

HealthProCHOICES

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

January 2017



"Hope smiles from the threshold of the year to come, whispering 'it will be happier'..." -Alfred Tennyson

New Bend Caduceus Forming

A Caduceus meeting in Bend is in development. Tentatively, the meetings will be held Wednesday Evenings at 7:00 p.m. Please contact Dan at 541-771-9582 for additional information.

Westside Collection Closure

You likely already heard that Care Testing at 9370 SW Greenburg Rd. has closed. Remember to use the app or website to see other test locations. Alternative collections sites include:

GS TESTING - Electronic Site

17649 SW 65TH Ave
Lake Oswego, OR 97035
Phone: 503-992-6359
Hours: Open 24/7
Someone will be present from 7am to 7pm Monday – Sunday. Please call 20 minutes in advance.

LEGACY CENTRAL LAB - Paper Chain Site

1225 NE 2nd Avenue - 1st Floor Draw
Station
Portland OR 97232
Mon-Fri: 7am-7pm (Open 24 hours during the week, after 7pm, pick up phone to be buzzed in)
Sat: 8am-4:30pm
Phone: 503-413-5113

CONCENTRA/TANASBOURNE -

Electronic Site (If you are currently not connected to this site please contact your agreement monitor or Markus at (503) 802-9816.)
2225 NW Town Center Drive
Beaverton OR 97006
Mon-Fri: 8am-5pm
Sat: 8am-5pm
Phone: 503-726-1021

Over the Counter Prescriptions

Everyone is reminded to review the Over-the-Counter Medication List at www.RBHMonitoring.com under other resources and Medication Management Form under forms. Remember to avoid taking medications that contain alcohol, diphenhydramine, and pseudoephedrine.

Over-the-Counter medications containing alcohol are to be avoided and cannot be approved by a provider by a Medication Management Form. If your physician or other practitioner prescribes a centrally acting antihistamines or decongestants such as diphenhydramine (Benadryl) or hydroxyzine (vistaril or atarax), these medications and some others, even though they are over the counter, require the completion of medication management forms. Please have these forms in place in advance of non-negative toxicology.

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 Christopher Hamilton, Ph.D. ((503) 802-9813; chamilton@reliantbh.com) for more information or to schedule a meeting.



HPSP: 888.802.2843
www.RBHHealthPro.com

Resolving to Get a Healthy Start on the Year Ahead

If you're like most people, this is the time of year when you look ahead to the next 12 months and resolve to make changes in your life. Some of those resolutions likely will be about trying to lead a healthier lifestyle -- whether that's quitting smoking or trying to lose a few pounds or getting more sleep.

There's a good bet that many resolutions made New Year's day won't be kept during the year, but Don R. Powell, Ph.D., president of the American Institute for Preventive Medicine, says that's because we don't set realistic goals. It takes time to develop a bad habit, so you can't expect to change overnight. You also should try to work on only one bad habit at a time. Trying to change too much too soon is a recipe for failure.

Dr. Powell offers a list of major changes to consider. You should pick one or two that are important to you. Once those goals are met, work your way down the list, one goal at a time.

Healthy resolutions

I resolve to get moving. A regular exercise routine is one of the most important steps you can take to improve your health and longevity. Starting this year, devote 60 minutes most days of the week to an aerobic activity you enjoy. Good choices include walking, running, swimming, biking, skating and aerobic dancing. Be sure to check with your health care provider before beginning an exercise program.

I resolve to aim for an ideal body weight. This year, eat high-fat foods in moderation. Sixty-five percent of American adults are overweight or obese, and these extra pounds contribute to heart disease, diabetes, stroke and an increased risk of certain cancers.

I resolve to stop smoking and avoid people who still light up. Cigarette smoking is the leading preventable cause of death and disease in America today. Secondhand smoke is just as bad; it can be deadly to nonsmokers who inhale it on a regular basis. Cigarette smoking has been linked to diseases such as leukemia, cataracts, pneumonia and cancers of the cervix, kidney, pancreas and stomach, according to the U.S. Surgeon General.

I resolve to keep my blood pressure under control. If you haven't had your blood pressure checked recently, do so. Follow your doctor's instructions if it's high, and faithfully take any prescribed medication. If left untreated, high blood pressure is the primary cause of stroke.

I resolve to develop a strong social support network. Studies have shown that people who have supportive relatives, friends and co-workers are sick less often than those who don't. Be a friend to others and keep your family close and caring.

I resolve to reduce my cholesterol. This year have your cholesterol tested. About 37 million Americans have a cholesterol level of 240 or greater, which is considered high risk. (Below 200 is considered healthy.) If your level is high, follow your doctor's instructions and reduce your consumption of red meat, regular dairy products and foods high in saturated fats.

I resolve to control my temper. For your heart's sake, make an effort to control a bad temper. Anger and hostility may be as bad for your heart as smoking and high blood pressure.

I resolve to develop a positive attitude. People who live long lives characteristically possess a positive attitude about life. Try not to dwell on negative thoughts, which may negatively influence your health and emotional well-being.

I resolve to always wear a seat belt. Don't start your vehicle until you and all your passengers are buckled up. Make sure that any children riding with you are in an appropriate child safety seat or booster seat.

Upcoming Opportunities

IDAA Annual Meeting 2017 – Salt Lake City, UT. August 2-6, 2017 at the Snowbird Resort. Find more information at www.idaa.org.

ORPRN Conference - REGISTRATION AVAILABLE SOON

ORPRN Conference - SAVE THE DATE

The Professional Recovery Network of Oregon 2017

Saturday, April 8, 2017 in West Salem at Chemeketa Eola

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"Courage is rightly esteemed the first of human qualities. . . because it is the quality which guarantees all others. . ." - Sir Winston Churchill

Oregon Professional Recovery Network Conference Registration is Open

This year's PRN Conference is April 8th in Salem at Chemeketa Eola (215 Doaks Ferry Road, Salem, OR 97304). Speakers include:
Robin Potter-Kimball, APRN, CNS - "Recovery and the Healthcare Professional". (1.25hrs)
Kara Litwiller, M.Ed., LPC, CADCI - "Substance Use Disorders and Co-Occurring Disorders". (1.25hrs)
Jeff Yates RPh - "Emergency Naloxone in Pharmacy Practice." (1.75hrs patient safety)
Eric Holeman RPh, Pharm D - Opiate Prescribing and Opiate Addiction: Past, Present, and Future and Managing Chronic Pain without Opiates: Now What? (1hr +1hr law/ethics)
Edwin Schneider RPh and Cheryl A. Fox, RPh - Topic: ORPRN & BOP updates on Recovery and Monitoring (1hr law/ethics)
All health professionals are invited. You can register at: <https://orprn.wufoo.com/forms/orprn-2017-registration/>

Toxicology

Health Professionals' Services Program (HPSP) licensees with substance use disorder diagnoses or a recommendation from a third-party evaluator participate in the HPSP toxicology program. Due to the nature of the work health professionals perform, including the access and availability of mind altering substances, the panel composition of these tests are special. Panel assignment will vary by licensee based on history, diagnosis, and compound availability. Unique panels are created to allow the detection of substances as diverse as Ambien and Fentanyl. All HPSP toxicology panels test for the alcohol biomarkers ethyl glucuronide (EtG) and ethyl sulfate (EtS).

The screening and confirmation levels of health professionals are lower than typical drug tests and allow for some of the lowest level of substance detection in the industry. Whereas the marijuana metabolite tetrahydrocannabinol (THC) screening is 50 or 100 ng/ml in some industries, the health professional panels screen at 20 ng/ml and confirm at 15 ng/ml. Specimens are screened with chromatography and confirmed with mass spectrometry.

Toxicology costs are bundled for the licensee and include collection, screening, confirmation, and the cost for Medical Review Officer (MRO) review of any non-negative specimens; even non-negatives due to valid prescriptions. If the costs were not bundled, there would be three independent invoices for every collection resulting in different prices for each specimen. The collection sites performing observed collections are independently run and operated. The collection technician is required to follow protocol outlined in the HPSP guidelines including performing an observed collection, preparing a split specimen, and following all chain-of-custody requirements. The cost for this service varies from site to site and if not bundled, the individual price for this service would range from \$20 to over \$80 at collection sites that operate as urgent care facilities. Additionally, as outlined in federal code, the MRO is independent from the laboratory that performs the analysis. By bundling toxicology costs, it makes it possible to offer statewide and nationwide collection sites.

In addition to urine testing, the HPSP toxicology program also utilizes alternative testing methods including blood and hair tests. These tests provide a broader window of detection. In the case of alcohol where the EtG and EtS metabolites are present in urine for several days, the alcohol biomarker phosphatidylethanol (PEth) is present in blood for several weeks.

2017 Western Doctors in Recovery Meeting

The third annual Western Doctors in Recovery Conference is February 24th to 26th in Carmel California. The theme for this year's meeting is "A Vision for You." Here is a link for additional details: <https://westerndoctorsinrecovery.com/2017-conference/>

Maintaining Proper Boundaries

Sante Center for Healing is offering a Maintaining Proper Boundaries Course. The course will be offered May 3-5, August 9-11, and November 8-10. The course is offered in Argyle Texas. Contact Kerrie Sanders ((940) 464-7222; kerries@santecenter.com) for additional information.

Spring Sunshine Brightens Mood

After months of low temperatures and dark skies, isn't it delightful to celebrate spring again?

For many people, this wonderful season of new life is a real morale booster. One reason: a brain chemical known as serotonin that soothes and balances the nervous system. For most people, serotonin production is linked closely to the amount of sunlight that strikes the retina of the eye.

When people are deprived of light, as usually happens during the winter months, the production of serotonin is slowed, and that could be a factor that produces a bad case of the winter blues. Conversely, the arrival of spring means more light, and for most of us, possibly a more cheerful mood.

Here are a few suggestions on ways to take advantage of spring sunshine.

Adjust your schedule, whenever possible, to spend time with the sun. When the weather is bright outside, why not grab a sandwich and take your lunch to a favorite outdoor bench? If you can get 30-40 minutes of exposure to bright sunlight periodically, your serotonin level will rise and the winter blahs will begin to fade.

Get serious about exercise. If you're like most of us, you added a few pounds during the winter. Try committing to three or four half-hour workouts per week to shed that weight. (Consult your family physician before beginning any new exercise program.) About 30 minutes of brisk walking, every other day, is enough to improve cardiovascular fitness, while also elevating your mood.

Change your diet to match the more active, outdoor lifestyle that begins with spring. Instead of fats, sweets and heavy starches, enjoy seasonal fruits and vegetables. You'll feel lighter and quicker on your feet.



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"When one door closes, another opens; but we often look so long and so regretfully upon the closed door that we do not see the one which has opened for us." ~ Alexander Graham Bell

New Bend GMC

Kerry Speed, MA, CADC III, MAC, QMHP is HPSP's new group leader for Oregon Medical Board licensees living in Central Oregon. Kerry owns and operates Juniper Behavioral Consulting at 19800 Village Office Court, Suite 201, Bend, OR 97707. Kerry completed her Masters of Arts in Addiction & Mental Health Counseling, Advanced Practice from the Hazelden Betty Ford Graduate School of Addiction Studies and worked in Minnesota as a Primary Therapist before moving to Oregon. Kerry loves Oregon and all the state offers. Kerry is exploring offering weekly group meetings for other health professionals. Kerry can be reached at 612-325-8217 and would love to hear from you.

Bend Caduceus

The Bend Caduceus meeting is now meeting Thursday evenings at 7:00 p.m. Please contact Dan at 541-771-9582 for additional information. The full updated Oregon Caduceus Meeting Schedule can be found at www.rbhmonitoring.com under "other resources."

Allergy Season

With all the rain we have had it is hard to think about allergies, but allergies will soon be in full force. As a reminder, several over-the-counter medications may have sedating or stimulating effects. These include centrally acting antihistamines, such as diphenhydramine (Benadryl), and hydroxyzine (vistaril or atarax). Like prescriptions with addictive potential and/or psychotropic medication be sure to have your primary care physician populate a Medication Management Form before a non-negative test.

The Medication Management Form and all other forms are available at www.RBHMonitoring.com under "Forms."

Looking at Happiness as a Choice



Are you a person who can act on tough questions? Questions like: What am I grateful for? What choices do I have? What actions can I take to improve my life? What are my primary strengths? How can I live a more balanced life?

People who can act on these questions likely also describe themselves as happy. "Happiness is neither a mood nor an emotion. Mood is a biochemical condition, and emotions are transitory feelings," says Dan Baker, Ph.D., director of the Life Enhancement Program at Canyon Ranch in Tucson, Ariz., and author of *What Happy People Know*.

Happiness is a way of life, an overriding outlook composed of qualities like love, optimism, courage, and a sense of freedom. It's not something that changes every time your situation changes. People often think happiness is something you're born with, but you can learn the qualities of happiness by mastering Dr. Baker's happiness tools described here.

Appreciation

This is the most fundamental tool. It is a form of love that asks for nothing and gives everything. "Taking time each day to appreciate what you have, to think about people who have made a difference, to acknowledge the love you have or have had. Each of these things can turn your attention to the good in your life," says Dr. Baker.

This process shifts your attention away from fear, which is often the basis of unhappiness."



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www.RBHHealthPro.com

Choice

Feeling like you have no choices or options in life is like being in jail. It leads to depression, anxiety, and learned helplessness. "Unhappy people make the mistake of giving in to fear, which limits their perception of the choices they have," says Dr. Baker. "Happy people turn away from fear and find they have an array of choices they can make in almost every situation."

Personal power

Personal power has two components: taking responsibility and taking action. It means realizing your life belongs to you and then doing something about it. "When you're secure in your personal power, it keeps you from becoming a victim," says Dr. Baker. "When you have it, you know you can handle whatever life dishes out."

Leading with your strengths

Focusing on your weaknesses reinforces unhappiness. By focusing on your strengths, you can solve problems and improve situations. "Building and broadening your talents and positive qualities feels good and improves your rate of success in every endeavor," says Dr. Baker. "People get energy from building on their successes, not fighting their failures."

Power of language

You think in words, and those words have the power to limit you or set you free. Similarly, the stories you tell yourself about your life eventually become your life. "Self-talk is powerful, so it's important to choose your words carefully," says Dr. Baker. "If you use destructive or critical language, you'll push yourself deeper into fear. Even something as simple as calling an unexpected situation a possibility instead of a problem can change the way you look at it." A good rule to follow in self-talk is to talk to yourself the way you want others to talk to you.

Multidimensional living

There are three primary components of life: relationships, health and purpose, or work. Many people, though, put all their energy into just one area. "But doing so never works," says Dr. Baker. "Happiness comes from living a full life."

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SAVE THE DATE May 4-5, 2017 St. Augustine, FL

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Keynote Speaker: Eric C. Arauz Author of "An American's Resurrection: My Pilgrimage from Child Abuse and Mental Illness to Salvation" Visit: <http://www.ipnfl.org/> for more information

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"A gush of bird-song, a patter of dew, a cloud, and a rainbow's warning, suddenly sunshine and perfect blue -
An April day in the morning." — Harriet Prescott Spofford

Travel

Spring is here and summer on its way, 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 other HPSP Guidelines are available at: www.RBHMonitoring.com

Over-the-Counter Allergy Relief

Allergies will soon be in full force. As a reminder, several over-the-counter medications may have sedating or stimulating effects. These include centrally acting antihistamines, such as diphenhydramine (Benadryl), and hydroxyzine (Vistaril or Atarax). Like prescriptions with addictive potential and/or psychotropic medication be sure to have your primary care physician populate a Medication Management Form before a non-negative test.

The Medication Management Form (MMF) and other useful forms are available at: www.RBHMonitoring.com

January 2017 HPSP Satisfaction Survey

Thank you to all who participated in the January 2017 edition of the HPSP Satisfaction Survey. A few highlights from the survey:

- 94% of licensees indicated that they understand the program's statutory monitoring requirements.
- 81% of licensees "agreed" or "strongly agreed" that the program treats them with dignity and respect.
- Just over 86% of licensees felt that information was communicated clearly and professionally and felt their Agreement Monitor is knowledgeable about their case.
- Of the licensees who use the portal, 83% found it to be "useful" or "extremely useful."
- 84% of licensees rated overall services favorably.
- 97% of workplace monitors indicated that they were either "very satisfied" or "satisfied" with the support they receive when supervising licensees.

Eighty-three (83) licensees participated in the survey. Nineteen licensees provided open-ended survey comments.

One licensee noted that their agreement monitor "is professional and personable to work with" and another noted, "is very professional and friendly!" Another positive comment from a licensee about their agreement monitor, "she always takes the time to go over the monitoring process and what to expect next I'm grateful for her dedication." A fourth licensee recorded, "I attribute my positive experience to my monitor. She has been excellent, always helpful and encouraging." These four positive comments about agreement monitors are balanced against a negative comment that the licensee's emails are not answered by their agreement monitor. If you ever experience less than timely responses to your emails or missed telephone calls please contact the HPSP Program Director, Christopher Hamilton (503) 802-9813; chamilton@reliantbh.com.

Two additional positive comments were received. One comment noted, "No changes in the evaluation from the last survey. Your program is clear and easy to navigate if in compliance." The other was a thoughtful, "thank you."

Three licensees made comments regarding the availability of toxicology collection sites after hours. We are consistently looking for collection sites in rural and frontier Oregon willing to provide observed collections, if you are aware of a location, please contact RBH's Mark Stotts (503) 802-9816; mstotts@reliantbh.com) to see if we can use the site. Additionally, licensees in the greater Portland Metro area, please remember that there are two 24-hour collections sites.

Four licensees made strong comments about what the program is currently and what it should be noting that the programs is or should be, "cookie cutter, rigid one size fits all, shame based and stressful, should be more like the Washington program, program should be an



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advocacy program, self-reported licensees and mental health licensees should have completely individualized requirements with no workplace guidelines, twelve step does not work.”

The program can be described as “cookie cutter” or molded out of the physician health program to the extent that there are statutory requirements, and that each Board has specific licensee requirements for workplace settings. Additionally, the HPSP participating Boards (Nursing, Medical, Dental, and Pharmacy) have worked with the program to develop guidelines that are uniformly applied to all licensees regarding check-ins, toxicology, testing exemptions, and third-party evaluation requirements. (All HPSP guidelines are available at www.RBHMonitoring.com) The idea that all treatment requirements are the same is not true, and these vary from licensee to licensee, based on diagnosis (DSM 5 and/or ASAM diagnostic criteria are used). All treatment plans are reviewed for medical appropriateness.

One licensee noted that there is no testing exemption for travel. That is not true, licensee who are in good standing, who have not had any reports of noncompliance, and after nine months are allowed 10 testing exemption days for the last three months of the first year and 21 exemption days for each consecutive year. The eligibility and application of these exemption days is outlined in the HPSP Toxicology Testing Exemptions Guideline.

One licensee expressed confusion with weekly check-in requirement, dilute urines, and inclement weather considerations. These items are all outlined in the monitoring agreement and guidelines. As there is a lot of information to cover and retain during enrollment, RBH is looking at additional modes to outline licensee requirements. Please remember to always review your monitoring agreement and read the HPSP Guidelines @ www.RBHMonitoring.com.

One additional licensee noted that they would like to receive daily reminders to call the IVR if they had not called at a certain point in the day. This is a regular request and has been discussed at length by the RBH Medical Director, Consulting Psychiatrist, and other members of the Policy Advisory Committee (PAC). The consensus of the PAC is to retain the call-in requirement as a personal responsibility of the licensee.

Finally, two licensees made comment about the difficulties in faxing. If you have any difficulty faxing, please immediately contact Markus (503) 802-9816, Dylan (503) 802-9867, or Tina (503) 802-9866.

Oregon- Health Professionals’ Services Program Preliminary MAT Findings



Christopher Hamilton, PhD,
Monitoring Programs Director

The Health Professionals’ Services Program (HPSP) recently performed an administrative review of HPSP participants, 25 licensees were identified as having taken buprenorphine prescriptions and 18 licensees were identified as having taken naltrexone while participating in HPSP.

Certain prescriptions, including Federally classified 2, 3, and 4 controlled substances, require medication management forms from the licensee’s prescriber and are subsequently entered as a medication in HPSP’s case management system. Enrollment documentation including third party evaluations, prescriptions, medication management forms, and toxicology results were reviewed to determine prescription start date and duration. Additionally, the data set was used to determine the date the licensee started HPSP, and their current status.



Robbie Bahl, MD,
HPSP Medical Director

Buprenorphine Experience

Of the 25 licensees, only one started buprenorphine as a treatment recommendation following a relapse verified by positive toxicology while participating in the program. The other 24 licensees started taking buprenorphine as a component of the treatment episode just prior to HPSP participation. The 25 licensees included two Medical Board, two Board of Dentistry, and 21 Board of Nursing.

To date, 72% (18 of 25) of the licensees who have had a buprenorphine prescription while participating in HPSP have successfully completed or are on target to successfully complete. Seven licensees (28%) have discharged unsuccessfully through license revocation, surrender, or retirement.

An area of concern voiced by some is the return to work of licensees while taking a partial agonist opioid receptor, buprenorphine. As HPSP can neither treat or practice medicine, it must rely on the licensee’s prescriber and the independent, independent from the program and the licensee’s board, third party evaluator for return to work recommendations. It is up to the

prescriber to determine if the licensee can practice while on a medically appropriate dose of buprenorphine. The HPSP Medical Director has final approval for medications and return to work with medication for medical, pharmacy, and dental board licensees HPSP licensees do work and take buprenorphine simultaneously. All twelve licensees who have successfully completed HPSP were working while taking buprenorphine and being monitored in HPSP. Additionally, at the time of program completion, all but one of the 12 were still working and taking buprenorphine. Additionally, of the six licensees currently in the program who have taken buprenorphine, four are currently working. Of the four licensees with buprenorphine prescriptions who are currently working, three are currently taking the medication and one titrated off the medication after stabilizing and before returning to work. Two of the six currently active HPSP licensees taking buprenorphine are in an unemployed status.

Naltrexone Experience

Of the 18 licensees, two HPSP licensees started naltrexone as a treatment recommendation following a relapse verified by positive toxicology while participating in the program. The other 16 licensees started taking naltrexone as a component of the treatment episode just prior to HPSP participation. Licensee include two Medical Board and 16 Board of Nursing.

Of the 14 currently active licensees, 11 were prescribed naltrexone for six months to one year and are no longer taking the medication since stabilizing in their recovery. The other three currently active licensees are still on a therapeutic naltrexone dose. The one licensee who successfully completed HPSP who was prescribed naltrexone while participating used the medication for a short duration before stabilizing and was off the medication at the time of program completion. Of the three HPSP licensees with naltrexone prescriptions who unsuccessfully discharged, two were still taking naltrexone at the time they were placed on probation by their board. In contrast to buprenorphine, HPSPs experience with naltrexone is the medication is more regularly associated with a short duration of stabilization.

Preliminary Findings

Based on Oregon's Health Professionals' Services Program's experience, health professional licensees participating in monitoring who are prescribed naltrexone and buprenorphine in medically appropriate doses in conjunction with substance use disorder treatment successfully complete monitoring and safely return to work at the same frequencies as health professional licensees who participate in monitoring and adhere to treatment recommendations that do not include MAT prescriptions. Our findings suggest, that licensees taking naltrexone use the medication to stabilize. Other findings suggest licensee who take buprenorphine may be safe to practice in their chosen field and are as likely to successfully complete their monitoring requirements as licensees who are not prescribed buprenorphine. We continue to review the HPSP experience with licensees prescribed MATs.

Spring Survival Guide

Spring is in the air. Unfortunately, so are the many tree and grass pollens that cause seasonal allergies. This can be bad news if these tiny particles cause your asthma to flare up. But the change in seasons doesn't mean that you have to hibernate until winter. While you may not be able to avoid your triggers completely, there are many ways to help limit your exposure.

Pollen and mold

For many allergy sufferers, pollen and mold are the main problem. If you are allergic to pollen or mold, you may notice that your asthma is worse on days that are hot, dry and windy. Your symptoms may lessen when it is rainy and windless, because the air is not as heavy with pollen and mold on these days.

You can check the pollen count in your area by going to the American Academy of Allergy, Asthma and Immunology's Web site. The Web site is updated daily during pollen season and lists the active pollens in your area. You can use this information to help plan your outside activities.

Here are some other suggestions for avoiding pollen and mold when pollen counts are high:

- Keep your windows closed to prevent pollen and mold from coming in.



- Remove any pollen and mold that make their way into your house with an air filter, air conditioning or an electrostatic filter.
- If possible, use an air conditioner, rather than fans, to cool your house.
- Keep your car windows rolled up and turn your air conditioner to re-circulate.
- Try to stay inside between 5 and 10 a.m. This is when pollen counts are generally the highest.
- Don't hang clothes or sheets outside to dry.
- Ask someone else to mow the lawn and rake leaves. These activities stir up allergens. If you have to do these things yourself, wear a mask.
- Take your vacation somewhere with less pollen, such as the beach.
- Shower and change your clothes after spending time outside. This will help remove any pollen or mold that is on your clothing, hair and skin.
- Exercise indoors.

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"It always seems impossible until it's done." – Nelson Mandela

RBH Continues HPSP Operation

RBH is pleased to announce that following a competitive bidding process we were named the successful proposer for Oregon's Health Professionals' Services Program (HPSP). RBH has continuously operated HPSP since the program started in July 2010. RBH will continue to operate HPSP as Oregon's physician health program (PHP) for licensees of the Medical, Pharmacy, and Dental Boards and as the alternative to discipline program (ATD) for the Board of Nursing. We are honored to continue to serve licensees, their respective boards, and the State of Oregon.

Guideline Updates

Three HPSP Guidelines were updated at the April HPSP Advisory Committee.

ETG/ETS Non-Negative Test Results Guideline - RBH will no longer normalize EtG or EtS results when the specimen's creatinine levels are equal or greater than 100ng/ml. EtG and EtS results with creatinine levels less than 100ng/ml will continue to be normalized.

Criminal Background Check for Self-Referral Licensees Guideline - The annual criminal background check has been changed to a criminal background check within six months of program completion or at the request of the program. The criminal background check must be received by HPSP in advance of program discharge. Licensees are encouraged to mail their unopened histories by a trackable method as outlined in the guideline.

Suspension from HPSP Guideline - The suspension from HPSP for illness, when that illness is not related to the licensee's entry diagnosis, that prevents the licensee from participating in the program.

Please review these and all other HPSP Guidelines at www.RBHMonitoring.com under "Resources."

The 5 R's of Mindfulness: Incorporating Mindfulness Into Everyday Life

Research shows the benefits of social and emotional learning for both youth and adults. According to the Collaborative for Academic, Social and Emotional Learning (CASEL), efforts that promote social and emotional learning improve young people's academic success and overall health and wellbeing, while also reducing negative behaviors such as alcohol and drug use, violence and bullying. Learning to navigate stress and distressing emotions like anger, anxiety and fear is an important part of developing emotional resiliency.

One way for children, youth 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. Neuroscience and psychological research suggest that the intentional practice of mindfulness improves the immune system – as well as increases gray matter in the brain involved with memory processes, emotional regulation, empathy and perspective taking.

Mindfulness educator, Chris Frasz of northern Michigan, recently presented a session for health educators at a Michigan State University Extension conference. He shared what he called The Five R's of Mindfulness as an easy way to remember and practice mindfulness in our everyday lives:

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.

Relax: Explore ways to slow down, connect with your breath and relax your mind and body.



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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?"

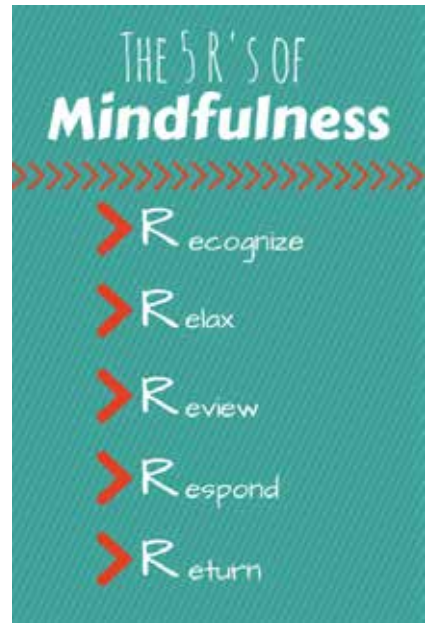
Respond: Practice responding from your deepest, wisest self while letting go of fear and worry about the past or future outcomes.

Return: Check in with yourself and bring yourself back to mindfulness and an awareness of the present moment with openness and curiosity.

Frasz also suggested that when our minds naturally go to our "to do" list and other intrusive thoughts that take us away from our mindfulness practice, that we gently tell ourselves, "Not right now" as a way to quiet our thoughts, calm our minds and bring ourselves back to the present moment.

A growing body of research shows the benefits of mindfulness to our physical, mental and emotional lives. Whether it's the intentional practice of meditation or Mindfulness-Based Stress Reduction programs (MBSR) or the practice of everyday mindfulness, you can explore ways to improve your health and wellbeing and bring more joy into your life through the practice of mindfulness.

This article was published by Michigan State University Extension. For more information, visit <http://www.msue.msu.edu>.



Upcoming Opportunities

Managing Workplace Conflict - Physician Health Services, Inc., June 8-9, 2017 - Massachusetts

This program is an educational forum for all physicians (both those in clinical practice and those in administration and leadership) to explore the relationships that drive the medical work environment. Disruptive behaviors and managerial miscommunications can impact a physician's ability to practice medicine effectively or a medical organization's ability to function smoothly. The course aims to allow participants to develop techniques to improve relationships with physician colleagues, coworkers, and patients, thereby improving the quality of the overall work environment. Please visit: www.massmed.org/mwcjune2017 for more information.

Maintaining Proper Boundaries

Sante Center for Healing is offering a Maintaining Proper Boundaries Course. The course will be offered May 3-5, August 9-11, and November 8-10. The course is offered in Argyle Texas. Contact Kerrie Sanders at 940-464-7222, or email kerries@santecenter.com, for additional information.

IDAA Annual Meeting 2017 - Salt Lake City, UT.

August 2-6, 2017 at the Snowbird Resort. Find more information at www.idaa.org.

2017 Professional Recovery Network



HPSP's Kate Manelis, Christopher Hamilton, and Nichole Collier pictured at the 2017 Professional Recovery Network.



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"The castle grounds were gleaming in the sunlight as though freshly painted; the cloudless sky smiled at itself in the smoothly sparkling lake, the satin-green lawns rippled occasionally in a gentle breeze: June had arrived."

J.K. Rowling, Harry Potter and the Order of the Phoenix

Is Your Area in Need of a Nurse Recovery Support Group?

The Nurse Assistance Network (NAN) is currently looking for nurses throughout the State of Oregon who would be interested in starting a Nurse Recovery Support Group in their local area. Whether you'd be interested in facilitating or simply being part of the support group, NAN would love to hear from you. For additional information or interest in participation, please contact Perla Estrada with the Oregon Nurses Foundation at Estrada@oregonrn.org.

Fourth of July Testing Exemption

Tuesday, July 4th is a holiday and licensees participating in toxicology are exempt from calling in our testing that day. For a full list of test exemption holidays please visit "other resources" on the website.

IVR Reminder

Remember that the IVR is available by phone ((888) 802-2851), website (www.RBHmonitoring.com), or by iPhone App (RBH Daily). The IVR is available from 3:00 AM until 5:00 PM. On the rare chance that the IVR is not working, please refer to the table below:

Before 7:00 AM	Leave a message for your agreement monitor and try the IVR again later in the morning.
After 7:00 AM	Call the HPSP Main Line (888) 802-2843 to check if you need to test and report your experience.
Getting close to 5:00 PM	Call your Agreement Monitor, the HPSP Main Line (888) 802-2843 and use the "zero out" feature to talk with someone.
Saturday before 5:00 PM	Call RBH's Monitoring Programs Director at (503) 802-9813. Leave a message if there is no answer.

After 5:00 PM staff are unable to verify if a licensee is required to test. Please review the HPSP Daily Test Notification Guideline at www.RBHmonitoring.com.

Collection Site Reminders

Summer is here and schedules are getting busy. Whether you are new to monitoring or expecting your 42nd test please review the following reminders.

- Keep paper chain of custody (CCFs) with you, a CCF may be required even if your regular collection site has previously not needed one.
- Once you check-in at the collection site you must stay until you produce a specimen.



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- Remember your assigned panel. If marked incorrectly you may be charged.
- If you experience any difficulties at the collection site call Tina (503) 802-9866 or Markus at (503) 802-9816 for assistance.
- Know your alternative collection sites. If a collection site is closed check the website, application, or call RBH for further assistance.

Additionally, please review all toxicology related guidelines at www.RBHmonitoring.com and ask your Agreement Monitor if you have any questions.

Travel Plans?

Traveling this summer? Please remember that we require two weeks notice of travel plans so we can identify testing sites. Remember that we need zip codes and dates of travel. Also, please remember to carry your paper chain of custody forms with you on your travels. Get your requests in early if you have already made your summer plans.

Steps to Manage Stress

- Identify the things in your life that cause stress. Try to avoid them, but if you can't, have a plan for dealing with them.
- Reduce internal stress by setting realistic goals and expectations for yourself.
- Share some of your responsibilities. A shared burden is lighter to carry -- and you may develop a new friendship or learn another way of problem solving.
- Exercise regularly to relieve muscle tension and stress. Stretches and walking are especially helpful.
- Find some humor in even the worst situation -- even when you have to force yourself.
- Organize your time and don't procrastinate. Focus on the individual steps for getting a job done, so you don't feel overwhelmed.
- Talk with a friend or family member. Sharing your thoughts and fears will make them less overwhelming and easier to handle.
- Get a pet to take care of and love.
- Practice deep breathing. Breathe in slowly from your diaphragm. Hold each breath for a few seconds, then exhale slowly.
- Learn progressive muscle relaxation to relieve tension. Tense and then relax every muscle in your body. Begin with your head and neck, and work your way down to your toes.
- Sit quietly and repeat to yourself a "cue" word, such as peace, that will make you feel calm.
- Listen to relaxation tapes or music.



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Upcoming Opportunities

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"Though no one can go back and make a brand new start, anyone can start from now and make a brand new ending." - Carl Bard

Toxicology Price Reduction

You may have already noticed, but the price for tests administered on or after July 1, 2017 are lower priced. The amount varies by toxicology panel, with the reduction being an average of an 8% reduction. Please check with Tina (503) 802-9866 for more information.

Travel Plans?

Traveling this summer? Please remember that we require two weeks notice of travel plans so we can identify testing sites. Remember that we need zip codes and dates of travel. Also, please remember to carry your paper chain of custody forms with you on your travels. Get your requests in early if you have already made your summer plans.

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 Christopher Hamilton, Ph.D. ((503) 802-9813; chamilton@reliantbh.com) for more information or to schedule a meeting.

Pets and People: The Health Connection

Psychology pioneer Sigmund Freud loved dogs, yet he never mentioned them in his research. It's only in recent years that scientists have begun to analyze the way we humans relate to other species. Perhaps that's because we need to make sense of the close connections so many people have with their pets, from pythons to parrots, German shepherds to Vietnamese pot-bellied pigs. Here are some of the most common questions people ask about their pets:

Is a dog's mouth cleaner than a human's?

Although this is a widely held belief among pet owners, the answer is no. So why don't we get sick from Fido's kisses? Generally, it's because animals and humans carry different types of bacteria in their mouths. Dog and cat bacteria don't tend to affect humans. So a kiss from your cat can be safer than a kiss from your grandma. But the cat's kiss won't be quite as safe as a dog's. There is a good chance that Spot's mouth is more sanitary, because a cat often cleans itself with its tongue.

Can you catch a cold from your pet?

Your runny-nosed cat licks you on the face and the next day you have the sniffles. Did you get it from your pet? Not likely. There are some diseases you can catch from your pet, called



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"zoonoses," but most viruses and upper respiratory infections aren't transmittable to humans. We carry different germs from those that inhabit our pets. For example, feline AIDS is a disease that attacks the immune system of cats in much the same way that human AIDS attacks the human immune system. But cats can't transmit feline AIDS to humans.

Though zoonoses are rare, there's at least one you should be aware of. It's called toxoplasmosis, and it can be transmitted from cats to people. The disease itself isn't dangerous for most healthy people; it consists of mild flu-like symptoms. But pregnant women who contract this disease may give birth to a baby with congenital defects. The expert advice: Pregnant women can have contact with cats, but they should let someone else clean out the litter box, where the greatest hazard lurks. Toxoplasmosis is also a danger to immunocompromised individuals, particularly those with AIDs who may develop toxoplasmosis infections that destroy vision and cerebral toxoplasmosis that causes neurological disease.



Are pets good therapists?

Many studies have explored the relationship between pets and humans. Among the results, as cited by the Delta Society, a nonprofit group that organizes animal-assisted therapy for people with mental and physical disabilities: Pets can reduce the loneliness of residents in long-term care facilities. People with borderline hypertension lowered their blood pressure on days when they took their dogs to work with them. Older adults who own dogs have fewer doctor visits than those who don't own dogs. Pet owners have lower triglycerides and cholesterol levels. Pet owners have better psychological well being.

If I accidentally leave my dog behind, will he find his way home?

Not unless you live close to where you left him. Remember "Homeward Bound," the Disney movie about two dogs and a cat that manage to find their way home from thousands of miles away? It makes quite an impression on pet owners, many of whom believe their animals have a great innate tracking ability.

But the idea that animals can track their way across the country to find their owners is a folk tale, experts say. In fact, pets rely on their sense of smell, rather than sight, to guide them back to familiar turf. Because smells change, an animal is actually more likely to get lost than humans. This doesn't mean pets are completely clueless about their home territory: Most have a specific distance they can travel from home and still find their way back — about a mile for city pets, and farther for country pets.

Can I have too many pets?

We usually find out about multiple pet owners from newspaper accounts: "Woman, 75, Found Dead with 50 Cats"; or "Health Department Raids Home of Hermit with 40 Dogs." The subjects of these stories have an unhealthy obsession with their pets. One study found that people who own too many pets suffer from a "rescue mentality" that seems to come out of a traumatic experience they themselves once suffered.

It isn't just the number of pets that determines whether a person has an unhealthy attachment to animals. Geraldine Rockefeller Dodge, for instance, had a kennel full of dogs, but she was wealthy, so she could find a place for them. But some people find they can't even cope with one cat appropriately.

Why are we more allergic to cats than dogs?

Allergic reactions are set off by proteins released by animals. These proteins can



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be from dried skin flecks or from dander. Both cats and dogs produce these, but cats have an additional allergenic element. As a cat licks itself, proteins in saliva dry on the fur, then flake off into the air. Allergy-prone people may be particularly susceptible to these airborne proteins.

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Upcoming Opportunities

The Other Bar- Newport Spiritual Retreat September 15 - 17, 2017

ALL healthcare professionals are welcome! The Newport Spiritual Retreat is held every September at the Hallmark Resort in Newport, Oregon. This retreat is exclusive for recovering members of the Legal, Healthcare, and Treatment communities, their spouses, families and significant others.

Visit: <http://theotherbaroregon.com/> or Jim O. at (503) 221-1425 for more information and to register.

Substance Use Disorder Conference

The Nursing Care Quality Assurance Commission, and Washington Health Professional Services invite you to attend an exciting Substance Use Disorder Conference October 13, 2017 at the Crown Plaza Airport Hotel, Seattle. The conference will address the role and responsibilities that nursing and healthcare organizations share regarding the abuse of opioids and other addictive drugs. The conference is aimed at nurses and nursing leadership, physicians, healthcare management, allied health professionals who specialize in substance use disorder, employee assistance professionals, and healthcare associations.

Early registration is now open. To take advantage of the \$100.00 early bird registration special, register before September 1, 2017. After September 1, 2017, the registration fee will be \$125.00 per person. For further information, please visit the conference website or send an email to: NursingPracticeConsultation.NCQAC@doh.wa.gov

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I have found that if you love life, life will love you back. - Arthur Rubinstein

Labor Day

Monday, September 4th is a holiday and licensees participating in toxicology are exempt from calling in for testing that day. For a full list of test exemption holidays please visit "other resources" on the website.

Text Communications

We have several licensees who have attempted to perform their weekly check-ins and complete other communications via text. RBH's Agreement Monitors and other team members are not set up to receive text messages. Please continue to communicate with the HPSP Team through traditional means.

IVR

After a short glitch, the iPhone application is up and running. This situation is a good time to remember the three ways to check-in: 1. The Apple App: RBH Daily, 2. The website: www.RBHMonitoring.com, 3. Phone: (888) 802-2851. Be sure to record your confirmation number. If you use your phone to check-in, consider taking a daily screen shot of the confirmation code. If you check-in using a web browser, depending on the settings of your web browser, be sure to refresh your screen to see the current day's check-in.

Collection Sites

Lincoln City Collection Sites - For those of you living on the Central Coast and others who visit, North Lincoln Hospital in Lincoln City is no longer a RBH collection site. Samaritan Occupational Medicine in Lincoln City is the next closest collection site. This leaves the Central Coast without a Saturday collection site. We are looking for an additional collection site with Saturday hours.

Outreach

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Year Seven (July 2016 – June 2017) Satisfaction Survey

Thank you to the 149 licensees who participated in the HPSP Satisfaction Survey over the last year. The 149 licensee participants represent a 34.3% response rate. Sixty-five licensees participated in the July survey which is a 29.4% response rate. Highlights for this period:

- 96.9% of licensees agree or strongly agree that they understand HPSP's statutory monitoring requirements



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- 89.3% of licensees agree or strongly agree that the program treats them with dignity
- 87.7% of licensees agree or strongly agree that the program treats them with respect
- 87.8% of licensees agree or strongly agree that program requirements are clearly explained
- 81.5% of licensees believe that HPSP provides significant and sufficient structure
- 92.3% of licensees believe that HPSP provides significant and sufficient accountability
- 87.7% of licensees agree or strongly agree that their questions or concerns are responded to in one business day
- 87.7% of licensees agree or strongly agree that their questions or concerns are addressed fully in the structure of the program
- 90.8% of licensees agree or strongly agree information is communicated clearly and professionally
- 88.6% of licensees agree or strongly agree their agreement monitor is knowledgeable about their case

Twelve licensees provided general comments on the July Satisfaction Survey. Five comments were positive in nature and individually mentioned specific HPSP Team Members. One licensee made comment about the IVR, as addressed above in the newsletter. Three comments were negative in that licensees felt the program should be less structured, more individualized for them, and shorter in length. Two licensees felt their agreement monitor does not return their calls as promptly as the licensee is required to check in. If you ever feel that your agreement monitor is not getting back to you in a timely manner, please contact the Program Director, Christopher Hamilton at (503) 802-9813.

All Satisfaction Survey results and comments are reviewed by HPSP's internal Policy Advisory Committee (PAC) and the HPSP Advisory Committee comprised of representatives from participating health professional boards.

The Power of Resilience

When tragedy strikes with the death of a loved one, a serious illness or a job loss, some people fall apart, while others adapt to such life-changing events more easily.

Being resilient is what makes the difference.

"Resilience is the process of adapting well in the face of adversity, trauma, tragedy or significant stress -- it means bouncing back from difficult experiences," says Patricia O'Gorman, Ph.D., a psychologist in private practice in East Chatham, N.Y., and a spokeswoman for the American Psychological Association. "We all share a special ability to take charge of our lives. This is what resilience can give us -- the ability to align ourselves with our strengths and to recognize our personal power."

Resilience is used to describe people who lead normal, fulfilling lives despite having experienced trauma or tragedy. These people are resilient because they have the ability to recover from adversity and retain a positive self-image and view of the world.

"People who are resilient accept that they have difficulties, but also know they have inner resources and abilities they have drawn on in the past," says Dr. O'Gorman. "This gives them a starting place that's positive, a place where they can search for solutions to their problems."

Building resilience

Resilience isn't a trait people either have or don't have -- it involves behaviors, thoughts and actions that can be learned and developed.

Here are some strategies for building resilience:

Nurture a positive view of yourself. Develop confidence in your ability to solve problems and trust your instincts. Avoid seeing crises as insurmountable problems. "You can't prevent stressful events from happening, but you can change how you interpret and respond to these events," says Dr. O'Gorman. "Try keeping a long-term perspective." Accept that change is a part of living. Certain goals no longer may be attainable as a result of adverse situations.

Accepting circumstances that can't be changed can help you focus on circumstances you can affect.

Look for opportunities for self-discovery. Many people who have experienced tragedies and hardship report better relationships, a greater sense of strength, an increased sense of self-worth and a greater appreciation for life.

Make connections. Good relationships with family, friends or others are important.



Accept help and support from those who care about you.

Maintain a hopeful outlook. An optimistic outlook enables you to expect good things to happen in your life.

Take care of yourself. Pay attention to your own needs and feelings. Engage in activities you enjoy and find relaxing. Exercise regularly, get enough sleep, and eat a healthful diet. Consider writing your thoughts about stressful events in your life. Try meditation and other spiritual practices. Many people find these activities help them build connections with others and restore lost hope.

"Becoming conscious of your strengths makes you stronger," says Dr. O'Gorman. "Resilience increases as you recognize the magnitude of what you've already accomplished and survived in your life and helps you believe you can meet the challenges that lie ahead."

Getting help

Getting help when you need it is crucial in building resilience.

"Beyond caring family members and friends, you may want to turn to support groups, mental health professionals or spiritual advisers if you're not able to bounce back from a setback on your own," says Dr. O'Gorman.

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"Nothing is more fleeting than external form, which withers and alters like the flowers of the field at the appearance of autumn." - Umberto Eco

Saturday Collection Sites

Please be advised that the radius for Saturday testing was raised to 30 miles by the HPSP Advisory Committee at the August Meeting. This means that if your nearest collection site with Saturday hours is within a 30-mile radius of your home, you will be required to test. Please be sure to check the website to identify your collection sites with Saturday hours.

New RBH Daily Smartphone Apps

RBH is pleased to announce the launch of both an updated iPhone app AND a new Android app. Both apps will allow you to conveniently check-in each day to see if you are required to test. Both provide your confirmation number, just like if you called the IVR or checked in from the website. You will also get the panel assignment to check off if you use a paper CCF. As always, remember that you can also check-in by phone through the IVR (888-802-2851) or the portal (rbhmonitoring.com).

iPhone Users: This new version of our app is compatible with Apple's new operating system (iOS 11) as well as older operating systems.

- To download the app for the first time, simply go to the app store (or iTunes) from your phone or iPad and search for "RBH Daily." This will bring up the NEW "RBH Daily" app. Click on download. Open the app to log in with your ID and pin.
- If you have previously installed an older version of the app, go to the app store and click on the "updates" tab. Once there, look for "RBH Daily" and click on "update." (If you can't find the app listed, follow the directions to download it for the first time.) Open the app to log in with your ID and pin.

Android Users: To download the app, simply go to the Google Play store. Search for "RBH Daily." This will bring up the "RBH Daily" app. Download it, then open to log in with your ID and pin.

Save the Date for the 2018 Professional Recovery Network Annual Conference

The next Professional Recovery Network (PRN) Conference is scheduled for Saturday, May 5, 2018 in Salem at the Chemeketa Community College Viticulture Center in West Salem. More information will follow in the coming months.

HPSP Guideline Quiz

How well do you know the HPSP Guidelines? Take this short quiz to find out!

1. How often are the Workplace Monitor Safe Practice Reports submitted to HPSP?
 - A. Once a month
 - B. Once every six months
 - C. Once a year
 - D. Whenever the Workplace Monitor deems it necessary
2. What is an MMF?
 - A. Meeting More Friends
 - B. More Meetings Form needed
 - C. Medication Management Form
 - D. None of the above

3. How soon do you need a Workplace Monitor in place for a new job?
 - A. In the first hour
 - B. In the first month
 - C. In the first week
 - D. Best case is by your first day of work
4. How many test exemption days do you have available after nine months of compliant participation?
 - A. 21
 - B. 5
 - C. 10
 - D. 15
5. Do you need a MMF to take Sudafed?
 - A. No
 - B. Yes
6. What will you be required to do if you test positive with ETG and there is no ETS finding?
 - A. You would be required to obtain a 3rd party evaluation
 - B. You would be reported non-compliant to your board
 - C. You would be required to step down from practice until you obtain return to work recommendations from an approved provider
 - D. All of the above
 - E. None of the above
7. Where can you find information on HPSP approved providers?
 - A. Google.com
 - B. Wikipedia.com
 - C. RBHMonitoring.com
 - D. rbhhealthpro.com
8. Which standard does HPSP follow when it comes to dilute specimens?
 - A. HPSP
 - B. DOT
 - C. OSBN
 - D. ESPN
9. What is the minimum number of Workplace Monitor Safe Practice Reports required to complete HPSP for OSBN licensees?
 - A. only 12
 - B. 24, but a monthly report is required for every month worked
 - C. 30
 - D. 18
10. Being admitted to a hospital for a mental health diagnosis is an automatic substantial non-compliance.
 - A. True
 - B. False

How did you do? For the answers to all of these questions and more, please visit www.RBHMonitoring.com.

Falling Into a New Workout

As the weather cools, make changes to stay active. Those long, active summer days have drawn to a close, but that's no reason to let your workout routines go into hibernation.

"Think of autumn as the start of a fresh new fitness season. Take advantage of the brisk temperatures to re-energize your commitment to a healthful lifestyle," says Kathie Davis, executive director of IDEA: The Health and Fitness Source, based in San Diego.

Start by writing down what you've accomplished in your fitness program so far and what you want to achieve in the future. Include long-range, broad objectives, such as maintaining a healthy weight, along with some short-term goals that will help you reach them.

As autumn days get shorter, "scheduling workouts can become more difficult, especially if you prefer to exercise outdoors, says Wayne L. Westcott, Ph.D., author of "Strength Training Past 50."



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Instead of struggling to beat the clock, Dr. Westcott suggests "get more bang for the buck by choosing activities that give you the same fitness benefits in a shorter amount of time." If you usually take a one-hour brisk walk, for instance, run for a half-hour, instead.

If you decide to work out indoors, don't expect to duplicate your outdoor routine. "Sustained activity in a gym lacks the variety you get outside," says Dr. Westcott. "If you spend an hour riding a bike on a beautiful country road, it goes by in a flash. If you spent an hour on a stationary bike in the gym, you'd go nuts."

To keep yourself entertained indoors, plan a workout that includes short periods of several different activities. Try 20 minutes on the stationary bicycle, 20 on the rowing machine and 20 on the stair climber. **Here are other ideas to help you make an active transition from summer to autumn exercise.**

Get organized. Autumn brings lots of new demands on time, especially if you're involved in community activities or have children in school. Protect your workout by setting a definite time and place, then scheduling other activities around that.

Seal the commitment by arranging to work out with a friend or personal trainer. Or join a group of people who walk, run or cycle at a regular time and place.

Catch the back-to-school spirit. Sign up for a class in a physical activity you've always wanted to learn.

Winterize your equipment. If you change your workout conditions, you may need to change your shoes, outerwear or other equipment, as well.

Maintain your skills. Tennis and swimming transfer easily indoors, but if golf or baseball is your sport, it may be harder to find winter opportunities to play. Keep in shape by choosing workouts that mimic motions used in your sport and keep those muscles strong and flexible.

Sign up for a bad-weather backup. Don't let rain or snow give you an excuse to skip a workout. Arrange for an indoor location before you need it. Join a health club, buy a video or investigate local mall-walking opportunities.

Find new opportunities to be active . Take the stairs instead of the elevator; park in the lot farthest away; and take a quick walk around the block at lunchtime.

"Get more exercise in winter, not less," says Dr. Westcott. "You'll feel better all over. And there's no more effective way to fight the winter doldrums than by staying active and fit."

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Upcoming Opportunities

Substance Use Disorder Conference

The Nursing Care Quality Assurance Commission, and Washington Health Professional Services invite you to attend an exciting Substance Use Disorder Conference October 13, 2017 at the Crown Plaza Airport Hotel, Seattle. The conference will address the role and responsibilities that nursing and healthcare organizations share regarding the abuse of opioids and other addictive drugs. The conference is aimed at nurses and nursing leadership, physicians, healthcare management, allied health professionals who specialize in substance use disorder, employee assistance professionals, and healthcare associations.

Registration is now open. The registration fee will be \$125.00 per person. For further information, please visit the conference website or send an email to: NursingPracticeConsultation.NCQAC@doh.wa.gov



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HealthProCHOICES

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October 2017



"Bittersweet October. The mellow, messy, leaf-kicking, perfect pause between the opposing miseries of summer and winter." - Carol Bishop Hipps

Upcoming State Holidays

The following Oregon observed holidays are test exemptions days on which you do not need to check to see if you need to test:

- Veterans Day - Friday, November 10 and Saturday, November 11
- Thanksgiving Day - Thursday, November 23 and Friday, November 24
- Christmas Day - Monday, December 25
- New Year's Day - Monday, January 1

OMB Licensee Change of Address Requirement

This is a reminder that under OAR 847-008-0060, OMB licensees are required to notify the Board in writing within 30 days of any change in residence address, practice location, or mailing address.

Professional Recovery Network (PRN) Meetings

Did you know that PRN meetings are open to all professionals? The Professional Recovery Network was previously the Pharmacy Recovery Network. A list of meetings with times and locations is available at: www.prnoforegon.org

Recent Follow-up Survey Findings

At the time of successful completion, licensees are asked to respond to a short HPSP Follow-up Survey. Over the last year, new questions were added about licensees' reflection of the program's impact on their professional and personal lives. Eighteen percent of surveys were returned over the last year and seven licensees responded to the following questions:

Professional Life	Percent Agree or Strongly Agree
I am more satisfied with work.	71%
I feel less stressed or burned out at work.	86%
I am better able to understand or empathize with my patients.	71%
The medical care I provide to my patients has improved.	57%
My professional relationships have improved.	57%
My work feels more meaningful.	57%

Personal and Interpersonal Life	Percent Agree or Strongly Agree
I feel better able to cope with life changes.	86%
I feel better equipped to manage my own health.	71%
My self-esteem improved.	57%
My mood improved.	71%
I have a better work-life balance.	86%
I am more engaged in my community.	57%
My personal life is less stressful.	57%
My spouse/partner and I communicate better.	29%
I am more satisfied with my personal relationships.	57%
I am better equipped to manage problems at home.	71%
I spend more meaningful time with family or friends.	100%
I feel better able to cope with life changes.	86%

Although this is a small sample, it is reassuring that following HPSP licensees feel their professional, personal, and interpersonal lives have improved in so many areas. The HPSP Policy Advisory Committee will continue to review all returned surveys and hope to see the trend identified above continue.

2018 Professional Recovery Network Annual Conference

The next Professional Recovery Network (PRN) Conference is scheduled for Saturday, May 5, 2018 in Salem at the Chemeketa Community College Viticulture Center in West Salem. More information will follow in the coming months.

The Power of Resilience

When tragedy strikes with the death of a loved one, a serious illness or a job loss, some people fall apart, while others adapt to such life-changing events more easily.

Being resilient is what makes the difference.

"Resilience is the process of adapting well in the face of adversity, trauma, tragedy or significant stress -- it means bouncing back from difficult experiences," says Patricia O'Gorman, Ph.D., a psychologist in private practice in East Chatham, N.Y., and a spokeswoman for the American Psychological Association. "We all share a special ability to take charge of our lives. This is what resilience can give us -- the ability to align ourselves with our strengths and to recognize our personal power."

Resilience is used to describe people who lead normal, fulfilling lives despite having experienced trauma or tragedy. These people are resilient because they have the ability to recover from adversity and retain a positive self-image and view of the world.

"People who are resilient accept that they have difficulties, but also know they have inner resources and abilities they have drawn on in the past," says Dr. O'Gorman. "This gives them a starting place that's positive, a place where they can search for solutions to their problems."

Building resilience

Resilience isn't a trait people either have or don't have -- it involves behaviors, thoughts and actions that can be learned and developed.

Here are some strategies for building resilience:

- Nurture a positive view of yourself. Develop confidence in your ability to solve problems and trust your instincts.



- Avoid seeing crises as insurmountable problems. "You can't prevent stressful events from happening, but you can change how you interpret and respond to these events," says Dr. O'Gorman. "Try keeping a long-term perspective."
- Accept that change is a part of living. Certain goals no longer may be attainable as a result of adverse situations. Accepting circumstances that can't be changed can help you focus on circumstances you can affect.
- Look for opportunities for self-discovery. Many people who have experienced tragedies and hardship report better relationships, a greater sense of strength, an increased sense of self-worth and a greater appreciation for life.
- Make connections. Good relationships with family, friends or others are important. Accept help and support from those who care about you.
- Maintain a hopeful outlook. An optimistic outlook enables you to expect good things to happen in your life.
- Take care of yourself. Pay attention to your own needs and feelings. Engage in activities you enjoy and find relaxing. Exercise regularly, get enough sleep, and eat a healthful diet. Consider writing your thoughts about stressful events in your life. Try meditation and other spiritual practices. Many people find these activities help them build connections with others and restore lost hope.



"Becoming conscious of your strengths makes you stronger," says Dr. O'Gorman. "Resilience increases as you recognize the magnitude of what you've already accomplished and survived in your life and helps you believe you can meet the challenges that lie ahead."

Getting help

Getting help when you need it is crucial in building resilience.

"Beyond caring family members and friends, you may want to turn to support groups, mental health professionals or spiritual advisers if you're not able to bounce back from a setback on your own," says Dr. O'Gorman.

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HealthProCHOICES

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November 2017



"No shade, no shine, no butterflies, no bees, no fruits, no flowers, no leaves, no birds - November!" -Thomas Hood

Upcoming State Holidays

The following Oregon observed holidays are test exemptions days on which you do not need to check to see if you need to test:

- Thanksgiving Day - Thursday, November 23 and Friday, November 24
- Christmas Day - Monday, December 25
- New Year's Day - Monday, January 1

New Apps Being Used

The new iPhone and Android apps were introduced in late September. The apps are being used. It is interesting to look at who is checking in by which method.

The iPhone app is the most popular check-in method; it is even a little more popular with men than women.

Check-in Method	Female	Male
Android	5.5%	8.0%
Internet	17.6%	12.4%
iPhone	49.5%	57.0%
Phone Call	27.3%	22.6%

When check-in method is broken down by licensee board, OMB and BOD licensees really prefer iPhones. Although iPhone is the preferred check-in method for BOP licensees, they have far more Android users than the OMB and BOD.

Check-in Method	BOP	OSBN	OMB	BOD
Android	12.2%	9.4%	2.6%	0
Internet	7.8%	17.3%	10.8%	0
iPhone	49.9%	46.0%	64.5%	68.3%
Phone	30.1%	27.3%	22.2%	31.7%

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 Christopher Hamilton, Ph.D. ((503) 802-9813; chamilton@reliantbh.com) for more information or to schedule a meeting.



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Holiday Depression and Stress

The holiday season is a time full of joy, cheer, parties, and family gatherings. However, for many people, it is a time of self-evaluation, loneliness, reflection on past failures, and anxiety about an uncertain future.

What Causes Holiday Blues?

Many factors can cause the "holiday blues": stress, fatigue, unrealistic expectations, over-commercialization, financial constraints, and the inability to be with one's family and friends. The demands of shopping, parties, family reunions, and house guests also contribute to feelings of tension. People who do not become depressed may develop other stress responses, such as: headaches, over-eating, and difficulty sleeping. Even more people experience post-holiday let down after January 1. This can result from disappointments during the preceding months compounded with the excess fatigue and stress.



Coping with Stress and Depression During the Holidays

- Keep expectations for the holiday season manageable. Try to set realistic goals for yourself. Pace yourself. Organize your time. Make a list and prioritize the important activities. Be realistic about what you can and cannot do. Do not put entire focus on just one day (i.e., Thanksgiving Day) remember it is a season of holiday sentiment and activities can be spread out (time-wise) to lessen stress and increase enjoyment.
- Remember the holiday season does not banish reasons for feeling sad or lonely; there is room for these feelings to be present, even if the person chooses not to express them.
- Leave "yesteryear" in the past and look toward the future. Life brings changes. Each season is different and can be enjoyed in its own way. Don't set yourself up in comparing today with the "good ol' days."
- Do something for someone else. Try volunteering some time to help others.
- Enjoy activities that are free, such as driving around to look at holiday decorations; going window shopping without buying; making a snowperson with children.
- Try something new. Celebrate the holidays in a new way.
- Spend time with supportive and caring people. Reach out and make new friends or contact someone you have not heard from for awhile.
- Save time for yourself! Recharge your batteries! Let others share responsibility of activities.

Can Environment Be a Factor?

Recent studies show that some people suffer from seasonal affective disorder (SAD) which results from fewer hours of sunlight as the days grow shorter during the winter months. Phototherapy, a treatment involving a few hours of exposure to intense light, is effective in relieving depressive symptoms in patients with SAD.

Other studies on the benefits of phototherapy found that exposure to early morning sunlight was effective in relieving seasonal depression. Recent findings, however, suggest that patients respond equally well to phototherapy whether it is scheduled in the early afternoon. This has practical applications for antidepressant treatment since it allows the use of phototherapy in the workplace as well as the home.

National Mental Health Association (NMHA) ©2017

Upcoming Opportunities

2018 Vanderbilt Center for Professional Health Courses

- Proper Prescribing of Controlled Prescription Drugs
 - Maintaining Proper Boundaries
 - The Program for Distressed Physicians
- Visit www.mc.vanderbilt.edu/cph for additional information on these courses.



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Upcoming State Holidays

The following Oregon observed holidays are test exemptions days on which you do not need to check to see if you need to test:

- Christmas Day - Monday, December 25, 2017
- New Year's Day - Monday, January 1, 2018
- Martin Luther King, Jr. Day - Monday, January 15, 2018

2018 Holiday Exemption Days

Holiday Event	2018 Testing Holidays
New Year's Day	Mon., Jan. 1, 2018
Martin Luther King, Jr. Day	Mon., Jan. 15, 2018
Presidents' Day	Mon., Feb. 19, 2018
Memorial Day	Mon., May 28, 2018
Independence Day (July 4)	Wed., July 4, 2018
Labor Day	Mon., Sept. 3, 2018
Veterans Day (Nov. 11)	Mon., Nov. 12, 2018
Thanksgiving Day	Thurs., Nov. 22, 2018 and Fri., Nov. 23, 2018
Christmas Day (Dec. 25)	Tues., Dec. 25, 2018

Over-the-Counter Prescriptions

The cold and flu season has arrived. Everyone is reminded to review the Over-the-Counter Medication List at www.RBHMonitoring.com under "Other Resources" and the Medication Management Form under "Forms." Remember to avoid taking medications that contain alcohol, diphenhydramine, or pseudoephedrine.

Over-the-Counter medications containing alcohol must be avoided and cannot be approved by a provider by a Medication Management Form. If your physician or other practitioner prescribes a centrally acting antihistamine or decongestant such as diphenhydramine (Benadryl) or hydroxyzine (Vistaril or Atarax), these medications and some others, even though they are over the counter, require the completion of Medication Management Forms. Please have these forms in place in advance of a non-negative toxicology test.

Holiday Travel

The holidays are here. Please remember that we require two weeks notice of travel plans so we can identify testing sites. Remember that we need zip codes and dates of travel. Also, please remember to carry your paper chain of custody forms with you on your travels. Get your requests in now if you have already made your holiday plans.



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Billing Questions

What is my credit card being billed for? You can log into Portal to find out! (To log in, go to rbhmonitoring.com and use your ID & 4 digit pin). Invoices are displayed in the middle of the right-hand column under the heading "Account." The date listed there will match the date billed on your credit card (and the amount will match too). The corresponding description of service for that date & amount will tell you if the charge was for a drug test, GMC, PMC, etc.

So which test or which PMC/GMC was the charge for? Note that the date in portal is the date billed, NOT the date of service. We are planning to start displaying the date of service on portal soon so that you can more easily match up the services received with the charges received. For now, know that each drug test is billed shortly after the test is completed. For GMC/PMC, we have started to include the date of service in the description (E.G – PMC for July)

Please be aware that if you are looking up PAST PMC charges, they may not all show on Portal due to the way they were entered into the system. Moving forward, they will all display.

The screenshot shows the RBH Monitoring portal interface. At the top, there is a navigation bar with links for Home, My Account, Resources, Potential Participants, Contact, and Log off. The user is logged in as Christopher Tester (ID: 15123476). The page displays several sections:

- Daily Check-Ins:** A table showing missed check-ins from October 23, 2017, to October 31, 2017. All entries are marked as "MISSED" and "Test Scheduled?" is "No".
- Account:** A table showing the account balance as \$0.00 and a list of recent transactions, including MEDTOX 87606/C DE ETG Only and MEDTOX 88544/A standard 5 panel, all with a balance of \$0.00.
- CCF Request Form:** A section for submitting a CCF form, including a field for "Quantity Needed and Comments" and a "Submit" button.

Criminal Behavior Reporting

A reminder to HPSP licensees that they are required to report the arrest or conviction of misdemeanors and felonies to both their board and HPSP within three business days. This includes subsequent convictions of previously reported arrests.

Quick-Start Resolutions for the New Year

Resolving to lead a healthier lifestyle is a good way to begin the New Year. But don't despair if you still haven't confirmed your New Year's Resolutions. There's still plenty of time to choose a better path for the year ahead.

"Millions of Americans make resolutions that go unresolved largely because they fail to utilize proven behavior modification techniques to support their new goals," says Don R. Powell, Ph.D., president of the American Institute for Preventive Medicine in Southfield, Michigan, and author of 365 Health Hints.

"For starters, it's important to set realistic goals for yourself," he says. "It takes some time to develop a bad habit, so don't expect to change things overnight. In addition, try to work on only one habit at a time. It's not easy to change your behavior, and it can become overwhelming if you try to change too much, too soon." Here are some



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major changes. Pick 1 or 2 that are important to you, work on them, and move on to others when you have met your goals.

Quick-Start Resolutions

1. I resolve to get physical. Sticking to a regular exercise routine is one of the most important steps you can take to improve your health and longevity. Starting this year, devote 30 minutes, three to four times a week to an aerobic activity you enjoy. Good choices include walking, running, swimming, biking, skating, and aerobic dancing.



2. I resolve to maintain an ideal body weight. This year, eat high-fat foods in moderation. Approximately one in two Americans is overweight, and these extra pounds contribute to heart disease, diabetes, stroke, and an increased risk of certain cancers.

3. I resolve to stop smoking and try avoiding those people who still light up. Cigarette smoking is the single-most preventable cause of illness in America today. Each year, six times more Americans die from cigarettes than were killed in the Vietnam War. Side stream smoke is just as bad; it can be deadly to nonsmokers who inhale it on a regular basis.

4. I resolve to control my blood pressure. If you haven't had your blood pressure checked recently, do so. Follow your doctor's instructions if it's high, and faithfully take any prescribed medication. If left untreated, high blood pressure is the primary cause of stroke.

5. I resolve to develop a strong social support network. Studies have shown that people who have supportive relatives, friends, and co-workers are sick less often than those who don't. Be a friend to others and keep your family close and caring.

6. I resolve to reduce my cholesterol. This year have your cholesterol tested or retested, if necessary. The average cholesterol level in the United States is 215 -- 15 points above 200, which is considered healthy. If your level is high, follow your doctor's instructions and reduce your consumption of red meat, regular dairy products, and food items high in saturated fats.

7. I resolve to control my hostility. For your heart's sake, make an effort to control a bad temper. Studies have indicated that anger and hostility may be as bad for your heart as smoking and high blood pressure.

8. I resolve to clean up psychological pollution. People who live long lives characteristically possess a positive attitude about life. Resolve to stop indulging in negative thinking which can pollute your mind and negatively influence your health and emotional well-being.

9. I resolve to always buckle-up. Make it a rule that you won't start your car until everyone is buckled-in. Wearing a seat belt greatly increases your odds of surviving a car accident.

"By keeping all of the resolutions you can add years to your life and life to your years," Dr. Powell says.
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