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I. PROGRAM OVERVIEW

Since 1997, the Virginia Health Practitioners' Monitoring Program (HPMP) has provided comprehensive and effective monitoring services to hundreds of healthcare professionals.

We offer an alternative to disciplinary action to qualified healthcare practitioners with a substance use diagnosis, a mental health or physical diagnosis, that may alter their ability to practice their profession safely.

The role of HPMP is to provide each practitioner with the identification, and continuous monitoring of the treatment recovery process to achieve and maintain optimal physical, mental, and emotional health in order to promote self, and patient safety. Our goal is to assist and support healthcare professionals in our program to returning to safe and productive clinical practice.

PROGRAM - HPMP REFERS

HEALTHCARE PROFESSIONALS FOR

APPROPRIATE TREATMENT AND

PROVIDES ONGOING MONITORING

OF TREATMENT PROGRESS.

The Department of Health Professions (DHP) contracts with the Virginia Commonwealth University Health System (VCUHS), Department of Psychiatry, Division of Addiction Psychiatry to provide monitoring and clinical services including:

- Confidential intake to determine program eligibility.
- Referrals to treatment providers for clinical assessment and treatment.
- Monitoring of treatment progress and clinical practice.
- Maintaining the alcohol and drug toxicology screening process.
- And for those participants with Board involvement, the team provides support including participant preparation for hearings and providing the Board with documentation or testimony of monitoring compliance.

Participation, in what is most often a one-to-five-year program is voluntary. Disciplinary action may be avoided and, in the absence of criminal behavioral or Board action, public records may not be generated. For those participants with Board involvement, the HPMP team provides support including participant preparation for hearings, documentation of participation for the Board, and by testifying to monitoring compliance at Board hearings.

HPMP services are available to anyone who holds a current, active license, certification or registration by a health regulatory board in Virginia or a multi-state licensure privilege. An applicant for initial or reinstatement of licensure, certification, or registration is also eligible to participate for up to one year from the date of receipt of their application.

If you have been referred to HPMP and would like to get started, or have questions, contact Virginia HPMP toll-free at 1-866-206-4747 or email vahpmp@vcuhealth.org.

II. THE HPMP PROCESS

Healthcare professionals may enter the program at any time either voluntarily or by referral to the program.

Most of the referrals received in 2021 was from DHP Licensing Boards.

DHP Licensing Boards - 43

DHP Enforcement Personnel - 27

Employers - 16

Other Monitoring Programs - 16

Treatment Providers - 10

Self-Referrals - 10

Attorneys - 6

The first point of contact is the HPMP Intake Coordinator. The HPMP Intake Coordinator will discuss the general processes and then will schedule a more thorough interview. Through a telephone interview, the Intake Coordinator collects:

- Demographic information;
- Vocational information:
- Reason for referral;
- Current treatment providers and medications; and
- A brief history of treatment for physical, mental health, and/or substance use disorders.

An eligible practitioner will then be sent a participation contract to sign and return to HPMP, upon receipt an acknowledgement of program participation will be distributed and the practitioner will be assigned a dedicated case manager. The case manager will provide a recovering monitoring contract with compliance requirements tailored to the specific needs of the participant during their recovery and monitoring process.

While participation in the program is at no cost to the practitioner, treatment costs and toxicology costs are the responsibility of the participant. As some participants find themselves in financial distress early in the recovery process, HPMP refers individuals to work through their insurance plans, while vetting potential providers, and/or recommend participants to enroll in Medicaid. The Third-Party Administrator for toxicology screens can work with participants for payment plan options.

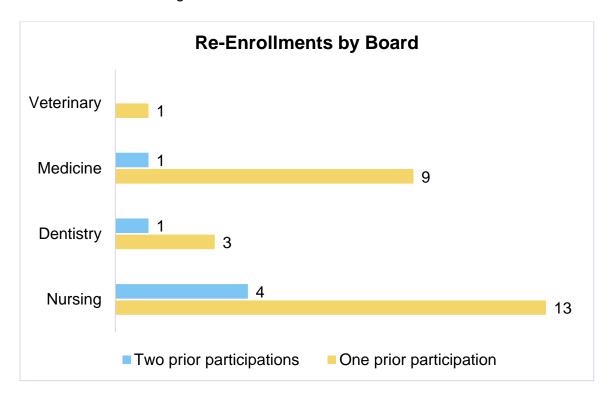
III. PROGRAM PARTICIPATION

During January 1, 2021 – December 31, 2021 the Health Practitioners' Monitoring Program received 231 program inquiries.

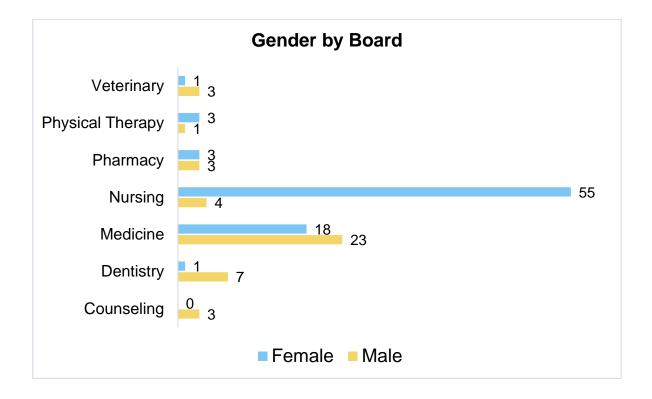
Intake interviews were completed for 164 individuals:

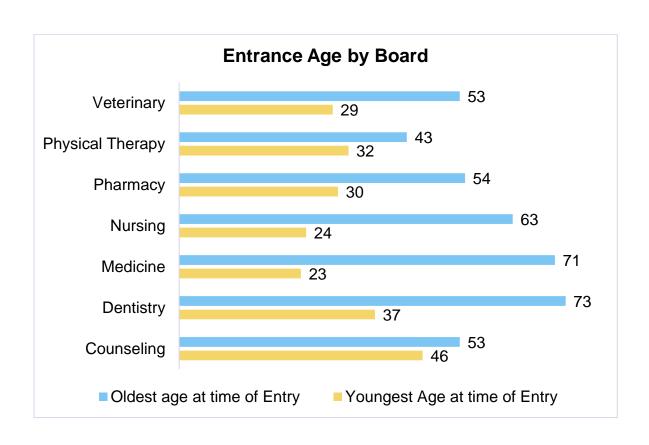
- 125 were enrolled into the program.
- 26 decided not to enroll.
- 4 did not complete the intake process.
- 9 were pending return of the enrollment packet on December 31, 2021.

Out of the 125 enrolled, 32 were previous participants. The majority of re-entries was from the Board of Nursing.



Demographics of 2021 Enrollees:

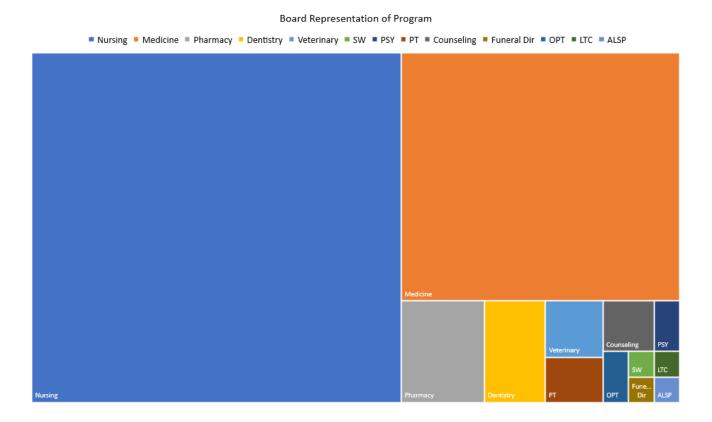




FOR THOSE THAT ENTERED IN 2021, 89 REMAINED ACTIVE AT THE END OF THE YEAR AND 35 WERE DISMISSED.

At the end of December 2021 there were 349 total active participants. There were 375 active participants at the end of December 2020, the number of total enrollees is decreasing yearly.

The Board of Nursing participants make up 57% of the program, Board of Medicine makes up 31%, with the other Boards with 4% or less.



A. **Enrollments**

The 125 individuals enrolled in 2021 were healthcare professionals from 7 of the 13 Regulatory Boards.

Boards with participants enrolled during 2021 are as shown below, with Board of Nursing having the highest percentage, followed by Board of Medicine.

Counseling = 2%

Dentistry = 7%

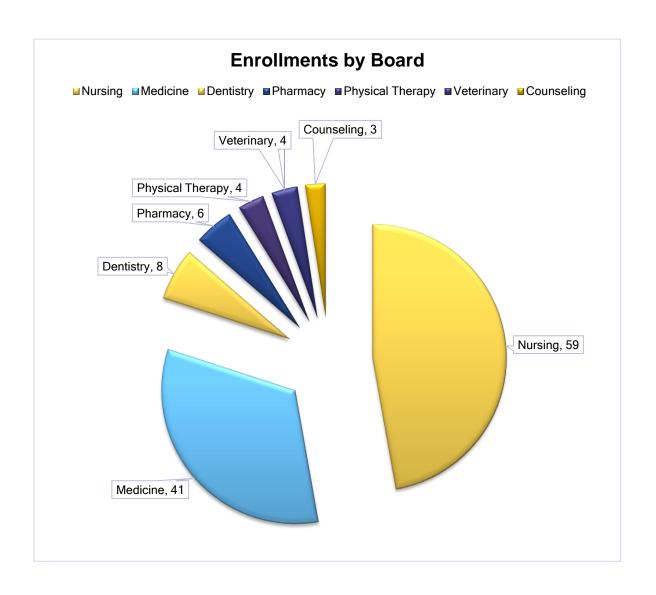
Medicine = 33%

Nursing = 47%

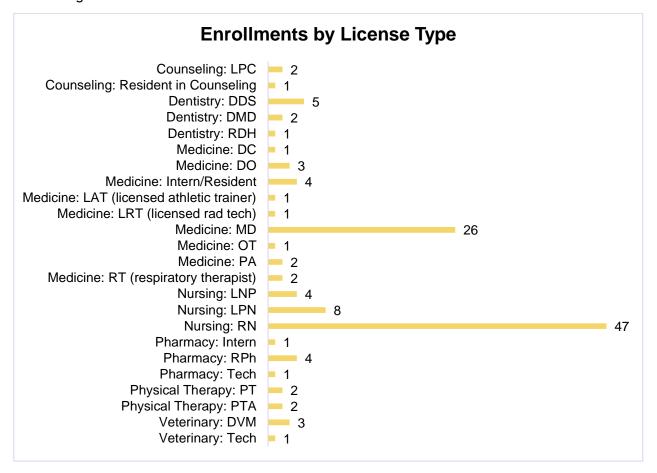
Pharmacy = 5%

Physical Therapy = 3%

Veterinary Medicine = 3%



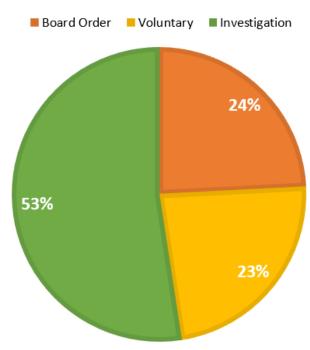
Program participants enrolled were from 24 out of the 129 licensee types DHP regulates.



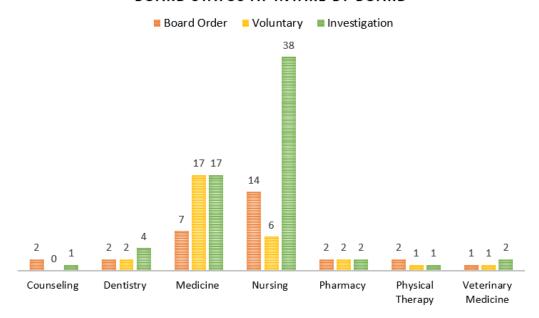
Participants can enter HPMP voluntary on their own at any time, be referred by DHP investigator during an investigation or by a Board Order.

During 2021, 53% of participants entered had an open investigation.





BOARD STATUS AT INTAKE BY BOARD



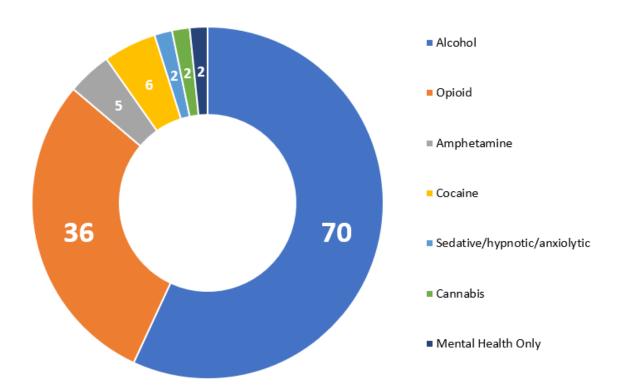
B. <u>Diagnoses/Drug of Choice</u>

The most frequent diagnoses from the 2021 enrollments were substance abuse and mental health disorders.

- 98% were monitored primarily for substance use disorders.
- 2% were monitored primarily for mental health disorders.
 - ❖ 59 participants had secondary substance diagnoses.
 - ❖ 28 cases had multiple (beyond 2) substances.

The most frequent drug of choice reported was alcohol at 56%, with opioids at 29%.

TOTAL NUMBER OF CASES BY CHOICE OF DRUG/DIAGNOSES



Cases by Primary Drug of Choice by Licensure

Board	Licensure	Alcohol	Opioid	Amphetamine	Cocaine	Sedative/	Cannabis	Mental
						hypnotic/		Health
						anxiolytic		Only
Nursing								
	LPN	3	2	0	1	0	0	1
	RN	23	22	2	1	2	2	0
	LNP	1	2	0	0	0	0	0
	Total	27	26	2	2	2	2	1
Medicine								
	Intern/	4	0	0	0	0	1	0
	Resident							
	MD	21	4	2	1	0	0	0
	DO	3	0	0	0	0	0	0
	Respiratory	2	0	0	0	0	0	0
	Tech							
	Occupational	1	0	0	0	0	0	0
	Therapist							
	LAT	1	0	0	0	0	0	0
	Rad Tech	0	1	0	0	0	0	0
	PA	1	1	0	0	0	0	0
	Total	33	6	2	1	0	1	0
Dentistry								
	RDH	1	0	0	0	0	0	0
	DDS	2	2	0	1	0	0	0
	DMD	0	0	2	0	0	0	0
	Total	3	2	2	1	0	0	0
Pharmacy								
	PharmTech	0	0	0	1	0	0	0
	RPh	1	1	1	1	0	0	1
	Intern	1	0	0	0	0	0	0
	Total	2	1	1	2	0	0	1

Veterinary								
	VetTech	1	0	0	0	0	0	0
	DVM	2	1	0	0	0	0	0
	Total	3	1	0	0	0	0	0
Counseling	Resident in	0	0	0	1	0	0	0
	Counseling							
	LPC	2	0	0	0	0	0	0
	Total	2	0	0	1	0	0	0
Physical	PT	2	0	0	0	0	0	0
Therapy	PTA	2	0	0	0	0	0	0
	Total	4	0	0	0	0	0	0

C. Stays Granted

In 2021, there were 11 Stay of Disciplinary Actions authorized by the licensing Boards.

○ Medicine Board: MD – 2

○ Nursing Board: RN - 8

○ Optometry Board: OD – 1

D. <u>Medication Assisted Treatment (MAT) for Health Practitioners</u>

HPMP allows participants to be on MAT medications during participation, whether they enter the program already on MAT medications or they start MAT medications after entry.

In 2021, 7 participants enrolled already on MAT medications:

Medicine Board: 1Nursing Board: 6

29 participants started on MAT medications after entry:

Medicine Board: 11
 Nursing Board: 15
 Pharmacy Board: 1
 Veterinary Board: 2

E. Return to Practice

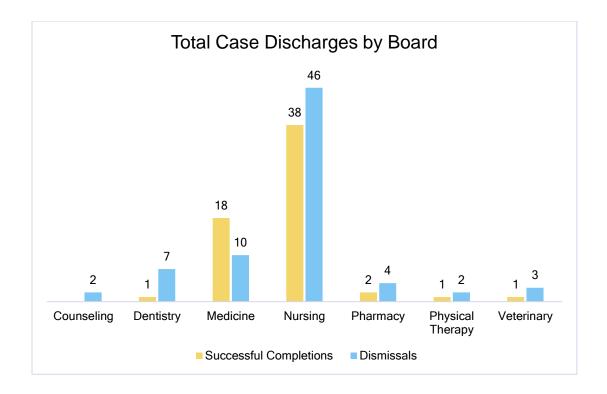
Practitioner and patience safety is our number one concern, in order to ensure practitioners are safe to return to practice several milestones in program participation must be reached. The timeframe for return to practice is different for each and every participant and is dependent an individual's participation.

For those allowed to return to practice in 2021:

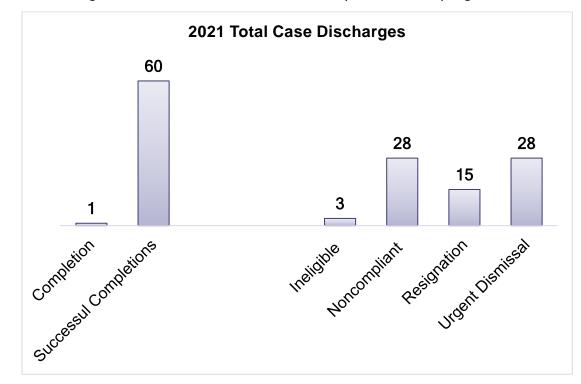
- o From time of entry to approval to look for practice: 31-154 days.
- o From time of entry to return to practice: 39-176 days.

F. <u>Discharges</u>

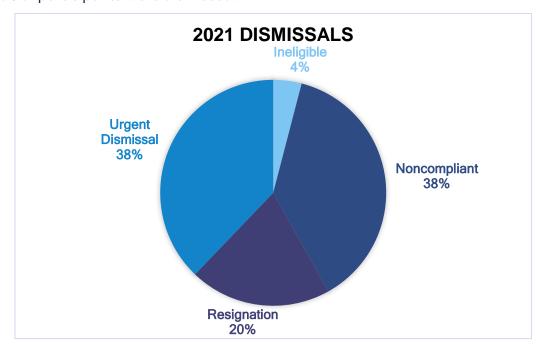
The HPMP discharged 135 participants during 2021.



45% of discharges were the result of successful completion of the program.

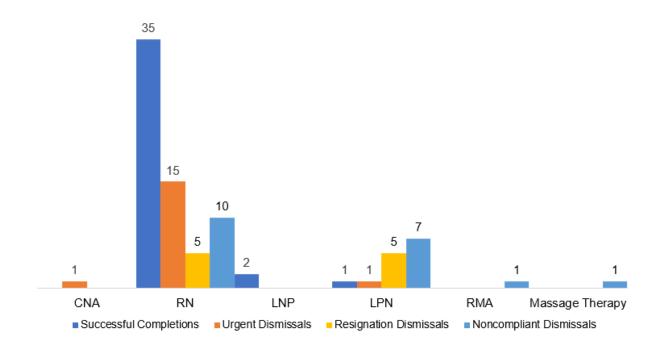


55% of participants were dismissed:

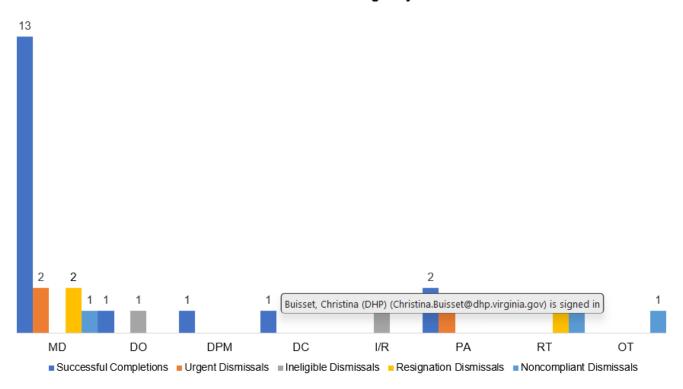


Board Discharges by Licensure:

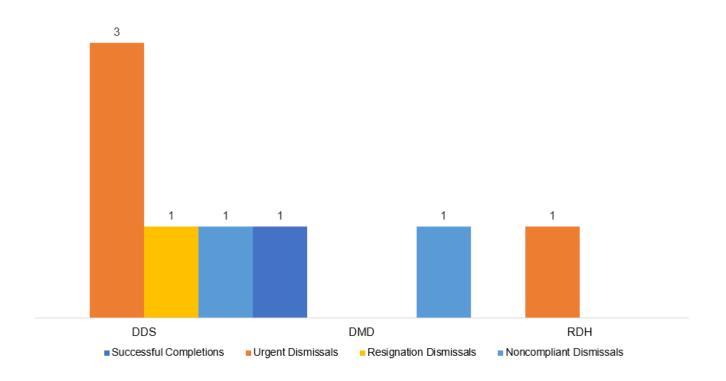
Board of Nursing Discharges by Licensure



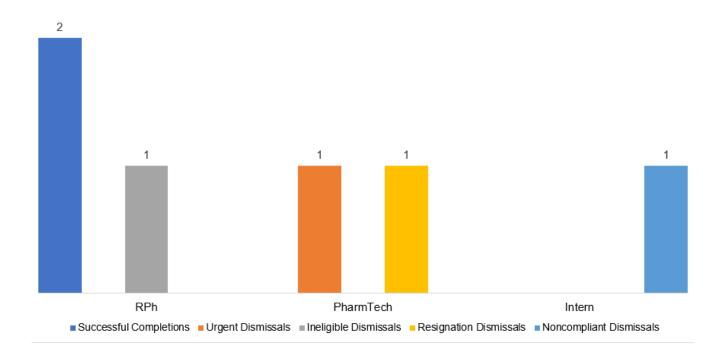
Board of Medicine Discharges by Licensure



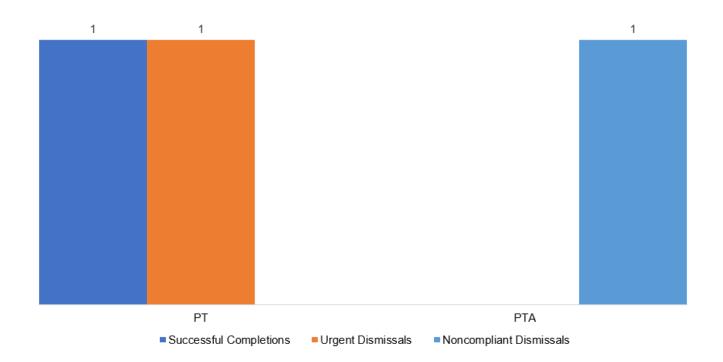
Board of Dentistry Discharges by Licensure



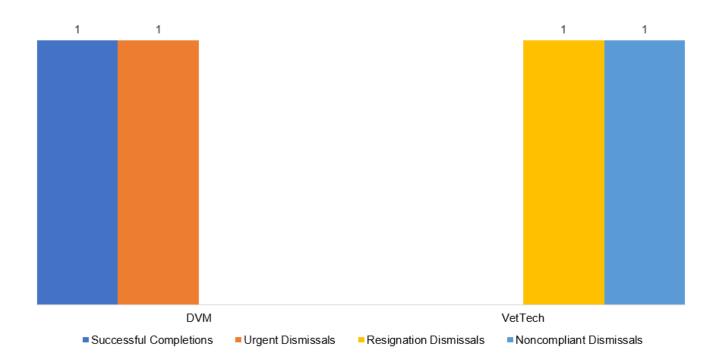
Board of Pharmacy Discharges by Licensure



Board of Physcial Therapy Discharges by Licensure



Board of Veterinary Medicine Discharges by Licensure



Board of Counseling Discharges by Licensure

