

THE IPRN NEWS

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A great big thank you to all for making our 25th Anniversary event a huge success!

A Great Big Thank You!

The Iowa Pharmacy Recovery Network 25th Anniversary Meeting & Dinner

IPRN wishes to send out a great big thank you to all who sent in congratulations or participated in and attended the Iowa Pharmacy Recovery Network's 25th Anniversary Meeting and Dinner in Des Moines on October 19th.

We had a wonderful meeting and banquet. The meeting was held at the Iowa Pharmacy Association headquarters in Des Moines. Emily Dykstra chaired the advocate training. Lucinda Harms and Jeff Reist from the University chaired an education section. They showed a film produced at the University of Iowa of a mock intervention of a impaired pharmacist and brought an article on Drug Dependence, A Chronic Medical Illness. Bruce Alexander chaired our committee meeting.

Our banquet followed at the Hilton Garden Inn in Urbandale. It was a beautiful setting and delicious food! Ed Sarrazin chaired the meeting and did an excellent job. We were excited to have Susan Lutz, a member from the 1980's who gave the history of PAPI (Pharmacists Aiding Pharmacists in Iowa). It was nice to see that we were right on track with what was originally envisioned.

Kayla Hatt spoke on the program at the University of Iowa and Bridget Jermeland spoke on Drake's PRN program. It is exciting to know that these programs are working at our college and to find out all that they do.

Lucinda Harms, advisor at the U of I presented a certificate of appreciation to Dick Schmidt, technician and member of IPRN since the mid-1990's. Renae Chestnut, Associate Dean at Drake, surprised Jennifer Moulton, our staff member at the Iowa Pharmacy Association with a certificate of appreciation. It was truly a fantastic event!

We are committed to excellence!

IPRN Fall Meeting Agenda

1:00 p.m. – 1:45 p.m. Advocate Training - Emily Dykstra

**2:00 p.m. – 2:45 p.m. Intervention/Education
Jeff Reist and Lucinda Harms**

**3:00 p.m. – 3:45 p.m. Open Committee Meeting
Bruce Alexander**

Agenda Items

1. Regional coordinator.

Background information: We have had the position of regional coordinator included in our manual (see below) but have not utilized this position. We will discuss and vote on whether to continue to aspire to have these positions in the future.

Manual: A regional coordinator is a pharmacy professional located in one of Iowa's five geographic regions. The regional coordinator is appointed by the chair of the IPRN committee and has expertise in substance abuse and addiction treatment programs.

Responsibilities may include:

- ✓ **Serve to receive notice regarding an impaired professional and carry through with the stated procedure for IPRN**
- ✓ **May serve the impaired professional's advocate, or delegate that responsibility to another advocate in their region**
- ✓ **Chair regional meetings**

It was the decision of the committee to leave this position as is.

2. Meeting frequency and rule change.

Background Information: In a past meeting we voted to have IPRN meetings annually instead of twice a year. In the board rules it states that we will have meetings twice a year. We will discuss and vote on whether to continue meetings annually and ask the board for a rule change or whether we will go back to meetings twice a year. We will ask for board input.

Input: Yes, to change the frequency of IPRN meetings from semi-annually to annually would require the Board to make a change to subrule 30.3(1). Please let me know if the IPRN committee wants the Board to make that change. Perhaps we should change it to "not less than annually" which would give you some flexibility.

It was the decision of the committee to resume twice a year.

Iowa's program has been and continues to be a model for other states and other professions.

IPRN has maintained a 24-hour, toll-free hotline. Calls made to the hotline included individuals needing help and concerned others.

***The toll free number is:
(877) 890-IPRN***

The Iowa Pharmacy Recovery Network is always in need of caring volunteers throughout the State of Iowa. The profession needs you to make a difference!

IPRN

Providing direction as a confidential resource

Providing support through caring volunteers

Providing education about impairment

Members of IPRN are volunteers who wish to help others through their entire recovery process.

Please feel free to call IPRN if you need assistance, need information or need help with an intervention.

We can help!

3. Early release.

Background information: We have been asked whether we can grant an early release from a contract. All of our contracts have been 5 year contracts. We will discuss and vote on whether we should be able to grant these requests. We will ask for board input.

Input: I don't think a rule change is necessary regarding your proposal on early release.

It was the decision of the committee to review cases as requested at our bi-annual meetings.

4. Manual revisions.

Background information: The manual has been updated to include changes up to this meeting. It will be updated again to include the decisions on the above issues and any other changes that are discussed at this meeting. We will discuss the manual and vote on the changes.

Manual changes were approved.

5. Corporate policy for impaired professionals.

Background information: We have planned to work with corporations that are operating in Iowa including chain pharmacies to develop a standard policy to deal with impaired pharmacy professionals. We will discuss what we can do to incorporate these policies. We may want to poll the corporations to find out what their policies are. One of the tools may be a contract with corporations to involve IPRN when they discover impairment. Another tool may be to ask to be included in the interventions. We will ask for board input.

We have decided to form a committee to look at corporate policy in Iowa. We will research what policies are in effect and hopefully develop a standard policy for corporations working in Iowa. Anyone interested in participating on this committee or submitting information on what is available please contact Bruce Alexander or Emily Dykstra.

4:00 p.m. – 4:30 p.m. Closed Committee Meeting

We reviewed the active participants. There are 16 participants currently working with advocates.

Current advocates are Bruce Alexander, Ed Sarrazin, Richard Schmidt, Verle Johnson, Emily Dykstra, Vicki Ellingrod, Sandra Dirks, Tracy Petersen, Dale Behnke, Jeff Reist and Lucinda Harms.

Thank you for all you do for IPRN!

PAP'I

Pharmacists Aiding Pharmacists in Iowa

Presented to IPRN 25th Anniversary meeting and dinner
October 19, 2006 by Susan Lutz

PAP'I—“In the beginning.....”

PAP'I initially was organized in 1981, based on the realization that a number of our peers needed a program that could offer them some assistance in dealing with alcoholism and other drug dependencies.

Emily Dykstra was kind enough to invite me to share some thoughts with you about the early days of IPRN's predecessor organization, PAP'I—Pharmacists Aiding Pharmacists in Iowa.

Well, I thought, no problem, because I am a “keeper,” seldom if ever throwing anything away that might have “historic” value. Oops—I really messed up this time, as apparently in some fit of cleaning house/ office, which rarely occurs, I must have discarded nearly every shred of PAP'I history. In fact, I recall my husband saying on more than one occasion, “Don't worry, if you need those old files, you can always call IPA”! Well, this time, he WAS right (please don't tell him!) for IPA came through.

I know we existed! The one remnant I was able to locate was a certificate from both years of my attendance at the Utah School (The University of Utah School on Alcoholism and Other Drug Dependencies) 1983 and 1984. I found these in a totally illogical corner of a drawer at home. While I don't have specific recollections of all that occurred at that week long school, I vividly remember how impressive it was and how much meaningful material we obtained. Much of the credit for the success of the pharmacy portion of that program went to APhA staffer at that time, Ronald Williams. Ron was instrumental in organizing a pharmacists' section and encouraged the states to send representatives to it. It was a tremendous experience because of the opportunities for interaction with recovering individuals in all walks of life. We attended an AA meeting, witnessed an intervention and received a wide variety of training and materials designed to be more effective in helping our peers through the difficulties created by drug dependencies. The program was well-rounded, as our daily schedule also included exercise programs and healthy meals. (Not to mention the awesome beauty of the Wasatch Mountains as a backdrop to the campus, visible each day on our walk from the dormitories to the meeting rooms.)

Much of the credit for the success of the pharmacy portion of the Utah School on Alcoholism and Other Drug Dependencies went to APhA staffer at that time, Ronald Williams.

PAP'I initially was organized in 1981, based on the realization that a number of our peers needed a program that could offer them some assistance in dealing with alcoholism and other drug dependencies. As a 6-year member of the Iowa Board of Pharmacy Examiners, I had witnessed cases in which a pharmacist was brought before the board for disciplinary action due to chemical abuse problems which had finally led to legal issues affecting his or her work and patients. I was

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The Board of Pharmacy early on saw a big demand for the program and referred a number of cases to it.

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privileged to serve as the initial PAP'I chairperson, first for the IPA Task Force, then for the committee itself, from 1981 to 1988.

The purpose of PAP'I, as noted in an early advocate reference guide, was to serve as “a voluntary non-coercive program established by the IPA for the purpose of evaluating and assisting any pharmacist with a condition or a problem which is potentially threatening to professional performance.” Services were intended to be in the best interests of both the pharmacist and the public and all IPA activities were non-punitive. It was recognized from the beginning that the best successes could occur if early recognition and treatment were possible, helping to assure that pharmacists could receive the needed support and help while personal, financial, mental and physical resources were intact.

The committee initially included five pharmacists and two lay members and was coordinated by IPA. For you historians, the early pharmacist committee members included Dean Olson of Webster City, Del Kramersmeier from Eagle Grove and Kathy Russi from Des Moines. Public members were Janet McDonough, a Des Moines psychologist and Zolida Henderson (occupation?) Committee meetings were held twice yearly. In addition, advocates throughout the state helped to perform the interventions for the committee. Thus the work of PAP'I was accomplished. Each advocate was required to attend at least one training session yearly. These sessions involved reviews of chemical dependency, updates on performing or being involved in interventions, and also highlighted area physicians and other professionals skilled in drug dependence and recovery issues.

In the early years, finding committed advocates was difficult. The goal was at least one advocate per IPA district, which was not always met. The Board of Pharmacy early on saw a big demand for the program and referred a number of cases to it. However, on at least one occasion, a case had to be returned to the Board of Pharmacy because no advocate was available. Pleas were sent out to the “district presidents” of the IPA structure at that time, to encourage more pharmacists to step forward to help their peers. “There but for the grace of God go I” is a term I found myself using on more than one occasion as we searched for new advocates.

Regular efforts were made through IPA, the Iowa Pharmacy Journal and various association meetings and gatherings to acquaint all pharmacists with PAP'I, with the goal of broadening the base of support for the program and attracting new advocates.

By the mid-1980s, most states had similar functioning programs or were in the process of developing such programs. The National Association of Boards of Pharmacy developed model rules to address such programs and encourage a degree

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of continuity among the states. Our goal was to see that Iowa, a leader in national pharmacy, was also a leader in addressing the impairment issue.

PAP'I also functioned as a peer review committee of the Iowa Board of Pharmacy Examiners. By this arrangement no civil liability could result from the activities performed by pharmacists for PAP'I. This was, and continues to be, highly critical to the success of the organization! From the onset of PAP'I, the Iowa Board of Pharmacy Examiners has been supportive of our efforts and has utilized the program whenever practical.

In the early years, responsibilities of PAP'I for reporting to the board included regular reports, as well as meeting minutes. All cases were reported by case number only, to maintain as much confidentiality as possible, except as was necessary to maintain an effective program. As I recall, this was a huge issue in the early days- that of trying to create a delicate balance between the need for intervention and maintaining public safety while at the same time trying to offer support and help to pharmacists truly in need of such assistance.

A detailed list of procedures was spelled out, to assure appropriate step by step action in each case. Every effort was made to assign advocates in a manner that allowed for easy accessibility and geographical convenience for timely contacts. Assistance for the advocates was provided through Powell III Chemical Dependency Center in Des Moines. When adequate and multiple efforts at intervention failed, and resistance to treatment or evaluation was apparent, the file was closed and the pharmacist in question was advised of the consequences of further impairment evidence, that is, referral to the Board of Pharmacy.

When pharmacists recognized the need for interventions and treatment and pursued such avenues, the advocates continued to monitor and encourage throughout the process, and reported at regular intervals to the Board of Pharmacy. Recovering pharmacists were provided with options for non-dispensing pharmacy positions, which were often good choices for continued professional employment and actually were believed to reduce recidivism.

So---this is where we started! In reading through some of the materials IPA graciously loaned me, it seems that many things PAP'I started have remained the same, especially the commitment of individual pharmacists to make a difference in the lives of troubled peers. In addition, the positive relationship with the Board of Pharmacy and the support both financially and programmatically of IPA continue to play key roles in the success of the program. But you have made tremendous strides in creating more awareness of IPRN, not only for pharmacists but for students as well. Your program is

Since November 2005, IPRN has distributed, through email, a monthly newsletter. The newsletter has had a positive effect on client participation and on making information available.

If you know anyone who would like to receive this newsletter just email and we will add them to the mailing list. Otherwise, feel free to pass the news along.

Also, if you wish to be removed from the email list, please let me know. Thanks!

dynamic and is offering the needed support to those it serves.

I appreciate the opportunity to share with you tonight. It's been enjoyable reviewing and recalling the early days. And I thank you and salute you for building on the foundations of PAP'I to make today's IPRN the useful and respected tool it now is. May each of you continue to be committed to IPRN's purposes by your hard work and sincere efforts. By doing so, all Iowa pharmacists and students will benefit and once again demonstrate that our state and our pharmacists are tops!

15th Annual Heartland PRN Conference

The 15th Annual Heartland PRN Conference was held October 6-8 at the Doubletree Guest Suites Hotel in Downers Grove, Ill. It was sponsored by the Illinois Pharmacy Foundation and Rush Behavioral Health Center. Wally Cross from the Rush Behavioral Center did a wonderful job of organizing and planning the event. The conference is intended to provide information, motivation, guidance and networking opportunities for those involved in the planning or strengthening of programs that help pharmacists or pharmacy students whose competence to perform their responsibilities has become compromised due to chemical dependency. The conference gave those attending tools and techniques to aid the recovering professional to maintain and grow in competence as recovery progresses. The conference was open to all pharmacists, technicians, students and interested others from all states, but specifically from Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota and Wisconsin.

Each night we had an International Pharmacists Anonymous Meeting (IPA). These were active meetings that confirmed that IPA is alive and well!

Presentations at the conference included The Addicted Pharmacist, The Mindful Personality, The Addicted Brain,, Addictive Interactive Disorders, a personal recovery story, Spirituality in Recovery and Everyday Life, Professional Advocacy and Assessing PRN Programs. It was an excellent program! Thanks to all who made it possible for me to attend.

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