

Pharmacist Recovery Network

Participant Handbook

2017



Southworth Associates, LLC

5530 W. Emerald, Boise, ID 83706

(208)323-9555—phone

(208)323-9222—fax

www.southworthassociates.net

Table of Contents:

Office Hours.....3

About the PRN.....4

Mission Statement.....6

Contact Information.....7

Monitoring Contract.....8

Drug Testing.....9-10

Travel/Vacation Requests.....10

Meeting Attendance.....11

Worksite Monitors/Overall Peer Monitors.....12

Reduction Requests.....13

Relapse/Medications.....14

Agonist Therapy.....15

Termination/Graduation.....16

PRN Office Hours

Building availability: 8:00 am—5:00 pm MT, Monday through Thursday,
8:00 am—4 pm MT, Friday

Normal telephone availability: 7:00 am—5:00 pm MT, Monday through Thursday,
7:00 am—4 pm MT, Friday

Emergency line availability: 24/7 through Emergency Line—(866)460-9014

2017 Southworth Holidays—Office will be closed.

Check Drug Testing for dates you are not required to check in.

Presidents Day (2/20)

Memorial Day (5/29)

Fourth of July (7/4)

Labor Day (9/4)

Thanksgiving Day (11/23)

Day after Thanksgiving (11/24)

Christmas (12/25)

*Participants experiencing an emergency or crisis
should call 911 or visit their local hospital emergency room.*

This handbook is intended to provide instruction and direction about the PRN. It is to be used in conjunction with your PRN contract and is simply meant to supplement any information already contained in your contract. It is your responsibility to know and follow the terms of your individualized contract. Your Compliance Monitor will gladly explain your requirements and answer any questions you may have.

About the Pharmacist Recovery Network

The Pharmacist Recovery Network (PRN) was formed in 2008 and is a confidential alternative to formal disciplinary action offered by the Idaho Board of Pharmacy. John Southworth, CADC, CIP, serves as the Program Coordinator and Mark Broadhead, M.D. of Reno, NV serves as Medical Consultant. While the program provides no direct counseling, treatment, or aftercare services, it does support and endorse the development of self-help groups at the local level.

The PRN was created to help any Idaho pharmacist, pharmacy tech, or pharmacy student who is impaired as a result of chemical dependency and/or mental illness/psychiatric problems. The program's primary mission is to identify and monitor pharmacy professionals with certain problems and thus to help protect the public from unsafe practice by impaired professionals. The PRN conducts interventions, coordinates placement in an evaluation/treatment program, and coordinates an individualized long-term monitored recovery program for each participating pharmacy professional. The PRN seeks to educate Idaho pharmacy professionals and other involved parties about the nature of the PRN and the problems of impaired pharmacy professionals and to establish a liaison with other professional organizations concerned with these issues.

Nationally, professional health programs have high success rates ranging from 85 to 90 percent. The PRN's experience is similar of those results. Success is generally defined as a pharmacy professional achieving a chemically free, professionally productive lifestyle at 5 years after treatment.

The PRN tries to identify pharmacy professionals with problems, to participate in interventions, to advise regarding treatment facilities, and to monitor compliance with recommended treatment plans. For chemical dependence, the PRN cannot force or prescribe recovery. It can and does document behaviors consistent with recovery. The participant has to find their own path to recovery. Participating in recovery activities exposes the participant to others who are seeking recovery, too. They share feelings and tools, but just the activities do not guarantee recovery. Vice versa the tools that work for one person may not work for another.

The PRN has become an important source of confidential support to pharmacy professionals seeking the help they need without necessarily jeopardizing their licenses. Most individuals join the program through some form of "benevolent coercion", seeking assistance because of some external pressure, which comes primarily from licensing boards or professional colleagues. However, employers, spouses, lawyers, and others have also contacted the program to report possible impairment or other abnormal behavior.

The PRN maintains a relationship with the Idaho State Board of Pharmacy that develops trust and satisfies legal requirements. As long as the pharmacy professional is in compliance with the PRN program requirements, they will not be reported to licensing or disciplinary agencies. The PRN will contact the Board if a pharmacy professional refuses to comply with PRN recommendations.

When pharmacy professionals follow their recovery program the PRN can be a powerful advocate. In the past, the PRN has advocated on behalf of participants to the Board of Pharmacy, federal agencies, judges, and employers.

The PRN receives financial support from the Board of Pharmacy. The PRN gratefully acknowledges the Board's support, however, the funds supplied by the Board are restricted in how they can be used and don't cover the entire costs of the PRN.

PRN Mission

The mission of the PRN is to assist pharmacy professionals and their families in identifying alcohol, drug, or behavioral problems that pose a potential threat to that professional, the family, or the patients/clients. The PRN will work to identify and facilitate acute treatment and to provide long-term support for the professional to return to a productive place within his/her profession.

Contacting PRN

General Help Line: 208-323-9555 ext. 206

Staff:

John Southworth, CADC, Executive Director/Program Coordinator

208-891-4726/john@southworthassociates.net

Katie Davis, Compliance Monitor

208-323-9555 ext. 103/kdavis@southworthassociates.net

Monday-Friday 7am-4pm MT

Lori Barnes-Lapp, Quality Assurance/Data Advisor

lori@southworthassociates.net

**It's best for you to communicate directly with your designated
Compliance Monitor whenever possible.**

Monitoring Contract

The PRN is designed to support the recovery process of pharmacy professionals and to help ensure the safe practice of pharmacy. **Contract requirements are there to help reinforce your own recovery program!**

This contract serves as a powerful tool toward documenting the recovery process and helping pharmacy professionals return to the practice of pharmacy. The overall chemical dependency monitoring contract is a five year contract and is designed to guide and document the participant's recovery from substance abuse or chemical dependency. Requirements of this contract include, but are not limited to, weekly attendance at mutual support group meetings (i.e. 12-Step meetings), weekly attendance at a professionally facilitated support group meeting, regular meetings with a 12-step sponsor , and participation in random toxicology drug screening.

For the pharmacy professionals who need monitoring for psychiatric/mental health issues, a contract is designed similar to the chemical dependency contract but also includes regular meetings with a psychiatrist or therapist who monitor and report on the behavioral and mental health aspect of recovery.

Once a PRN contract is signed each participant is responsible for all requirements. PRN Compliance Monitors are considering the following compliance issues when advocating for participants:

- Consistent check-in to FirstLab to see if a drug screen is required that day
- Providing toxicology samples that are negative & valid (i.e. not dilute)
- Timely completion/submission of reports
- Attendance/participation at required meetings

Drug Testing

Participants must call in and/or check in online to FirstLab every Monday-Friday between 5am-5pm Mountain time.

Check-in is not required on these holidays:

- New Year's Day
- Memorial Day
- 4th of July
- Labor Day
- Thanksgiving Day
- Christmas Day

Generally, drug testing begins at a frequency averaging once per week for pharmacists and 24-36/year for students/pharmacy techs. Other forms of drug testing may be added into the random cycle at any time. Examples include, but are not limited to, hair and/or blood tests.

PRN does not accept any other drug testing other than results completed by using FirstLab's Chain of Custody (i.e. Drug Court tests, other 3rd party tests, etc.)

When a participant misses a required check-in to FirstLab they can choose to either self-test with one of their FirstLab provided Chain of Custody forms or not test and risk having been selected. If they elect to test they should use a test option number provided to them by their Compliance Monitor.

If a participant has a shy bladder or is otherwise not able to produce enough sample they have few options. They can either stay at the testing facility until they are able to produce enough for a split specimen; they can authorize the testing facility to accept a non-split specimen so long as they understand that if the specimen comes back questionable they have no way of re-testing it if they disagree with the results; or they can return to a testing facility later that day with a new Chain of Custody form and try again.

Drug Testing cont.

You can locate testing sites nationwide by using the following website: <http://www.questdiagnostics.com/home.html>

For Patients → Find a Location → Insert street address and/or zip code → Select “Drug Screen—Urine” → Find

You are responsible for assuring you have Chain of Custody forms on hand at all time. If you need to reorder forms you'll need to do so directly through FirstLab. You can either:

- 1) login to the Testing Notification System (www.phm.firstlab.com) and select Forms/Reports, Chain of Custody Order Form, or
- 2) contact FirstLab by phone at (800)732-3784.

Travel/Vacation Requests

You should notify PRN in writing at least one (1) week prior to departure anytime you travel out of town during the Monday-Friday work week. If there are testing sites near where you will be traveling to you will be expected to continue to check in and test if selected. If you are traveling to an area where no sites are within a reasonable distance, as determined by PRN, and/or if you have plans that will make testing impossible you can make a request to be excused during this time. This request should outline the following: 1) where you are going, 2) why you are going, 3) how long you plan on being away, and 4) what requirements exactly cannot you not fulfill but traveling.

Based on the above information and your case history it is up to your Compliance Monitor to determine whether or not you will be excused from contract requirements if you travel out of town. If approved, PRN will only excuse participants from the specific item(s) requested. If you did not request to be excused from a particular requirement you will be expected to continue to fulfill it as outlined in your contract.

If you forget your Chain of Custody forms when traveling it may be possible to set up an electronic Chain of Custody form with a local lab. You'll need to contact your Compliance Monitor as early in the day as possible if this is necessary as it may take some time to accomplish.

Meeting Attendance

Client Attendance Report (CAR) forms as well as instructions on how to fill out these forms can be downloaded via our website: <http://www.southworthassociates.net/monitoring/pharmacists-recovery-program>

CAR forms must be turned in by the 5th of the month. Totals for monthly meeting attendance will be tallied on the 10th of each month and low meeting letters sent at that time if applicable.

While in your ninety (90) meetings in ninety (90) days phase of your contract only outpatient treatment classes, 12-Step meetings, and Caduceus meetings count toward this goal. Health Professionals support group, sponsor meetings, etc. are not counted toward your 90/90 nor are they counted toward your 12-Step meeting requirement once 90/90 is completed either. Outpatient treatment classes are only counted towards your meeting attendance during the 90/90 requirement.

If a participant misses a Health Professionals support group they must first notify their designated Compliance Monitor as well as their support group facilitator with an explanation on why they are missing the required group. Secondly, if you are excused from group by your Compliance Monitor you will be asked to attend two extra 12-Step meetings as replacement. Please be mindful to mark those replacement meetings on your CAR forms so your attendance is tallied correctly for the month.

A participant cannot request a decrease in Health Professionals support group attendance rate until they have met at least 90 times with the group.

PRN does not accept on-line meetings.

Caduceus meetings will count toward your 12-Step meeting requirements and should be noted the same way as 12-Step meetings on your CAR.

Worksite Monitors

A Worksite Monitor is someone who has met the PRN's guidelines and is viewed as encouraging and supportive of the participant's recovery and who understands the importance of their confidentiality. They are willing to observe the participant in their employment setting, regularly update the PRN, as well as immediately notify the PRN if they notice any behavioral or emotional changes that cause concern.

You are responsible for nominating your Worksite Monitor. Your designated Compliance Monitor will then contact your nominee and determine if they are eligible to act in this capacity. Releases should be signed for your nominee at least two (2) weeks prior to you starting the job.

Generally, Worksite monitors must:

- Be someone in the client's workplace
- Not be a subordinate or employee of the person being monitored
- Not currently a participant in the PRN program
- Per BOP, work monitors cannot be a family member to the client

PRN will call your Worksite Monitor in between quarters for a verbal update as well as send quarterly requests for written updates.

Also, be aware that the Board of Pharmacy does not allow PRN clients to have more than two work locations.

Overall Peer Monitors

An Overall Peer Monitor is a peer (typically another recovering Health Professional) that meets with participants at least once a month to:

- 1) Assess the recovery process (including how he/she is doing in recovery and how he/she is feeling about his/her recovery)
- 2) Assess compliance with the PRN contract
- 3) Support the pharmacist professionals' progressive efforts in recovery
- 4) Assess how the pharmacist professional is managing work-related stressors
- 5) Discuss work-related issues that have/may have an impact on recovery

The assigning of Overall Peer Monitors will be used on a case by case basis as defined and articulated by PRN and could include any or all of the following:

- 1) Participants who are on multiple contracts,
- 2) Participants having non-compliance issues,
- 3) Participants with behavioral needs as defined by the PRN,
- 4) Participants with more than expected difficulty with abstinence in the opinion of the PRN.

Reduction Requests

Participants may submit written requirement reduction requests to their designated Compliance Monitor. When making a request the participant is expected to look internally and be mindful of their recovery program and be detailed on the reasoning behind wanting/needing the change.

Participants are expected to wait at least ninety (90) days in between each request approval before submitting another request.

Only one request at a time will be approved. For each request change period, the participant may request a decrease of no more than:

- Six toxicology tests/year
- One mutual support group (12-Step)/week—*will never drop lower than 1 meeting/week*
- One sponsor meeting/month—*will never drop lower than 1 meeting/month*
- One Health Professionals support group meeting/month—*will never drop lower than 1 meeting/month and must have met at least 90 times with the group*

Relapse

A relapse will result in an automatic review by PRN to determine the next course of action. Typical results of this review include a re-evaluation and following of the new evaluation recommendations.

Your Compliance Monitor will ask you to submit a Letter of Explanation regarding the relapse in order to get your perspective on what happened and/or what led up to the relapse.

If the PRN decides not to officially report the relapse to the Board of Pharmacy PRN will still notify the Board of Pharmacy informally of the relapse and the course of action we have taken.

Medications

If a participant is prescribed a controlled substance and/or a potentially addictive medication PRN will recommend that the participant not practice until evidence is provided of discontinuation of that medication (i.e. negative drug screen or statement from prescriber noting the discontinuance date).

If a participant cannot get off a prescribed controlled substance or potentially addictive medication they will have their case reviewed with the Medical Consultant to get advocacy to work.

PRN utilizes “The Medication Guide for a Safe Recovery” issued by Talbott Recovery Center as a guideline on whether a medication is safe or risky for a person in recovery to take. A copy of this Guide can be found here: <http://www.southworthassociates.net/documents/pharmacy/medguide-updated-20141.pdf>.

- Class A drugs should be absolutely avoided
- Class B drugs should only be taken with physicians knowledge of the participants’ recovery
- Class C drugs should be safe to take

Participants must notify PRN of any over-the-counter medications they take along with duration of use.

A Yearly Updated Prescription form as well as list of medications containing alcohol/Guide to Alcohol Free Products can be downloaded from our website: <http://www.southworthassociates.net/monitoring/pharmacists-recovery-network>

Agonist Therapy Policy

It is the clinical opinion of the PRN that when it comes to the treatment of Substance Use Disorder, abstinence from potentially addicting substances is the pharmacologic gold standard. As such, abstinence is the expected state of all professionals who are attempting to return to work in the health care fields. The use of harm reduction techniques such as agonist therapy should be reserved for the severest forms of Substance Use Disorders and are, in general, considered too high risk to be allowed to return to work in patient care.

Still, exceptions may be made on a case-by-case basis under highly modified monitoring contracts. Agonist therapy may be considered appropriate for individuals who have been using the drug either IV or who have met the criteria for severe use disorder for a period of years. They must have had at least two relapses after appropriate treatment or while under monitoring. For those with Opiate Use Disorder, at least one of those relapses needs to have occurred while on naltrexone or other opiate receptor-blocking agent. Having proven they have the severest form of the disease, candidates for agonist therapy will be monitored for as long as they are on this form of therapy. Reduction in monitoring or recovery requirements will not be considered as long as the patient is on this form of therapy. Modifications to the contract shall be at the monitoring agencies discretion and for increased efficiency of efficacy of monitoring only. Should the individual discontinue agonist therapy, the individual may then sign a new standard contract. Time spent on agonist therapy shall not count toward the completing of a standard contract.

Termination/Graduation

Self-referred participants (i.e. participants that do not have a Board of Pharmacy Order) must request graduation in writing and the PRN will review the case. A suggested timeline for a self-referred participant to request graduation would be:

- At least one month prior to your PRN contract end date send a letter to PRN requesting graduation.

A self-referred participant must fulfill their PRN contract as dictated by their PRN approved treatment plan or the Board of Pharmacy will be notified and they, in turn, may choose to initiate proceedings.

Board-referred participants should review their Board of Pharmacy Order (Order) to determine how to proceed for graduation.

If your Order is written in a way that it will automatically terminate on a certain date, that is when you will graduate (unless this termination date is before your PRN contract end date. If that is the case then you will remain being monitored as a Self-referral until your PRN contract end date.)

If your Order does not have an automatic termination date you must request PRN's support for termination of your Order in writing as well as send a request to the Board of Pharmacy directly to terminate your Order. If the PRN agrees to support the termination of the Order then PRN will send a support letter to the Board of Pharmacy. The Board of Pharmacy typically only meets five times a year to review these requests and thus, depending on scheduling, you may be required to be monitored past your PRN contract date.

A suggested timeline for a Board referred participant to request graduation would be:

- At least three months prior to your PRN contract and Order end date send a letter to PRN requesting support for termination of your Order.
- At least three months prior to your PRN contract and Order end date send a letter to the Board of Pharmacy requesting an appearance in front of the Board of Pharmacy at their upcoming meeting, to request termination of your Order.

Only the Board of Pharmacy can release Board-referred participants. In order to graduate, PRN must wait for notification from the Board of Pharmacy that the participant's Order either: 1) terminated on its own, due to the way it was written or 2) was dismissed pursuant to Board action at an open, public meeting.

- Monitoring fees continue to accrue until either one of the above items is met.

We encourage you to make the most of our website as it contains many helpful links, documents, and other information:

<http://www.southworthassociates.net/monitoring/pharmacists-recovery-network>

Please review your contract regularly and contact your Compliance Monitor directly should you have any questions regarding this Handbook or any requirements!

