Abridged Substance Abuse Toolkit

Introduction

The College of Pharmacists of Manitoba’s (College) mission is to protect the health and well-being of the public. The College takes complaints seriously, especially when those complaints relate to substance abuse.

Traditional disciplinary action is appropriate in many cases. However, the complexity of complaints and discipline matters involving substance abuse typically require more than traditional sanctions. Pharmacists seeking to return to practice once a substance abuse concern has been identified, require a monitoring program that supports recovery to ensure patient safety.

The College developed a toolkit to assist the College’s Complaints Committee or Discipline Committee (committees) in considering addictions-related matters. This toolkit provides a thought wise framework to base decisions related to the conditions and obligations that form the monitoring program once it has been determined that the pharmacist is eligible to embark on a gradual return to work program.

This toolkit uses the term “monitors” to refer to the College’s Complaints Committee and College staff working under the direction of the Complaints Committee or a Discipline Committee Order.

What criteria must be met for a monitoring program?

A monitoring program is a support program which requires a set of routines and reporting designed to assist the pharmacist in achieving long-term remission from substance abuse. Cooperation in a monitoring program does not give a pharmacist immunity from investigation or the complaints and discipline processes. Furthermore, monitoring programs are not for everyone. The following may disqualify a pharmacist from a monitoring program:

- Previous removal from a monitoring program due to noncompliance
- Previous disciplinary action
- Diversion of controlled substances with the intent to distribute and NOT for his/her own use (this typically signifies that the pharmacist does not have a substance abuse disorder to recover from)
- Reckless patient harm

Participation in a monitoring program is a requirement of re-licensure. The pharmacist must sign an undertaking (agreement) with the College and agree that non-compliance with any condition or
agreement associated with the monitoring program, is professional misconduct. The pharmacist has the opportunity to access legal counsel prior to signing the undertaking. Pharmacists participating in a monitoring program, commit to abstain from alcohol and/or substance use (including cannabis), and are required to notify the monitors of medically required substances prohibited by the program. This may include the use of prescribed opioids for pain management after hospitalization or required surgical procedure.

What is in an undertaking between the pharmacist and the College?

The undertaking is the contract signed when the pharmacist enters a monitoring program. It typically includes the following:

- Duration of time the pharmacist must be monitored and how monitoring will be conducted
- Requirements for random drug and/or alcohol screening, support group participation, treatment evaluations, self-reflection, and reporting
- Gradual return-to-work plan, if one is appropriate to include at the time
- What will occur if the pharmacist relapses or does not comply with the contract
- Definitions of key words in the contract, including “relapse”

By signing the undertaking, the pharmacist agrees that any unauthorized missed, refused, positive, adulterated, or dilute drug and/or alcohol test is noncompliance. The undertaking does not prohibit the College from taking disciplinary action, if appropriate.

Violating a clause of the undertaking is professional misconduct. If this occurs, the pharmacist must surrender their practicing license until an evaluation is completed. Monitors assess the violation and decide whether the pharmacist can return to practice, under what conditions they may return to practice, or whether to pursue other disciplinary action.

What are the elements of a monitoring program?

Pharmacists entering a monitoring program are required to undergo addictions and psychiatric evaluations. They are required to report for random drug and/or alcohol screening, and must refrain from practicing pharmacy unless permitted by the College. If the pharmacist is permitted to resume practice, they are limited by conditions put in place by the monitors for at least five years. The pharmacist pays all costs associated with the monitoring program and may be subject to the costs related to the College resources necessary to monitor the conditions that the pharmacist is subject to.

If the pharmacist breaches any aspect of the undertaking, the other parts remain in effect. The length of a monitoring program will be extended every time a new undertaking is required due to non-compliance or relapse.

An undertaking may be customized for each situation and phase of recovery.
Example of Gradual Return-to-Work Plan

The following is an example of what a gradual return-to-work plan may be structured as.

<table>
<thead>
<tr>
<th>0-6 Months</th>
<th>6-12 Months</th>
<th>1-2 Years</th>
<th>3-5 Years</th>
<th>5+ Years</th>
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<tbody>
<tr>
<td>Refrain from practicing</td>
<td>Work no more than three days per week</td>
<td>Work no more than four days per week</td>
<td>May work full time (five days per week</td>
<td>Licence conditions may remain in</td>
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<td>(max. eight hrs./day) or 24 hours per</td>
<td>(max. eight hrs./day) or 32 hours per</td>
<td>but not overtime (max. eight hrs./day)</td>
<td>effect if a relapse occurred during</td>
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<td>week</td>
<td>week</td>
<td></td>
<td>the program</td>
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<td></td>
<td>Always work under supervision</td>
<td>Always work under supervision</td>
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<td>Maintenance phase of rehabilitation.</td>
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<td></td>
<td>Remain at the same position and/or</td>
<td>For up to half this period, remain at</td>
<td></td>
<td>Annual meeting with the College to</td>
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<td>pharmacy (or consent to an exit</td>
<td>the same position and/or pharmacy</td>
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<td>ensure adequate supports remain in</td>
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<td>interview between the College and</td>
<td>(or consent to an exit interview</td>
<td></td>
<td>place</td>
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<td></td>
<td>former manager)</td>
<td>between the College and former</td>
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<td></td>
<td>Submit to weekly drug testing</td>
<td>manager)</td>
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What is a relapse? How is it detected and managed?

A relapse is “a discreet event that occurs simultaneously to the resumption of drug and/or alcohol use or as a process that occurs over time in an individual who has previously achieved and maintained abstinence for a period of time beyond detoxification.”

Those who are monitored by recovery programs have a lower chance of relapsing. During the first year of treatment the risk of relapse remains high. Early recognition of relapse increases the possibility that the pharmacist will successfully re-enter the recovery process. Relapse can be prevented by consistent engagement with a support group and active monitoring. Unfortunately, extrinsic motivation, like that of the conditions of a monitoring program, does not secure successful rehabilitation. The pharmacist must attain and maintain a state of intrinsic motivation to progress through rehabilitation.
What criteria ensure a successful recovery from substance abuse?

To place a pharmacist on a course to recovery, the College requires that the pharmacist completes the following:

- Attend support group meetings each week
- Engage in frequent contact with a “sponsor” who acts as a mentor on their recovery journey
- Submit to random drug and/or alcohol screens according to established best practices for monitoring health professionals
- Participate in treatment sessions with an addictions specialist and/or psychiatrist, for dealing with emotional reactions and compulsive behaviours
- Follow all contracts, undertakings, and regular self-reflection

### Progression through a Recovery Program

**Precontemplation**
- Pharmacist admits a substance abuse disorder and understands the negative consequences of their behaviour
- Pharmacist begins to inquire about support meetings

**Contemplation**
- Pharmacist decisively pursues actions leading towards participation in support meetings

**Preparation**
- Pharmacist creates a plan to pursue change, which includes priorities, goals, and actions

**Action**
- Pharmacist successfully and effectively changes their behaviour for at least six months

**Maintenance (sustained action)**
- Addiction rehabilitation is a life-long commitment requiring adequate on-going support to maintain sobriety long-term
Successful Completion of the Monitoring Program

A pharmacist has successfully completed a monitoring program if:

- The pharmacist has been adhering to and participating in the monitoring program for the set amount of time
- Treatment or therapy is deemed completed in an expert’s opinion
- The pharmacist continues to maintain negative drug test results
- The pharmacist has practiced pharmacy safely for the minimum length of time established, abiding with any practice restrictions
- The pharmacist has attended regular support group meetings
- The pharmacist has completed self-reflection
- The required reports from the employer, supervisor, and/or designated employee have been received within the provided time frame
- Any other aspects stipulated in the undertaking have been fulfilled

What situations require a monitoring program to be terminated for a pharmacist?

There are circumstances that show a pharmacist is not ready to engage with a monitoring program and should not be permitted to practice:

- The pharmacist fails to provide monitoring documentation or notifications
- The pharmacist presents a danger to themselves and/or their patients
- The pharmacist refuses to stop practicing when required to
- The pharmacist fails to undergo drug and/or alcohol screening requirements
- The pharmacist does not follow treatment recommendations
- The monitors must take into account the extent to which the situation presents a threat to public safety, the seriousness of the violation, and any factors that aggravate or mitigate the situation.

References and Resources

- National Council of State Boards of Nursing