

## **Physicians Serving Physicians**

### **Purpose**

Physicians Serving Physicians (PSP) is a peer program that provides peer support, assessment, education consultation and referrals for physicians (and also for residents and medical students) who are affected by addictions, and likewise also provides support, assessment, education, consultation and referrals for their families and their colleagues.

### **History**

Physicians Serving Physicians (PSP) was founded in 1981 through the efforts of Dr. Robert (Bud) Premer MD who at that time was Chief of Orthopedic Surgery at the VA Medical center in Minneapolis with the help and encouragement of Diane Nass who became the first Executive Director of PSP in 1981, the only Executive Director PSP has ever had.

Diane Nass, a licensed alcohol and drug counselor (LADC) and herself in recovery, is a truly inspiring leader and a pioneer. Over the years, Diane also was involved in founding and leading in other recovery organizations for other professionals which support recovery of its members, Dentists Concerned for Dentists, where Diane was their CEO for some years, and also Lawyers Concerned for Lawyers.

Since its inception in 1981, PSP has served the needs of over 900 physicians and families.

Physicians Serving Physicians (PSP) and the Twin Cities Medical Society (TCMS), seeing the value of recovery services for physicians struggling with addictions, both entered into an understanding and written agreement in 2017 that TCMS would assume the leadership and functions of PSP. This process is near completion and will lead to an expansion and revitalization of PSP.

Diane Nass retired on March 1, 2018 after an illustrious career spanning over 37 years, of serving physicians and other professionals and their families.

TCMS is on the verge of hiring its new CEO who will be the Interim ED of PSP until the search a new Executive Director for PSP is completed.

PSP temporarily is continuing its work of serving physicians in recovery under the able and compassionate leadership of Dr. Jeffrey Morgan MD, PSP's Interim Medical Director.

### **Structure**

PSP is and always has been a non-profit privately funded organization.

PSP has no member dues for its physician members.

PSP is 100% funded by private donations from donor organizations

- such as Minnesota Medical Insurance Corporation (MMIC), hospitals,
- medical societies and also by individual donors including physicians.

PSP is an organization intended to meet the needs of physicians struggling with addictions as they embark on and continue their journey of recovery, and also provides critical support to the family members and colleagues and other close associates of its physician members.

PSP is not affiliated with Health Professionals Serving Professionals (HPSP) but does work cooperatively and congenially with HPSP.

HPSP was formed by public legislation in 1994 and it serves the boards of nursing, medical practice, dentistry, pharmacy and podiatric medicine.

Since its inception in 1994 and expansion in 2000 to cover all regulated health professions, HPSP has enrolled over 6000 health professionals, including close to 900 physicians.

Before HPSP was formed in 1994, PSP did stipulations and monitoring of its member required to do so by the Minnesota State Board of Medical Practice (BMP). PSP no longer serves this function of stipulations and monitoring. HPSP has assumed this function.

### **Key Functions and Services of PSP**

Again, all PSP functions and services are offered to help physicians as they begin and continue the process of their recovery from their addictions.

Critical to understanding what PSP does is to know the unique needs and characteristics of physicians in recovery.

Physicians have lower rates of addiction compared to the general population, perhaps in part due to the trend of developing their addictions somewhat later in their lives.

Physicians also have higher rates of successful recovery from their addictions compared to the general population, with physicians generally having recovery success rates at 5 years of 75% to 80%, compared to the general population having recovery rates of 40% to 60%.

Physicians higher rates of successful recovery is due in considerable part to the success of monitoring programs such as HPSP. Physicians in monitoring programs such as HPSP have higher recovery rates from their addictions, 75% to 80%, comparable to physicians not in these monitoring programs, whose recovery rates are similar to the general population, 40% to 60%.

Physicians also have higher recovery rates from their addictions in large part due to having so much to lose- their reputations, licensure and livelihood.

Physicians in certain specialties such as Emergency Medicine and Anesthesiology, and perhaps also Psychiatry, have higher rates of addictions.

All people with addictions feel shame about their addictions and endure societal stigma. This stigma is greater for those with addictions even more than it is for mental illnesses.

This stigma is accentuated by the still oft mistaken belief and misconception that addiction is a moral failing and or weakness, when we know it most certainly is not, but is a brain disease, has now a better understood biological and neurobiological basis, and can be a chronic medical condition. Yet addictions are also successfully treated when identified and treatment is offered.

Physicians do better in their recovery when they are served by organizations serving only physicians, hence meeting their and their families' unique needs for confidentiality and privacy.

PSP offers the following services:

- interventions
- family support
- counseling and education about addiction for physicians and their family members and their close colleagues, other co-workers and other concerned parties
- referral resources for addiction treatment services and facilities
- referral sources for mental health treatment services

- monthly physician-only recovery meetings. These meetings occur in multiple locations across the state and provide a uniquely private place for physicians beginning recovery and in recovery to get support and guidance and inspiration from their peers.
- PSP also serves residents and medical students.

Since medical students do not yet have their medical licensure, and hence are not under the purview of the BMP nor HPSP, PSP is a unique place for them to get the help they need.

Most physicians with addictions who enter recovery remain licensed and employed.

It has been an honor and privilege for me, and a truly inspiring process for me to be consulting to TCMS as they identify the unique values inherent in PSP and as TCMS helps expand PSP. It has been fun!

Likewise, it also has been an honor and privilege and a great pleasure to give this presentation to you today.

Karen K. Dickson MD  
Past President MPS  
MPS Program Committee  
Co-Chair of MPS Women Psychiatrists' Committee