



The Voluntary Disciplinary Alternative Program (VDAP)

VDAP is authorized by the Alabama legislature to promote early identification, intervention, treatment and rehabilitation of nurses in Alabama whose competence is found to be impaired or compromised because of the use or abuse of drugs, alcohol, controlled substances, chemicals, or other substances or as a result of a physical or mental condition rendering the person unable to meet the standards of the nursing profession. VDAP is a voluntary program that offers nurses in the State of Alabama an alternative to discipline for issues they admit to relating to substance use, mental health, or physical ailments that may inhibit their ability to provide safe nursing care. ABN conducts compliance monitoring to ensure the accountability required for nurses with substance use or mental health issues to safely return to practice.

To be eligible the nurse must cease nursing practice until they have been deemed safe to provide patient care by a Board -Recognized Substance Use Disorders Treatment Provider with a health professional track. It is important to note that the Alabama Board of Nursing (ABN) does not perform addiction counseling or recovery services, which is the role of independent treatment providers. ABN's role is to monitor the licensee's compliance with the VDAP Agreement.

While treatment is conducted by the treatment provider, ABN compliance monitoring cultivates and preserves external evidence of recovery. Simply put, we've designed post agreement compliance monitoring services to ensure that our licensees are following through on recovery activities and meeting the requirements stipulated in the agreement upon entering the VDAP program.

Below are excerpts of requirements of the VDAP program and provisions of the agreement and compliance monitoring. Please read your VDAP agreement carefully to ensure that you understand all requirements and expectations related to compliance upon entering the program.

The VDAP agreement major components include but are not limited to:

Comprehensive evaluation for substance use disorder: An evaluation conducted in an inpatient or structured outpatient setting over a period of three (3) to seven (7) days by a multidisciplinary team that includes assessment of the applicant or licensed nurse's physical health, substance use, psychological and psychiatric functioning, family and social assessment, and legal and occupational history. Neuropsychological and cognitive testing, drug testing, and any other testing deemed appropriate by the evaluation team may also be included.

A board-recognized substance use disorder treatment provider with a healthcare professionals track: the treatment provider conducts or provides, by a qualified provider, assessment, evaluation, diagnosis, and treatment of substance abuse or dependence, utilizing DSM-IV-TR or DSM-V criteria by a qualified provider

that includes mental disorder diagnoses; factors including psychosocial, contextual and environmental factors; level of functioning; and disability. These providers issue treatment recommendations based on ASAM Criteria. The ABN provides a list of board approved providers on their website.

The treatment provider must conduct, during the initial phase of treatment, biological testing and screening for drugs, chemicals, and alcohol that are analyzed by qualified medical and laboratory personnel. A drug screen that is positive during treatment requires confirmation, at the applicant or licensed nurse's expense, from a laboratory approved by the Board. The treatment provider shall notify the Board's designee(s) of any drug screen deemed positive.

The treatment provider must provide individualized written plan(s) of care including assessment and diagnosis, treatment goals, and discharge criteria.

ABN Board Staff Consultation: Board consultation is the provision of information from the Board to the treatment provider regarding the facts that support the evaluation.

Completion of Recommended Treatment (Does not have to be at same provider that conducted evaluation)
[Treatment Providers – Alabama Board of Nursing.](#)

- ASAM Levels of Care
 - Level 1: Outpatient
 - Level 2: Intensive Outpatient/High-Intensity Outpatient
 - Level 3: Clinically Managed Low-Intensity Residential, Clinically Managed High-Intensity Residential, Medically Managed Residential
 - Level 4: Medically Managed Inpatient

Recommendation to return to the safe practice of nursing: Recommendation to return to practice must come from the Board-recognized substance use disorder treatment provider.

ABN Compliance monitoring includes but is not limited to the following:

Recovery Activities Requirements:

- Abstinence: Abstain from any substance containing alcohol and from the use or possession of controlled substances, illegal drugs, mood-altering substances, or any prescription drugs except as provided for in order (prescriptions, etc).
- Aftercare: Weekly aftercare at a Board-acceptable substance use disorder aftercare program for a minimum of one year, or longer if recommended by treatment provider.
- Abstinence-Oriented Support Group Meetings: Attend three meetings per week for duration of monitoring, and report monthly on nurse's self-report and maintain a sponsor.
- Individual/Group Counseling: Regular participation contingent upon recommendation of original treatment provider.

Individual Reporting Requirements:

- Monthly self-report: Complete monthly online self-report
- Required notifications to the Board: Must notify board of any arrest, admission to any institution for substance use disorder treatment or emotional/psychological disorder, relapse, employer discipline, positive drug screen, investigation by another board of nursing or governmental agency, disciplinary action against another professional license

Substance Use Monitoring:

- **Designation of Primary Healthcare Provider/Dentist: Prescription Verification**
All medications, including OTC, must be verified to the Board by the prescribing healthcare provider/dental on a Board-approved form.
- **Drug Screening:** Random drug screening through Board-recognized provider (licensee is responsible for cost). Provide prescriptions for any positive result.

Employment Monitoring:

- **Employer Notification and Evaluation of Performance:** Employer must sign form acknowledging receipt of order/agreement and willingness to comply with monitoring requirements. The employer submits online quarterly report evaluating nurse's nursing practice performance.
- **Employment Restrictions:** Cannot work more than 84 hours in a two-week schedule without prior written authorization from the Board. Nurse works only regularly assigned, identified and predetermined units. Cannot contract for services, nor work for a nursing registry, nursing staffing agency, travel nurse agency, nursing float pool, locum tenens position, or temporary employment agency. Cannot work in any position that requires the nurse to enter the home of an individual patient, including, but not limited to, home health, hospice, or house call service, self-employment, faculty at a nursing program. APRNs must receive specific recommendations for Board-recognized treatment provider to return to advance practice, and if substance use disorder included controlled substances, must remain out of advanced practice for a minimum of one year. Restriction from administering or accessing controlled substances if recommended by treatment program – can request restriction be lifted.

Licensure Restrictions:

No multistate license.

For disciplinary action, license is listed as a single state license on probation.