

**INDIANA
PROFESSIONALS
RECOVERY
PROGRAM**



WHO WE ARE

- IPRP is the Indiana Professionals Recovery Program (IPRP) - a state-wide monitoring program for health care professionals who suffer from substance use disorder.
- We aspire to help protect the health, safety and welfare of patients that could be at risk from an impaired provider.
- The IPRP team is dedicated to helping the impaired provider remain accountable and dependable both during and after their time in the program, so they can overcome their addiction and ultimately return to the career they love.

MISSION STATEMENT

IPRP is committed to providing the impaired health care professional with a remarkable recovery experience through monitoring, support, and accountability.

OUR GOAL

To provide all health care professionals suffering from substance use disorder the support, resources, advocacy, and accountability needed to overcome their addiction and return to safe practice and self-wellness.

OUR TEAM

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Program Director

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OUR TEAM

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Clinical Case Manager

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SUBSTANCE USE DISORDERS

HEALTH CARE PROFESSIONALS



1:3 People personally
know someone with
SUD



1:10 People live with
someone suffering with a
SUD



1:15 People meet the
DSMV Criteria for a
diagnosis of SUD

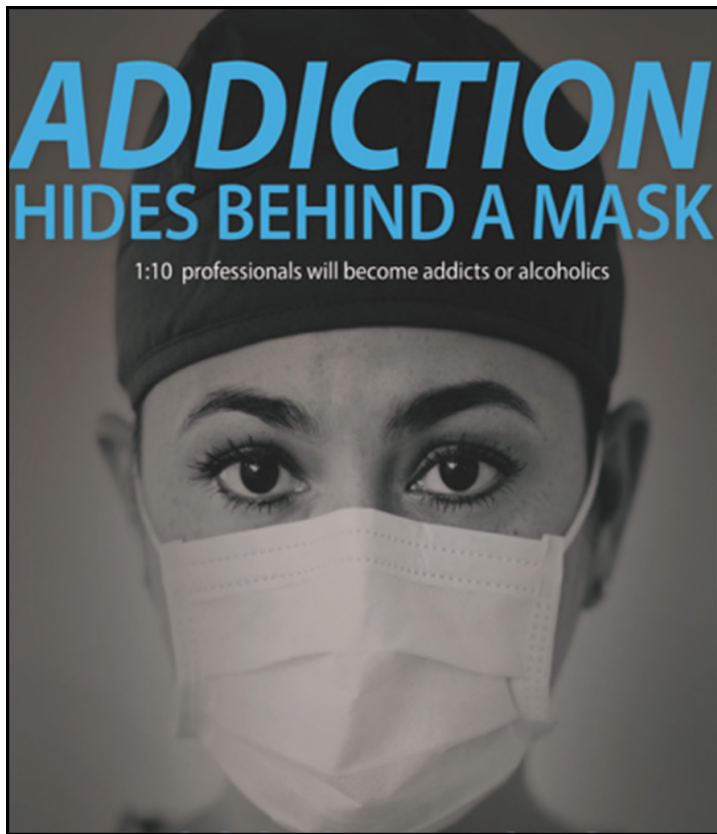
A CONSUMER NATION

- United States makes up 4.4% of the world's population and yet we consume:
 - 80% of World's Opiates
 - 90% of World's Hydrocodone
 - 80% of World's Amphetamines



ADDICTION **HIDES BEHIND A MASK**

1:10 professionals will become addicts or alcoholics



WHAT DO YOU THINK OF.....

- What does substance abuse look like to you?
- What comes to mind when you think about someone with a substance use disorder?
- What do they look like?
- Where do they live?
- What do they do for a living?

WHO IS BEHIND THE MASK?

- Intelligent, top 25% of class
- Well liked and Respected
- Supervisors and Managers
- Advanced Degrees
- Top performers



THE 6 STEP PROCESS

WHILE EACH PATIENT'S CASE IS UNIQUE, IPRP HAS
A PROVEN PROCESS TO OFFER THE GREATEST
IMPACT.



***PROFESSIONAL
OR
REPRESENTATIVE
CONTACTS IPRP***



2

***COMPLETE BRIEF
PHONE EVALUATION
AND PARTICIPANT
SELF-REPORT***



3

**COMPLETE IN-PERSON
INTAKE AND
EVALUATION**

RELEASE OF INFORMATION (ROI)

What is a Release of Information?

Why is a Release of Information necessary?

What types of ROI's might a participant sign?

IPLA/ INDIANA STATE BOARD OF THE MEDICAL PROFESSIONAL

We ask all participants to sign a release of information for the IPLA and Indiana State Board of Nursing (BON) as they are the regulatory agencies for all licensed nurses in the state of Indiana. This release is for a full release of ALL medical records, which means the IPLA and BON would be able to receive any information regarding IPRP intakes and assessment results, any admission or discharge information, any psychiatric or psychological evaluations, any monthly or quarterly reports submitted to IPRP, treatment summary, any laboratory reports, progress notes, or summary of compliance. The purpose of this release of information is to report your compliance (or non-compliance) with monitoring.

INDIANA OFFICE OF THE ATTORNEY GENERAL

We ask all participants to sign a release of information for the Indiana Office of the Attorney General as they are one of the regulatory agencies for all licensed nurses in the state of Indiana. This release is for a full release of ALL medical records, which means, the Indiana Office of the Attorney General would be able to receive any information regarding IPRP intakes and assessment results, any admission or discharge information, any psychiatric or psychological evaluations, any monthly or quarterly reports submitted to IPRP, treatment summary, any laboratory reports, progress notes, or summary of compliance. The purpose of this release of information is to report your compliance (or non-compliance) with monitoring.

AFFINITY E-SOLUTIONS, INC

We ask all participants to sign a release of information for Affinity E-Solutions, the company IPRP uses to run the electronic medical record (EMR) system and scheduling and handling drug tests for our monitoring participants. This release is a full release of all medical records. Affinity needs to access your information to assist you getting labs scheduled and as part of running our EMR.

**WITHAM HEALTH
SERVICES &
TOXICOLOGY/
LABCORP**

We ask all participants to sign a release of information for Witham Health Services and Toxicology as well as LabCorp. IPRP uses these labs for all drug testing for initial assessments, as well as any drug testing performed while in monitoring. This release covers only the laboratory reports and allows IPRP to receive the results of any drug tests you take.



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***IPRP
INTAKE/EVALUATION IS
REVIEWED WITH THE
CLINICAL TEAM***



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**IMPLEMENT THE
RECOVERY
MONITORING
AGREEMENT (RMA)**





If you are a nurse or pharmacist that is caught diverting medication or suspected of drug or alcohol abuse, impaired on your job your employer is required to report you as you may be a potential threat to the public.



If you are struggling with substance use disorder and do not voluntarily report yourself, you will eventually be discovered, and the consequences are most commonly quite severe.



Ultimately, the Indiana State Board of Nursing, Indiana Board of Pharmacy, office of the Indiana attorney general, or a similar regulatory or legal agency will mandate your admission into the program.



Mandatory admission is not the end. Rather, it is just the beginning for Indiana Professionals Recovery Program to help you recover and return to your health care profession as a new and improved nurse or pharmacist.

MANDATORY ADMISSION (REGULATORY)

VOLUNTARY ADMISSION (NON-REGULATORY)

- If you are struggling with addiction, there is confidential help available (unless reported by another entity). You are not alone.
- When you are proactive and voluntarily self-report your situation, higher levels of confidentiality can be offered, which leads to little or no effect on your licensing status as a nurse or pharmacist and career path.
- During voluntary admission, you will be able to remain active in your health care profession while being monitored as long as you remain compliant in the program.
- Early intervention is key, and when an impaired provider voluntarily enters into this program, not only do you benefit, but your patients do as well.





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**RETURN TO WORK
SAFELY AND
ACHIEVE A LIFE
*OF PERSONAL
WELLNESS***

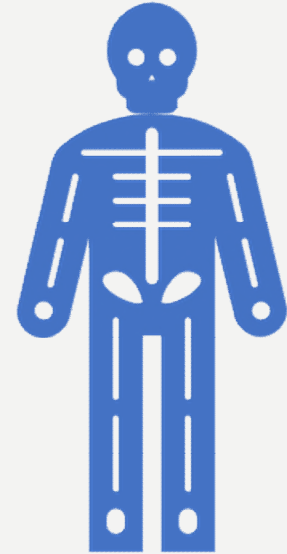
ADDITIONAL INFORMATION

MONITORING KNOW HOW



WORKSITE MONITOR (WSM)

- What is a Worksite Monitor?
- Why do I need a Worksite Monitor?
- Who can be a Worksite Monitor?
- What is the role of the Worksite Monitor?
- Is an ROI required of a Worksite Monitor?



SELF-HELP MEETINGS

- What is a self-help meeting?
- Where do I find self-help meetings?
- Why would I be required to attend a self-help meeting?
- Does a participant have to report meeting attendance?



SELF-HELP MEETINGS

- SMART Recovery
[smartrecovery.org](https://www.smartrecovery.org)
- Refuge Recovery
[refugerecovery.org](https://www.refugerecovery.org)
- Celebrate Recovery
[celebraterecovery.com](https://www.celebraterecovery.com)
- Straight Path to Recovery Islam-focused recovery
[straightpathtorecovery.com](https://www.straightpathtorecovery.com)
- Find a Local AA Meeting
[aa.org/pages/en_US/find-local-aa](https://www.aa.org/pages/en_US/find-local-aa)
- Find a Local NA Meeting
[na.org/meetingsearch](https://www.na.org/meetingsearch)
- Secular Organizations for Sobriety
[sossobriety.org](https://www.sossobriety.org)

COMMON RISKY BEHAVIORS CHECK LIST

- **Absenteeism**

- Instances of leaving without permission
- Excessive sick leave
- Frequent Monday and/or Friday absences
- Repeated absences, particularly when they follow a pattern
- Lateness to work, especially on Monday mornings, and/or returning from lunch
- Leaving work early
- Peculiar and increasingly unbelievable excuses for absences or lateness
- Absent more often than other employees for colds, flu, gastritis, and so forth
- Frequent unscheduled short-term absences (with or without medical explanation)

RISKY BEHAVIORS

“On-The-Job” Absenteeism

- Continued absences from post more than job requires – “goofing off”
- Long coffee breaks, lunch breaks
- Frequent trips to the restroom

Uneven Work Pattern

- Alternate periods of high and low productivity

High Accident Rate

- Accidents on the job
- Accidents off the job (but affecting job performance)
- “Horseplay” that causes unsafe conditions

RISKY BEHAVIORS

Problems with Memory

- Difficulty in recalling instructions, details, conversations, and so forth
- Difficulty recalling nurse's own mistakes

Difficulty in Concentration

- Work requiring greater effort
- Jobs taking more time
- Repeated mistakes due to inattention
- Bad decisions or poor judgment
- Errors in charting
- Forgetfulness

Confusion

- Difficulty following instructions
- Increasing difficulty handling complex assignments

RISKY BEHAVIORS

Reporting to Work in an Inappropriate State

- Coming to/returning to work in an obviously altered condition

General Lowered Job Efficiency

- Missed deadlines, unreliability
- Complaints from patients, family members
- Improbable excuses for poor job performance
- Undependability
- Refusal to take job assignments, failure to complete assignments

RISKY BEHAVIORS

Poor Employee Relationships on the Job

- Failure to keep promises; unreasonable excuses for failing to keep promises
- Overreactions to real or imagined criticism
- Borrowing money from co-workers
- Unreasonable resentments
- Avoidance of associates
- Lying and exaggerating
- Complaints from co-workers, supervisors, other staff
- Blaming others for problems

RISKY BEHAVIORS

Inappropriate Appearance

- Decreased attention to personal appearance and hygiene
- Odor of alcohol on breath
- Glassy, red eyes
- Tremors

Other Problem Behaviors

- Sleeping on the job
- Withdrawal from others, self-isolation
- Mood swings
- Increasing irritability
- Problems at home, with relationships, with finances

RISKY BEHAVIORS

Drug Diversion

- Consistent volunteering to give medications
- Patient complaints of no relief; discrepancies on records
- Consistent administration of IM (prn) and maximum doses when other professionals do not demonstrate such patterns
- Frequent wastage, such as spilling drugs or breaking vials
- Unobserved wastage, no co-signatures
- Work on a unit where drugs are missing or have been tampered with
- Frequent volunteering for additional shifts; appearing on unit when not assigned.

Q & A

The floor is now yours!

Ask questions!

Let's have a discussion!

Thank you for inviting us to speak to your group today!!!