



Physician Health News

The Official Newsletter of the Federation of State Physician Health Programs



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Welcome to the 32nd edition, Volume 1 of *Physician Health News*. We hope you will find this an informative forum for all aspects of physician health and well-being. *Physician Health News* is the official newsletter of the Federation of State Physician Health Programs (FSPHP) and is published by the FSPHP.

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The FSPHP is a national organization providing an exchange of information among state physician health programs (PHPs) to develop common objectives, goals, and standards. If you're not a member yet, please consider joining. State, Associate, International, Individual, Industry Partner Individual, and Organizational membership categories are available. Please visit fsphp.org/membership to learn more.

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PHYSICIAN HEALTH NEWS MARKETPLACE

President's Message

Michael Baron, MD, MPH, DFASAM, FAPA



Stigma is Lethal

Stigma is lethal. Stigma significantly prevents physicians and other licensed healthcare workers from seeking help for mental illness. Stigma leads to exclusion, prejudice, and discrimination, and it can even lead to death. The Triad of Confidentiality, championed by Drs. Hengerer and Gundersen, cochairs of the FSPHP Task Force to Support Safe Haven, is one of FSPHP's initiatives to reduce stigma. The Triad of Confidentiality includes:

1. **Regulatory Protection:** PHP is approved to accept confidential referrals without the involvement of the state medical board.
2. **Record Protection:** PHP records are protected from discovery in legal proceedings.
3. **Application Protection:** PHP compliance permits non-disclosure of protected health information on licensure/credentialing/insurance and certification applications.

Stigma is a major reason that physicians don't get help for mental illness. Stigma can also lead to suicide. The following is a case that ended tragically for one of two residents. The facts are real but are changed to protect identities.

Stigma is triggered through many different processes, especially these leading ones:

- Medical licensing and credentialing applications often require the disclosure of mental health history.
- Seeking help for a mental health condition might lead to breaches in confidentiality, potentially impacting one's standing among colleagues or superiors.
- Demanding workloads make it challenging for physicians, especially trainees, to prioritize their own mental health care.
- Many physicians internalize negative attitudes about mental illness, viewing the need for help as a sign of weakness or personal failure, causing self-stigma.

At the Tennessee Medical Foundation (TMF), we received a referral for a Post Graduate Year (PGY) 5 resident with only four months remaining in their five-year training program. He was referred to the TMF the day after his arrest for diversion of opioids for his own use. He was in treatment for opioid use disorder (OUD) the day after he was referred. In

his eighth week of treatment, and despite heavy lobbying by the PHP, he was terminated from residency with only four months remaining.

So far, his story has a happy conclusion. About eight months after successfully completing treatment, he entered and completed another PGY5 year at a different residency program. His criminal charge was adjudicated with a deferred entry of judgment to avoid criminal conviction. He had State Medical Board actions, including probation. He loves recovery and is very involved in 12-step work. He is now in a successful private practice. The ninth step promises of recovery have come true in his life.

A few months after his termination, a friend of his—a PGY4 resident from a different program but at the same institution—was sent home on a Friday for alcohol issues. Over the weekend, he ended his own life.

When I told this story at the AMA State Advocacy Summit meeting in January 2025, I heard a collective gasp from the audience. Stigma is lethal.

We will never know the extent of stigma this resident had. We won't know his degree of negative self-talk. We don't know what factor the first resident's termination had on the second resident's suicide. What we do know is that months prior to the PGY4 resident being sent home and ending his own life, the PGY5 resident who was sent home was terminated. The PGY5 resident was not yet back in another residency.

Stigma can be lethal in several ways, particularly when it comes to mental health and substance use disorders (SUD). We have seen examples of how stigma causes delays in treatment or leads individuals to avoid care altogether. The following are real-life examples with which we were involved:

- A pregnant physician with an active SUD was afraid to seek necessary obstetric care. She avoided prenatal care due to fear of legal consequences and of having Department of Child Services involvement. This lack of care could have led to serious health complications for both her and her baby. She self-referred to the PHP on advice from a confidant who was a past PHP participant. She accepted our referral for obstetric and SUD treatment. She had no legal or regulatory board consequences and delivered a healthy baby.

- A treating physician dismissed the physical symptoms in their physician patient (our participant) who had a co-occurring mental health condition, attributing the symptoms to their mental illness. This resulted in a delayed diagnosis.
- A physician who was successfully discharged from treatment and released to return to work was very hesitant to begin the employment application process. She had toxic shame and the “why-try syndrome” of hopelessness. This resulted in social isolation and unemployment. She was eventually pushed by the PHP into applying for work and, to her surprise, was hired.

By creating barriers to care, worsening symptoms, and contributing to social and economic hardships, stigma can significantly increase the risk of premature death among physicians with mental illness and SUDs. Healthcare workers with stigmatized conditions may face bullying, neglect, or even harassment, putting their physical and emotional safety at risk.

Our everyday PHP language can also be stigmatizing. Stigmatizing language can significantly impact our participants’ health, well-being, and even access to care. Changing the words we use to talk about addiction is crucial in reducing stigma. Our lexicon can perpetuate stigma or reverse it. Terms like *dirty screen*, *junkie*, *druggie*, *wet brain*, and *cold turkey* are stigmatizing. A shift in language reflects our understanding that addiction is a chronic, treatable disease, not a moral failing or character flaw.

Stigma has been a part of the healthcare workers’ psyche since long before the entrance of PHPs 50 years ago. A lot of work has been done to raise awareness and reduce stigma over the last 10 years. We are far from done. Confidentiality diminishes the effects of stigma that can be associated with mental health care. The implementation of confidentiality is an integral component of encouraging help-seeking and provides assurance of public safety.

This work is a call to action to address confidentiality barriers to seeking help.

The Future of Healthcare Professional Evaluation and Treatment is Here!

The Federation of State Physician Health Programs (FSPHP) is pleased to announce the launch of the FSPHP Evaluation and Treatment Accreditation™ (FSPHP-ETA™) program and the release of the *FSPHP-ETA™ Standards for Accreditation v2.0!*

This groundbreaking program sets the gold standard for evaluation and treatment programs serving:

- ▶ Career physicians
- ▶ Medical students
- ▶ Residents and Fellows
- ▶ Healthcare professionals in safety-sensitive roles

Why Participate in a FSPHP-ETA™?

- ▶ **OBJECTIVE AND RELIABLE ACCREDITATION**
Developed over 4 years by a consensus of experts utilizing FSPHP Guidelines to enhance the effectiveness of evaluation and treatment processes and thereby optimize outcomes.
- ▶ **PROMOTES CONSISTENCY AND QUALITY**
Makes guidance available for providers working with safety-sensitive professionals.
- ▶ **SPECIALIZED FOR HEALTHCARE**
Addressing the unique needs of medical professionals in safety-sensitive occupations.
- ▶ Showcase your program as a leader in the field with the FSPHP-ETA™!
- ▶ Purchase the *FSPHP-ETA™ Standards* and take the next step toward enhanced excellence.

Join the movement today! Learn more and apply now: <https://www.fsphp.org/fsphp-eta>

Executive Director's Message

Linda Bresnahan, MS



Dear FSPHP Members,

As we reflect on our progress and look toward the future, I'm excited to share updates on the remarkable strides we've made and the opportunities that lie ahead. I am proud and grateful for the unwavering dedication and invaluable contributions of each of you. The hard work, passion, and commitment demonstrated by our FSPHP leaders and members have been the driving force behind the progress and milestones we celebrate today. These efforts not only highlight our accomplishments but also lay the foundation for the future of Physician Health Programs (PHPs), ensuring continued support for the health and well-being of physicians nationwide.

This year, we have achieved several remarkable goals that have been years in the making, made possible by the tireless work of our members. These milestones will have a lasting impact on our field, and I am thrilled to share a few highlights with you:

1. Research Goal Achieved: Completion of the PHP National Survey!

One of the most significant achievements is the completion of the PHP National Survey! The response rate was incredible: 48/51 or 94%. This is a testament to the dedication of our PHPs in advancing the field for all. One new finding from our PHP National Survey emerged when we asked all PHPs to report the total number of physicians served within a 12-month period. The response was astounding; over 6,000 physicians were served, with an additional 3,500 new referrals reported during that time frame. This means that, in just one year, more than **10,000 physicians** were directly impacted by PHPs. Moreover, this number reflects a multiplier effect—every 12 months, this incredible reach continues to grow. It is a powerful reminder of just how essential and far-reaching our work is. These numbers tell a clear story: PHPs are making a profound difference in the health and well-being of physicians nationwide. The impact of PHPs cannot be overstated, and your unwavering dedication and service have been the driving force behind this success.

In February, we hosted a member information session and presented the initial report of this data. The findings will also be shared during the research session at our upcoming Conference in Seattle. Additionally, a

member-specific report will soon be available, and our research committee is already exploring opportunities to publish these important findings. This is a monumental achievement, offering unprecedented insight into the physician population and the critical work being carried out by PHPs.

2. Accountability, Consistency, and Excellence Goal Achieved: The Launch of the ETA™ and PEER™ Programs!

Another exciting development is the successful launch of the FSPHP-**Evaluation and Treatment Accreditation (ETA™)** and **Performance Enhancement and Effectiveness Review (PEER™)** programs. These programs exemplify the commitment of FSPHP to Accountability, Consistency, and Excellence, and our core values. We are excited to witness their growth and positive impact. <https://www.fsphp.org/peer-program>; <https://www.fsphp.org/fsphp-eta>

3. Education and Visibility: Elevating the Understanding of PHPs

One of FSPHP's top strategic priorities has always been to enhance awareness and highlight the life-saving impact of our PHPs. This year, we have made tremendous progress toward achieving this goal through a variety of initiatives. We participated in our first major network interview, and we have presented at key national events with more exciting presentations to come.

Recent Presentations Include:

March 7, 2025

FSMB—A Summit Meeting of the Opioid Regulatory Collaborative

Moderated Panel: Management and Treatment of Licensees

Christopher Bundy, MD, MPH, Chief Medical Officer, Federation of State Physician Health Programs and Executive Medical Director of Washington Physicians Health Program, Nicole L. Chopski, PharmD, ANP, Bureau Chief, Health Professions Bureau, Idaho Division of Occupational and Professional Licenses, Christopher Harlow, PharmD, Executive Director, Kentucky Board of Pharmacy, Moderator: Katie Templeton, JD, Chair, Federation of State Medical Boards

February 22, 2025

2025 ACGME Annual Educational Conference

***Physician Health Programs and GME:
A Candid Conversation***

Christopher Bundy, MD, MPH, Chief Medical Officer, Federation of State Physician Health Programs and Executive Medical Director, of Washington Physicians Health Program, Courtney Barrows McKeown, MD and Cindy Hamra, JD, MA

February 21, 2025

Georgia Association Medical Staff Services

Addressing Mental Health including Substance Use Disorders

Linda Bresnahan, MS, Executive Director, CEO of the Federation of State Physician Health Programs

January 9–11, 2025

2025 AMA State Advocacy Summit

Panel Session

Michael Baron, MD, MPH, DFASAM, FAPA, FSPHP President and Tennessee Medical Foundation Medical Director, Humayun “Hank” Chaudhry, DO, MACP, FRCP, CEO, Federation of State Medical Boards (FSMB), Stefanie Simmons, MD, FACEP, CMO, Dr. Lorna Breen Heroes’ Foundation, J. Elizabeth Struble, MD, past-president and current Legislative Commission chair of the Indiana State Medical Association (ISMA)

November 7, 2024

AMA 2024 Interim Meeting

Legislative and Regulatory Advocacy to Support Physician Wellness

Christopher Bundy, MD, MPH, Chief Medical Officer, Federation of State Physician Health Programs and Executive Medical Director of Washington Physicians Health Program

October 28–31, 2024

National Association of State Controlled Substances Authorities (NASCSA) 2024 Conference

Setting the Stage for Second Chances—Hope and Redemption—Professional Recovery Programs

Rebecca Payne, MD, Medical Director, South Carolina Recovering Professional Program & Joseph Jordan, PhD, FSPHP Southeast Region Director & CEO, North Carolina Professionals Health Program

October 30, 2024

Federation of Podiatric Medical Boards Community Practice Session

Physician Health Programs & Health Professional Programs: Addressing Health Care Professionals at Risk of Mental Health Illness including SUD

Linda Bresnahan, Executive Director, Federation of State Physician Health Program & Edwin Kim, MD, FSPHP President-Elect and Pennsylvania Physician Health Program Medical Director

October 19, 2024

2024 Mid-South Addiction Conference

Physician Health Programs and Safety-sensitive Populations

Michael Baron, MD, MPH, DFASAM, FAPA, FSPHP President and Tennessee Medical Foundation Medical Director

October 18, 2024

Maryland Physician Health Program—Physician Health Symposium

Expanding the View of Physician Health

Mark Albanese, MD, FSPHP Northeast Region Director & Physician Health Services Massachusetts Medical Director

Professionalism, Burnout and Moral Injury

Michael Baron, MD, MPH, DFASAM, FAPA, FSPHP President and Tennessee Medical Foundation Medical Director, Christopher Bundy, MD, MPH, Chief Medical Officer, Federation of State Physician Health Programs and Executive Medical Director of Washington Physicians Health Program, Edwin Kim, MD, FSPHP President-Elect and Pennsylvania Physician Health Program Medical Director, Scott Hambleton, MD, FSPHP Past President and Chair Mississippi PHP

Additionally, our upcoming **American Foundation for Suicide Prevention (AFSP)** and **FSPHP video tutorial** will provide valuable insights into PHPs and their critical work. In June, we will debut a new **PHP video**—created in collaboration with FSPHP and our members—to educate and promote the essential work of PHPs. These efforts are vital in elevating the visibility of our programs and ensuring they receive the recognition and support they deserve.

Most recently, in recognition of Health Workforce Wellbeing Day, ALL IN: Wellbeing First for Healthcare, a national coalition led by the Dr. Lorna Breen Heroes’ Foundation, unveiled a new initiative to empower health workers to access the mental health care and support they may need, while equipping employers, policymakers and other decision-makers with resources to eliminate systemic barriers to mental health care.

This campaign includes six core actions, two of which are about the work of PHPs!

Homepage: All In for Mental Health

<https://drlornabreen.org/allinformentalhealth>

Among the six rights to mental health care:

- Confidential Professional or Physician Health Program Support—All In for Mental Health
<https://drlornabreen.org/allinformentalhealth/six-actions/confidential-health-program>
- Pathway for Re-Entry After Recovery—All In for Mental Health
<https://drlornabreen.org/allinformentalhealth/six-actions/pathway-to-reentry>

As we head into the second quarter of 2025, I am confident that the momentum we've built will continue to propel us toward even greater accomplishments. We look forward to the long-lasting impact of these initiatives and the continued advancement of our work. Your ongoing support, contributions, and commitment are what make these achievements possible. Together, we are shaping a

brighter future for Physician Health Programs and for the health professionals who rely on them.

Thank you for all that you do.

With gratitude,
Linda Bresnahan, MS
Executive Director, FSPHP



Chris Bundy, MD, MPH, FASAM; J. Corey Feist, JD, MBA; Linda Bresnahan, MS; Art Hengerer, MD; and Daniel Blaney-Koen, JD, at Healthcare Workforce Well-Being Day on March 18.

Introducing the Federation of State Physician Health Programs (FSPHP) Performance Enhancement and Effectiveness Review (PEER™) Program!

The PEER™ program is designed to empower Physician Health Programs (PHPs) to optimize performance, enhance effectiveness, and align with best practices by utilizing the 2019 *FSPHP Physician Health Program Guidelines*—the review process will provide feedback specifically designed to educate and enhance consistency and excellence for your PHP!

Why Participate in a PEER™?

- ▶ **ACTIONABLE RECOMMENDATIONS:** Identify program strengths and areas for enhancement.
- ▶ **GUIDED BY INDUSTRY EXPERTS:** Developed by a consensus of experts utilizing FSPHP's PHP Guidelines and objective, experienced expertise.
- ▶ **THE PEER™ PROGRAM IS NOT A "PASS" OR "FAIL":** It is specifically designed to provide expert insights to educate and enhance PHP operations.

Elevate Your PHP. Enhance Operations. Strengthen Your Impact.

Learn more today: <https://www.fsphp.org/peer-program>

Member News and Updates

Communication about PHP Confidentiality

A growing number of FSPHP Physician/Professional Health Programs (PHPs) have integrated confidentiality language into their websites. In March 2024, the FSPHP Public Policy Committee addressed prevalent misunderstandings about confidentiality and PHPs by releasing the FSPHP Issue Brief: Effective Communication Regarding PHP Confidentiality.

Here are just a few FSPHP members that added confidentiality verbiage to their websites:

- Georgia Professional Health Program
<https://gaphp.org/confidentiality/>
- Tennessee Medical Foundation Physician's Health Program
<https://e-tmf.org/privacy>
- Washington Physicians Health Program
<https://wphp.org/confidentiality>
- West Virginia Medical Professionals Health Program, Inc.
<https://wvmpohp.org/confidential-resource>

New PHP Program—Small but Mighty

We admit that we were devastated when the Missouri State Medical Association (MSMA) announced to us that they were closing the Missouri Physicians Health Program (MPHP). We were sad but did not lose hope.

As colleagues, active participants, released participants, service providers, FSPHP members, and others responded to the closure with so much positive feedback and words of kindness, we realized how much we loved what we did, and we didn't want to stop. We knew the MSMA had made plans for the University of Missouri Physician and Health Professionals Wellness Program to step in and monitor our active participants. Knowing our participants were being taken care of and that service to them would not be interrupted was a great relief for us.



Kay O'Shea, MAC,
CADC, CTP



Mary Fahey, LCSW,
CCTP

We asked our St. Louis participants, service providers, and colleagues for their advice about opening our own nonprofit corporation so we can continue monitoring St. Louis regional healthcare professionals. Their response was extremely positive. Our next step was to present our business plan to the Missouri Board of Healing Arts and ask to be listed as an approved service provider. They approved our program, contingent upon revisiting our progress in July of 2025.

Given the progress we've made, we are looking forward to that meeting. We incorporated on December 26, 2024, as STL-Professionals Health Program (STL-PHP). Today, we are proud to serve over 25 participants and have secured incoming and pledged donations. Along with our Board of Directors, including a Medical Director, we have passed our by-laws. Our pro bono website is almost ready to launch.

Starting over hasn't been easy, but it has its advantages. Mary Fahey took Kay O'Shea to her first Federation of State PHP Conference in 2010 in Seattle, and we are so pleased to attend the upcoming April 2025 conference. Attending this conference is always an incredible learning experience. We always return exhausted yet invigorated, ready to implement the new ideas and best practices shared by the industry's knowledgeable professionals. Building new connections and discussing case management with other programs has been invaluable.

Volunteering to be on FSPHP committees and being nominated to serve on the FSPHP Board continue to influence our desire to manage the best professional program we can.

We treasure being part of the FSPHP family. Thank you for all your support and well-wishes.

Sincerely,
the Directors of the STL-Professionals Health Program,
Kay O'Shea, MAC, CADC, CTP and
Mary Fahey, LCSW, CCTP

Washington Physicians Health Program

Advocacy and Credentialing Reform Efforts

Advocacy continues to be a focus for the Washington Physicians Health Program (WPHP), and we are making strides in advocating for license and credentialing question reforms. These reforms are aimed at ensuring credentialing applications and processes limit health-related inquiries to questions about current impairment and avoid asking intrusive questions regarding prior diagnoses and treatment. Recently, WPHP collaborated with UW Medicine to reform their healthcare credentialing. This effort, led by Brian Johnston, MD, at Harborview Medical Center, positions the University of Washington as a leader among health systems in Washington that are taking tangible action to support the mental health and well-being of their health professional workforce.

WPHP played a critical role in providing consultation and technical assistance throughout this initiative, helping UW Medicine align its credentialing procedures with best practices that support the health and sustainability of its workforce. By integrating comprehensive well-being measures into the credentialing process, UW Medicine has demonstrated a deep commitment to the mental health of its physicians and healthcare teams.

It is notable that the UW not only adjusted its credentialing and recredentialing applications but also evaluated the entire process to ensure appropriate inquiry. This included revising its peer reference forms to ensure that references are only asked to report concerns for current impairment. These reforms serve as a model for other healthcare institutions, not just within Washington but across the country. They highlight how a thoughtful, well-supported credentialing process can promote the long-term wellness and success of healthcare professionals.

WPHP was also successful in collaborating with Physicians Insurance, our region's premier medical professional liability carrier, to reform its credentialing practices. Dr. Bundy had the opportunity to showcase these changes at the Medical Professional Liability Association Underwriters Conference in Scottsdale, Arizona, this past September.

WPHP Expands Licensees

Washington Physicians Health Program (WPHP) now serves Anesthesiology Assistants in addition to the following healthcare professionals: osteopathic physicians, allopathic physicians, podiatric physicians, physician assistants, dentists, and veterinarians as well as students and residents of these disciplines.

New Communications Efforts

Washington Physicians Health Program (WPHP) has implemented a Strategic Communications Plan to raise visibility about its program and services in the medical community. Capacity has been added for a more robust communication infrastructure providing increased communications, thought leadership, and external engagement support with key partners and stakeholders. One of WPHP's first efforts was updating its mission, vision, and values statements with its team to embody the essence of the organization, align with its purpose, and provide a solid foundation for core messaging. WPHP is also refining its external engagement strategy to tap into high-impact opportunities along with developing new resources to share information about our program.

Key Outcomes from the 2025 ACGME Annual Educational Conference

Dr. Chris Bundy, Executive Medical Director of the Washington Physicians Health Program (WPHP), attended the 2025 Accreditation Council for Graduate Medical Education (ACGME) Annual Educational Conference on Feb. 20–22 in Nashville, TN. As the world's largest Graduate Medical Education (GME) conference, this event was a special opportunity for attendees to engage in educational sessions and strengthen professional connections in the field of academic medicine. This year's conference theme, "Meaning in Medicine," highlighted the importance of aligning personal and professional values, promoting well-being, and fostering collaboration within the healthcare community.

In support of this theme, Dr. Bundy presented "Physician Health Programs and GME: A Candid Conversation," featuring panelists Courtney Barrows McKeown, MD, a surgeon and physician in recovery, and Cindy Hamra, JD, MA, Associate Dean of the University of Washington GME. This inspiring session gave attendees a rare opportunity to hear the personal stories of physicians who have experience with addiction and recovery. The presentation also included information about WPHP's contract with UWGME and UWSOM that covers the cost for evaluations for students and residents, including comprehensive diagnostic assessments for SUD at nationally recognized centers specializing in the assessment of safety-sensitive workers. It also illuminated best practices, opportunities for improvement, and advocacy targets that can help GME and PHP programs deliver on a promise of hope and healing while mitigating the risk of adverse professional consequences that can discourage residents from seeking and accepting help when needed.



Linda Bresnahan, FSPHP Executive Director; Courtney Barrows McKeown, MD, General Surgeon and Advocate for Physician Mental Health; Chris Bundy, MD, MPH, FASAM, FSPHP Chief Medical Officer and Executive Medical Director of the Washington Physicians Health Program (WPHP); and Cindy Hamra, JD, MA, FACHE, Associate Dean, University of Washington School of Medicine

During the “Review of the 2024 ACGME Well-Being Symposium: Charting New Directions for GME” session, ACGME shared key outcomes from the symposium, which Dr. Bundy attended last November. One result was the formation of several Well-Being Affinity Groups that will convene throughout the next year to identify resources to support resident well-being. Dr. Bundy will lead the Access the Mental Health Care Affinity Group and attend a summit of Affinity Group Leaders at ACGME’s office in Chicago in the Fall of 2025.

In addition, Dr. Bundy attended resident well-being sessions that raised awareness about PHPs as a critical resource for GME and program directors in supporting residents in crisis. This conference was a valuable opportunity for WPHP to connect with colleagues representing the University of Washington GME, Seattle Children’s GME, and Valley Medical Center GME. Alongside Linda Bresnahan, MS, FSPHP Executive Director, Dr. Bundy met Dr. Debra Weinstein, the new ACGME President and CEO. They also met with Dr. Humayun Chaudhry, MD, CEO of the Federation of State Medical Boards, and several members of the ACGME Leadership Team and Board of Directors. The conference insights and connections with ACGME Wellness Leaders will further enhance the work WPHP conducts to support medical professionals across Washington.

Dr. Michael Baron Participates in the 2025 AMA State Advocacy Summit

Dr. Michael Baron, FSPHP President and Medical Director of the Tennessee Medical Foundation Physician Health Program, represented FSPHP at the 2025 AMA State Advocacy Summit (SAS) January 9 through 11, 2025, in Carlsbad, CA.

Dr. Baron joined an esteemed panel that included the following:

- Dr. Humayun Chaudhry, CEO of the Federation of State Medical Boards
- Dr. Stefanie Simmons, Chief Medical Officer at the Dr. Lorna Breen Heroes’ Foundation
- Dr. J. Elizabeth Struble, Past President of the Indiana State Medical Association

This panel explored advocacy efforts and partnerships among the AMA, the Dr. Lorna Breen Heroes Foundation, the Federation of State Medical Boards, and the FSPHP. Key topics included removing stigmatizing language related to mental illness and substance use disorders from licensing and credentialing applications. Dr. Baron highlighted the vital role Physician Health Programs (PHPs) play in driving licensure and credentialing reforms.

The session also critically assessed whether current efforts to address these challenges are sufficient. Panelists evaluated the strengths and limitations of ongoing advocacy initiatives,



Humayun “Hank” Chaudhry, DO, MACP, FRCP, CEO of the Federation of State Medical Boards (FSMB); Stefanie Simmons, MD FACEP, CMO of the Dr. Lorna Breen Heroes’ Foundation; J. Elizabeth Struble, MD, past-president and current Legislative Commission chair of the Indiana State Medical Association (ISMA); and FSPHP President and Tennessee Medical Foundation Medical Director Michael Baron, MD MPH, DFASAM, FAPA

outlined future opportunities, and discussed actionable steps that medical societies can take to better support medical students, residents, and practicing physicians nationwide.

Dr. Baron’s participation in this session underscored the critical role PHPs play in advocacy and education, championing initiatives that promote the health and well-being of the medical profession.

West Virginia Medical Professionals Health Program

The West Virginia Medical Professionals Health Program (WVMPHP) was incorporated as an independent, not-for-profit 501(c)3 charitable organization in 2007. The vision of the WVMPHP is improving the health of West Virginians through promoting the well-being of West Virginia physicians, podiatrists, physician assistants, and other licensed healthcare professionals. We regularly provide services to West Virginia hospitals, training institutions, and healthcare employers. The WVMPHP continues to be the physician health program recognized by the WV Board of Medicine and the WV Board of Osteopathic Medicine, as outlined in our current five-year service agreements. WVMPHP continues to operate under the guiding principles of collaboration, communication, transparency, and accountability.

Senate Bill 573, passed in March 2007, provided enabling legislation for confidential access for physicians, podiatric physicians, and physician assistants to seek assistance and guidance in a confidential, professional, and respectful manner. WVMPHP promotes the early identification and treatment of potentially impairing conditions and follow-up monitoring and support, which is critical to successful recovery and public protection. Statutorily, licensees are not required to disclose their WVMPHP participation to their perspective medical board upon licensure renewals solely based on having a qualifying illness. Over 90 percent of referrals are voluntary (not board-mandated), and we are pleased to announce that approximately 93 percent have continued with their careers or returned to their education/training. Currently, 20 percent of our participants are medical students/residents, 7 percent are physician assistants, and 73 percent are physicians.

WVMPHP is committed to educating the healthcare community about the principles of the physician health program and issues of physician health and well-being through our website (www.wvmphp.org) and the promotion of written materials and educational opportunities for health professionals, healthcare systems, training institutions, organizations, and societies. The WVMPHP has been overseeing a Department of Human Services physician education grant for the past 13 years.

That education includes the WV Appalachian Addiction & Prescription Drug Abuse Conference (AAPDAC), which is held annually in the fall. Last year, the AAPDAC had 500 registrations with over 400 healthcare/legal professionals in attendance. The conference sessions are recorded and offered after the in-person event for additional “virtual” access with CME/CLEs/CE credits obtained for eleven different professional disciplines.

WVMPHP, like many other PHPs, faces challenges for sustainability and program expansion. The WVMPHP generates 40 percent of its annual budget revenue through its annual Spirit of Wellness in Medicine fundraising campaign. The WVMPHP receives a modest fee paid with medical board licensure applications as a “pass-through” via legislation and earmarked for the PHP. Licensure fees represent 40 percent. We also bill participants as outlined in legislation, and those fees represent approximately 20 percent. We have four staff members: an Executive Medical Director, an Administrator, and two Case Managers. Additional activities include more than 75–100 nonparticipation contacts annually, providing the legislatively required CME prescriber education web courses. We also interface regularly with other components of organized medicine, including specialty societies of multiple disciplines, other peer assistance programs in the state, and the Department of Human Services.

WVMPHP is currently working on the agenda for the Appalachian Addiction and Prescription Drug Abuse Conference coming up in the fall, including associated

CME for multiple disciplines. During our most recent board meeting, we approved the hiring of Cyndi MacKenzie, GPC, a certified grant professional who has previously collaborated with the FSPHP.

In addition, WVMPHP has engaged Kevin Stalnaker, CPA, a consultant with 25 years of healthcare industry experience who regularly works with the WVMPHP. Mr. Stalnaker will play a key role in the development and implementation of strategic planning to ensure the long-term viability and availability of WVMPHP. His efforts will focus on updating bylaws, governance, funding, staffing, and other planning initiatives critical to maintaining and enhancing services.

The WVMPHP is excited about the opportunity to build upon our operations and services as we move forward.

FSPHP Attends ACGME Symposium on Physician Well-Being

Dr. Art Hengerer, FSPHP Board Director, Dr. Chris Bundy, FSPHP Chief Medical Officer, and Linda Bresnahan, MS, FSPHP Executive Director, were invited to the Accreditation Council for Graduate Medical Education (ACGME) 2024 Symposium on Physician Well-Being on November 18–20. Their focus was to spread awareness and understanding of the role of PHPs. The goal of the symposium was to partner with guests who specialize in the physician health and well-being space to review and discuss the progress and impact of the well-being



Dr. Stuart Slavin, ACGME; Dr. Carol Bernstein, ACGME; Linda Bresnahan, MS; Dr. Tim Brigham, ACGME; Dr. Chris Bundy; and Dr. Art Hengerer (left to right)

movement within graduate medical education since 2015. Attendees were charged to identify successful strategies and initiatives that have effectively improved the well-being of medical trainees, faculty, and staff. The symposium further challenged attendees to define the future ideal states for both the GME clinical learning environment and the individuals within it, explore the well-being focus, and propose actionable strategies for future enhancements. For WPHP, this was a key opportunity to showcase its model collaboration with GME, mechanisms to support access, and elevate the PHP voice in national discourse on physician health and wellness.

American Bar Association Adopts New Model Rule on Conditional Admission to the Practice of Law

Buddy Stockwell, Executive Director, Tennessee Lawyers Assistance Program, ABA CoLAP Commissioner, ABA CoLAP Chair of Committee on Monitoring Lawyers Assistance Programs (LAPs)

In February 2025, the American Bar Association adopted a new Model Rule on Conditional Admission to support bar applicants who look to overcome a history of misconduct aggravated by an untreated mental illness or substance use disorder. The new rule specifies that the American Society of Addiction Medicine (ASAM) Criteria provides best medical practices in diagnosing, treating, and monitoring conditionally admitted lawyers.



Buddy Stockwell

At its mid-year meeting in February 2025, the American Bar Association (ABA) adopted a new Model Rule on Conditional Admission. The rule was proposed by the ABA Commission on Lawyer Assistance Programs (CoLAP) Law School Committee and was cosponsored by the ABA Committee on Disability Rights to ensure compliance with the Americans with Disability Act (ADA). Numerous sections of the ABA supported this new rule, and it was unanimously adopted by the ABA.

The new rule will ensure fair, inclusive, and effective admission into the legal profession while also protecting the public when an applicant's past conduct calls their character and fitness into question.

The many benefits provided by this new rule are as follows:

First, the rule states that conditional admission inquiries must be based solely on identifying conduct issues. This prohibits inquiry into a bar applicant's past or present

mental health or substance use history. Most jurisdictions have already eliminated mental health inquiries during the bar application process. As such, law students and bar applicants with no conduct issues are assured a safe space to confidentially seek immediate intervention for a current clinical situation or maintain treatment for a managed mental health issue. Early intervention and effective mental health care are key to fostering a healthier legal profession.

Second, the rule specifies that the American Society of Addiction Medicine (ASAM) Treatment Criteria for Addictive, Substance-Related and Co-occurring Conditions, Fourth Edition ("ASAM Criteria") provides best medical practices for supporting lawyers. This ABA endorsement of ASAM's specialized criteria for Safety Sensitive Occupations will greatly improve the efficacy of Lawyer Assistance Program monitoring while also ensuring that these specialized levels of care are consistent with the ADA.

Third, this new rule demonstrates a new and exciting era of collaboration between the ABA CoLAP, the Federation of State Physician Health Programs (FSPHP), and ASAM. By applying case-by-case best medical practices for safety-sensitive workers, lawyers can receive the effective clinical support they need to objectively establish fitness to practice and overcome character and fitness concerns. Many thanks to the FSPHP and ASAM for supporting LAPs.

Finally, with mental health concerns and substance use issues disproportionately affecting legal professionals, this new rule creates a structured, fair, and rehabilitative approach—balancing public protection with second chances for qualified candidates. By adopting the rule, the ABA has affirmed its commitment to competence, fairness, and diversity in the legal field, ultimately benefiting both legal professionals and the clients they serve.

Watch the video of the House of Delegates testimony:

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Read the following article: The Road Back: How Should Conditional Admission Be Handled?

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Meet Our Newest Members

We are excited to announce that the following new members have joined FSPHP since the publication of the Fall 2024 issue. Please join us in warmly welcoming them to our community!

State Voting Member

Maggie Seamands, RN
Executive Director, North Dakota Professional Health Program

Associate Members

Hannah Adkins, LCSW
Clinical Case Manager, Colorado Physician Health Program

Susan Blank, MD, LFSASM, DFAPA
Medical Director, Georgia Professional Health Program

Rebecca S. Carlson, LMHC
Program Coordinator, Iowa Professional Health Program—Dental, Pharmacy, and Professional Licensing

Lauren Dewey
Donor Relations Manager, Colorado Physician Health Program

Stephen Ezzo, MD
Chair, Compliance Committee and Board of Directors
North Carolina Professionals Health Program

Shelly Farnan, PsyD
Chief Wellness Officer, University of Missouri
Physician and Health Professionals Wellness Program

Paul Fox, LPC
Recovery Specialist, South Carolina Recovering Professional Program

Candice Gonzalez, LCSW
Clinical Coordinator, Utah Professionals Health Program

Vita McCabe, MD, MHSA
Clinical Associate Professor – Dept of Psychiatry—
Addiction, University of Michigan

Marisa Morrill, LMHC
Clinical Coordinator, Physicians Health Services—
Massachusetts Medical Society

William Neff, MD
Board Director, Colorado Physician Health Program

Andrew Seefeld, MD
Associate Medical Director, New Hampshire
Professionals Health Program

Sheryl Slankard, LCSW
Clinical Case Manager, Colorado Physician Health
Program

Kent Swaine, MD
Nevada Professionals Health Program

Pang Yang, BSW
Case Manager, Minnesota Health Professionals
Services Program

Individual Members

Deanne Chapman, MS, PA-C
System Director, Occupational Health Services,
Tufts Medicine

Lori Crane, PhD, MPH
Professor and Principal Researcher, Colorado
Physician Health Program

John DeMello, DDS
National Council of Dental Health Programs,
Board of Directors

Malini Madanahalli, MD
Clinician Care Committee Member, Palo Alto
Foundation Medical Group

Charles Meredith, MD
Psychiatrist, Psychiatric Medicine Associates

Lori Woehler, PsyD
Clinical Psychologist, Bellevue Psychotherapy, PS LTD

Industry Partner Individual Members

Kevin Byers
Business Development, Phamatech Labs

Teresa Eliasson, MD
Senior Medical Advisor—Health and Practice
Condition Monitoring, College of Physicians and
Surgeons of Alberta

Cynthia Henderson, JD
Professionals Program Liaison, Bradford
Health Services

Sebastian Orosco
Associate Litigation Attorney, Kansas State
Board of Healing Arts

Briana Torgerson, LPC-MHSP, LADAC II
Professionals Program Coordinator,
Cumberland Heights

International Members

Diana Meakins, BMSc, MD, FRCPC
Case Coordinator and Assessment Physician,
Physician and Family Support Program, Alberta
Medical Association

Samantha Cook Wallenius, MD, FRCPC
Associate Medical Director, Ontario Medical
Association Physician Health Program

Upcoming Events



The FSPHP 2025 Conference and Annual Membership Meeting, *Health Professional Well-Being: Aligning Safety, Supports, and Confidentiality* is the leading event for physicians, healthcare professionals from all specialties, and those committed to health and professional well-being. Over 300 attendees join us, including our Physician or Professional Health Program (PHP) staff and experts involved in the evaluation and treatment of health professionals.

It is the most valued professional development training for your PHP staff and treatment professionals.

Education Objectives:

- Identify the next generation of prevention and outreach strategies for healthcare professionals.
- Examine the day-to-day operation of PHPs by assessing their positive benefits, as well as the challenges that impact desired outcomes.
- Examine and propose practices to improve confidentiality, reduce stigma, and remove barriers to help-seeking to increase the utilization of PHPs.
- Share and propose exemplary administrative, funding, legal, monitoring (including toxicology), and case-management policies and approaches that increase access to care, improve the participants' experience seeking services and/or being monitored, and contribute to evidence-based outcomes.
- Demonstrate how research, public relations, and outcome reporting foster an increased understanding of the benefits of PHPs and the significance of health and well-being initiatives.
- Describe and compare the unique characteristics of the evaluation and treatment of healthcare professionals

through a safety-sensitive lens that positively impacts health and well-being outcomes and public safety.

- Compare and discuss how PHPs interface with institutional wellness programs.

Special Events:

- **First Time Attendees and New Members Welcome Meeting**
Wednesday, April 23 at 10:30–11:30 AM in the Columbia Ballroom A
- **FSPHP & FSMB Joint Session**
Confidentiality, Safety, Collaboration, and Care: A Physician's Journey
Friday, April 25 at 2:00–3:30 PM in the Regency Ballroom (7th floor)
- **Dinner and Presentation with Dr. Wirt (Andy) Hines III**
Mania, Medicine, and Mirandas: A Doctor's Story of Bipolar Disorder and Recovery
Friday, April 25 at 7:00–8:30 PM in the Columbia Ballroom A
This is an advanced purchase, ticketed event. Tickets are \$125 each.
- **Annual Member Business Meeting**
Saturday, April 26 at 10:30–11:45 AM in 402 Chilliwack
All State-Voting, Associate, International, and Honorary Members are encouraged to attend.

Learn more with these helpful links:

- [Conference Webpage](#)
- [Detailed Agenda](#)
- [Education Credits Information](#)
- [What to do in Seattle](#)

FSPHP Open Forum Leadership Series

The FSPHP Open Forum Leadership Series is a platform for FSPHP Member PHP leaders to engage in open discussions, share best practices, share updates, and foster collaboration and innovation within the organizations, and address critical issues affecting physician and professional health programs.

These informal, open-forum discussions are held virtually and do not include agendas, PowerPoint presentations, or the taking of minutes.

The FSPHP Open Forum Leadership meetings are open to FSPHP PHP members who identify as part of their leadership team, including executives, directors, and department heads.



May 14, 2025, at 12:00–1:00 PM, Eastern Time

Facilitator: Dr. Arthur Hengerer, FSPHP Board Member and Past Chair of FSMB Board, Board of Professional Medical Conduct, and the Dept. of Otolaryngology at University of Rochester

[Click here to register](#)



August 27, 2025, at 12:00–1:00 PM, Eastern Time

Facilitator: Dr. Molly Rossignol, FSPHP Northeast Region Director and New Hampshire Professionals Health Program Medical Director

[Click here to register](#)



November 19, 2025, at 12:00–1:00 PM, Eastern Time

Facilitator: Dr. P. Bradley Hall, FSPHP Director-at-Large; West Virginia Medical Professionals Health Program Executive Medical Director

[Click here to register](#)

Join the Action: FSPHP Committees Open for New Participants!

Passionate about supporting national causes for Physician Health Programs? Consider joining an FSPHP committee!

Involvement in FSPHP committees lets you champion a cause you're passionate about and offers a chance to boost your skills and acquire valuable experience. It also introduces you to other dedicated FSPHP members. Join in the fun while making a meaningful impact!

Being part of a committee is also an excellent stepping stone toward a future leadership role on the board of directors.

To join a committee, please do the following:

- Visit the [FSPHP Committees webpage](#) and check out the full list of FSPHP committees, their descriptions, frequency of meetings, and rosters.
- Submit your interest to join or your plans to renew via the [FSPHP Committee Service Interest Form](#).
- Email ssavage@fspHP.org with questions.

**SHARE YOUR
EXPERTISE**

**JOIN AN FSPHP
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Gratitude Spotlight

Donors

We extend our heartfelt gratitude to the generous donors that donated from October 2, 2024 through April 4, 2025. Your support makes our mission possible.

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- Join Our Mailing List: <https://fsphp.memberclicks.net/distributionlist>
- Sponsor a Regional Member Meeting Email: ssavage@fsphp.org
- Newsletter Sponsorship: Newsletter Advertisement
- Visit the FSPHP Industry Partner Engagement Opportunities webpage for more information: Vendor Engagement Opportunities

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You Deserve the Spotlight—Submit Your News!

The impactful work you do at your Physician and/or Healthcare Professional Program (PHP) is making a real difference, and we want to celebrate it in the next issue of *Physician Health News*! Whether it's a major initiative or a small yet meaningful success, we want to showcase the incredible efforts happening in PHPs nationwide. Share your story and let us highlight your program's contributions!

We've set ourselves a goal—to hear from *every* PHP!

Do you have something new or exciting to share? It could be:

- A new peer support meeting
- Mentorship program for new participants
- Innovative referral management
- Educational programs and advocacy efforts in your state
- Fundraising success stories
- Research or quality improvement initiatives
- Fresh approach to retreats and community-building
- Suicide prevention efforts
- Legislation improving confidentiality or other legislation activity
- Partnered with licensing or healthcare organizations on licensure/credentialing question reform
- Website updates for easier access to help
- Clearer content on program confidentiality
- Program expansion to other health professionals—who and how?

We'd love to share your updates! Send a few sentences, up to 500 words, or a link.

Your contributions may be featured in our newsletter or weekly insights.

Please send submissions via the Content Submission Form at https://fsphp.memberclicks.net/index.php?option=com_mcform&view=ngforms&id=2116093, or email Sandra Savage at ssavage@fsphp.org.

Helpful FSPHP Resources

- **Insights:** <https://www.fsphp.org/fsphp-insights>
- **Featured Articles, Podcasts, and Videos about PHPs:** <https://www.fsphp.org/featured-articles-podcasts-and-videos-about-phps>
- **PHP Member Policy Library:** <https://fsphp.memberclicks.net/member-policy-library>
- **Job Opportunities:** <https://www.fsphp.org/job-opportunities>
- **FSPHP Events:** <https://www.fsphp.org/events>
- **State Program Videos:** <https://www.fsphp.org/state-program-videos>
- **Map of FSPHP Regions:** <https://www.fsphp.org/assets/docs/RegionMap.pdf>