



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

Professional Health Monitoring Programs
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Voluntary Recovery Program

Objective: The Voluntary Recovery Program (VRP) provides a method by which licensed health care professionals suffering from a mental or physical disorder can be directed to appropriate treatment and receive monitoring to ensure that they remain capable of practicing safely. The program offers the eligible professional an alternative to board disciplinary action from becoming a permanent part of his or her professional licensing record. However, the VRP's non-public format is a privilege and not a right; therefore, a licensee declining to cooperate with the VRP will exclude the licensee from further VRP consideration.

Eligibility Requirements: To be eligible for VRP participation, a licensee must:

1. Complete an evaluation by a provider approved by the VRP and have the assessor determine that a diagnosed mental or physical disorder exists.
2. Fully comply with the treatment plan recommended by the VRP-approved provider(s) and approved by the VRP.
3. Enter into a VRP Consent Agreement, which is approved by the licensing board, providing that disciplinary action, including suspension or revocation, will be deferred so long as the licensed professional adheres to the VRP Consent Agreement.
4. Successfully complete at least three years of monitoring under the VRP Consent Agreement that includes VRP supervision of the licensee's treatment and recovery process, work performance, professional support group attendance, abstinence from prohibited substances, and random drug testing.

Terms and Conditions for VRP Participation: To enroll and maintain good standing in the VRP, the licensee must:

1. Sign the Participation Cooperation Form; complete the Personal Data Sheet.
2. Complete a VRP-approved assessment and/or treatment.
3. Comply with the recommendations made by the VRP-approved treatment provider.
4. Sign a VRP Consent Agreement with the licensing board deferring formal disciplinary action for a period of no less than three years.

5. If specifically requested by the VRP to not practice as a licensed professional, the licensee must agree not to accept or continue employment in any position requiring licensure until cleared to do so by the VRP case manager and a VRP-approved provider.
6. When approved to return to licensed practice by the VRP, the licensee:
 - A. Shall not work in any practice setting without workplace monitoring as required by the VRP.
 - B. Shall comply with all practice limitations.
 - C. Shall not do any of the following until specific written permission is granted by the VRP case manager:
 - (1) Practice nursing in any capacity that involves the administration of controlled substances (typically for a period of no less than six months upon returning to licensed practice);
 - (2) Function as a supervisor;
 - (3) Practice in a private practice setting;
 - (4) Practice in an emergency room, operating room, intensive care unit, cardiac catheterization laboratory, or coronary care unit; or
 - (5) Practice as an agency nurse.
7. Completely abstain from the use of all controlled substances, caution legend (prescription) drugs, mood altering substances or substances of abuse including alcohol in any form, except under the following:
 - A. The licensee is a bona fide patient of a licensed health care practitioner who is aware of the licensee's impairment and participation in the VRP;
 - B. Such medications are lawfully prescribed by the licensee's treating practitioner and approved by the VRP case manager;
 - C. The licensee provides the VRP, within 48 hours of receiving the prescription, written notification of the prescription including name of prescribing practitioner, illness or condition diagnosed, the type, strength, amount and dosage.
8. Abstain from the use of marijuana, medical marijuana, medical marijuana extract, synthetic marijuana, cannabinoids, cannabichromene (CBC), cannabidiol (CBD), cannabidiolic acid (CBDA), cannabidivarin (CBDV), cannabigerol (CBG), cannabinol (CBN), Delta-8 Tetrahydrocannabinol (Delta-8 THC), Delta-9 Tetrahydrocannabinol (THC), tetrahydrocannabinolic acid (THCA), tetrahydrocannabivarin (THCV), and terpenes unless licensee is a bona fide patient of a licensed health care practitioner who is aware of the licensee's impairment and participation in the VRP.

9. Avoid all products containing alcohol including but not limited to over-the-counter medications (e.g. cough syrup), mouthwash, hygiene products, topical gels or medications, foods or liquids containing alcohol (e.g. vanilla extract, kombucha).
10. Abstain from all substances of abuse including but not limited to Dextromethorphan, Kratom, Kava, Khat, Ayahuasca, Peyote, Salvia.
11. Avoid all foods containing poppy seeds.
12. Undergo random drug testing as directed by the VRP.
13. Arrange for submission to the VRP of regularly scheduled progress reports by treatment provider(s) and/or the workplace supervisor or monitor.
14. Submit monthly verification of attendance at required support group meetings (number of meetings as recommended by the VRP-approved treatment provider).
15. Enroll in a peer assistance program when available and requested by the VRP.
16. If requested by the VRP, the licensee will agree to inactivate the licensee's professional license and maintain an inactive license until the VRP provides the licensee with written permission to pursue reactivation.
17. Pay all costs incurred in complying with VRP participation, including but not limited to undergoing requested evaluation(s), treatment, the reproduction of treatment or other records, drug testing and any subsequent reanalysis of specimens and/or medical review officer consultation(s) of non-negative drug test results.

Ineligible for VRP participation include:

1. Licensees convicted of, pleading guilty, or nolo contendere to either a felony or a misdemeanor under the Controlled Substance, Drug, Device and Cosmetic Act.
2. Licensees with a history of practice problems indicating significant patient harm.
3. Licensees who have been involved in the diversion of controlled substances for the primary purpose of sale or distribution.
4. Licensees who have committed sexual boundary violations.
5. Licensees who have failed to successfully complete a similar program in another jurisdiction.
6. Licensees who previously declined or failed to cooperate with the VRP.