

HealthProCHOICES

A newsletter for participants in the Health Professionals' Services Program (HPSP)

January 2020



"Let your smile change the world, but don't let the world change your smile." - Connor Franta

Staffing Updates

After six years with HPSP, Monitoring Programs Director, Christopher Hamilton, PhD is returning to state service as a Behavioral Health Business Analyst in the State Court Administrator's Office of General Counsel. In this role, Christopher will provide leadership and direct policy in how Oregon's state courts interact with individuals with behavioral health conditions. HPSP will be in the VERY capable hands of the monitoring leadership team of Drs. McBeth and Gustafson, Jenn Leddin, LMSW, CADC II, and monitoring's Operations Manager Tina Mewhinney.

- Monitoring Policy Manager - Scott McBeth, PhD. Scott has been with HPSP for over five years as an Agreement Monitor and most recently working in enrollment.
- Monitoring Clinical Manager - Jenn Leddin, LMSW, CADC II. Jenn has been with HPSP for over a year with a wealth of clinical knowledge.
- Monitoring Operations Manager - Tina Mewhinney. Tina has been with HPSP for nine years. Tina is point for all monitoring operational aspects including toxicology.
- Senior Vice President Clinical Operations - Eric Gustafson, Psy.D. Eric has been with the company for 24 years and will support HPSP.
- Drs. Bahl and Autry remain in their Medical Director and Consulting Psychiatrist roles.



Scott McBeth, PhD



Jenn Leddin, LMSW, CADC II



Tina Mewhinney

Saturday Phone Coverage

With Christopher's departure, Saturday phone coverage will be provided by Tina Mewhinney with back-up by Jenn Leddin and Scott McBeth. Tina can be reached at (503) 802-9866.

HPSPMONITORING.com is Now Ready

In follow-up to our spring announcement and reminder last month, HPSPMONITORING.com is up and running. The website can be reached at: <https://www.hpspmonitoring.com> and the new generic email is: hpsp@ibhsolutions.com. Stop by and visit the new site!



Health Professionals' Services Program
[hpspmonitoring.com](https://www.hpspmonitoring.com)

888.802.2843

Upcoming Testing Holidays

The following Oregon observed holidays are test exemptions days on which you do not need to check to see if you need to test:

- Martin Luther King, Jr. Day – Monday, January 20, 2020
- President's Day – Monday, February 17, 2020

Upcoming Events

IDAIA 2020

The next **International Doctors in Alcoholics Anonymous** will be August 5-9, 2020 in Spokane, Washington. For more information please visit www.idaa.org.

Seasonal Affective Disorder (SAD)

Seasonal affective disorder (SAD) is a depression that occurs during a particular season of the year. Most people with SAD are depressed during the fall and winter, when the days are shortest. Their depression disappears in the spring and summer. A less common type begins in late spring or early summer. Changes in the amount of daylight may be the cause of SAD.

Although many people say they get the "blues" in the winter, a person with SAD has much more difficulty coping during this season. Like other forms of depression, SAD interferes with daily life. Overcast days can make a person with SAD feel worse. People with SAD have mild to moderate depression.



SAD can affect anyone, although women are approximately 1.5 times more likely to develop SAD than are men. Those most affected are people in their late teens, 20s, and 30s, with the majority women in their 30s. Older adults are less likely to develop it. It is more common in northern latitudes and extreme southern latitudes. The depression is frequently moderate to major. SAD sufferers frequently have other family members with mental illness, such as depression.

Varying levels of the neurotransmitter serotonin are believed to play a role in SAD. The sleep hormone melatonin, which has been linked to depression, also may play a role. The body makes more melatonin in the dark, so the shorter, grayer days of winter boost levels of melatonin.

The symptoms of SAD can be confused with symptoms of other illnesses, including hypothyroidism and viral infections such as mononucleosis.

People with a mild case of SAD can ease symptoms by increasing the time they are exposed to daylight during the day. Spending time outdoors each day and getting regular outdoor exercise are two effective methods to combat SAD. For more severe cases, doctors may prescribe light therapy and possibly antidepressants. Light therapy involves exposure to very bright, full-spectrum fluorescent light for a certain amount of time each morning.

What to Do

During the fall and winter, try to get regular exercise and spend time outside each day. Rearrange the furniture in your home and workspace and open the blinds or curtains to take advantage of as much sunlight in the fall and winter as possible. Talk to your doctor if you have signs or symptoms of SAD significant enough to interfere with daily life. Your doctor can refer you to a mental health professional trained to treat patients with SAD.

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