

# PHP

Where We've Been,  
Where We Are,  
Where We Are Going

# PHP History

- Ontario Medical Association member service
- Providing services to physicians since 1995
- Veterinarians since 2002
- Pharmacists since 2004

If you build it they will come.....



Now.....

Over 4,000 new callers served

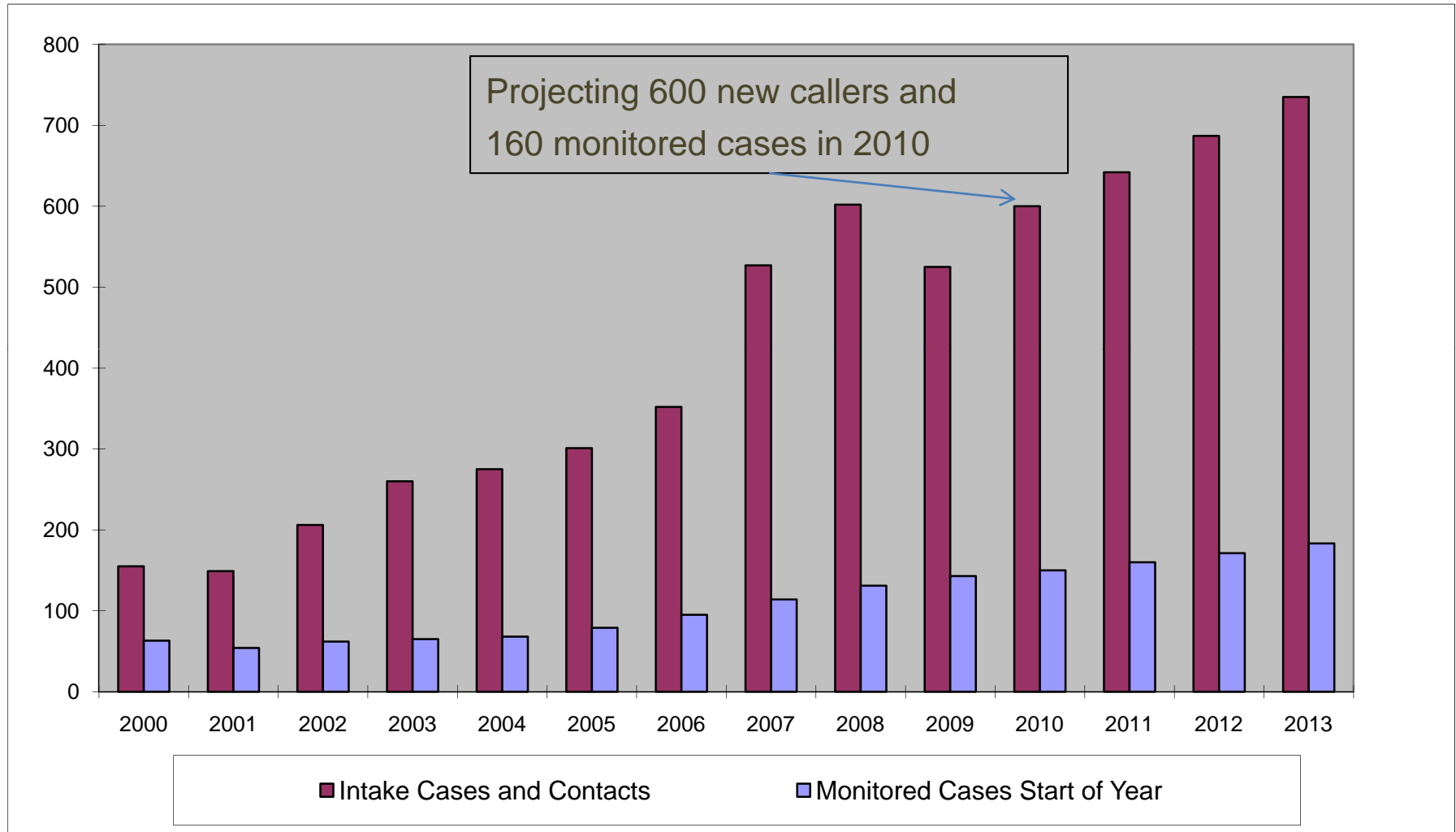


Now.....

Over 300 monitoring contracts



# Actual and Projected Program Growth



# Every day our new callers are ...

angry **ANXIOUS**

violating boundaries

depressed

disillusioned

discouraged

exhausted and burned out

financially stressed

Isolated

stressed by marital  
and family problems

stressed at work

Victims of harassment and violence

considering suicide

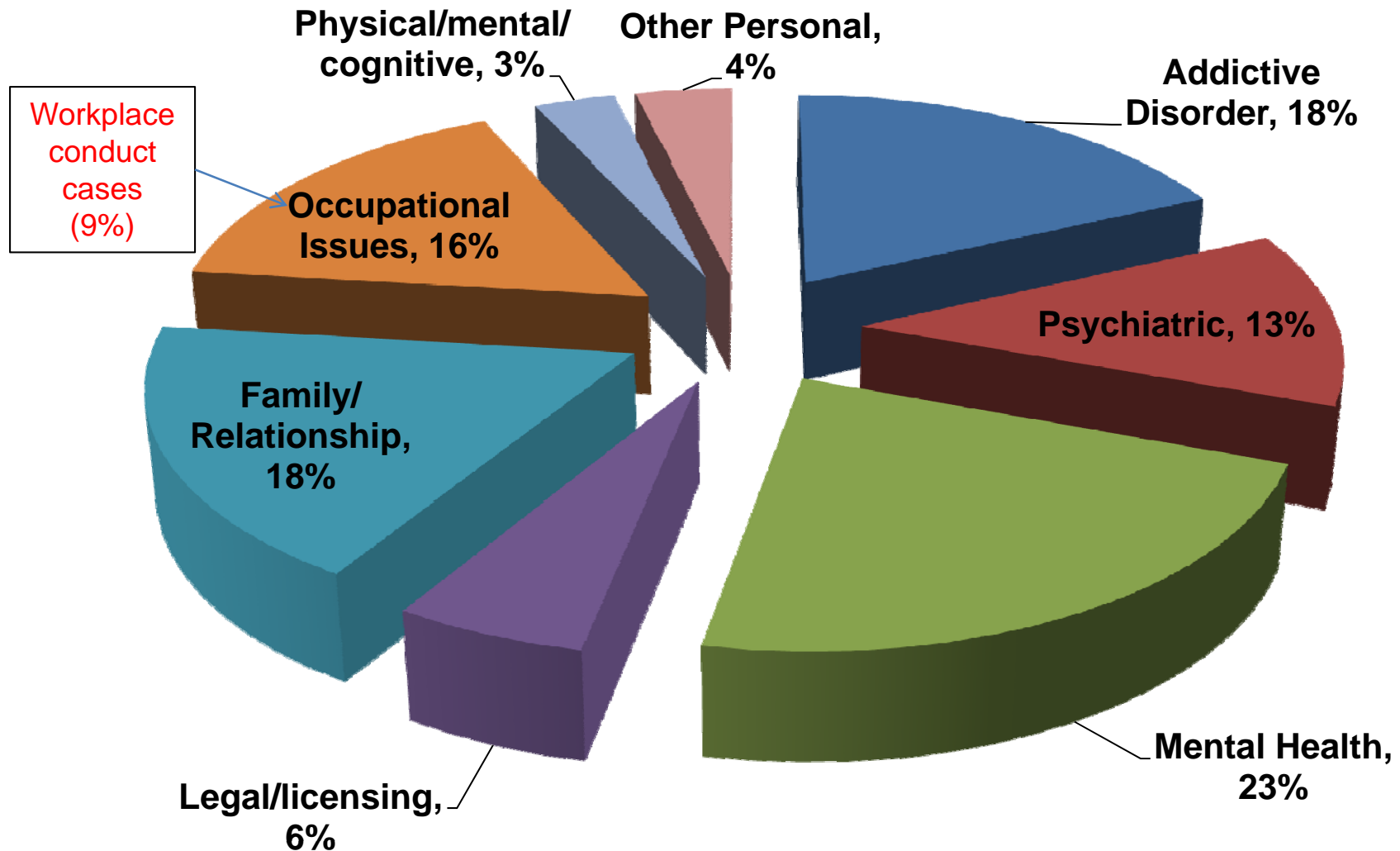
distressed by serious mental illness

*abusing or dependent on alcohol or drugs*

resentful

disrupting their workplace

# All Problem Types – 2009



# We receive calls from:

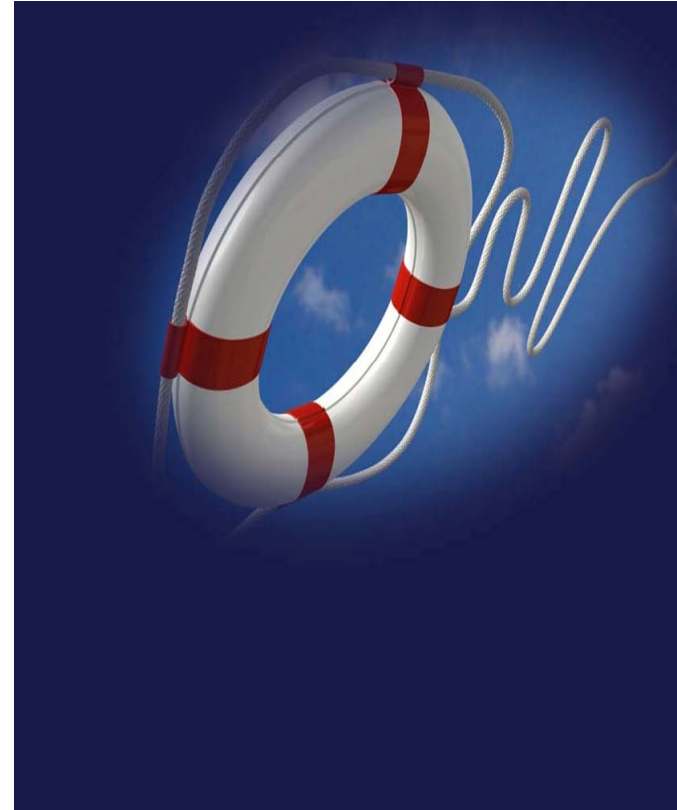
- The professional themselves
- And often
  - Concerned family member, loved one
  - Colleague or friend
  - Department chief, Employer
  - Regulatory body

# PHP Staff

- Medical Director (family physician, addiction medicine)
- Associate Medical Director (psychiatrist)
- Case Managers
  - (RN, MSWs, MEd. Counseling Psychology)
- Director, Administration (MBA)
- Admin support staff

# PHP Services

Information and Advice  
Intervention Services  
Assessment and Referral  
Monitoring & Case  
Management  
Advocacy  
Family Support  
Education and Prevention



**The PHP is a *CONFIDENTIAL* service**

**The PHP is NOT a  
*treatment program***

# PHP Intake Service

- Confidential service
- Case managers
- Director or Associate Medical Director
- Telephone or personal interview
- Preliminary assessment and problem definition
- Advice
- Referral if indicated
- Business hours

# Long-Term Case Management and Monitoring

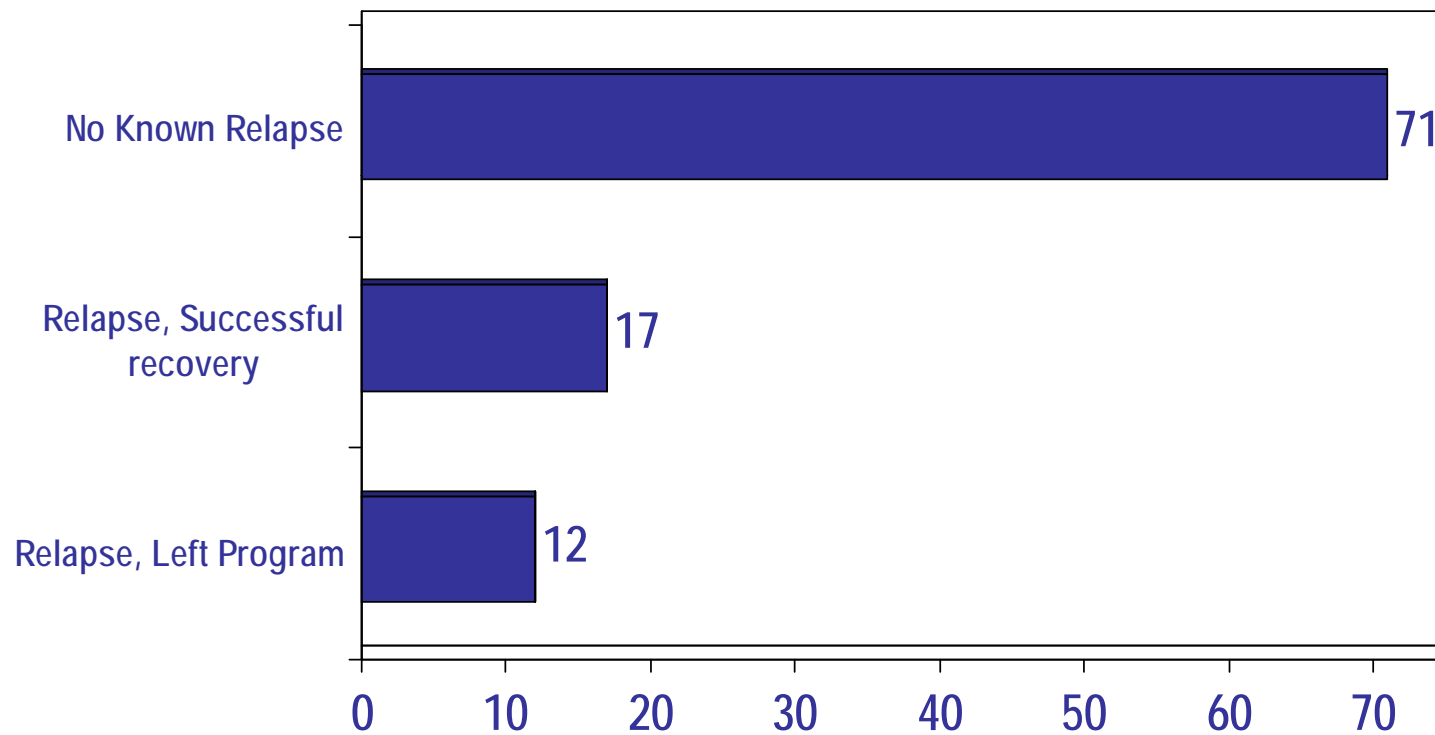
- Substance Dependence
- Substance Abuse
- Psychiatric Monitoring
- Behavioural Monitoring
- Combinations

# Long-Term Case Management and Monitoring

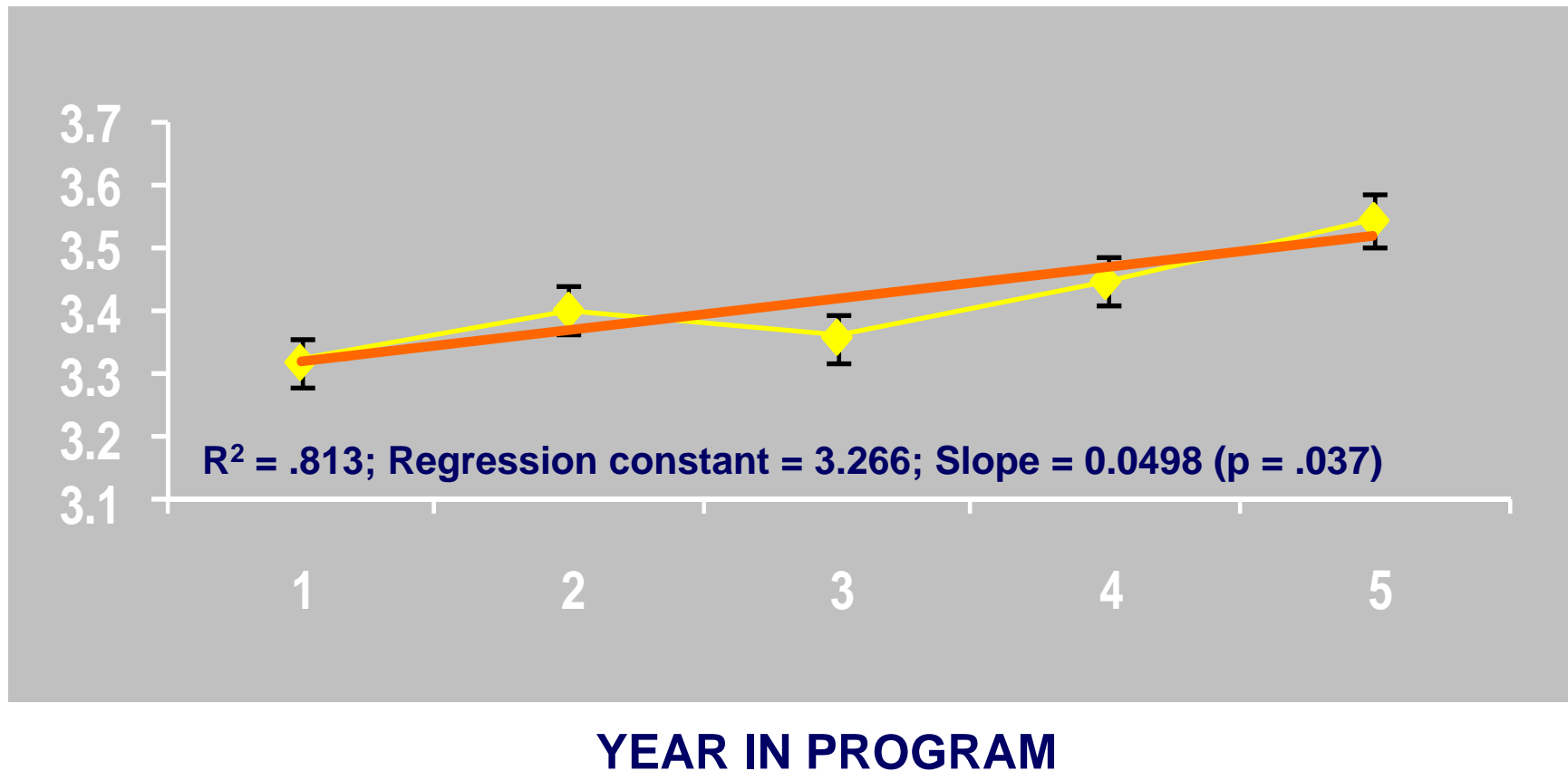
- Rigorous, clinically focused
- Biological (substance use disorders)
  - Random urine testing
  - Hair analysis
- Behavioural / treatment compliance reports
- Face to face with PHP monitor
- Return to work considerations
- Workplace monitors
- Contingencies for non-compliance

# PHP First 100 Relapse Data

(Brewster, Kaufmann et. al. BMJ, Nov 2008)



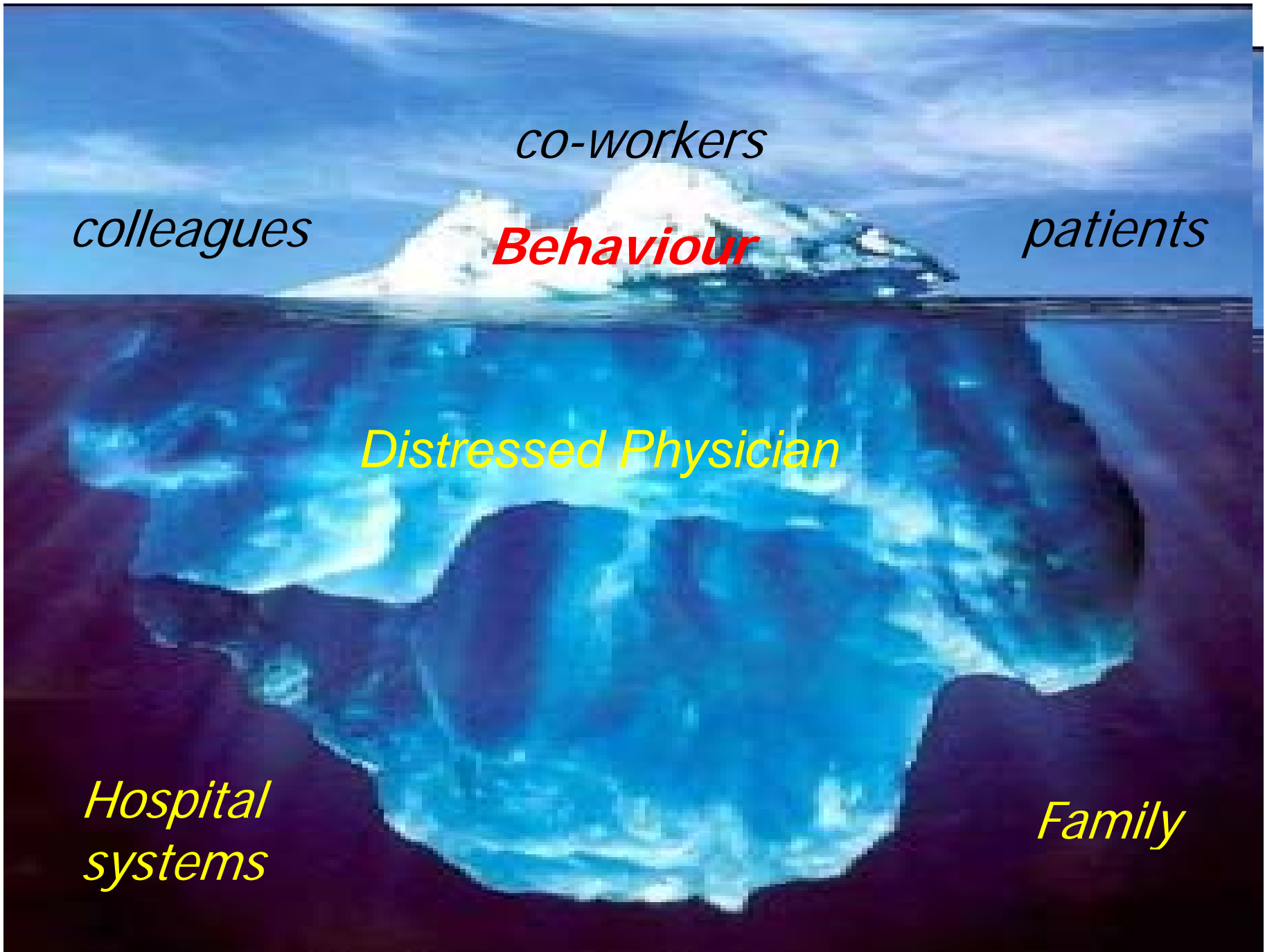
# LIFE SATISFACTION\* BY PROGRAM YEAR



\* Mean of 14-items: 4-Very satisfied; 3-Satisfied; 2-Dissatisfied; 1-Very dissatisfied



*“The Doctor isn’t available right now. Would you like to speak to Mr. Hyde?”*



*co-workers*

*colleagues*

***Behaviour***

*patients*

***Distressed Physician***

***Hospital systems***

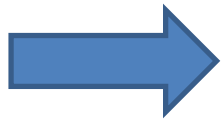
***Family***

# PHP Experience:

- Approx. 9% of physician referrals due to conduct problems specifically (about 30 per year)
- Many referred with other problem types display disruptive behaviour
- 88% male
- One third surgeons***
- Ob-gyn, anesthesiologists approx. 10% each.
- Generally expert and valued clinicians

# Physician Workplace Support Program

- 2008 OMA Board approved the PHP developing a new program



Physician Workplace Support Program

# Physician Workplace Support Program

- The purpose of the Physician Workplace Support Program is to **support** physicians who find themselves in stressful situations, usually in institutional settings
- The program will not serve to stifle or suppress good faith, respectful advocacy for patient care.

# Physician Workplace Support Program

- December 2009 hired Mary Yates
- Year 1 implementation has begun
- We are very interested in your thoughts and comments
- Enjoy the day!