



RAMP

Recovery &

Monitoring Program

Participant Guide

Recovery & Monitoring Program

A Program of the Institute for Nursing

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Introduction

Welcome to the Recovery and Monitoring Program (RAMP). This guide will serve as a primary source of information during your participation in RAMP. It includes a description of RAMP and the Peer Assistance Program, terms of participation and policies of the program. Additional program information and documents are posted on the New Jersey State Nurse Association (NJSNA) website www.NJSNA.org and on your Affinity Online Solutions (AOS) website www.Affinityhealth.com/cms. Please read this guide carefully and refer to the website periodically for updates. Contact your case manager with any questions regarding your participation in the program.

RAMP is a program of the Institute for Nursing (IFN), the foundation of the New Jersey State Nurses Association. Since 1988, the IFN's mission has been to support the advancement of nurses through education, research and clinical development.

RAMP is an alternative to discipline program that is contracted with the New Jersey Board of Nursing (NJBON) to provide monitoring services.

Health professionals are not immune to mental illness and substance use disorders. In fact, approximately 6-20% of nurses suffer from mental illness and/or substance use disorders. Many of these nurses do not seek or receive the help they need. Our priority is the well-being of nurses and the public by supporting nurses in their wellness.

RAMP will provide monitoring while you take control of your physical, emotional, spiritual and social health. Congratulations on taking this step towards making positive changes!

RAMP, was established in January 2003. The aim of the program is to protect the public's safety and assist participants with impaired practice issues. RAMP encourages participants to seek recovery before their impairment harms a patient or damages their career through disciplinary action.

For more than three decades, NJSNA and the IFN have identified the support of nursing with substance use disorders as a priority requiring awareness, advocacy and support. The NJSNA was instrumental in the passage of Alternative to Discipline legislation allowing New Jersey nurses, the opportunity to seek treatment and protect their nursing licenses.

RAMP, NJSNA and the IFN recognize that nurses face a broad range of potential issues, which may impair their abilities to practice nursing safely. RAMP has expanded beyond substance use disorders to further support nurses in safe practice.

Mission

The mission of RAMP is to protect the public while safeguarding the well-being of nurses.

RAMP achieves its mission through:

- Advocacy for nurses
- Education of nursing and consumer communities
- Ongoing program evaluation to assure the implementation of best practices and outcomes

RAMP works collaboratively with the NJBON, the nursing community and the consumer public as put forth in the mission of NJSNA and the IFN.

Impaired Nursing Practice

Nursing practice is impaired when the individual is unable to meet the requirements of a professional code of ethics and standards of practice because of cognitive, interpersonal or psychomotor skills that are altered by conditions of the individual within the environment. These factors include psychiatric illness, excessive alcohol or drug use or addiction.

(Impairment) Means an inability to function at an acceptable level of competency or incapacity to continue to practice with the requisite skill, safety and judgment as a result of alcohol or chemical dependency, psychiatric or emotional disorder, senility or a disabling physical disorder

New Jersey Board of Nursing Laws, posted 7/8/09

RAMP encompasses a comprehensive, structured plan for recovery and monitoring that promotes public protection, safe practice and health. The program is voluntary and a participant's status within it is non-public when eligible for alternative to discipline. RAMP monitoring consists of a five-point approach:

- Random drug screening and daily check-ins
- Peer support groups
- Support meetings (such as 12 step meetings)
- Outpatient therapy
- Return to work process and workplace monitoring

Services

- Assisting with communication to licensing boards and other sanctioning agencies
- Third party drug screening
- Confidential data collection to document maintenance of recovery
- Independent resource regarding treatment options for and recovery from impaired practice

The participants are responsible for all costs related to the program including the application fee, costs of evaluation, peer assistance group meetings and toxicology screens.

Case Managers

RAMP case managers are nurses and social workers who possess educational and clinical expertise in substance use disorders and mental health. Case managers:

- Provide participants with information and support
- Conduct a preliminary assessment
- Monitor participants compliance, progress in recovery and safety to practice
- Act as liaisons between all parties involved with the programs' participants
- Educate participants, employers and the community

Contact information for case managers is on the NJSNA website.

Peer Assistance Program

The Peer Assistance Program has been advocating for nurses and nursing practice since 1981. The primary activity of the Peer Assistance Program is nurse-led support groups for nurses with substance use disorders and mental illness. The peer groups are self-help, smoke free groups facilitated by nurses, who understand addiction and the recovery process.

The Peer Assistance Program also provides:

- Confidential 24 hour Peer Assistance hotline
- Advocacy for nurses with problems of impaired practice
- Information for nurses who need medical interventions

- Information on treatment facilities
- Educational programs to public about identification, intervention and referral

24 Hour Hotline 1-800-662-0108
Help is available 24 hours a day, 7 days a week

RAMP and Peer Assistance Program

The peer support groups are an integral part of RAMP. All participants are required to actively participate in peer support groups weekly and abide by the rules of the group. Participants are:

- Required to identify a “home” group to which they will be required to attend weekly
- Expected to make up missed meetings at another group
- Allowed two excused absences per year
- Expected to attend and participate in these meetings
- Financially responsible for the costs related to the peer meetings

Peer facilitators and RAMP staff will communicate on a monthly basis and weigh in on matters including returning to work and discharge.

Please note this is not a substitute for therapy, treatment or 12 step meetings.

Fees: The fee for the peer assistance program is debited monthly through your AOS account. If a participant is experiencing financial challenges, the peer assistance fee may be negotiated at the discretion of the peer support facilitator.

Group Changes: Participants must have the permission of their case manager and peer leaders prior to transferring home groups and must complete the “Home Group Change Form” and return it to their case manager.

Participants Rights and Responsibilities

Rights

As a participant in RAMP, you have the right to:

- Be treated with dignity and respect
- Have your privacy maintained in accordance with state and federal guidelines
- Timely communication with RAMP staff
- Accept or decline participation in any research
- Know the length of anticipated RAMP participation and expected completion date
- Refuse participation at any time and to be informed of possible consequences
- Be informed of costs involved with participation
- Know the name and qualifications of assigned RAMP case manager

Responsibilities

As a participant in RAMP, you are responsible to:

- Adhere to the terms of your RAMP monitoring agreement
- Maintain open, honest and timely direct communication with RAMP case manager, peer facilitator, healthcare provider, therapist and employer
- Submit all required/requested documentation in a timely manner
- Actively participate in program
- Complete all treatment recommendations made by RAMP
- Maintain your compliance with daily check-ins and testing when selected
- Ensure that your personal information is updated and accurate
- Absorb all financial cost incurred (e.g. lab fees, peer group fees, and initial application fee)
- Attend 12 Step meetings, if required by RAMP
- Refrain from nursing practice until granted approval by RAMP

Grievance Resolution

Participants should attempt to discuss issues directly with person (s) involved. If this is not possible, the participant should provide a written account of the issue directly to RAMP Director when necessary or as requested.

Release of Information

The release of information is a mandatory component of RAMP's monitoring program. The purpose of the release of information is to facilitate monitoring, recovery and return to safe nursing practice. RAMP case managers must be able to communicate with all individuals who support the participants' health and nursing practice. This includes, but is not limited to, primary care provider, pain management specialists, therapists, supervisor and peer facilitators.

RAMP may communicate with the NJBON in cases of noncompliance, by request of participant to support re-licensure and if a participant was referred to RAMP by the NJBON.

RAMP requests that participant sign releases to allow this exchange of information. Refusal to sign consent forms will lead to dismissal from RAMP. Release forms are available on the NJSNA website and upon request from case manager.

Privacy and Confidentiality

All personal information and health records maintained by the program will be kept non-public, which means it will not to be disclosed to the public but it may be known to the Board of Nursing and may be required to be shared with employers, treatment providers and other state boards of nursing.

Referrals

- Self - The nurse can contact RAMP prior to being confronted or be requested to do so by an employer, co-worker, friend, or family member
- Employer - An employer may refer a nurse in need to RAMP
- Board of Nursing - A Board of Nursing may refer a nurse to RAMP as a result of a complaint and/or discrepancies in a background check or profile
- Other - Family members, co-workers, and friends may refer a nurse in need to RAMP

RAMP receives referrals by phone and email. The intake case manager will begin the intake and determine category for RAMP participation.

Eligibility

Nurses are eligible to participate in RAMP who:

- Are identified as having their practice impaired by a physical, mental or addictive disease
- Are willing to refrain from practice and seek evaluation and treatment
- Agree to abide by a contract that sets the requirements for safe return to practice

Eligibility may also be determined by the licensing board. Those licensees with disciplinary action may still be monitored for maintenance of recovery.

Enrollment and Intake Process

Intake Interview - The nurse participant will have an interview over the phone with a case manager. The case manager may require the nurse participant to complete the interview in person.

Enrollment Paperwork - The nurse participant will receive an enrollment packet that must be completed. Once completed, the packet, along with all signed documents will be returned to RAMP. The document packet may include, but not limited to, the following forms:

- RAMP Application
- RAMP Release of Information
- RAMP Monitoring Agreement
- Legal Representation Form
- Financial Responsibility Form
- Board of Nursing documentation including (but not limited to) Private Letter Agreement
- Any admission or discharge summaries requested by RAMP

Drug Screening – RAMP will also mail an Affinity Online Solutions (AOS) enrollment packet to the participant. Once she or he receives this packet, they must activate their account and begin calling in daily.

Peer Groups - Participants are required to attend peer groups immediately. Case managers will assist the participants in selecting a peer group during the intake. Once selected, participants are required to contact the peer facilitator prior to attending first meeting.

A complete list of peer groups and contact information for the peer facilitators is on the NJSNA website at <http://www.njsna.org/?9998>.

Policy for Changing Peer Groups - In order to ensure continuity of the relationship with RAMP participants and peer leaders, a participant, once assigned a peer group is to remain in their peer group unless an unforeseen event occurs, such as employment or change of residence. The following is the order and process for changing groups. This must be followed PRIOR to a participant changing groups:

- 1- Participants are to FIRST notify their assigned Case Manager if a change in peer group is needed. The participant is to discuss the reasons and rationale for the peer group change with their Case Manager.
- 2- Participant is to discuss the change with the current Peer Leader after discussion with Case Manager.
- 3- The Case Manager and current Peer Leader will discuss if change is beneficial to the well-being of the participant. If approved, the potential accepting Peer Leader will be contacted for approval by the Case Manager. (Please note: A change in groups may necessitate a change in Case Manager as Case Managers are assigned by Peer Groups).
- 4- Once approved by Case Manager and both the current and potential Peer Leader, then the change may occur.

Orientation Intake Conference Call- There will be a one-time mandatory orientation program with Annemarie Edinger, RAMP Communications Coordinator. Once you receive your RAMP paperwork, please call Annemarie Edinger at 609-883-5335 ext. 115. Annemarie will review your entire packet with you and answer any questions that you may have regarding participation in the program.

Terms of Participation

The terms of participation are laid out in the monitoring agreement, agreement revisions and this handbook. The following are general guidelines related to the monitoring agreements. For specific questions nurse participants should refer to their monitoring agreement and contact the RAMP case manager.

As a participant, you will be required to sign a monitoring agreement. The monitoring agreement outlines your requirements as a RAMP participant. These requirements may include, but not limited to, the following:

- Peer Groups - Weekly attendance
- For participants with a substance use disorder: Attendance in 12 step program including an original 90 meetings in 90 days, then a minimum of 3 meetings per week
- Adequate treatment at a location approved by the RAMP staff
- A comprehensive evaluation if requested by RAMP or Board of Nursing
- Follow-through on all recommendations made by the evaluator and/or treatment providers
- Daily check-in's and submitting to testing when requested. Screens are randomized across a year
- Abstinence from addictive substances including alcohol unless approved by RAMP for a specific reason
- Monthly reporting including self-reports, 12-Step attendance sheets, therapy evaluation report (as long as therapy continues), employer evaluation report (if working in healthcare), and pain management report
- Submit all controlled medication prescriptions in AOS monthly and include a copy of the prescription or pharmacy report.
- Abstention from practice as a nurse until granted approval by RAMP staff with the return to work process

If you have questions, please refer to your monitoring agreement and your case manager.

Please note that refusal to participate in any portion of the monitoring agreement and recommendations of RAMP or the evaluator is considered noncompliance and reportable to the NJBON. If any part of the monitoring agreement is found to be invalid all remaining parts of the document will remain valid.

Compliance with RAMP

Full compliance with RAMP means that all parameters of the monitoring agreement and RAMP policy. Please review with case manager should there be any questions.

Non-compliance with any parameters set in the Board of Nursing orders, Private Letter Agreement, RAMP monitoring agreement or RAMP policy will be reported to the NJBON through the Director or their designee. Failure to remain compliant with any of the parameters may lead to dismissal from the program.

Communication

RAMP participants are responsible for maintaining communication with case manager, peer facilitators, employers, and treatment providers. Participants are required to have verbal communication with RAMP minimally every 90 days. Participants are required to respond to communication from RAMP such as email, telephone calls, and AOS messages within 24 hours. Participants are required to have their own personal email address. Participants are required to notify case managers in the event of:

- Change in address/phone number/email.
- Change in health care provider (s)
- Change of employment/supervisor
- Receipt or use of any prescriptions or substances that are known or may lead to abuse
- Travel plans

Failure to inform RAMP of any changes within 48 hours may result in the extension of participation, report to the NJBON and/or dismissal from RAMP.

Monthly Reporting

A key aspect of monitoring is the monthly reporting by participant, peer facilitator, employer, health care providers and therapists. The following reports must be received by the 5th of the month for the previous month.

Report Name	Frequency	Method of Submission
Self-Report	Monthly	AOS by participant
Attendance Reports	Monthly	AOS by Participant*
Peer Support Report	Monthly	AOS by Facilitator
Controlled Prescription Medications	Monthly	AOS by participant & upload documentation i.e. prescription or pharmacy report

If applicable:

Therapy Evaluation	Monthly	Completed by therapist; submit by fax
Employment Report	Monthly	Completed by supervisor; submitted online to AOS
Pain Management Report	Monthly	Completed by Pain Management Practitioner; submit by fax

* RAMP participants are required to maintain completed hard copies of the 12-Step Meeting Attendance reports, to include meeting dates and initials - verifying meeting attendance for the last six months. Participants may be asked to produce these documents by their case manager. Forms are located on the NJSNA website at <http://www.njsna.org/general/custom.asp?page=723> and on the Affinity web site under My Documents.

Confidential Fax Number 609-883-1544

Drug Screening

Participants must establish an account with AOS, for required drug screens and reporting. At the time of enrollment, the participants will receive an AOS packet from RAMP that includes instructions to use the system and Chain of Custody (COC) forms. Participants will be required to fund their account to pay for at least one month of screens as well as Peer Group meetings.

Participants must provide specimens on the day requested and may be asked to provide urine, hair, blood or nail samples. **RAMP does not excuse missed tests.**

Chain of Custody - Chain of Custody or COC forms are provided to assure the validity of the specimen and for the protection of all involved in the screening process. It is signed by the participant, the collector at the collection site and the lab personnel at the lab when it is received. For the participants' protection, please be sure that protocol is followed and that the test is sealed and initialed when you submit the sample.

What does an “Abnormal” test result mean?

An abnormal result usually means that the creatinine and/or specific gravity of the specimen are below or above normal limits. It can also mean the temperature and /or color is outside of normal limits.

What does a “Dilute Urine” test result mean?

Dilute urine means that both the specific gravity and the creatinine are above or below normal limits. If a specimen is dilute there will be a concern that the participant has attempted to alter the results in some way. This is considered a positive screen.

If a participant has dilute urine they will be required to submit to further drug screening, this may include a hair follicle screening. This is not negotiable and the nurse participant will need to ensure there are available funds in the AOS account to cover the additional expense.

Products to be aware of:

- **Poppy seeds and hemp seeds/oil products** contain substances that may cause a positive drug test result
- **Alcohol-containing products** will cause a positive drug test. Clients must abstain from alcohol including over-the-counter medications containing alcohol, such as liquid cold medications, alcohol-based mouthwashes, and food containing alcohol
- Certain hand sanitizers have also been known to produce a positive test

The use of any of these above mentioned will **not** excuse a positive test.

RAMP works with each participant and employer on an individual basis to put appropriate limits and screens in place to assure safe practice. The decision to return to work is a collaborative process, between the participant, their peer facilitator and peer group, therapist, case manager and the RAMP program director, to ensure the safety of the public and the participant.

Step 1: Compliance with RAMP

Prior to returning to work the following must have been completed:

1. All in-patient, intensive out-patient, and weekly out-patient treatment is completed successfully and there is enrollment and compliance in a biweekly individual therapy.
2. Demonstrate a period of sobriety/strong recovery/stability after treatment is completed (minimum of 1 month after discharged from treatment).
3. Compliance with daily check-ins.
4. The participant demonstrates full compliance with drug testing. A record of calling and testing for 90 days is expected. All drug screens must be negative, there can be no missed calls and participants must test when they are called.
5. Where required a minimum 90 (12 step) meetings in 90 days, with sponsorship, is completed and documented with RAMP. There after the participant is attending a minimum of 3 meetings weekly.
6. All monthly reports are filed in a timely manner
7. Participants must be free of any controlled substances, unless under the care of a Board Certified Pain Management Specialist, has been evaluated and deemed safe to practice by RAMP. All other avenues for pain relief must be explored and documented.
8. Participants cannot work while taking medication assisted treatment such as Methadone, Suboxone and other drugs in this class.

At this point, contact your case manager to obtain permission of your intention to speak with your peer group about working as a nurse.

Step 2: Peer Facilitator and Peer Group Input

The next step in the return to work process is to discuss return to work with the peer facilitator and peer group:

1. Ask for feedback and discuss readiness to return to work.
2. Complete the return to work check list, which is found on the NJSNA website.

This step may require several meetings to complete the discussions.

Step 3: File review with your Case Manager

Upon completion of steps one and two, alert your case manager by e-mail of your progress and request a formal file review. At this time your case manager will review your file for compliance, which may take up to two weeks to complete.

After the review is complete, the participant will be notified whether or not they are approved to return to work. If they are not eligible to return to work, they will be advised what they must do to be considered eligible.

At this time, the participant will be notified of any additional limitations on their practice. The participant and the case manager will discuss appropriate nursing settings and positions.

Step 4: Job Hunting, Interviewing and Accepting a Position

Once the participant is approved to return to work, they may interview for positions keeping in mind any restrictions/limitations on practice.

Prior to accepting a position the participant must discuss their RAMP enrollment and provide a copy of their monitoring agreement to the nursing supervisor.

When an offer of employment is made:

1. Contact your RAMP case manager for final approval of position.
2. Submit signed release allowing RAMP to speak with supervisor.
3. Send your case manager:
 - A. Supervisor's full name and credentials
 - B. Supervisor's telephone number and email address
 - C. Organization's complete address, including zip code
4. Your case manager will call your supervisor and discuss the offer and confirm that they are aware of your enrollment in RAMP.
5. At this time, a contract revision will be completed and sent to the participant. The participant will assure the hiring supervisor signs the contract. The participant will send back the signed revised contract to RAMP.

Step 5: Working while Monitored

The participants are responsible for:

1. Understanding and abiding by the work restrictions
2. Providing supervisor's email address for completing the monthly employment evaluation for assigned due date.
3. Checking in daily and submitting to random testing when called. A participant who is a No Show for a test is required to immediately stop working and will be required to remain out of work until the next random test is chosen. ****Self-testing will not be accepted****
4. A positive test requires participant to IMMEDIATELY be removed from work

Failure to adhere to this policy may result in the loss of permission to work and/or a report to the NJBON.

Restrictions on Employment

RAMP enforces restrictions on practice and employment to assure safe practice.

The participant monitored by RAMP will agree to:

- Not function in an autonomous or unsupervised role **
- Not work more than 40 hours a week or Not more than 3 consecutive 12 hour shifts.
- Not work longer than 12 hours a shift
- Not work nights unless healthcare provider authorizes and the RAMP case manager determines there is adequate supervision
- Not work for multiple employers or engage in self-employed practice
- Not accept employment with registries, staffing agencies or a pool position
- Not float or rotate to other units
- Not work overtime
- Not have access to controlled medications **at least** the first six months of work unless otherwise agreed

No Access to Controlled Substances refers to, but is not limited to:

- Not counting or administering controlled substances
- Not having access to narcotic keys or codes for automated dispensing systems
- Not witnessing wastage, signing pharmacy receipts for controlled substances, or having the ability to access storage areas where controlled substances are stored
- Not calling, faxing, or otherwise electronically authorizing prescriptions for controlled substances

Restrictions on controlled substance will be lifted when participant, peer facilitators, therapist, employer and case manager are in agreement. Additional monitoring parameters may be put on place when this restriction is lifted.

Additional drug screens and hair follicle screens will be added to testing schedule during the first year of work.

RAMP case managers must always speak to the employer prior to participants resuming work or changing employers.

**** Supervisor must be on premises. Supervisor must be a registered nurse.**

Controlled Substances

Participants must abstain from the use of all potentially addictive substances including:

- Alcohol and alcohol containing substances
- Illicit substances
- Controlled substances (with or without prescription)
- Uncontrolled substances that contain alcohol or other abusable substances (prescription or over-the-counter medications)

Medications used to treat psychiatric disorders are not included in this list and should not be stopped unless under the direction of a healthcare provider.

Prescriptions

For all new or changed prescriptions of controlled substances: Participants must notify their case manager about the prescription within 24 hours of receipt of the prescription and upload a copy of prescription into AOS.

Each month participants are responsible for listing all controlled substances in AOS. When a prescription is filled or refilled a prescription report must be submitted in AOS and include a start and end date, physician's name, dosage, pharmacy name, and either the corresponding prescription, pharmacy report or picture of medication label. This must be updated with every filled or refilled prescription for controlled substances; otherwise participant will be considered noncompliant if they test positive and if currently working as a nurse, will be removed from work.

If submitting a picture of the prescription bottle, the picture must include the full label including your name, doctor's name, name of the drug, full dosage information and date filled.

The Medication Guide for a Safe Recovery

Please reference **The Medication Guide for a Safe Recovery** for a comprehensive listing of potentially addicting medications, substances containing alcohol, and safe alternatives.

<http://paulearley.net/download/pamphlets/8-medication-guide-for-a-safe-recovery/file>

RAMP recommends that participants work with their healthcare providers to find an alternative to taking potential abusable substances.

Chronic Pain Management

A participant in RAMP requiring chronic pain management must have the following:

- Have a board certified **Pain Management Specialist** who is the only prescriber of pain medications; the specialist will also:
 - Provide RAMP with an evaluation including history and alternatives tried in the past
 - Provide regular reports regarding the participant

- Agree to comply with a **Pain Management Plan** which is developed with the Pain Management Specialist and/or the Addiction Specialist. The Pain Management Plan must include:
 - Identification of pain precipitants and stressors
 - Use of non-pharmacological, non-opioid analgesic interventions to manage the pain
 - The inclusion of adjunctive approaches to the management of pain, that may include acupuncture, massage, physical therapy, and other appropriate measures
 - Clear indications for when the client shall use the mood/mind altering medications
 - A plan to handle break-through pain

Participants with conditions requiring the long-term use of mood/mind altering medications must sign the Chronic Pain Management Agreement. The Chronic Pain Management Agreement outlines how the client facilitates his or her health care between a pain management provider, addiction specialist, neuropsychologist, and therapist.

A participant who signs the Chronic Pain Management Agreement must comply with all requirements set forth in the Chronic Pain Management Plan.

For all new or changed prescriptions of controlled substances: Participants must notify their case manager about the prescription within 24 hours of receipt of the prescription and upload a copy of prescription into AOS.

Each month participants are responsible for listing all controlled substances in AOS. This includes a start and end date, physician's name & dosage. This must be updated every month, otherwise participant will be considered noncompliant if they test positive and if currently working as a nurse will be removed from work.

Medication Assisted Treatment

RAMP **does not support** the use of medication assisted treatment (including methadone, buprenorphine and drugs in this class) for maintenance or treatment of addiction except in the detoxification phase.

RAMP participants are restricted from returning to work while on these medications.

Travel and Relocation Policies

Travel Policy

It is required that the participants alert case managers of any travel plans. A *monitoring interruption request* is submitted through the AOS website and must include the dates and locations of travel. It is the participant's responsibility to follow up on request with case manager.

- Participants are required to check in daily
- Participants must be prepared to submit to a drug screening every day
- It is the nurse participant's responsibility to find a suitable lab at their destination prior to travel and bring a COC forms on their trip.

Unless participants are out of the United States or on a cruise, they may be called to test.

12-step meetings remain mandatory for participants with a substance use disorder, even if you are on a cruise or out of the country. The discontinuation of 12-step meetings has been identified as a primary relapse antecedent for persons in recovery.

Relocation Policy

If a participant is moving out of New Jersey, it may be possible to transfer to another state's monitoring program. The participant should contact the state's monitoring program and RAMP case manager prior to the relocation.

The transfer may be approved by the RAMP case manager if the participant is accepted in the similar program.

If transferred, it will be the responsibility of the participant to facilitate that quarterly reports are sent to RAMP of their compliance.

Failure to alert RAMP of the relocation in a timely manner may result in a dismissal from the program.

Relapse and Treatment

Treatment

If treatment is required, the case manager will facilitate the admission to appropriate treatment in a RAMP approved treatment program.

Emergent issues are always referred to the closest emergency room. Should the case manager believe that a participant may be at medical or psychiatric risk and the participant is non-cooperative, RAMP staff may call 911 in the participant's local area for assistance.

Participants may be required to submit to an evaluation for treatment, failure to do this or to follow evaluators recommendations may result in a report to the licensing board and/or dismissal from RAMP.

While in treatment, the participant may not work as a nurse.

The participant will be asked to voluntarily inactivate their nursing licenses with an *Inactive Letter* to the NJBON while in treatment. This is not a disciplinary action against the license and will be activated once treatment is complete.

Relapse

In the event of a relapse, the participant must contact their RAMP case manager immediately. If working as a nurse, then they must stop working immediately.

They will be required to sign a new RAMP monitoring agreement and voluntarily inactivate their nursing license.

The nurse will be required to enter appropriate, recommended treatment and begin a new 90 meetings in 90 days.

The case managers will assist nurses in finding appropriate treatment programs

Evaluations

New participants in RAMP will be sent for an evaluation to a RAMP approved evaluator when the need for immediate treatment is not identified by RAMP case manager. The case manager will provide the participant with the names of the evaluators when appropriate.

In order to provide a comprehensive evaluation, the evaluator is provided with pertinent information including but not limited to: NJBON documents, drug screening results and compliance information. The participant should bring copies of any documents relating to the incident which led them to RAMP.

Admission to inpatient or intensive outpatient treatment program may take the place of the evaluation.

Refusal to participate in the evaluation process may lead to dismissal from RAMP and report to the Board of Nursing. The participants are responsible for the costs related to the evaluations.

Successful Completion

The monitoring agreement including the length of participation in RAMP is determined by specific situation, recommendation of evaluators and the requests of the NJBON. The standard length of monitoring is five years. The participant is eligible for completion of your monitoring period by the end date of the agreement.

However, if a participant is not progressing with the recovery process the monitoring period end date may be extended and completion delayed. RAMP reserves the right to extend the contract in the case of relapse and/or noncompliance.

To facilitate the discharge process it is recommended that the participant contact their case manager one month prior to anticipated completion date, to ensure all required documents and screening have been completed.

The participant will be informed when they are no longer required to check in for random toxicology screening. DO NOT STOP calling in until you receive notice from your case manager.

It is recommended that you keep the completion letter in a safe place for future evidence of your successful completion. You may also want to provide a copy of the letter to your employer.

Noncompliance and Dismissal

Noncompliance with Requirements

A participant who demonstrates noncompliance with the requirements of the monitoring agreement and rules of the program will be reported to the NJBON. Noncompliance includes but is not limited to:

- Failure to regularly attend peer groups
- Failure to submit to drug screening
- Failure to submit necessary reports
- Working in a non-approved nursing position
- Taking non-approved controlled substances
- Failure to follow treatment recommendations

Dismissal from RAMP

Dismissal from RAMP may occur for the following reasons but not limited to:

- Habitual noncompliance with any aspect of the monitoring agreement requirements
- Deemed to not be progressing satisfactorily in recovery
- No longer "willing" or "able" to comply with monitoring agreement
- Refusal to cease practice (continuing practice despite not being authorized by the program)
- Failing to inform another licensing board of their participating and practicing or attempting to practice in that jurisdiction

Withdrawal from RAMP

A participant may withdraw from RAMP at any time by notifying your case manager in writing.

Once a participant withdraws from RAMP or is dismissed, RAMP will report this to the NJBON and their employer (if working as a nurse).

Glossary

12 Step Programs: These are self-help groups (AA, NA, etc.) governed by 12 Steps and 12 Traditions that provide a way of thinking and managing life events that are positive and productive. Attendance at 90 meetings in 90 days (90/90) is required if you have a Substance Use Disorder. Sponsorship is also a suggestion by AA etc., and a requirement for RAMP. Participation in a 12 Step program is the best documented way to maintain recovery.

Alternative to Discipline (ATD): A voluntary, non-public, non-disciplinary program, which offers an alternative to traditional discipline authorized by statute and rule by the Board of Nursing. (NCSBN 2011)

Alternative to Discipline and RAMP participation: Should you have a disease or condition that impairs your ability to practice safely and you are willing to enter RAMP and participate in the monitoring program the NJBON will keep this private and include you in the ATD committee of the NJBON. This is a five year program that assists nurses in developing life skills, disease management techniques that assure recovery and decreases the chance of relapse. It is not treatment. Please note that the NJBON does not recognize any monitoring program except RAMP. With that understanding, should you still choose another monitoring program; the nurse will no longer be eligible for ATD. The participant will then receive a public, permanent order against your license.

Drug Diversion: the obtaining of drugs illegally; the misappropriation of drugs from a patient, health care employer or other source. (NSCBN 2011)

Inactive License: A participant may be asked to temporarily inactivate their license. This is done by signing the provided letter stating that the participant and case manager will discuss the best time to re-activate the license. The reactivation process should take about five days and is facilitated by your case manager.

Public Order (Consent Order or Order of Suspension or Revocation): A public order by a licensing board is a public action that cannot be removed from your license. Since it is a public action anyone can petition the board for the information surrounding the suspension and receive all of the details about it. This includes consent orders, orders of suspension or revocation. This may lead to placement on the National Practitioners Data Bank (NPDB) and/or the Office of the Inspector General (OIG) list.

Private Letter Agreement (PLA): This is a letter you may receive when the NJBON offers you the opportunity to participate in Alternative to Discipline (ATD). This may be a result of a complaint filed against you. The PLA outlines requirements to participate in ATD. Should you choose to ignore the letter or choose not to cooperate with them, you may be referred for disciplinary action against your license.

RAMP Monitoring Agreement: This is the document that is signed upon enrollment into RAMP. It indicates the requirements that must be met for compliance in the program. Should compliance not be maintained a negative report may be made to the NJBON. Further noncompliance may result in an action against your license.

Recovery Minded Thinking: RAMP determines Recovery Minded Thinking by the behaviors of the participants. Your recovery must be the primary focus and is demonstrated by participation and compliance with RAMP.

Reinstatement: If your license has been suspended or revoked, you must petition the NJBON through a written letter and request the reinstatement of your license. This letter should be sent to your case manager who will forward it to the BON along with a letter of RAMP's support. [See Appendix A](#). You will receive a reinstatement packet from the NJBON and when you have accurately completed the packet and returned it to the NJBON they will give you further direction that you must follow to be reinstated. Any monies owed to the NJBON must be paid in full or a payment arrangement made for your license to be reinstated. Should you have a suspended or revoked license for longer than 5 years, you will be required to retake your NCLEX Exam.

Substance Use Disorder: The state of dependency on mind altering chemicals with continued use that persists despite negative consequences. (NCSBN 2011)

Resources

National Council of State Boards of Nursing, Substance Use Disorder in Nursing a Resource Manual and Guidelines for Alternative and Disciplinary Monitoring Programs. 2011 ISBN 978-0-9826465-6-4.

Smith, Linda L., Recovery Maintenance Workbook for Nurses, Psychosocial Press, Madison, CT, 2004. ISBN 1-887841-54-7.

New Jersey Board of Nursing

<http://www.njconsumeraffairs.gov/nur/Pages/default.aspx>

National Council State Boards of Nursing

<https://www.ncsbn.org/index.htm>

The Substance Abuse and Mental Health Services Administration

<http://www.samhsa.gov/>

The New Jersey Department of Human Services

Division of Mental Health and Addiction Services

<http://www.state.nj.us/humanservices/das/home/index.html>

Division of Disability

<http://www.nj.gov/humanservices/dds/home/index.html>

The Medication Guide for a Safe Recovery

<http://paulearley.net/download/pamphlets/8-medication-guide-for-a-safe-recovery/file>

Alcoholics Anonymous

www.aa.org

Narcotics Anonymous

www.na.org

Al-anon

www.al-anon.alateen.org

National Alliance for the Mentally Ill (NAMI)
Helpline: 1-800-950-NAMI [6264]

www.nami.org

American Association of Nurse Anesthetists Peer Assistance

<http://www.aana.com/resources2/peer-assistance/Pages/default.aspx>

An updated list of resources is on the New Jersey State Nurses Website at www.njsna.org.

Appendix A

REINSTATEMENT OF LICENSES – SUSPENDED

FOR PARTICIPANTS:

Write an informal letter outlining what you have done to come into compliance with RAMP and/or what you have done to establish your recovery. (Treatment, AA/NA, Sponsor, Peer Support etc.)

1. Participant letters are **addressed to Ms. Deborah Zuccarelli** and **emailed to Case Manager**

Deborah Zuccarelli, BSN, RN
New Jersey Board of Nursing
124 Halsey Street, 6th Floor
PO Box 45010
Newark, NJ 07101

2. **DO NOT MAIL TO THE BOARD OF NURSING**
3. **EMAIL** your letter to your case manager no later than the 10th of the month.
4. If reinstatement is granted, participant will receive an **Order of Reinstatement** in the mail in approximately 2-3 weeks.
5. Participant will sign the **Order of Reinstatement** and make **three** copies.
6. Participant will return the signed **Order of Reinstatement to Deputy Attorney General Susan Carboni in Newark**

D.A.G. Susan Carboni
Division of Law
PO Box 45029
124 Halsey Street, 5th Floor
Newark, NJ 07101

7. Participant will send a copy of the signed **Original Order of Reinstatement** to RAMP.
8. Participant will go to the BON Web site:
<http://www.njconsumeraffairs.gov/nur/Pages/applications.aspx>, print and complete the **reinstatement application**. Make one copy for your personal file.
9. Participant will send a copy of the signed **Order of Reinstatement** and the original **reinstatement application to Sameerah Bond at the BON**

Sameerah Bond
New Jersey Board of Nursing
124 Halsey Street, 6th Floor
Newark, NJ 07102

10. Participant will keep a copy of the signed **Order of Reinstatement** and a copy of the **reinstatement application** for your personal file.

11. The license will be sent to participant from the BON by mail.

This entire process could take up to 2-3 months.

In order to request reinstatement of license, participant must be 100% compliant with monitoring agreement including check-ins, drug screens, peer group attendance, monthly reporting and fees.