

January 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



February Testing Holiday

Monday, February 15, 2021, Presidents' Day, is a test exemption day. As a reminder you do NOT need to check in to see if a test is required on this day.

Inclement Weather

As we continue through the colder months of the season, please remember that if a collection site is closed due to inclement weather, you must inform HPSP of the closure. This will be verified by your agreement monitor. If the site is confirmed to be closed and the licensee has been in compliance with all requirements for nine consecutive months (or has been compliant thus far if enrolled less than nine months), then the licensee may use one of the 21 toxicology exemptions allotted to each licensee per year.

HPSP Outreach

The HPSP Team is scheduling informational sessions on HPSP. If the administrators of your health care workplace are interested in learning more about HPSP, please ask them to contact Scott McBeth, Ph.D. (503-802-9865; scott.mcbeth@ibhsolutions.com) for more information or to schedule a meeting.

Satisfaction Survey

Thank you for participating in the January 2021 HPSP Satisfaction Survey. Your feedback is very important to us. All input is reviewed by the HPSP Policy Advisory Committee (PAC) and, where possible, the program is adjusted. Changes made from Satisfaction Survey input in the past include in-person meetings with agreement monitors, Saturday phone support, and lower-cost toxicology panels for unemployed HPSP participants. Results and answers to your questions will be shared in an upcoming newsletter. Input will also be reviewed by the HPSP Advisory Committee. Your next opportunity to participate is July 2021.

"Take the first step in faith. You don't have to see the whole staircase, just take the first step." – Dr. Martin Luther King Jr

Mindfulness

COVID-19 has only added to the regular stresses you experience as a health professional. If 2020 has taught us anything, it is that no one is immune to stress and anxiety. We hope HPSP's newsletter, HealthProChoices, has been a resource where you can learn techniques to deal with stress and anxiety from your personal life, the workplace, and the broader world. This month, we offer an article developed by IBH's EAP side of the business about using mindfulness to cope with stress.

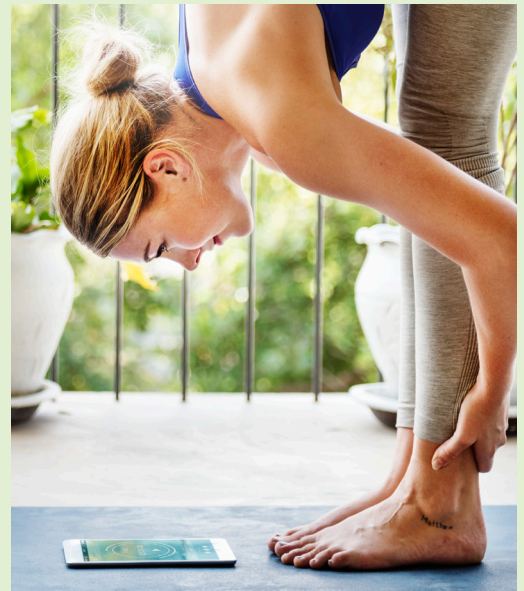
Mindfulness Helps Boost Mental Health

No one can avoid stress and a certain amount is actually good for you. But it's best to keep unhealthy levels in check. One way for children and adults to develop self-awareness and the ability to cope with and navigate feelings of stress is through the practice of mindfulness. Mindfulness is a process of active, open, nonjudgmental awareness. It is paying attention in the present moment with openness, curiosity and flexibility. It reduces stress, depression, and anxiety and can help increase your sense of wellbeing and happiness.

The 5 R's of Mindfulness

1. **Recognize.** Be aware of yourself. Recognize your thoughts and your own internal dialogue and when you're caught up in negative, fear-based thinking. Practice noticing your mental state.
2. **Relax.** Explore ways to slow down, connect with your breath and relax your mind and body.
3. **Review.** Gently review your options and ways that you might respond to a difficult situation. Ask yourself, "What can I control? What can I change (and not change)? Do I have a choice?"
4. **Respond.** Practice responding from your deepest, wisest self while letting go of fear and worry about the past or future outcomes.
5. **Return.** Check in with yourself and bring yourself back to mindfulness and an awareness of the present moment with openness and curiosity.

Source: Karen Pace, Michigan State University Extension



Resource Center: Mindfulness

Insight Timer - Free App for Sleep Anxiety and Stress: <https://insighttimer.com>

Calm - App for Sleep, Meditation and Relaxation: <https://www.calm.com>

Continuing Education: Caron

"Hope for Families: Supporting Children Impacted by a Loved One's Substance Use Disorder"

Wednesday, February 10th, 2021 11:am – 12:30pm

Meeting Registration - Zoom

News

Good News Network - Positive news stories from around the globe: www.goodnewsnetwork.org

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After Hours Phone Number

Recent inclement weather is a great reminder to save the IBH Monitoring after-hours line, 503-802-9818, in your phone. The IBH Monitoring after-hours line is available for collection site emergencies. During business hours, you should continue to use our regular line, 888-802-2843, or your agreement monitor's direct extension.

Inclement Weather

We hope you have recovered from the recent winter storms! As we continue through the colder months of the season, please remember that if a collection site is closed due to inclement weather, you must inform HPSP of the closure. This will be verified by your agreement monitor. If the site is confirmed to be closed and you have been in compliance with all requirements for nine consecutive months (or have been compliant thus far if enrolled less than nine months), then one of your allotted 21 toxicology exemptions per year may be used. Be sure to review the HPSP Guideline for Inclement Weather and Toxicology Testing at hpspmonitoring.com.



CCF Request Form

Great thanks and appreciation to the licensee who noted on the January survey that the CCF Request function of the portal, hpspmonitoring.com, was not working properly. We reported this to our IT team upon receiving the survey results and we are pleased to report it is back up and running.

You can resume using this request form:

- Simply log into your account at hpspmonitoring.com
- Look for the section labeled "CCF Request Form"
- Fill out the BRIEF form and hit "submit"
- Your request will be received by our staff and processed quickly!

"You the warrior must look forward to the future but not live in it." – Darrel James Woodr

New Addendums Out for Signature

Due to the recent passage of voter initiative Measure 110 (2020) the HPSP Advisory Committee is requiring IBH Monitoring to have HPSP licensees sign an updated addendum. The addendum adds the requirement of reporting any citation of Class E violations for possession of DEA scheduled drugs. This requirement is in addition to the standing obligation of reporting any misdemeanor or felony arrest and/or conviction.

Addendums have been sent to all Oregon Medical Board and Oregon Board of Dentistry participants. If you have not done so already, please sign/return immediately. The Oregon State Board of Nursing and Oregon Board of Pharmacy are reviewing the addendum language. As soon as a final copy is approved by these boards, it will be sent to all participants. Please be on the lookout for the updated addendum in the coming days.

Updated Guidelines

HPSP's internal Policy Advisory Committee (PAC) has begun the process of reviewing all of the program guidelines. In January, The HPSP Advisory Committee approved changes to two guidelines. The first guideline was expanded and renamed; It was originally called the "Guideline for Brief Periods of Employment and Volunteer Work." This has been replaced with a broader guideline covering all employment and volunteer opportunities. The new document is named "Guideline for Workplace and Volunteer Work Monitoring." Make sure to review this updated document.

Participants from the Oregon Medical Board will also want to be sure to review the updates to the "Guideline for Approving CME requirements for the Oregon Medical Board."

*Both guidelines will be updated on the portal (hpspmonitoring.com) shortly. In the meantime, copies were sent along with the newsletter.

HPSP January 2021 Satisfaction Survey

Thank you to all of those who participated in the January 2021 Health Professionals' Services Program (HPSP) Satisfaction Survey. This was our nineteenth consecutive biannual survey since January 2011. For this survey, 20% of active participants from all four participating boards who had been enrolled for at least four months responded. The survey serves as an ongoing quality improvement tool and provides a feedback loop for participants. Survey results are reviewed by the internal HPSP Policy Advisory Committee (PAC) comprised of the HPSP Medical Director, Consulting Psychiatrist, Program Director, and two Agreement Monitors.

Participant Survey Highlights:

- Just over 97% of participants "agree" or "strongly agree" that they understand the program's statutory monitoring requirements.
- Most participants feel that they are treated with dignity (77.8%) and respect (80.5%).
- 86.2% of participants feel that HPSP provides a "significant amount" or between a "significant amount" and "some" structure. 88.9% of respondents feel this way about the program's accountability.
- A minimum of 86% of participants respondents agreed or strongly agreed that:
 - questions/concerns are responded to within one business day;
 - questions/concerns are addressed fully;
 - information is communicated clearly and professionally; and
 - the agreement monitor is knowledgeable about his/her case.
- Just over 80% of respondents indicated that they had used the portal and, of those, just over 75% find the portal "useful" or "extremely useful."
- 83.4% rated the program as "excellent," "above average," or "average."

HPSP January 2021 Satisfaction Survey (Continued)

The survey provides an opportunity for participants to leave open ended comments. For this reporting period, 16 participants left responses. All comments are appreciated and have already been reviewed by the PAC. Seven responses were negative and have been internally investigated. Four responses were positive with comments of thanks and noted appreciation of the support from the licensee's agreement monitor. The other responses were programmatic in nature with two licensees asking for reminders during the day if they had not already checked the app to see if they had to test. Additionally, several participants made note of the difficulties COVID has placed on their schedules on days they have to test due to shortened collection hours at some collection sites. HPSP's staff has been working diligently throughout the pandemic to provide alternate testing sites whenever possible. As noted earlier in the newsletter, another licensee commented about the CCF Request form not working on the portal and this has been corrected.

Many suggestions, including removing the workplace monitor requirement, are not possible as they are explicit monitoring program components. The boards require a workplace monitor in order to ensure that public safety is being upheld. This is one way that HPSP is able to serve our dual purposes of providing licensees a second chance while protecting public safety. The PAC does consider program changes that are in the participant's benefit and within the program's span of authority.

Your next opportunity to participate in the HPSP Satisfaction Survey is July. We look forward to your participation.

Resource Center: Mindfulness

Insight Timer - Free App for Sleep Anxiety and Stress: <https://insighttimer.com>

Calm - App for Sleep, Meditation and Relaxation: <https://www.calm.com>

Nothing Much Happens - Podcast featuring "bedtime stories for grown ups" in a mindfulness-focused format: www.nothingmuchhappens.com

News

Good News Network - Positive news stories from around the globe: www.goodnewsnetwork.org

Continuing Education

Under Pressure: Nursing Care During Community Crises. March 10, 2021 at 10AM via Zoom.

Moderated by Susan King, RN, MS, CEN, FAAN, retired Executive Director of the Oregon Nurses Association, this free event highlights the struggles and triumphs of Oregon nurses as they have cared for our community and themselves during this long emergency including a pandemic and social, political and economic upheaval. Speakers will consider the mental and physical health of our essential health care workers and of the patients, young and old, under their charge.

[Click Here to Register](#)

March 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



“Help! I have a concern...”

Your agreement monitor is here to help you with any concerns. If your agreement monitor is not available, call the general number at 888.802.2843, and one of our other agreement monitors will step in to help. Regardless of who helps you, if you are not satisfied with the resolution of the situation, please let your agreement monitor know. Your agreement monitor may present your concern to our Policy Advisory Committee which consists of senior staff members and both our Medical & Psychiatric Consultants. One additional option is to reach out to the HPSP Manager, Kate Manelis, LMSW at 503.802.9848 or kate.manelis@ibhsolutions.com. Again, please know that we are here for you.

“But I already submitted it by fax!”

Does this sound familiar? It does to our ears because all too often a fax fails to complete successfully and the sender does not realize it. So that you don't find yourself in this position we encourage you to ensure you wait for confirmation that every page of the fax was successfully delivered. That said, we find that participants are often more consistently successful emailing documentation to us at hpsp@ibhsolutions.com. Need more ideas? Talk to your agreement monitor!



Connecting in a New Way

The last year has pushed many of us to experiment with using Zoom and other platforms in both our work and social lives. Most have found that, although they may not be able to physically get together, at least they can SEE each other and interact in a different way. We are excited to begin rolling that same idea out at IBH Monitoring after a successful pilot study. As part of your recovery support, your agreement monitor can setup a video conference meeting with you at the time of your annual review or another mutually agreeable time. During the video conference you will review your progress and plans for the year ahead. We hope this opportunity to interact with your agreement monitor in a new way will be helpful!

Herbal Supplements

One of the most common questions agreement monitors are asked by participants is, “Can I take XYZ supplement?” We recognize that vitamins and herbal supplements are an increasingly popular choice and we want to provide some guidance around how supplements may interfere with your success in monitoring.

Remember that herbal supplements are not regulated by the FDA and are not required to undergo clinical trials and testing. There are no guarantees that the ingredients listed on the bottle are actually in the supplement (the opposite is also true – there may be ingredients in the supplement that are not listed). As such, remember that you are proceeding at your own risk when you use supplements. We strongly recommend that you seek guidance from your primary care provider prior to starting any new supplement.

There are some supplements that we know should NOT be used by participants in monitoring because they may interfere with toxicology testing and cause positive toxicology results.

- Many tinctures and elixirs are made using alcohol – these are not permitted by HPSP. If you are interested in taking a tincture or elixir, you are encouraged to look for an alcohol-free version.
- Poppy seeds and California poppy can cause toxicology tests to be positive for morphine or codeine. Any food, drink, or supplement with poppy/poppy seeds as an ingredient is not permitted by HPSP.

If you have a question about a specific supplement, your agreement monitor may be able to provide guidance as to whether the ingredients listed on the product would be contraindicated for monitoring. However, HPSP will not guarantee that any vitamin or supplement product is “safe” or “approved.” There may be ingredients in the product that are not listed on the packaging, and it is impossible for HPSP to know how every ingredient may metabolize. If a supplement results in a positive test, please remember that we must follow the guidelines for non-negative toxicology results; this may include a report of non-compliance to the licensing Board and a requirement to step-down from practice pending a third-party evaluation.

We are here to support you on your wellness journey. We hope this information provides some clarity. Please let your agreement monitor know if you have any questions.

More Fall-Out from the Pandemic

We have been carefully monitoring the research on the impact of the pandemic on mental health and addictions. The results are not surprising but are extremely concerning. The research below highlights the increase in alcohol use, anxiety, and depression. You should be proud of yourself for your continued success in leading a healthy lifestyle throughout this pandemic. That said, we know that more support and help is going to be needed in the coming months and we are here for you!

- APA survey (February 2021) found: “Nearly 1 in 4 adults (23%) reported drinking more alcohol to cope with their stress.” (Source: <https://www.apa.org/news/press/releases/2021/03/one-year-pandemic-stress>)
- From the Kaiser Family Foundation: “The COVID-19 pandemic and the resulting economic recession have negatively affected many people’s mental health and created new barriers for people already suffering from mental illness and substance use disorders. During the pandemic, about 4 in 10 adults in the U.S. have reported symptoms of anxiety or depressive disorder, a share that has been largely consistent, up from one in ten adults who reported these symptoms from January to June 2019 (Figure 1). A KFF Health Tracking Poll from July 2020 also found that many adults are reporting specific negative impacts on their mental health and

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well-being, such as difficulty sleeping (36%) or eating (32%), increases in alcohol consumption or substance use (12%), and worsening chronic conditions (12%), due to worry and stress over the coronavirus. As the pandemic wears on, ongoing and necessary public health measures expose many people to experiencing situations linked to poor mental health outcomes, such as isolation and job loss.” (Source: www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/)

Your Stress Management “Urgency Kit”

There are many techniques for managing stress, but you may only be aware of a few, such as exercising, meditation, journaling, or talking things over with a friend. Experimenting with different ways of managing stress can help you discover a collection of dependable techniques that fit your life and work for you—a personal stress management “urgency kit.” Try these quick, “on the fly” stress management techniques to see if they qualify for your kit. 1) Peel an orange. Studies show the smell of citrus can help reduce stress; 2) take a walk in green space; 3) listen to classical music for five minutes; 4) drink black or green tea; 5) try a guided imagery exercise using all five senses; 6) declutter your desk; 7) spend ten minutes in the sun. (Source: DFA Publishing)

Continuing Education

Medical and Behavioral Health Providers: Join us to better serve Veterans and Military Service Members in your community! Oregon Veterans face a higher suicide rate than their civilian peers. Veterans face unique barriers to accessing medical and behavioral healthcare. Many providers, although highly skilled, are unfamiliar with Military culture and the unique needs of Veterans as they pertain to behavioral health, and more specifically, to suicidality.

Military Culture Awareness and Suicide Prevention Training for Providers is a two-day training that addresses in-depth knowledge and skills to bridge this gap between providers and Veterans who seek care.

By educating providers on Veteran and Military-specific language and other cultural cues, as well as providing access to specific suicide prevention and intervention assessments, we hope to improve providers’ familiarity with Service Members’ needs around mental health and suicide.

Earn up to 12 AMA PRA Category 1 Credits™*

The two-day trainings are **free** and held virtually on **Zoom** between March and May 2021. There are two types of trainings available:

1. Regional trainings where Providers can share local resources and challenges as a cohort
2. Statewide trainings focusing on under-served populations, including Veterans and Military Service Members who are LGBTQ+, Women, and/or Tribal Members. Click [here](#) for additional information on training dates.

Addictions 2021: May 14-15, 2021 | Live Virtual Program | Register Today

Prior to the COVID-19 pandemic, it was estimated that 22 million Americans suffered from an addiction to alcohol or drugs and approximately 20% of all Americans smoked cigarettes. Early reports suggest these numbers have grown significantly as a result of the pandemic and other national and world events in 2020. The surge of opioid addiction and deaths from overdose are a national crisis.

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McLean Hospital, the largest psychiatric hospital of Harvard Medical School, is pleased to offer this annual conference bringing together some of the foremost authorities in the addiction field. Topics will include new, evidence-based treatments, the nuances of treating comorbid disorders along with addiction, and special populations. We are honored to have a prestigious and accomplished faculty. Smaller, breakout sessions each afternoon will allow for in-depth exploration of topic areas in an interactive and stimulating format that should enhance learning and skill-building.

Who Should Attend: This course is targeted to Primary Care and Specialty Physicians, Nurses, Nurse Practitioners, Physician Assistants, Psychologists, and Counselors. This course may also be of interest to physicians who practice in Anesthesiology, Emergency Medicine, Family Medicine, Internal Medicine, Lifestyle and Mind-Body Medicine, Pain Medicine, Pediatrics and Adolescent Medicine, Psychiatry, Neurology, and Psychology and Mental Health.

The Harvard Medical School is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Harvard Medical School designates this course for a maximum of 13.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. **Register Today**

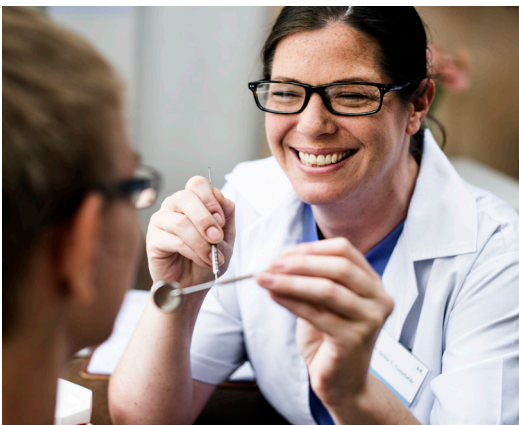
Unique Opportunity: Addiction Medicine Fellowship

The Department of Psychiatry and Health Behavior at the Medical College of Georgia is actively recruiting for Addiction Medicine Fellowship candidates. This is a one-year fellowship. Physicians board eligible in any medical specialty with a minimum of one year of sobriety are eligible to apply. We believe that physicians with both practical work experience and in recovery are an asset to our program in that their experiences add depth to our program and is helpful to trainees right out of residency. If you have a physician in your program that may be considering a career transition, please encourage them to reach out to Tina Hall at 352.665.5104.

April 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



Agreement Monitors

We understand that consistency is integral to supportive recovery and monitoring. One of our program goals is to maintain consistent relationships between participants and their Agreement Monitor. We want to acknowledge that in the past several months there have been changes to our HPSP staff, which has resulted in some participants being transferred to different Agreement Monitors, and those changes can feel disruptive. Please know that we do not take these transfers lightly, and we truly only make changes when they are unavoidable. If you have any concerns or questions about this issue, please contact the HPSP Program Manager, Kate Manelis, at kate.manelis@ibhsolutions.com or 503-802-9848.

Travel

Please remember that travel requests need to be made two weeks in advance in order to guarantee appropriate site allocation and chain of custody form distribution. The Guideline for Toxicology Testing Exemptions and all HPSP Guidelines can be found at www.hpspmonitoring.com under the resources tab.



Weekly Check-ins – A Quick Reminder

Checking in weekly with your Agreement Monitor provides recovery support by reviewing recovery activities and addressing concerns. In addition, the weekly check-in is also an opportunity for licensees to update their Agreement Monitor on changes. These changes include:

- Home address
- Work address
- Employment
- Prescribed medications
- Credit card
- Health-related issues

The Guideline for Weekly Contact with Agreement Monitor and all HPSP Guidelines can be found at www.hpspmonitoring.com under the resources tab.

Over-the-Counter Allergy Relief

Seasonal allergies can be challenging to say the least! As a reminder, several over-the-counter medications may have sedating or stimulating effects, including centrally acting antihistamines such as diphenhydramine (Benadryl), and hydroxyzine (Vistaril or Atarax). A complete list can be found here: [Management of Psychotropic Medications and Medications with Addictive Potential](#). (Look under the resources tab at www.hpspmonitoring.com.)

Be sure to have your primary care physician submit a Medication Management Form if you are using any of the listed over-the-counter medications BEFORE you have a non-negative test. This is the same form that is filled out if you have any prescriptions with addictive potential and/or psychotropic medication. The Medication Management Form and other useful forms can be found at www.hpspmonitoring.com under the resources tab.

IBH Monitoring: **Meet our Staff**

Health Professionals' Services Program



Kate Manelis, LMSW
Program Manager
Health Professionals' Services Program

Kate has been with IBH Monitoring since the Health Professionals' Services Program began in 2010. Prior to that, she worked at IBH (then RBH) on the Employee Assistance Program team, and spent the first several years of her career as a Psychiatric Social Worker at Atascadero State Hospital in California. She obtained her BA in Social Work from Goshen College in Goshen, Indiana, and her Master of Social Work degree from Fresno State University. Outside of work, she volunteers as a Site Coordinator for SMART Reading and is the Treasurer of the Parent Support Organization for her children's middle school. She loves spending time with her family (which includes her spouse, two kids, two dogs, and three pet mice), reading, the Oregon coast, and anything true crime related.



Jenn Leddin, LMSW, CADC II
Lead Agreement Monitor
Health Professionals' Services Program

Jenn Leddin joined IBH Monitoring as an Agreement Monitor for the Health Professionals' Services Program (HPSP) in October 2018. Prior to joining IBH, she worked as a mental health therapist and alcohol & drug counselor in both residential and outpatient treatment centers for individuals and families. Jenn graduated from Portland State University with her Master of Social Work degree and became a licensed Social Worker in the state of Oregon. She is also certified as an Alcohol & Drug Counselor II through the Mental Health and Addiction Certification Board of Oregon. In her spare time, she enjoys playing softball and spending time with her family.



Ashlea Tenner, MA, LPC, CADCI
Agreement Monitor
Health Professionals' Services Program

Ashlea has been with IBH Monitoring since January 2018, working as an Agreement Monitor with primarily Medical Board and Nursing Board licensees in the Health Professionals' Services Program (HPSP). Prior to joining IBH, Ashlea was working as a dual diagnosis, individual, family, and group therapist at Northwest Behavioral Healthcare Services, an acute adolescent residential treatment center in Gladstone, OR. She has prior experience treating healthcare professionals and co-running an LGBTQIA2S+ support group as a chemical dependency therapist at Hazelden Springbrook in Newberg, OR as well as history working as an admissions counselor at Catherine Freer Wilderness Therapy Program for Adolescents in Albany, OR. Ashlea has a bachelor's degree in psychology from OSU and master's degree in mental health and addictions counseling from Lewis and Clark, as well as specialized educational training in adolescent therapy, eating disorder treatment, problem gambling, and ecotherapy. Outside of work, Ashlea enjoys adventures with her family, spending time outdoors, and creating art through watercolor, food, and nature crafting.



Scott McBeth, Ph.D.
Agreement Monitor
Health Professionals' Services Program

Since 2015, Scott McBeth has been with IBH Monitoring as an Agreement Monitor for the Health Professionals' Services Program (HPSP). Scott is experienced in the social sciences and has worked in both in-patient and out-patient treatment for chemical dependency. Scott has a MS in Education and a Ph.D. in Education, plus has all the course work for a MS in Marriage and Family Therapy. Scott has also worked for 12 years in higher education as a professor and as an Academic Advisor. In his spare time, he has raced as elite Triathlete and now is an All American age group triathlete. He enjoys spending his downtime with his wife and his two Siberian Husky dogs.



Kathryn (Kat) Peil, BS
Agreement Monitor
Health Professionals' Services Program

Kat Peil joined IBH Monitoring in April of 2021 as an Agreement Monitor for the Health Professionals' Services Program (HPSP). Prior to joining the monitoring team, Kat gained valuable experience as a mental health crisis clinician and case manager in southwestern Washington. During that time, Kat worked with individuals experiencing mental health and/or substance use disorders which has allowed her a greater understanding of recovery. She currently holds a Bachelor of Science degree in Psychology from Washington State University and certification in case management. Kat enjoys spending her free time with her family, gardening, cooking, and hiking.



BreAnne Butler-Smith, BA
Agreement Monitor
Health Professionals' Services Program

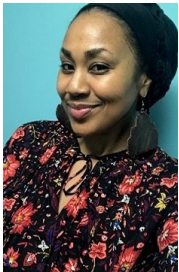
In March of 2021, BreAnne Butler-Smith joined IBH Monitoring as an Agreement Monitor for the Health Professionals Services Program (HPSP). Prior to joining the monitoring team BreAnne worked as a mental health case manager for youth in Northern California. During BreAnne's time as a mental health case manager, she gained invaluable experience learning about the struggles with co-occurring disorders and the long term effects of trauma within family systems and youth. She is currently earning her Master's in Social Work and already holds a Bachelor's in Social Work. BreAnne enjoys spending time with her family and getting outside whenever possible.



Ashley Cohen, BA, CADC II, QMHA I
Agreement Monitor
Health Professionals' Services Program

Ashley Cohen joined IBH Monitoring in March of 2021 as an Agreement Monitor for the Health Professionals' Services Program (HPSP). Prior to joining the monitoring team, she worked with community organizations to create addiction outreach and treatment programs aimed at eliminating barriers to treatment. Ashley has provided addiction treatment services in residential and outpatient treatment centers, working with both adolescents and adults. Ashley is a Certified Alcohol and Drug Counselor and a Qualified Mental Health Associate with the Mental Health and Addiction Certification Board in Oregon. She received her Bachelor of Arts degree in Communications from the University of Wisconsin.

IBH Monitoring



Christa Lee, LMSW (MD)
Program Manager
IBH Monitoring

Christa Lee is the Program Manager for IBH Monitoring Programs, including the Delaware State Professionals' Health Monitoring Program (DPHMP) and the Christiana Care Monitoring Program (CCMP.) In this role Christa consults with state boards and employers, partnering with them to protect public safety and foster continued recovery for health professionals and other employees through supportive monitoring. Christa was hired by IBH in 2010 as the Team Lead for the Health Professionals' Services Program for the State of Oregon. She assisted in implementing & rolling out the statewide monitoring programs for healthcare professionals in both Oregon and Delaware and has served in the capacity of an Agreement Monitor since that time.

Christa graduated with her Master's in Social Work degree from the University of Maryland, School of Social Work in 2008, specializing in Mental Health & Substance Abuse with a sub-specialization in Employee Assistance Programs. After graduating, she was hired by First Advantage, Inc. as the Program Manager for their SAP Services program. As the Program Manager, she was responsible for managing the chemical dependency programs for a host of companies & organizations whose employees had tested positive in the workplace.

Christa is a strong advocate for overall health and wellness and is a certified spinning and fitness instructor. She enjoys working out, traveling, and spending time with her family.



Dylan H.
Agreement Monitor
IBH Monitoring, including DPHMP, CCMP, Extended Monitoring, SLAC

For more than eight years, Dylan H. has filled a variety of roles at IBH providing much needed assistance. Since 2019, he has served as an Agreement Monitor for the Delaware Professionals' Health Monitoring Program (DPHMP). He also serves as the enrollment coordinator for DPHMP, Christiana Care Monitoring and other IBH Monitoring programs. It is his goal to help each participant successfully navigate the enrollment process. Dylan also manages the Extended Monitoring Program, a monitoring program for those looking to document their ongoing recovery work for both accountability and personal growth purposes.

Previously Dylan worked with the Health Professionals' Services Program (HPSP) as the Enrollment coordinator, building on his experience as an Administrative Case Coordinator in the operations side of the department. In 2013, Dylan joined IBH working in the employee assistance program.

Operations Team



Tina Mewhinney
Monitoring Operations Manager
IBH Monitoring

Tina Mewhinney is the Operations Manager for IBH Monitoring. In this role, she manages vendor relations, is the liaison with finance, and manages the Operations Team, ensuring seamless delivery of service.

Tina's expertise is based on her years of experience working within IBH Monitoring. She joined IBH in July of 2012 as an Administrative Case Coordinator. She served as a liaison with IBH's toxicology vendors, coordinated toxicology sites for participants and became an expert in monitoring operations. In 2019, she became the team lead for operations and served as the Program Manager for several programs, including Combined Transport, Oregon State Lawyers Association, Montana and Adolescent Intervention Management. In January of 2020 Tina took on the dual roles of Operations Manager and Portland Office Manager. In her spare time, she enjoys spending time in nature, time with her family, cooking and photography.



Mark Stotts
Monitoring Assistant
Operations Team

Since 2014, Mark has been an integral part of monitoring department operations. His primary focus is toxicology, from account set-up to testing processes. Mark assists with other operations duties such as data entry as well. Mark received his Bachelors of Science with a major in Psychology from Portland State University in 2013. Outside of work hours, Mark can be found running, competing in obstacle course races, hiking and practicing archery.



Kristine Herrington
Assistant Case Coordinator
Operations Team

Kristine Herrington joined the IBH Monitoring team in May of 2018. Kristine is primarily responsible for participant financials. Kristine also supports the Monitoring team with a multitude of administrative tasks and special projects. Kristine holds an Associate's Degree as an Administrative Assistant from Lewis- Clark state college in Idaho. Previously Kristine worked in a non-profit drug treatment center. In her spare time, Kristine likes spending time with her grandchildren and being outdoors.



Ali Kelly
Administrative Assistant
Operations Team

In November 2019, Ali Kelly started with IBH and worked with several departments prior to finding her home with the Monitoring Department in April of 2020. As the department's administrative assistant, Ali verifies testing, processes invoices, manages mail processes along with other projects. Ali loves reading, writing, music, art, crafting, and hiking with her family.

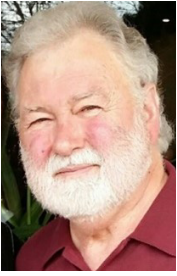
Administrative Team



Lori Govar, MSW, MBA
Director, IBH Monitoring

As the Director of IBH Monitoring, Ms. Govar oversees program management, sales, and data management. She brings a wealth of experience to this role. Previously, she was the Report & Data Manager for IBH Monitoring.

Ms. Govar's expertise is grounded in her experience in direct client service in the EAP field, previously providing telephonic intakes, case management, high risk case consultation and compliance monitoring. Her subsequent experiences as a Senior National Account Manager included program implementation, program analysis, management consultation, organizational development and educational seminar development and provision. Later, Ms. Govar held the role of Operations Officer at First Advantage Workplace Services, overseeing account management, network management, and operations, including information systems development and maintenance, systems analysis, quality improvement, financial analysis, CEAP supervision and staffing. In her role as Report & Data Manager for IBH Monitoring, Ms. Govar managed the development of the monitoring information system, including working with the direct service team to identify needs; planning and implementing small projects; and partnering with full time programmers for large projects. Ms. Govar queried the system for relevant data, analyzed the findings and prepared succinct, clear reports. Additionally, she implemented surveys and delivered reports analyzing findings and developed pricing for program services.



Dr. Joseph H. Autry, III, MD
Psychiatric Consultant

Dr. Autry is a Board Certified psychiatrist and a former member of the Federal Senior Executive Service. For more than 25 years, Dr. Autry held key leadership positions in mental health and substance use research, policy and administration and has maintained a private psychiatric practice. He retired from federal service in April 2009, and received commendations from the Secretary of Health and Human Services (HHS) and the Secretary of the Department of Veterans Affairs (VA).

While serving in the Federal Senior Executive Service, Dr. Autry was responsible for the implementation of Executive Order 12564, which requires federal agencies to establish comprehensive drug-free workplace plans. He also oversaw the management of the National Laboratory Certification Program, the implementation of the Mandatory Guidelines for Federal Workplace Drug Testing Programs and development of the system of training for laboratory inspectors and Medical Review Officers. He has also served as the Deputy Administrator for the Substance Abuse and Mental Health Services Administration and from 2001-2002 he served as the acting Administrator of the agency.

A recipient of both the Presidential Rank Award for Meritorious service and the Presidential Rank Award for Distinguished Service, Dr. Autry is also a Distinguished Life Fellow of the American Psychiatric Association.



Dr. Robbie Bahl, MD
Medical Director

Dr. Bahl is a triple Board-Certified medical physician, specializing in Addiction Medicine and Family Medicine. Dr. Bahl subspecializes in the monitoring of impaired professionals, and is the Medical Director of the State of Oregon's Health Professionals' Services Program (HPSP).

Dr. Bahl is also a board-certified Medical Review Officer (MRO). He is the Medical Director of Shanti Recovery & Wellness in Portland, Oregon, where he performs Suboxone and Buprenorphine Inductions and Maintenance, Chronic Pain Management, Chronic Opioid Management, Alcohol Dependence Treatment, Vivitrol and Sublocade Injections, and psychotherapy. Dr. Bahl also holds privileges at several hospitals in the Portland metro area where he performs inpatient detoxification and rehabilitation.

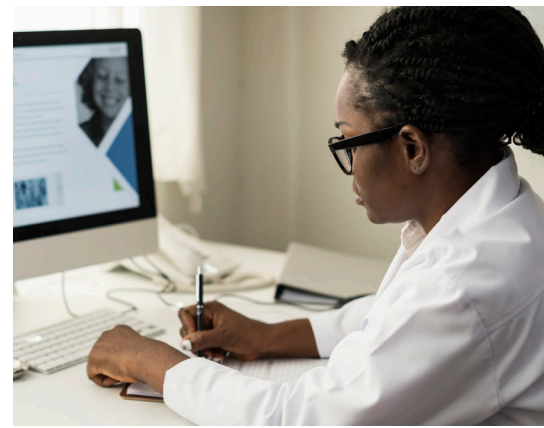
Dr. Bahl has been formally trained in Addiction Medicine in the university setting. He completed an accredited ABAM fellowship training program at The Addiction Institute of New York in Manhattan at the Columbia University College of Physicians and Surgeons. In addition, he has worked on the national level by sitting on the Board of Directors of ASAM, the American Society of Addiction Medicine.

"I strive to change society's outlook on drug addiction. Addiction is a chronic neurobiological illness and should be treated as one by medical professionals, governments, and the public. The medical, social, and financial tolls of the disease on public health are astronomical. With education and quality treatment, addiction medicine will gain further recognition as a major medical specialty."

May 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



Memorial Day

Monday, May 31, 2021, is a test exemption day. As a reminder you do NOT need to check in to see if a test is required on this day. Please be aware that HPSP's main office will also be closed on May 31st. Our answering service will be available and/or you can reach us through our after-hours emergency number at (503) 802-9818. Leave a message if there is no answer and your call will be returned quickly.

New Resource! Workplace Monitor Orientation Guide

HPSP is pleased to provide all new and existing Workplace Monitors with an orientation guide. This is intended as a resource for our Workplace Monitors to learn more about HPSP as a whole, as well as more specific information about the role and responsibilities of a Workplace Monitor. Agreement Monitors are in the process of sending the guide out to all current Workplace Monitors. It can also be found on portal (www.hpspmonitoring.com).



Guideline Update

At the April meeting of the HPSP Advisory Committee, changes were approved to the Toxicology Testing Exemption guideline. New language was added stating that "The Policy Advisory Committee (PAC) must approve all requests for toxicology testing exemptions within the two weeks prior to the licensee's estimated date of completion, as the licensee must be available to participate in required program completion activities during that time." Please speak with your Agreement Monitor if you have questions about this change.

You can review this updated document on portal (www.hpspmonitoring.com), under Resources, then Guidelines.

CEUs!!!

The APhA Institute on Substance Use Disorders is being held “virtually” June 1st - 4th. The program offers a total of 8 CEUs. Financial Assistance is available for pharmacist licensees through the Professional Recovery Network (<http://www.prnoforegon.org/>). For more information, visit <https://aphainstitute.pharmacist.com/>



A Frontline Provider Credits The Physician Health Program For Teaching Him That Good Self-Care Is A Key To Surviving The Pandemic

This story is being reprinted from the FSPHP 2021 Spring Issue of Physician Health News: <https://www.fsphp.org/newsletters>

I am a frontline provider at a busy hospital at the epicenter of the COVID pandemic. Most days, I get home from work completely overwhelmed and exhausted. I collapse on the floor and can barely summon the energy to speak. When I do, it is often unintelligible. My family looks at me in horror. My back aches from long shifts spent hunched over critically ill COVID patients. My face is raw and sore and chafed. There were many shifts when I had to wear inadequate PPE and there was the constant awareness of putting my own health and that of my family in jeopardy. Many patients are on ventilators and have a grim prognosis. For those who are lucky to be awake, there is never quite enough time for compassion or connection. There are always more patients to see, the hospital quite literally overflowing with patients. The final indignity is that we were forced to take a pay cut, which was even more demoralizing. But throughout this pandemic, even in the worst of times, I have always felt that I will be okay and that I can get through this with grace. A number of years ago, I experienced a devastating personal and mental health crisis and was introduced to the Physician Health Program. Through their guidance and support, I was able to get the necessary treatment and therapy to get my life and career back on track. The enduring lesson from that experience is that I cannot rely on willpower and self-reliance alone to overcome anxiety, substance abuse, or PTSD. That was an extremely difficult and uncomfortable lesson to learn because willpower and self-reliance are the very traits that helped me excel at every level of my education and medical career. It took time, but I ultimately learned to embrace vulnerability and fallibility not as weaknesses but as signs of my humanity. As I moved forward with my life, it was with a commitment to always put personal health, wellness, and family first over career and ambition. As we start the new year and the pandemic rages unabated, I made the difficult decision to cut back on my work hours. This has paid immediate dividends on my overall mood and energy level. I reconnected with a therapist I used to see, which has been incredibly helpful. Also important has been making sure to get plenty of sleep. I used to take pride in being able to get by on only four to six hours of sleep, but now I aim for at least eight hours each night. I eat a healthy diet and get regular exercise. I meditate and practice yoga daily. I am reading more and watching more TV. As I write this, I have an awareness that these may come across as indulgences in the midst of a national and global health crisis. But I assure you that these are not indulgences; these are critical things that I need to do to be at my best as a provider and serve the public. When I wake up in the morning to get ready for another difficult day at work, I feel well rested. My head is clear and my heart is open. I listen to inspirational music as I drive in to work and I feel incredible gratitude—gratitude for my own health and also for the privilege to be able to help others in this time of need.

Would you like to share YOUR success story? We'd love to hear it and to share it. Contact your agreement monitor or Kate Manelis, Program Manager, at kate.manelis@ibhsolutions.com.

Common Stress Reactions

Behavioral

- Increase or decrease in activity level
- Substance use or abuse (alcohol or drugs)
- Difficulty communicating or listening
- Irritability, outbursts of anger, frequent arguments
- Inability to rest or relax
- Decline in job performance; absenteeism
- Frequent crying
- Hyper-vigilance or excessive worry
- Avoidance of activities or places that trigger memories
- Becoming accident prone

Physical

- Gastrointestinal problems
- Headaches, other aches and pains
- Visual disturbances
- Weight loss or gain
- Sweating or chills
- Tremors or muscle twitching
- Being easily startled
- Chronic fatigue or sleep disturbances
- Immune system disorders

Psychological/Emotional

- Feeling heroic, euphoric, or invulnerable
- Denial
- Anxiety or fear
- Depression
- Guilt
- Apathy
- Grief

Thinking

- Memory problems
- Disorientation and confusion
- Slow thought processes; lack of concentration
- Difficulty setting priorities or making decisions
- Loss of objectivity

Social

- Isolation
- Blaming
- Difficulty in giving/accepting support or help
- Inability to experience pleasure or have fun

(Adapted from CMHS, 2004)

Self-Care After a Crisis

Most professionals are finally experiencing some relief from the crisis-mode of the COVID pandemic. As a crisis resolves, is it not unusual to experience a delayed stress response. Stress responses can vary widely from person to person, and between situations. (See listing of common stress responses.) You may find yourself in a state of physical and emotional fatigue, and you may feel some ambivalence about giving up your disaster role. Be aware that you may experience some 'letdown' when the disaster operation is over (CMHS, 1994). It is important to give yourself time to stop and reflect on the experience and how it changed you. Following are some action steps that may be helpful to get closure in the weeks after the crisis.

- Consider participating in an organized debriefing or critique.
- Reconnect with your family.
- Have a physical checkup.
- Continue normal leisure activities. Stay involved with your hobbies and interests.
- Consider stress management techniques such as meditation, acupuncture, and massage therapy.
- Draw upon your spirituality and personal beliefs. Take advantage of faith-based counselors and workplace counseling units.
- Avoid using alcohol, tobacco, or drugs to cope with stress. [Speak to your Agreement Monitor or Treatment team for support and alternate coping method suggestions.]
- Use Employee Assistance Programs.
- Make sure to take care of YOU!



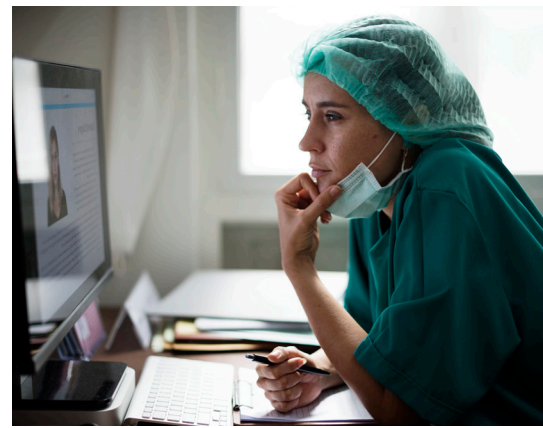
Source: U.S. Department of Health and Human Services. A Guide to Managing Stress in Crisis Response Professions. DHHS Pub. No. SMA 4113. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration

<https://store.samhsa.gov/sites/default/files/d7/priv/sma05-4113.pdf>

June 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



Outreach

What do Legacy Health, St. Charles Health System (Bend), the Oregon Department of Corrections, Oregon State Hospital, Mt. Hood Community College, and Walla Walla University School of Nursing have in common? They have all benefited from a presentation on the Health Professionals' Services Program in the last 6 months. We would love to present for your practice, organization, or school as well. Benefits include a greater understanding and appreciation of the program so that you and other participants can be better supported and so that other licensees can access services more easily when needed. If you know of an interested group, reach out to your agreement monitor who will pass the message along to Kate Manelis, Program Manager.

Addiction and Poetry

JAMA published a poem about addiction that you may appreciate. Check it out by clicking [here](#).



Travel

It is officially summer! It is a great time to travel and take vacations! However, please remember that travel requests need to be made two weeks in advance in order to guarantee appropriate site allocation and chain of custody form distribution. The Guideline for Toxicology Testing Exemptions and all Guidelines can be found at www.hpspmonitoring.com under the resources tab.

Also, when packing for your trip don't forget to pack your chain of custody forms, just in case. Have fun and safe travels!

July Testing Holiday

Monday, July 5, 2021, is a test exemption day in honor of Independence Day. As a reminder you do NOT need to check in to see if a test is required on this day. Please be aware that HPSP's main office will also be closed on July 5th. Our answering service will be available and/or you can reach us through our after-hours emergency number at (503) 802-9818. Leave a message if there is no answer and your call will be returned quickly.



Supporting Your Teenagers

Caron Treatment Program recently provided some helpful tools and information about supporting teenagers that IBH is passing along. This should not be interpreted as an endorsement for or against their services; IBH has no affiliation with Caron Treatment Program.

From Caron Treatment Program:

Summer is a time to relax and recharge. After the year we've just had, it is greatly needed. With summer comes the Fourth of July, barbeques, senior week, graduations, and (hopefully) vacations. In other words, it is party season.

For teens with more time on their hands and less responsibility, this can equal a time of greater risk for substance use. Binge drinking and its many potential consequences are just one of the things we need to be talking with teens about and setting rules and expectations around.

The teen years are a time of exploration and navigating a desire for more independence. As a result, some teens make the risky decision to engage in binge drinking. Gretchen Hagenbuch, Caron SAP Coordinator, shares information and tips on how to help your teen have a safe and alcohol-free summer. Watch the video by clicking [here](#).

It can be challenging for parents to know what to do when they discover their teen is using substances. To help provide some guidance, we have developed a parent resource guide outlining some steps to take. Get the resource guide [here](#).

Finding "Normal" After the Pandemic

"Normal" is the buzz word of the day. Our country is eager for a "return to normal," but that is not so easy after all that we have experienced.

The pandemic represents a chronic, long-term and on-going tragedy. When any tragedy strikes, normal human reactions follow a pattern called "crisis response." This happens naturally in all of us and encompasses a range of both physical and emotional responses. Initially, our instincts take over and we experience "Fight, Flight or Freeze" reactions to threats or danger. In these moments, physical reactions include increased adrenaline, heightened senses, increased heart rate, hyperventilation, sweating, etc. We experience a variety of emotional reactions as well. These may include shock, disbelief, denial, anger, fear, sorrow, confusion, frustration, and guilt.

continued on next page →

Signs of Stress

Physical Reactions*

- Insomnia, recurrent dreams, difficulty falling/staying asleep
- Fatigue
- Hyperactivity
- Pain in the back or neck
- Headaches
- Heart palpitations*
- Dizzy spells*
- Appetite changes
- Stomachaches or diarrhea
- Sweating or chills
- Tremors or muscle twitches

*If symptoms persist, see a physician

Emotional Reactions

- Flashbacks or reliving the event
- Excessive jumpiness or tendency to be startled
- An increase in irritability, with outbursts of anger and frequent arguing
- Feelings of anxiety, helplessness or vulnerability
- Feelings of guilt
- Feeling depressed or crying frequently
- Feeling heroic, euphoric, or invulnerable
- Not caring about anything

Behavioral Reactions

- An increase or decrease in energy and activity levels
- A change in tobacco use
- An increase in temptation to relapse through use of alcohol and/or other drugs
- Worrying excessively
- Wanting to be alone most of the time
- Blaming other people for everything
- Having difficulty communicating or listening
- Having difficulty giving or accepting help
- An inability to feel pleasure or have fun

Effects on Productivity

- Inability to concentrate
- Increased incidence of errors
- Lapses of memory
- Increased absenteeism
- Tendency to overwork
- Feeling confused
- Having trouble thinking clearly and concentrating
- Having difficulty making decisions

Looking at the pandemic through this lens, as a nation we may have been in (or in and out of) crisis response for more than a year. For health care providers on the front line, this is even more true. To put it mildly, this has been exhausting, both physically and emotionally. It is helpful to discuss what happened in retrospect in a supportive and safe environment. Validation of your experiences and acknowledgement of your emotional and physical reactions is helpful.



After any crisis, most people show signs of stress. These symptoms are typically a normal reaction to an abnormal situation. Some of the predictable reactions that may persist now that the pandemic is having less of an impact here in the United States are listed to the left.



In addition, there are some pandemic-specific crisis response reactions people may be experiencing as federal, state, and local guidelines are becoming more relaxed. It can feel like there is an expectation to return quickly to pre-pandemic activities and responsibilities. This may be a welcome change, but there may also be difficulties and challenges during this process. After more than 15 months of being encouraged to stay home and avoid contact with those outside of your family or “pod,” you may feel uneasy about resuming activities like eating in a restaurant, attending a movie or performance, going to an outdoor festival or parade, traveling, or many other activities that have not been a part of “normal” life since early 2020. You may welcome the opportunity to forego wearing a mask in some spaces as guidelines and policies change, but it may also make you feel uneasy or unsafe. You may be ready to jump back into pre-pandemic life with both feet, but you may also feel anxious about doing so (or likely, somewhere in the middle).

Being familiar with these signs of stress in yourself and your loved ones can be helpful. These signs are normal and should decrease over time. That said, it is important to know how to relieve stress in a healthy way and know when to get help. The first step is to prioritize self-care.

Keep Yourself Healthy

- Eat healthy foods and drink water.
- Avoid excessive amounts of caffeine.
- Do not use alcohol or tobacco. Do not use other drugs that have not been prescribed by your physician.
- Increase self-help meeting attendance, contact with your sponsor or other supports as needed.
- Get enough sleep and rest.
- Get physical exercise.

Use Practical Ways to Relax

- Relax your body often by doing things that work for you—take deep breaths, stretch, meditate, wash your face and hands, or engage in pleasurable hobbies.
- Pace yourself between stressful activities. Do a fun thing after a hard task.
- Use time off to relax—eat a good meal, read, listen to music, take a bath, or talk to family.
- Talk about your feelings to loved ones and friends often.

Pay Attention to Your Body, Feelings, and Spirit

- Recognize and heed early warning signs of stress.
- Recognize how your own past experiences affect your way of handling this event and think of how you handled past events.
- Know that feeling stressed, depressed, guilty, or angry is common after a traumatic event.
- Connect with other who experienced the pandemic in a similar way as you did.
- Take time to renew your spirit through meditation, prayer, or helping others in need.

It may take time to feel like you’ve regained control over your life. Be patient with yourself. Sometimes things become so overwhelming that you need help from a professional. Also remember that those around you have experienced the stressors of the pandemic in their own unique way.

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You may be able to support them:

- Offer your assistance and show a willingness to listen even if you haven't been asked for help.
- Don't take stress reactions experienced by others personally.
- Spend time together.
- Reinforce at appropriate intervals that you are available for emotional support.
- Be ready to talk about what happened when you are both ready.

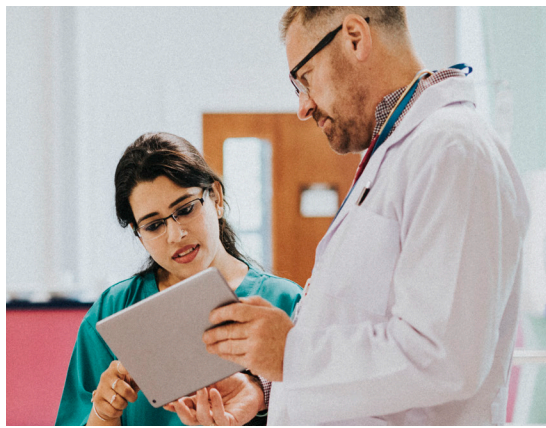
If you are having thoughts of harming yourself or someone else, please call the National Suicide Prevention Hotline at 1-800-273-TALK (8255), contact a member of your care team, or talk to a trusted friend.

Just because life is coming back to normal doesn't mean that you will immediately "feel" normal. Be patient with yourself, take extra self-care measures and reach out for help when you need it!

July/August 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



Program Guidelines

HPSP is continuing to review the guidelines that inform the program. Revisions are made as needed such that the program can remain in alignment with current best practices. Four guidelines were recently updated and approved by the participating Boards (via the Advisory Committee). Click on the links below to read more:

1. [Chronic Use of Medication with Addictive Potential](#)
2. [Third Party Evaluations](#)
3. [Minimum Standards for Evaluators](#)
4. [Evaluator Expectations](#)

Changes were minor, and in fact were primarily clarifying language.

One guideline was newly created – [Compliance Letters and Reports](#) – which addresses when and how HPSP will disclose compliance information to third parties after receiving a request from a licensee. These guidelines, as well as all the other program guidelines, are available on www.hpspmonitoring.com.



“Non-Alcoholic” Beer and Wine

Some beverages that are labeled and advertised as “non-alcoholic” can and do contain small amounts of alcohol that may be detected by a urine toxicology test. As a rule of thumb, anything that involves a fermentation process, even if that process is interrupted during manufacturing, should be avoided. This includes non-alcoholic beer, wine, and kombucha. These “near-beer” types of beverages are generally contraindicated for people in recovery, as they can be powerful relapse triggers. Additionally, please be reminded that some over-the-counter and prescription medications may contain alcohol, which can also lead to positive toxicology and should be avoided. If you have any questions about this, please contact your Agreement Monitor.

“AMA Supports Docs Receiving MAT for Substance Use — Organization also embraces physicians with disabilities or illness”

This recent headline, written by Shannon Firth, Washington Correspondent for MedPage Today, highlights an important step forward for all of us. The American Medical Association voted to adopt a report that support physicians receiving treatment for substance use disorders, as well as for those with disabilities or illness. This action affirms "that no physician or medical student should be presumed impaired" because of a decision, in collaboration with their treating physician, to receive medication for opioid use disorder.



GO TO ARTICLE

FSPHP-NIDA Imaging Biomarkers Study Opportunity: You Can Help!

Physicians (and other health care workers) have a long and storied history of studying themselves for the good of humankind. The FSPHP and NIDA are supporting important work to understand how neural circuitry and human physiology are changed by addiction and repaired by recovery.

This NIH IRB-approved study, which is being conducted by the Neuroimaging Research Branch (NRB) at NIDA in collaboration with the FSPHP, is recruiting 500 PHP (or PHP equivalent) participants. The goal of the research is to optimize the efficacy of currently available therapeutics by identifying brain biomarkers that can help assess the current severity of an individual's substance use disorder (SUD), follow treatment progress and predict treatment outcome. Those who may be eligible for the study are:

- Healthcare professionals enrolled in a PHP or equivalent program
- Diagnosed with a severe substance use disorder
- 21 years or older

The collaboration between NIDA and FSPHP helps ensure that this valuable research project can be completed with consideration for both research and quality clinical care. This study is approved by both the NIH IRB and the FSPHP research committee. **For more information:** <https://fsphp.memberclicks.net/fspHP-nida-study>

September Testing Holiday

Monday, September 6, 2021, Labor Day, is a testing exemption day. Licensees who participate in toxicology are not required to be available for testing on this day. HPSP strongly encourages licensees to check in for testing seven days a week, 365 days a year. Please be aware that HPSP's main office will also be closed on September 6th. Our answering service will be available and/or you can reach us through our after-hours emergency number at 503-802-9818. Leave a message if there is no answer and your call will be returned quickly.

THANK YOU to All Our Survey Respondents!

Thank you to everyone who recently completed an enrollment, exit or participation survey. Enrollment surveys are sent out approximately four months after starting in HPSP. Exit Surveys are sent immediately to those who successfully complete. Participation surveys are sent out twice a year to those who did not recently receive one of the other two surveys, but who are actively enrolled in the program. A few highlights of the survey results follow:

- On the exit interview, the majority of respondents rated their Agreement Monitor as “excellent;” in total 84.6% of ratings for agreement monitors were “excellent” or “above average.”

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- Also on the exit interview, 87% of respondents indicated that they are “more satisfied with work” after participating in the program. Similarly, 77% felt that they were “better able to cope with life changes” and “better equipped to manage [their] own health.”
- On the enrollment survey, all respondents rated the helpfulness of their Agreement Monitor as “very good.” Over half (5 or 62.5%) also rated the administrative team “very good” while the others (3 or 37.5%) rated the team “good.”
- Licensees who responded to the participation survey indicated that they:
 - ✓ “Strongly agree” or “agree” that they understand the program’s statutory monitoring requirements. (98.2%)
 - ✓ Are treated with respect (80%).
 - ✓ Feel that HPSP provides a “significant amount” or between a “significant amount” and “some” structure (87.3%) AND feel this way about the program’s accountability (89.1%).
 - ✓ “Strongly agree” or “agree” that:
 - Questions/concerns are responded to within one business day (89.1%);
 - Questions/concerns are addressed fully (85.4%);
 - Information is communicated clearly and professionally (83.6%); and
 - Their Agreement Monitor is knowledgeable about their case (87.3%).
- 100% of provider respondents felt that questions and concerns were responded to promptly and that information was communicated clearly and professionally.
- IBH’s ability to monitor licensees to ensure safety in the workplace is endorsed by 95% of monitors who provided a rating.
- Professional Association respondents rated services as “extremely valuable” or valuable for membership.
- Professional Association respondents rated feedback from members as “above average.”

Constructive feedback was also provided. All input is reviewed by the HPSP Policy Advisory Committee (PAC) and, where possible, the program is adjusted. Changes made from Satisfaction Survey input in the past include video-conference and in-person meetings with agreement monitors, Saturday phone support, and lower-cost toxicology panels for unemployed HPSP participants. Input has also been reviewed by the HPSP Advisory Committee consisting of members of each participating licensing board.

Mental Health Is Physical Health

The world was stunned when Simone Biles, widely expected to be the stand-out athlete at this summer’s Olympic Games, withdrew from competition citing mental health concerns. Not long before that, Naomi Osaka similarly prioritized her mental health when she elected not to participate in the French Open. These events launched an important and long overdue conversation about protecting one’s health and well-being regardless of external pressures.

We often consider mental health and physical health as two separate systems, when the reality is that they are irrevocably intertwined. If a surgeon breaks their arm, we do not, as a society, expect that they will continue to operate on patients. We make sure they take the time off and get the treatment they need to be able to return to practice in a safe and healthy manner. If you are struggling with anxiety, depression, grief, trauma, or anything else that is preventing you from performing at your best, please remember that mental health IS physical health. You deserve to make your mental health a priority. You would not try to “power through” a broken arm – and you do not need to “power through” a difficult emotional state. If you are struggling, please reach out. Your HPSP Agreement Monitor can help provide resources and support. You are more than worth it!

September 2021

HealthProChoices

A newsletter for participants in the Health Professionals' Services Program (HPSP)



What's That Website? Why Should I Visit It?

The hpspmonitoring.com website is a great source of information. Without even logging in, you can find all of the pertinent program forms and guidelines, the current and past newsletters, as well as additional resources. You are then able to log in using your 8-digit ID and 4- or 6-digit pin; these are the same credentials you use to check to see if a test is required each day.

Once logged in, you can:

- 1) Check to see if a test is required
- 2) Request additional CCFs
- 3) Review a history of your daily check-ins
- 4) Check your account balance
- 5) See a list of your assigned collection sites

All data is current as of the prior evening. If you have any questions or experience trouble logging in, please contact your Agreement Monitor.



We Love Bagels and Muffins, Too...

But please remember to avoid those with poppy seeds! Poppy seeds and California poppy can cause toxicology tests to be positive for morphine or codeine. Any food, drink, or supplement with poppy/poppy seeds as an ingredient is not permitted by HPSP.

Address Change

All address changes must be submitted in writing (email, fax, or mail). HPSP does not want to risk incorrectly recording a verbally reported address. By submitting any address changes in writing, you will help us to ensure that we avoid errors that could potentially breach your confidentiality.

Health Professionals' Services Program
hpspmonitoring.com | 888-802-2843



Why?

Participants often ask, “Why does my participation in HPSP have to last so long?” or “Why do I have to test so often?” In fact, HPSP’s structure is empirically based. A light review of three relevant research studies will shed light on the purpose behind the various program components. For, example, you will see that a five-year long program is the “gold standard” of recovery in the field of addiction.

1. Relapse Declines after Five Years: This is a follow-up article by the authors after originally making the statement that “After 5 years of abstinence, a recovering alcoholic has approximately the same chances of lifetime relapse as a randomly selected member of the general US population has of experiencing alcoholism in the coming year.” In the article, they review the research studies that allowed them to make that statement. They primarily are referencing studies of alcohol use disorder, but do look at other drugs as well. Read the full document [here](#).

2. Appropriate Use of Drug Testing in the Clinical Setting: This is a consensus statement published by ASAM (American Society of Addiction Medicine) to provide guidance about the effective use of testing in diagnosis, treatment, and recovery. Below are the key points that are related to monitoring. As you can most likely tell, these are mirrored in HPSP’s toxicology testing program:

- Testing should be random, not scheduled or predictable in any way (page 2).
- Type of test (urine/blood/hair/etc) as well as panel need to be selected based on drugs of abuse (or drugs of concern) (page 2).
- Frequency of tests should in general be based on the window of detection for the drugs of abuse (or drugs of concern.) That said, it goes on to say that testing should be weekly at the beginning of recovery and then once stabilized can be gradually decreased to at least monthly (page 11).
- Testing frequency should be increased on days following weekends and holidays for those in outpatient care (page 25).
- Monitoring, with a drug testing component, should continue for five years (page 30).
- Physician Health Programs should monitor participants for five years if diagnosed with an addiction (page 31).

Read the full document [here](#).

3. Outcomes of SUD Monitoring Programs for Nurses: This study was conducted in part to determine which nurse monitoring program characteristics are associated with program completion. It notes that the “percentage of nurses successfully completing a program correlated with the number of years in the program...It shows a steady increase and suggests that the highest percentage of nurses successfully completing a program was at or around the 5-year mark.” They also note the importance of testing twice a month in successful program completion, including among nurses who have experienced a relapse. Read the full document [here](#).

The Finish Line

Imagine that you are running a marathon. You trained for it, and the first few miles feel easy. As you continue it does get tougher, much tougher, but the cheers of the crowd, the camaraderie of your fellow runners and the “refreshments” along the way help you to keep on going. Knowing that others see your effort and that they want you to keep trying sure helps you to put one foot in front of the other, even when you want to give up. (Continued on next page)



The beginning of the pandemic was like this for many on the front line of health care: It was tough work with long hours and difficult conditions to put it mildly. Yet, the general population was cheering you on with signs, treats and messages of support. It made the unbearable just a bit easier to know that the world cared and that your hard work was appreciated.

As the marathoner continues, they reach for that finish line; it gets closer with each and every step. Every last bit of energy is used to get to that 26.2 mile mark. In our battle with COVID, this can be seen as the point where the vaccine was developed and the virus' spread slowed. The pandemic "finish line" was within reach. Last bits of energy were used treating patients as we as a nation worked to reach that finish line.

Suddenly though, what is impossible in an actual marathon, happened: **The finish line moved!** Case counts soared again and hospital beds were filled. Now, it seems the pandemic is wearing on endlessly. Returning to our metaphor, the crowd that is cheering is thin at best, your fellow "runners" are weary, and the refreshments have all but dried up. In fact, it might even seem that the crowd is trying to trip you and get in your way by NOT doing the things that science shows will stop the spread of COVID-19. There is not a clear finish line and there are obstacles instead of supporters. Is there any question about why our healthcare professionals feel TIRED?

How would we help a runner in this situation? We would tell them to REST and REFUEL...and we would CHEER them on. For your "race," know that your Agreement Monitor and the rest of the HPSP staff are here to help you find ways to REST and REFUEL even in the face of the stressors of today's world. And we are definitely here to CHEER you on. WE APPRECIATE ALL THAT YOU DO!

5 Self-Care Tips to Help Reduce Stress

① **Make self-care a priority.** Exercise daily, get plenty of rest, address your own needs and feelings regularly, and make an effort to eat healthy.

② **Start a mindfulness practice.** Mindfulness can help develop self-awareness and the ability to cope with feelings of stress. Pay attention to the present moment with openness, slow down, connect with your breath to relax your mind and body.

③ **Create a resilience routine.** Take a proactive approach to dealing with stress. Make exercise, meditation, yoga and other relaxation techniques part of your daily routine.

④ **Make time for activities you enjoy.** Read a good book, watch a comedy, play a fun game, or make something—it doesn't matter what you do, as long as it takes you out of your worries.

⑤ **Remember to laugh.** Laughter is the best medicine and it's free. Laughter can reduce the pain you feel, both body and mind, and help to minimize the issue at hand.



A Thank You From the Staff at IBH Monitoring

We see you and we value you. The lengths that you have gone to over these last months to keep our community safe are astounding. Your tenacity and perseverance is an inspiration, and your dedication and hard work will not be forgotten. Thank you, thank you, thank you. - Kate

To our health care workers: I would like to take a moment to thank you for all you do during this time of uncertainty, stress, and anxiety. I know on a personal level that professionals like you are helping me and my family stay healthy and strong. Thank you!! - Scott

Thank you health professionals for the sacrifices you make every day, and especially during this pandemic. Your dedication, commitment and courage deserve our deepest gratitude and admiration. - Tina

Words cannot express my gratitude for your ongoing efforts, courage, and perseverance to continue the fight against the pandemic. Thank you for all the sacrifices you have made to help our communities overcome this difficult time. - Jenn

Thanks for all that you do during an incredibly difficult time in history. Your job isn't an easy one, but humanity would be worse off without people like you. - Dylan

Your fortitude, perseverance, and dedication are inspiring. Thank you for doing what you do. - Kat

You are all amazing and I hope you stay safe and healthy during this pandemic. I am so grateful for your continued dedication to helping others. Please know that if you are struggling we are here to help you too. Together we can do hard things. - Ashlea

Thank you to our healthcare team for your professionalism and caring both on an ongoing basis and especially during the difficult time of Covid and changes in leadership. - Joe Autry

YOU ARE A LIFESAVER! Thank you for all you have done and continue to do where it matters the most, on the front lines! Your dedication and commitment to this fight has not gone unnoticed!! Despite it all, you continue to show up with your heart and mind!! We honor you today and always! - Christa



Thank you for all the hard work you do day in and day out. These times are especially dark and tough, but you continue to shine through the darkness. Know that we support you and we thank you for all the long days and sacrifices you make to help those who need you. Thank you for everything and all you do. - Mark

Please know just how very much all of your work, each and every day, is appreciated. Even on those days when it seems like no one cares, WE DO. We know that you are giving your best and we are so thankful! You continue to go above and beyond to serve your patients, even in the face of what seems like a never-ending pandemic. Thank you! Those two little words can never be quite big enough for all the gratitude they hold. - Lori



HealthPro**Choices**

October 2021

A newsletter for participants in the Health Professionals' Services Program (HPSP)

IBH Monitoring is now Uprise Health

Our 30-Year Legacy is Our Foundation

Founded in 1988, IBH quickly emerged as a trusted behavioral health consultant to large corporations across the nation. **We have continued to evolve along with the behavioral health landscape, acquiring the expertise and products offered through several well-known, marquee organizations, including Claremont EAP, American Behavioral Health, Reliant Behavioral Health, Quality Health Solutions, Inflexion, EAP Preferred, HMC Healthworks, and Uprise.**

New Look. New Name. Total Person Care.

The world is a different place and people feel differently about mental health. Just as everything around us changes and evolves, so has our company. We recognize that the path to wellbeing is through a powerful link between physical and mental health and we want this to be represented within our company. We are pleased to announce that we are now **Uprise Health**. This brand represents our culture and alignment of our strategy to be a digital mental health care organization that cares for the total person.

Today, as one company, **Uprise Health** uses clinically validated technology and appropriate, timely and coordinated care to transform mental health for our customers, members, and ourselves. We will pursue this transformation with the same passion we have for our family, friends, and community. On behalf of all of our associates, we value your trust in our company, and we look forward to our continued partnership.



Health Professionals' Services Program

hpspmonitoring.com

888-802-2843



**Supporting you every
step of the way.**

How Does This Name Change Impact Me as a Participant in HPSP?

Other than the name, it doesn't impact you directly! This is part of our ongoing efforts to integrate our offerings and develop innovations to better serve our customers and participants. A few things you will need to know:

- Your Agreement Monitor's email address, and the other HPSP team members' addresses, are now formatted as [first name].[last name]@uprisehealth.com. All of our team members will continue to receive emails to their previous email addresses (both ibhsolutions.com and reliantbh.com addresses)
- The email address for the general mailbox is hpsp@uprisehealth.com. Emails sent to the previous versions of the address will also continue to forward for the time being.
- The portal address has not changed; it is still <https://hpspmonitoring.com/>
- The app, "RBH Daily," and the IVR have not changed either.
- You do not need to "re-sign" any releases, agreements, consents, etc. These all still apply since we are doing business as (DBA) our former companies.

Toxicology Reminder

If your collection site does not have the capability to use an electronic chain of custody of form (CCF), you must take your paper CCF form with you. When you are informed that you need to test, you are told which panel to test on. You must check that panel on the paper CCF. Failure to check the correct panel may result in additional testing and associated costs.

Nurse Survey Spotlights Mental Health Difficulties During the Pandemic - As featured in MedPage Today

"More than half of nurses working in critical care said they were "not emotionally healthy," according to the latest COVID-19 survey on mental health and wellness conducted by the American Nurses Foundation and shared with MedPage Today." "Of 9,572 nurses surveyed in the third of a series of pandemic-related polls, 75% of nurses across all roles said they felt "stressed," and 10% said they felt "worthless."

Even if you are not a nurse, you are in the healthcare field and the stressors of the pandemic impacted you. Read the rest of this important article at: <https://www.medpagetoday.com/nursing/nursing/95065>



We are here to help.

Participant Reflection Corner

“A part of my active recovery guides me to be grateful and accountable. Yet another part is being able to work in a profession I hold dear, especially in these challenging times, as a healthcare provider – this is what HPSP has done for me. My career is part of who I am and HPSP allows a safe return to work by providing the accountability needed to safely practice. I have been able to work as a registered nurse and even advance my career with my employer; things that would not have been possible prior to recovery and the structure of HPSP.” - Andrew, RN

Thanks, Andrew, for sharing your reflections! Here’s another comment from a licensee after completing the program:

“I am so grateful for this program. It gave me a second chance. I now appreciate other people more, see what I needed in my life and I wouldn’t be where I am if I wasn’t in the monitoring program. I believe I would have spiraled down and lost my job, family and support system.”

If YOU would like to share your reflections on the impact of the program, please email your Agreement Monitor or hpsp@uprisehealth.com.

The Holidays are Coming!

There are several toxicology testing exemption days approaching:

- Veteran’s Day – Thursday, November 11, 2021
- Thanksgiving Day - Thursday, November 25, 2021
- Day After Thanksgiving - Friday, November 26, 2021
- Christmas Day Observed – Friday, December 24, 2021
- Christmas Day – Saturday, December 25, 2021
- New Year’s Day Observed – Friday, December 31, 2021
- New Year’s Day – Saturday, January 1, 2022

While checking for testing on these holidays is not required as no tests will be scheduled, we highly recommend that you continue to check in for testing 365 days per year. This can help to maintain a consistent routine and reduce the risk of missing a check in, and possibly missing a scheduled test.

Please make sure to notify your Agreement Monitor of any travel plans for the holidays so that alternate collection sites can be located in time.

Resources

Resiliency Podcast: [Click to listen](#)

Virtual Course via Zoom: Women in Healthcare: The Pursuit of Wellness. This 3-day interactive, CME approved retreat focuses on individualized wellness for practitioners. Individualized assessments and reports are provided. Learn while participating in highly engaging activities, whole and small group learning sessions, and giving/receiving real-time feedback centered around personal and professional growth and well-being. Learn skills and techniques to promote wellness, joy, and purpose. [Click to register](#)

HealthProChoices

November 2021

A newsletter for participants in the Health Professionals' Services Program (HPSP)

Holiday Reminder

There are several toxicology testing exemption days approaching:

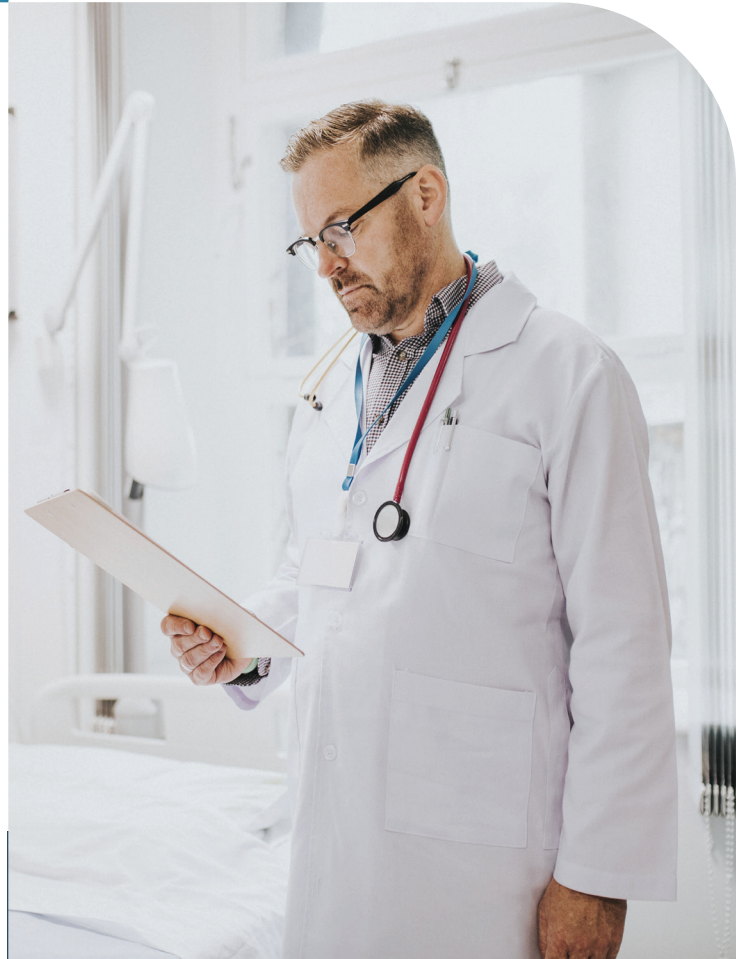
- Thanksgiving Day - Thursday, November 25, 2021
- Day After Thanksgiving - Friday, November 26, 2021
- Christmas Day Observed – Friday, December 24, 2021
- Christmas Day – Saturday, December 25, 2021
- New Year's Day Observed – Friday, December 31, 2021
- New Year's Day – Saturday, January 1, 2022

In addition, **2022 holidays** can be found on our website under the resources tab. While checking for testing on these holidays is not required as no tests will be scheduled, we highly recommend that you continue to check in for testing 365 days per year. This can help to maintain a consistent routine and reduce the risk of missing a check in, and possibly missing a scheduled test. **Please make sure to notify your Agreement Monitor of any travel plans for the holidays so that alternate collection sites can be located in time.**

We've "Moved"

We've moved...but not really. HPSP staff have been working remotely for the last 18 months thanks to the pandemic. As such, we have closed our office. We will use temporary office space to meet with licenses, for meetings, or other in-person events. **Our new mailing address is:** Uprise Health, PO Box 8668, Portland, OR 97207.

Mail that is sent signature required, including certified mail, should be addressed to: Uprise Health Monitoring, 2 Park Plaza, Suite 1200, Irvine, CA 92614



Health Professionals' Services Program

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Supporting you every step of the way.

Program Guidelines

HPSP is continuing to review the guidelines that inform the program. Revisions are made as needed such that the program can remain in alignment with current best practices. Six guidelines were recently updated and approved by participating Boards (via the Advisory Committee). Click on the links below to read the newly revised guideline:

- [Guideline for Completion of HPSP](#)
- [Guideline for Dilute and Low Creatinine Specimen Results](#)
- [Guideline for Weekly Contact with Agreement Monitor](#)

Please keep in mind these key points of the revised guidelines:

- Dilute and low creatinine specimens will always result in follow up testing, which may be urine, hair, and/or blood. Medical evaluation will be required after the third dilute or low creatinine result in a rolling 12 month period.
- Participants are required to check in with their Agreement Monitor once per week, including a minimum of one phone call per month. Some circumstances require a weekly phone call; these are spelled out in the guideline. If more than six weekly check ins and/or monthly phone calls are missed in a rolling six month period, a report of non-compliance will be submitted to the appropriate licensing board.

As always, if you have any questions about these changes, please let your Agreement Monitor know.

RBH Daily App

Reminder: if you use either the iPhone or Android app for daily testing notification, please be sure to close out the app each day. Leaving the app open and simply attempting to “resubmit” (hitting the submit button again) each day may not give you the correct information. Always be sure the confirmation screen displays that day’s date as the “Date Checked,” a response for “Test Today,” your confirmation code and your “compliance status.” Don’t forget to record your confirmation number or keep a screenshot.



We are here to help.

Gratitude

The American Nurses Foundation and the Greater Good Science Center at the University of California, Berkeley, have joined forces to create Gratitude Practice for Nurses. This campaign draws on decades of research showing that practicing gratitude is good for our bodies, our minds, and our relationships—and is a valuable tool to respond to the stresses faced by nurses and other health professionals. Although specifically designed for nurses, all health professionals can benefit from the Gratitude Practice Toolkit. The gratitude journal is a great idea for everyone. Both of these resources and additional information can be found at <https://ggsc.berkeley.edu/gratitudeforurses>

NIDA/NIH-FSPHP Research Study Opportunity!

The National Institute on Drug Abuse (NIDA)/National Institutes of Health (NIH), in collaboration with the Federation of State Physician Health Programs (FSPHP), is conducting a research study to understand how neural circuitry and human physiology is changed by addiction and repaired by recovery. Our HPSP follows your recovery status closely – we understand your journey in recovery better than any other set of people in the world. This cohort—YOU—are essential to the goal of this research study – to identify brain biomarkers of addiction and thus, optimize the efficacy of currently available therapeutics.

Please contact Betty Jo Salmeron, M.D. at (443) 740-2651 or BSalmeron@nih.gov to learn more.



Are you interested in participating in clinical research related to your recovery?

The National Institute on Drug Abuse (NIDA) is conducting a research study looking at brain imaging changes at the start of sobriety in physicians and other health professionals participating in a Physicians Health Program (PHP) or equivalent.

The study includes an ONLINE-only component, with total participation about 4-7 hours.

Eligible participants may also be invited to complete the main study, which includes 1-3 in-person visits to NIDA at the Charles Brody Research Campus in Baltimore.

In-person visits comprise a full day of procedures, including two brain imaging (fMRI) sessions at each visit and an overnight stay in an on-campus clinical research unit the evening prior to the study visit.

Compensation is about \$100 for the online-only study, and \$350 to \$900 for completing the in-person imaging visits. NIDA will cover transportation expenses.

If you participate in the imaging sessions, you will also receive a picture of your brain on a T-shirt.

To learn more, contact: Betty Jo Salmeron, MD (443) 740-2651 | BSalmeron@nih.gov

* Participation in this study is completely voluntary, not part of your occupation, or part of any treatment and does not provide any direct health benefit. Health care and a physician's services will not have any impact on their status as a patient. Screened by NIDA.

Managing Holiday Stress

Things are different for all of us again this holiday season and these changes can trigger feelings of loneliness, anxiety and stress. Here are a few suggestions to help you feel emotionally and physically balanced during the holidays:

Maintain a Routine. Even though your regular routine has been disrupted, you can still have some structure to your day. Create a realistic schedule with times set aside for important activities like work time, school time, screen time, exercise and free time. Try to maintain your normal sleep schedule. It can help you function better during the day, stabilize your mood and give a boost to your immune system.

Keep Moving. Although it might be tempting to binge-watch all of your favorite holiday movies, too much screen time and sitting can make you cranky, bored and irritable. Make time to be physically active every day, even if it's just a short socially distanced walk. It'll help reduce your stress give you a healthy burst of endorphins to improve your mood.

Stay Positive. Even if this moment seems stressful, can you find a way to make it pleasant? Connect with someone else in a positive way with a kind gesture, or try to notice what's around you with fresh eyes and an open mind. Even when the holidays are stressful, try to remember to laugh. Laughter is the best medicine and it's free.

HealthProChoices

December 2021

A newsletter for participants in the Health Professionals' Services Program (HPSP)

Inclement Weather Policy

Unpredictable winter weather brings additional testing challenges. There is a possibility that a collection site could close due to inclement weather. Calling ahead will help you plan for this possibility. If you determine that your primary site is closed, please access the portal (hpspmonitoring.com) to see your list of alternative sites so that you can contact them as well to see if they are open. If all of your local sites are closed, please call your agreement monitor. Once HPSP has confirmed the site closure(s), you will be excused from testing that day and your test will be rescheduled.

If your sites are open but you are unable to travel due to inclement weather, you can use one of your exemption days. Remember, you are eligible for exemption days once you have been in compliance with all requirements for a period of nine consecutive months. If you are unable to travel due to inclement weather but you have been in the program for less than 9 months, you will be considered for a one-time use of an exemption day.

Regardless of your situation, **make sure to contact your agreement monitor** if you are not able to test due to inclement weather because any missed test is treated as a non-compliance if not approved. If you have any testing issues or concerns and are unable to reach your agreement monitor, you can always call the main line (1-888-802-2843) to be connected to another HPSP team member. Our after-hours testing emergency phone is: 503-802-9818. All of the HPSP guidelines can be found on our website under the Resources tab:
<https://www.hpspmonitoring.com/>



All of us at Uprise Health join together to wish you and yours a peaceful and joy-filled holiday season.

Health Professionals' Services Program

hpspmonitoring.com

888-802-2843



Supporting you every step of the way.

Toxicology Tidbits

Like the rest of the healthcare field, collection sites continue to experience shortages of staff and high demand. We strongly recommend that you call before arriving to test so that you will be aware of any unusual wait times or deviations from standard hours. Remember that your alternate collection sites are listed on the portal (hpspmonitoring.com).

Holiday Reminder

The following holiday testing exemptions are approaching:

- Christmas Day Observed – Friday, December 24, 2021
- Christmas Day – Saturday, December 25, 2021
- New Year’s Day Observed – Friday, December 31, 2021
- New Year’s Day – Saturday, January 1, 2022

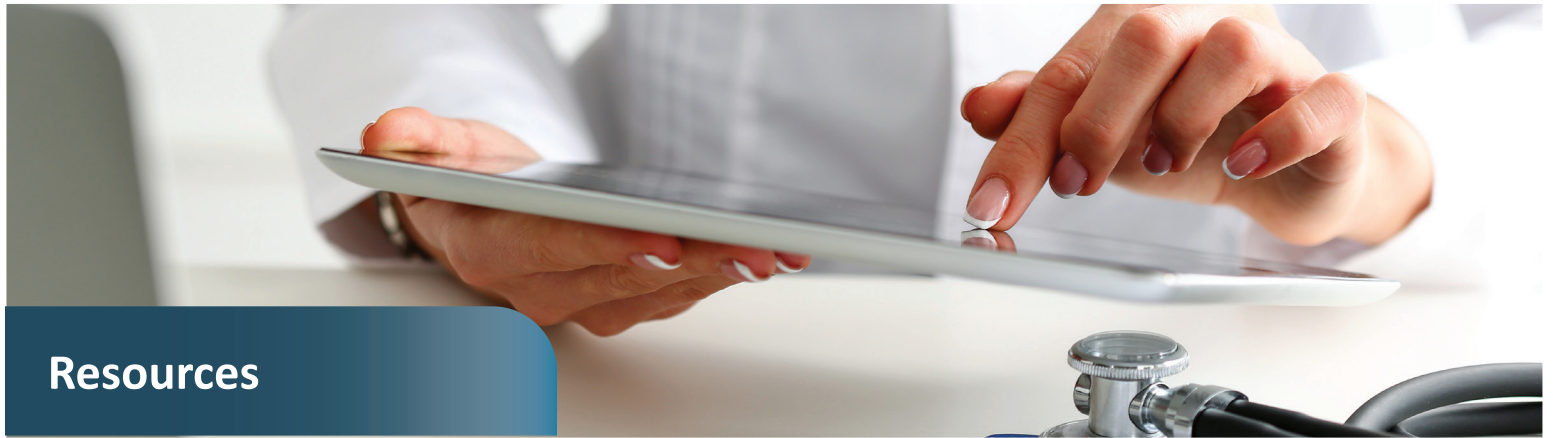
As you have heard us say before: we highly recommend that you continue to check in for testing 365 days per year even though checking for testing on these holidays is not required as no tests will be scheduled. Checking in daily creates a consistent routine and reduces the risk of missing a check in, and possibly missing a scheduled test.

Answers at Your Fingertips

We would bet you have found yourself asking questions like:

- Where else can I test?
- What was that bill for?
- What is the easiest way to get more testing (chain of custody) forms?
- What are the rules about _____ (fill in the blank with things like travel? severe weather?)
- What is that collection site’s phone number? hours?
- Where can I quickly get a Medication Management Form?
- When is the next holiday testing exemption?

The answers to all of these questions – and more – can be found on the HPSP portal. Simply navigate to <https://www.hpspmonitoring.com> from your preferred browser. Guidelines, forms and other resources can be found without even logging in. For more personalized information, click the log in tab and enter your 8-digit ID and your PIN; these are the same numbers used to check-in to see if a test is required. Once logged in, your invoices / balance, collection sites, check-in history and more are viewable. Reach out to your agreement monitor if you have any questions.



Resources

Do Your Bucket List: 7 Ways to Up Your Focus on Things that Matter

Uprise Health hosted this great webinar earlier this month and we are pleased to share it with you! Whether it's running an Iron Man, meeting somebody, or mastering a new skill, we all have that next thing we want to accomplish in life. But it's so easy to lose focus on personal growth in the rush of daily life. Get inspired and get practical with these 7 strategies to increase your focus on that next bucket list item. Life without regrets is possible-you just need to get focused. Click here to do your bucket list: <https://vimeo.com/654713977>

Amazed and Amused: Strategies of the Sane and Successful

MedPage Today's Greg Laub shared Karyn Buxman's inspiring keynote address at NPWH. Who doesn't need a bit of hope and humor? Check it out on MedPage's site here: <https://www.medpagetoday.com/meetingcoverage/npwhvideoppearls/95825>

Holiday Stress or Holiday Joy?

Join Caron Treatment Center's Erin Goodhart in taking a look at the holidays in two different blog posts.

The first, Pressure at Home for the Holidays: Overcoming the Myth of the Picture-Perfect Holiday and Finding the Gift of Joy, can be found here: <https://www.caron.org/blog/pressure-at-home-for-the-holidays>

The second, Coping with Post Vaccine Holiday stress, can be found here: <https://www.caron.org/blog/coping-with-post-vaccine-holiday-stress>