

Health Care Professionals

SUBSTANCE USE DISORDERS AND PSYCHIATRIC CONDITIONS

Addiction in Physicians How common?

- ▶ Same as general population overall
- ▶ Specific substances are higher

Health Professionals' Drugs of Choice

- ▶ Alcohol is most prevalent, followed by prescription medications
- ▶ Prescription medication abuse is higher than in general population because of access to the medications

ADDICTION IN THE HEALTH CARE PROFESSIONAL

DEFINITION OF IMPAIRMENT:

Inability to practice with reasonable skill and safety due to illness

SUBSTANCE USE DISORDERS

Drug Use in Health Care Professionals:

- | Prevalence of prescription medication dependence
- | Access
- | Specialty patterns:
 - ▶ anesthesiologists: fentanyl
 - ▶ pharmacists: polysubstance, opiates
 - ▶ nurses: narcotics, benzodiazepines
 - ▶ dentists: nitrous oxide

IDENTIFICATION OF PROBLEM BEHAVIOR/IMPAIRMENT

- ▶ Early warning signs:
 - ▶ Change in behavior (ex., isolative, irritable)
 - ▶ Late to work
 - ▶ Call in sick or not show for work
 - ▶ Inadequate record keeping
 - ▶ Decline in relations with co-workers
 - ▶ Job performance problems
 - ▶ Administering/prescribing pain medications when others have not

PREDICTORS OF POSITIVE OUTCOME IN SUBSTANCE USE DISORDERS

General population:

- Employment
- Family
- Lower severity of illness
- Fewer psychiatric problems
- No family history of substance use disorders
- Compliance with treatment and aftercare

HEALTH CARE PROFESSIONALS OUTCOME

- ▶ Very high rates of recovery, similar to pilots: 75%
- ▶ Due to :
 - ▶ Protect license
 - ▶ Adequate treatment
 - ▶ Monitoring
 - ▶ Social stability

PREDICTORS OF POSITIVE OUTCOME IN SUBSTANCE USE DISORDERS

Physicians:

- Single drug/alcohol
- Not opiate dependent
- No co-existing psychiatric problems
- Monitoring program
- High intensity treatment

HPSP History

HPSP was created in 1994 through efforts of the Boards of Nursing, Pharmacy and Medical Practice and their professional associations.

HPSP provides monitoring services to health professionals with illnesses that may impact their ability to practice

Mission and Goals

The mission of HPSP is to protect the public by providing monitoring services to health professionals whose illnesses may impact their ability to practice safely.

HPSP's goals are to promote early intervention, diagnosis and treatment and provide monitoring services as an alternative to board discipline.

Why Create the Program?

- Allows illness to be monitored outside of a disciplinary process
- Concern that health professionals were not seeking help for their illnesses because of fear of board discipline

HEALTH PROFESSIONALS SERVICES PROGRAM

- | Professionally staffed
- | Confidential
- | Voluntary
- | Non-disciplinary
- | Alternative
- | Not treatment provider, support group, enforcement agency

Examples of How HPSP Protects the Public

Health professionals call HPSP when they are:

- Terminated or put on leave due to symptoms of mania, psychosis, dementia, or other medical disorder
- Terminated for stealing medications
- In a treatment program for substance use disorder
- Hospitalized for suicide attempt

HPSP **intervenes immediately** and may request refrain from practice and/or obtain assessments to determine level of care

Examples of how HPSP protects the public

Employers report practitioners to HPSP for:

- Stealing narcotics
- Being intoxicated
- Being manic or psychotic
- Being unable to function due to brain injury

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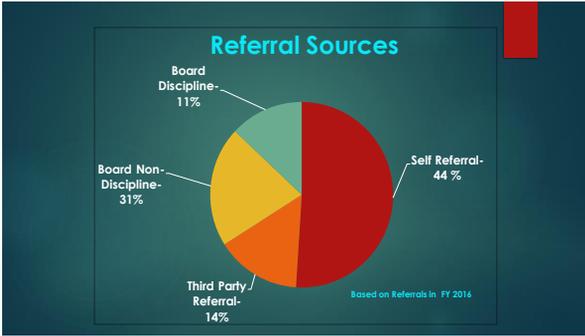
General Requirements

- reports received quarterly, unless otherwise recommended

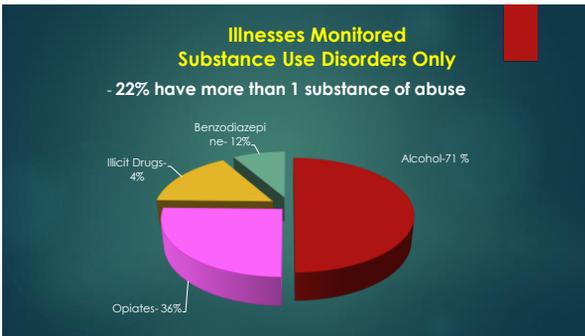
- ▶ Treatment providers for each illness monitored
- ▶ Work site monitoring, if working in licensed profession or similar profession
- ▶ Participant reports

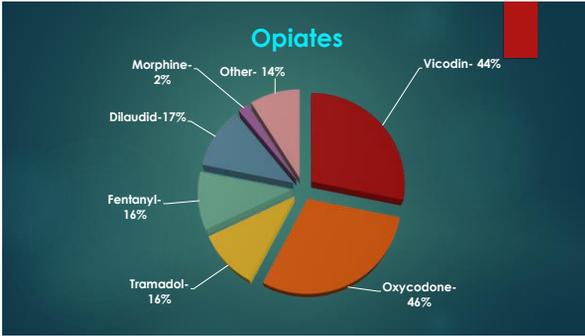
Individual Requirements

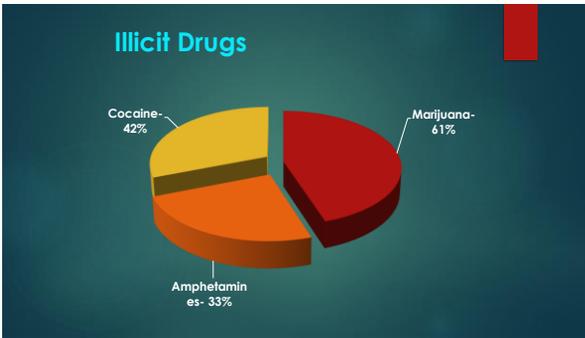
- ▶ Attendance at mutual support groups/sponsor
- ▶ Random urine toxicology screens
- ▶ Practice restrictions- hours of work, on call, shift work, access to controlled substances
- ▶ Length of monitoring average is 3 years, if diversion and/or high risk profession, up to 5 years











- ### Other Abused Substances
- Ambien
 - Soma
 - Ketamine
 - Propofol
 - Nitrous Oxide
 - Phentermine
 - Flexeril
 - Ephedrine
 - Cough Syrups

Functions of HPSP

Refer health professionals to providers to determine if they have an illness that warrants monitoring

- Evaluate symptoms, treatment needs, immediate safety and potential risk to patients
- Collaborate with medical consultants and community providers concerning treatment

Create and implement monitoring contracts

- Specify requirements for appropriate treatment and continuing care
- Determine illness-specific and practice-related limitations or conditions
