

**DEPARTMENT OF HEALTH  
WASHINGTON STATE BOARD OF NURSING  
PROCEDURE**

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<b>Title:</b>	Missed Check-Ins and Tests	<b>Number:</b>	W43.02
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**Reference:** [RCW 18.130.160](#) - Finding of unprofessional conduct—Orders—Sanctions—Stay—Costs—Stipulations.  
[RCW 18.130.175](#) - Physician health and voluntary substance use disorder monitoring programs (*as amended by 2023 c 425*).  
[WAC 246-840-750](#) - Philosophy governing voluntary substance use monitoring programs.  
[WAC 246-840-760](#) - Definitions of terms used in WAC [246-840-750](#) through [246-840-790](#).  
[WAC 246-840-770](#) - Approval of substance use monitoring programs  
[WAC 246-840-780](#) - Conditions for participants entering the approved substance use monitoring program.  
[WAC 246-840-790](#) - Substance use disorder monitoring stipend program

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**Supersedes:** W43.01 – November 4, 2022  
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**Approved:** 

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Dawn Morrell, BSN, RN  
Chair  
Washington State Board of Nursing (WABON)

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**PURPOSE:**

Compliance with the Washington Health Professional Services (WHPS) Program Participation Contract is paramount to the nurse’s safe practice. Daily check-ins with the contracted monitoring service and frequent drug screening holds the nurse accountable to ensure program compliance. The National Council of State Boards of Nursing *Substance Use Disorder in Nursing* (2011) contains additional information on drug testing, pp. 142 – 161.

## **PROCEDURE:**

- I. Missed Check-Ins
  - A. The nurse must check in daily, online or by telephone, Monday through Friday, except for state holidays. If the nurse does not check in, WHPS considers this a missed check-in. The electronic monitoring system posts missed check-ins daily.
  - B. The case manager checks electronic notifications at least once daily to identify missed check-ins and tests.
  - C. When the nurse misses a check-in:
    1. The first missed check-in results in WHPS notifying the nurse that missed check-ins are considered non-compliance and further missed check-ins will result in additional drug testing.
    2. The second missed check-in and any subsequent missed check-ins result in WHPS scheduling the nurse for a standard panel + EtG drug test the following business day and notification that WHPS may increase testing frequency.
    3. The third missed check-in within a three-month period further results in notifying the work site monitor (WSM), possibly requiring the nurse to cease practice, and increase in testing frequency.
    4. A repeated pattern of three missed check-ins in a three-month period constitutes significant non-compliance and results in a referral to the Substance Use Disorder Review Panel (SUDRP).
  
- II. Missed Drug Tests
  - A. The contracted electronic monitoring program randomly chooses nurses in the program to drug test according to WHPS standards. (*See Procedure W42 Drug and Alcohol Testing.*) WHPS verifies with the nurse that they failed to test on their selection date.
  - B. A missed test constitutes an instance of non-compliance unless WHPS can resolve through verification of extenuating circumstances (e.g., employer substantiation of the inability of the nurse to leave the worksite to test).
    1. WHPS schedules an observed drug test (standard panel + EtG) and requires the nurse to test within two hours. WHPS may increase testing frequency.
    2. WHPS may require the nurse to cease practice.
  - C. The second missed test within a one-year period constitutes non-compliance. WHPS will:
    1. Schedule an observed drug test (standard panel + EtG) and require the nurse test within two hours.
    2. Notify the work site monitor (WSM).
    3. May require the nurse to cease practice.
    4. Refer the nurse for a substance use disorder evaluation.
  - D. The third missed test within a two-year period constitutes significant non-compliance.
    1. This results in the actions outlined above in C.
    2. WHPS will refer the nurse to SUDRP.
    3. In addition to increased testing frequency, WHPS may require alternative testing (hair/blood/nail samples). The case manager will consider other factors, such as group support attendance, observed behaviors, etc.