Markey, 1995). Denial by both the impaired nurse and his or her coworkers can serve as an effective temporary cop-

ing mechanism and often is emotionally easier to deal with during a crisis situation than directly confronting another individual (Scott, 2010). Although M.C. did receive help in the end, her colleagues and nurse manager may have intervened sooner if they had the support, skills, tools, and training to do so.

## Incidence Rate

Eighteen million Americans struggle with alcohol abuse, and more than half of all adults have a family history of alcoholism or problem drinking (Scott, 2010). Because exactly how many nurses abuse alcohol is unknown, providing an exact incidence rate is challenging (Jefferson & Ensor, 1982; O'Dowd, 2006). Prevalence of alcohol abuse in the profession of nursing has been reported at 6%–10% (Scott, 2010; "The Do's and Don'ts of Helping the Impaired Nurse," 2008); this mirrors a prevalence of 10% in the general U.S. population. Using these rates, the estimated amount of alcoholic nurses in the United States would be around 40,000 (Dunn, 2005; Lachman, 1986). Allsop (1987) and Grace and Rees (1994) rank nursing as one of the top 10 professions that suffer from alcohol abuse. More than

Camille A. Servodidio, RN, MPH, CRNO, OCN®, CCRP, is the RN director of the Cancer Clinical Research Office at Hartford Hospital in Connecticut. The author takes full responsibility for the content of the article. The author did not receive honoraria for this work. No financial relationships relevant to the content of this article have been disclosed by the author or editorial staff.

Digital Object Identifier: 10.1188/11.CJON.143-145