Professional Assistance Program of New Jersey

The prevalence of healthcare professional impairment is largely unknown among other groups than physicians. The prevalence has been estimated conservatively to be between 10—15% of the population *(American Society of Addiction Medicine (ASAM) – Principles of Addiction Medicine, 6th ed., 2019).* There are approximately 648,400 licensed physicians in the nation. Accordingly, there are probably 64,000 physicians who are suffering from impairment conditions. In **New Jersey** there are more than **207,000 licensed healthcare professionals** including nurses, pharmacists, dentists, and other allied health professionals, as well as doctors. Accordingly, there maybe more than **20,000 impaired healthcare professionals** in the state.

PAPNJ Staff

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Our Mission

The mission of the **Professional Assistance Program of New Jersey** (PAPNJ) is to provide services to protect the public safety and welfare of the citizens of New Jersey through education, identification, evaluation, treatment planning, and advocacy for licensed healthcare and other professionals in recovery from impairing medical conditions and illnesses.

Professional Assistance Program of New Jersey

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Princeton, NJ 08540
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782 Alexander Road
Princeton, NJ 08540
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Education & Identification

The PAP will educate the stakeholders, healthcare and other professionals, the teaching institutions, hospital staffs, and the regulatory agencies about healthcare and other professional impairment. These stakeholders will learn about the phenomenon, how to recognize it, and how to make an appropriate referral. This education will occur through lectures and continuing medical education presentations to allied health and other training institutions and practicing medical and other professionals in their various venues.

Evaluation

Each healthcare and other professional referred for an evaluation of an impairing condition will undergo a thorough and comprehensive interviewing process designed to elucidate the common impairing conditions that are causative. In each case a complete drug, alcohol, prior treatment, legal, psychiatric medical, surgical, family, and psychosocial history will be obtained. Diagnoses will be made according to defined diagnostic evidence—based criteria. Treatment plans will be developed in accordance to evidenced—based protocols and procedures individualized according to each person's need and severity of illness. Once that the treatment plan is developed, it is shared with the program participant and the referral source before implementation.



Treatment & Monitoring

The PAP, after developing the treatment plan, will refer the program participant to the appropriate level of care and skilled therapist to begin the execution of the treatment plan. Upon completion of the initial (primary) treatment, the PAP will follow the participant and keep in close contact with selected consultants that are involved in the subsequent phases of the participants care. The PAP "monitors" the participant's recovery by reviewing regularly at face-to-face monthly visits, each element of the treatment plan to assist the recovery process. Whenever indicated, the PAP will make adjustments in the treatment plan when necessitated by new developments or a relapse in the progression of recovery. In some cases the treatment plan will include random testing to verify recovery and the effectiveness of the prescribed treatment plan. Enrollment into the treatment program is usually for a minimum of five years. The frequency of the follow up visits and the random monitoring become less and less as the program participant progresses in his or her recovery.

PAP Counseling Services

The PAP has available counseling services for participants, family members and non program persons seeking counseling. The counseling director is certified nationally & by the state and is a master's level LPC.

The PAP Counseling services are appropriate for substance use disorders, co-dependency, depression & anxiety, litigation stress and grief.

Hospital Contracts & Private Monitoring Contracts

The PAP will engage in contracts with hospitals to provide services mandated by the Joint Commission **(JC)** to have impairment committees to address the issues of physicians and other **licensed independent practitioners (LIPs).** Many hospitals do not wish to engage in the necessary burden of creating these mandated committees and they are permitted to use outside agencies to act as **"hospital authorized parties"**, as per the **(JC)** mandates. These hospitals are charged an annual fee, based upon number of persons per hospital.

Advocacy & Participant Benefits

The PAP will provide advocacy for its participants from the initial referral throughout and beyond the completion of enrollment and treatment. Some licensing boards allow for those participants enrolled in a professional assistance program to receive the help that they need anonymously. In many cases, there is a regular anonymous reporting that occurs through the use of a coded case number. The licensing board is comfortable with the monitoring and the reporting that the PAP provides to adequately protect the public safety and welfare. In other situations, the boards, once they become aware of its licensee's impairment is more willing to consider alternatives to license revocations and suspensions if the PAP can provide evidence of successful participation compliance with the PAP treatment plan. Continued successful participation in the program is usually a prerequisite for continued licensure and for reinstatement of suspended and revoked licenses. The PAP also provides advocacy for reinsurance needs, staff appointments, and new employment opportunities. The program participants benefit in many cases by avoiding the loss of their licenses and thus avoid being reported to national data banks. The program participants also enjoy the benefit of expert treatment planning and advocacy to assist their return to practice in an expeditious manner. Clients enrolled in the ARP are permitted to answer "No" on license renewal applications to questions regarding impairment.

Expert Consulting Agreements

The State Board of Medical Examiners entered into an agreement with the PAP to administer their anonymous program, **the Alternative Resolution Program (ARP)** which is a special committee of the Board known as the **Impairment Review Committee (IRC).** It is anticipated that other expert consulting agreements will be reached with the other licensing boards that regulate other practitioners in the state.