NC Managing Partners Summit

8:30 a.m. - 9:00 a.m.  ■ Registration

9:00 a.m. - 10:30 a.m.  ■ Law Is a Buyers Market

Jordan Furlong, is a lawyer and leading analyst of the global legal market and forecaster of its future development. Author of the Law21 blog, Evolutionary Road: A Strategic Guide to Your Law Firm’s Future and Law is a Buyer’s Market. Furlong will lead the audience through discussions on topics such as:

- Is the traditional law firm business model dead?
- How can we build a robust multi-generational law firm?
- How do we serve the 21st century client ethically and efficiently?

*Jordan Furlong, Legal Market Analyst and Forecaster, Principal, Law21*

10:30 a.m. - 10:45 a.m.  ■ Break

10:45 a.m. - 12:00 p.m.  ■ Succession Planning, Firm Transition and Growth Strategies

The statistics are alarming:

- 400,000 lawyers in the United States are 62 and older
- 30 – 40% of actively practicing lawyers are at the age and stage where they are beginning to retire or to contemplate retirement
- 63% of law firm partners, aged 60 or older, control at least ¼ of their firm revenue
- Most law firms do not have succession plans in place.

Is your firm prepared for your most active rainmaker to retire? This program will guide you through the challenges to succession planning, a deep dive into the succession plan developed by a southeast regional mid-size law firm along with best practices for your firm to develop a successful model to transition lawyers and clients through the process. We will also discuss growth and hiring trends for law firms, along with innovative growth opportunities for today’s law firm.

*Tom Lenfestey, lawyer and owner of The Law Practice Exchange*

*Julie Beavers, Director of Recruitment and Professional Development with Ward & Smith*

*Dan Atcheson, Executive Director at Special Counsel*

*Lisa Angel, President and Owner of Rosen Law Firm*
Networking Lunch

What Is Your Firm’s Response to a Colleague in Need?

The ABA and Hazelden Foundation recently conducted a nationwide study confirming that lawyers struggle with depression, anxiety and alcoholism at rates that far exceed rates found in the general population and other professions. We all know the risks. We often see colleagues in trouble but are unsure exactly what to do about it. This presentation will highlight real-world strategies that law firms can use to 1) identify colleagues at risk, 2) create a culture of safety that will reduce barriers for those in need to asking for and receiving help, and 3) intervene when it is clear a colleague needs assistance.

Robynn Moraites, Executive Director, Lawyer Assistance Program at NC State Bar
Cathy Killian, Clinical Director & Western Clinical Coordinator, Lawyer Assistance Program

Break

Innovations in the Law

Join us for a discussion among law firm managing partners who are bravely launching innovative programs investing in the futures of their law firms. Lawyers from North Carolina based law firms will discuss challenges facing today’s law firm and creative solutions that result in efficiencies for clients, well balanced law firm members and economic benefits for clients and firms.

Rachel Blunk, Attorney at Forrest Firm, P.C.
Anna Carpenter, Associate Attorney at McIlveen Family Law Firm
Lisa Angel, President and Owner of Rosen Law Firm
Aaron Lay, Hamilton Stephens Steele + Martin, PLLC

Managing Partner Conversation Among Peers

Audience members will participate in round table discussions facilitated by team leaders discussing hot topics such as: compensation models and funding retirement, recruiting and retaining millennial talent, when to hire a chief operating officer or director of administration, review of health and other benefits packages.
Law Is a Buyer’s Market

JORDAN FURLONG
Clients

- They want tailored value for fewer dollars in less time.
- Increasingly sophisticated and assertive with providers.
- Differentiators: Service, relationships, client experience.

Markets

- LegalZoom/Avvo changed the market for consumers/SMEs.
- Legal technology changing the economics of law practice.
- Expertise, quality, brand: Still strengths, but no longer enough.
Everyone resists change. But lawyers are the gold standard.

Tough conversations and decisions can no longer be postponed.

You have the skill and talent to meet this opportunity, right now.
12 TACTICS ▶ PICK ANY 3

- Manage your client experience
- Improve your workflow
- Reconsider your markets
- Invest in intelligence
- Build non-lawyer services
- Price for outcomes
- Address compensation
- Re-engineer sales
- Diversify your talent
- Create an R&D function
- Accelerate transition
- Renew your culture

MANAGE THE CLIENT EXPERIENCE

- What is it like to be served by your law firm?
- Ask clients during and after; act on the results.
- Create and incentivize client service protocols.
**IMPROVE YOUR WORKFLOW**

- Lawyers simply must make better use of their time.
- Map out, upgrade, & automate legal work processes.
- Engage in people and project management.

**INVEST IN INTELLIGENCE**

- Client knowledge sets relations and grows business.
- Market knowledge drives pricing and positioning.
- Business knowledge is your competitive core.
RECONSIDER YOUR MARKETS

- Forecast your future optimal markets and clients.
- Double down on the markets you can dominate.
- Inventory is shifting from hours towards outcomes.

BUILD NON-LAWYER SERVICES

- Diversify your sources of income beyond lawyers.
- Leverage data to deliver value to clients via tech.
- Strengthen your firm as a standalone enterprise.
PRICE FOR OUTCOMES

- Move from input lawyer billing to output client pricing.
- Value to client + competing offers + COB = price.
- Pilot fixed fees, measure profitability, expand, repeat.

ADDRESS COMPENSATION

- What are you paying your people to do?
- Incentivize team performance, client growth.
- Give lawyers options for how they make money.
RE-ENGINEER SALES

- Reward origination proportionally, shorter-term.
- Build a professional sales support team.
- Accept that not every lawyer will be good at sales.

DIVERSIFY YOUR TALENT

- Fish in new corners of the demographic pond.
- Integrate “non-lawyers” into client service.
- Sign fewer free agents; build your farm system.
CREATE AN R&D FUNCTION

- What will you be offering in 2023? In 2028? To whom?
- Look beyond legal to a multi-disciplinary future.
- This is where your millennials take the wheel.

ACCELERATE TRANSITIONS

- Hard conversations need courage and candor.
- Build long, generous off-ramps from practice.
- Incentivize your desired departure behaviors.
Your culture will change. That’s normal and natural.

Four pillars of a highly desirable law firm culture.

Start building the foundation of tomorrow’s law firm today.
THANK YOU!

LEADING TOMORROW'S LAW FIRM

NORTH CAROLINA MANAGING PARTNERS SUMMIT
RALEIGH NC • 05.22.2018 • JORDAN FURLONG • LAW21
What is Your Firm’s Response to a Colleague in Need?

Robynn Moraites
Cathy Killian
Risk Management Strategies
Managing Partners Summit

Cathy Killian, Clinical Director
Robynn Moraites, Executive Director
NC Lawyer Assistance Program

Why?
(are we here today)

What?
(do we hope to accomplish)

Goal:
To empower you with the tools you need to effect meaningful change.

• ABA, CoLAP and Hazelden Foundation partnered for the first national study on lawyer mental health.
• Large, reliable data set.
• Diverse in every way.
• Collected over 2,000 responses to retain only responses from currently employed attorneys.
• Findings published in the peer reviewed Journal of Addiction Medicine.
• And the results are in…

Landmark National ABA Study

Just the FACTS
Survey of 13,000 U.S. lawyers in 19 states
Problematic Drinking

Most at Risk?
Younger lawyers in first 10 years working in private firms

- Highest rate age 30 and under: 32%
- General U.S. population: 6%
- Lawyers surveyed: 21%

Drug Use

- Number of lawyers who completed the section on alcohol use: 97%
- Number of lawyers who completed the section on drug use: 27%

Mental Health

Mental Health Symptoms
Lawyers with drug use disorders also had highest rates of depression, anxiety, and stress.

- Depression: 24%
- Anxiety: 19%
- Stress: 23%

Lawyers report depression 4X the general U.S. population
Quick Look Signs - Professional

**Attendance Problems**
- Arrive late / leaving early
- Taking “long lunches”
- No return to work after lunch
- No-show for client appointments
- Unable to be located
- Ill with vague ailments
- Absent (especially Mon/Fri)
- Frequent rest room breaks
- Improvable excuses for absences
- Last minute cancellations
- Can’t get a meeting with them
- Insist on “working from home”
- Despite repeated objections

**Performance Problems**
- Missed deadlines
- Decreased efficiency
- Decreased performance
- Inadequate follow through
- Lack of attention
- Poor judgment
- Inability to concentrate
- General difficulty with recall
- Blaming or making excuses for poor performance
- Erratic work patterns
- Non responsive
- Failure to show up in court
- You know they’re inflating billables

Quick Look Signs - Personal

**Relationship Problems**
- Complaints from clients
- Problems with supervisors
- Disagreements or inability to work with colleagues
- Avoidance of others
- Irritable, impatient
- Angry outbursts, combative
- Inconsistencies or discrepancies in describing events
- Hostile attitude
- Overreacts to criticism
- Unpredictable, rapid mood swings
- Non-responsive communication

**Personal Problems**
- Legal separation or divorce; custody issues
- No family support
- Children won’t speak to them
- Living outside financial means
- Credit problems, judgments, tax liens, bankruptcy
- Frequent illnesses or odd accidents
- Arrests
- Isolating from friends, family
- Avoids social activities
- Personal life very intertwined with practice
- Handling their own legal problems
- Chaotic personal life/lots of drama

**Additional Professional Cues**
- Mail piling up
- Inability to see big picture
- Paralyzed in decision making
- Knows what needs to happen but can’t make it happen
- Personality change – not the lawyer you used to know
- Starts to look disheveled or unkempt
- Smells like alcohol
- Pupils odd (dilated or pin points)

Trust your gut. If you suspect something is wrong, it probably is. These signs are huge red flags. Once the professional façade is cracked, it is the last domino to fall, not the first.
Let’s Move Into the Solution

Swiss Cheese
Method to Risk Management

Layer 1 - Policy

• Adopt a policy...then stick to it
  – Sample in handouts (NY)
  – ABA created a task force last fall to develop a
    model policy for firms; final draft circulating
  – Real buy-in at highest levels or it will not work
  – Partners, Associates and Staff will “hear what
    you say but believe what you do.”
  – Decide how to promote and encourage (not
    punish) early self-report vs. report coming in
    from staff

Layer 2 - Orientation

• Introduce Issue and Policy at New
  Lawyer Orientation (1 hour max)
  – Sample structure:
    • Mgmt speech on importance & risk mgmt.
      issues (15 min)
    • Intro to policy & encourage self-report (10 min)
    • Personal story of a lawyer in recovery (30 min)
Layer 3 – In-House CLE

- In-House MH/SA CLE (1 hour)
  - Make it interesting and relevant
    - LAP can really help here with a variety of topics and formats each year you hold this
  - Mandatory or not? Every year? Every 3?
  - Restrict laptops and phones?

Layer 4 – Promote Wellness

- See article from Best of Legal Mgmt for list of ideas
- We are helping arrange mindfulness training across the state with Laura Mahr of Conscious Legal Minds (.com)
- Lawyers who are happy and well balanced are more efficient and productive and at far less risk for errors or worse

Layer 5 – Train Support Staff

- Suggest this as a training (1 hour)
- Include key partner(s) to whom reports will be made
- Why support staff may be hesitant to report
  - Keeping wheels on bus
  - Fear of retribution, job security
- LAP can help design & conduct this training
Layer 6 – Training for Lawyers

• Suggest this as a training (1 hours)
• Understand “enabling” in various forms
• What to look for / what to do when a report is made
• Last clear chance agreements
• LAP coaching on how to have difficult conversations

Layer 7 – Partnership Meeting

• Add a 15-to-20-minute item to the annual partnership meeting agenda
  – Need not be exhaustive or overkill
  – Snapshot of effectiveness of other initiatives (layers of the cheese)
  – The key is consistent short reinforcement that firm leadership is really behind this

Layer 8 – Firm Retreat

• Add some wellness related workshops – morning yoga, mindfulness training, non-contact boxing training, interactive team building exercises and competitions between practice areas...
• Not necessarily alcohol free, but less focus on alcohol-centered activities
Layer 9 – Insurance Coverage

• If self-insured, make sure in-patient substance abuse treatment is covered as well as out-patient (whether for primary treatment or relapse prevention aftercare)
• We see greatest rates of success where lawyer’s job is held for his/her return

Layer 10 – Informal Procedures

• Many firms have a lawyer who would be willing and could serve as a liaison to LAP or as a go to person when someone needs to ask for help.

Why we don’t act

• Worried about reputation of firm
• Human nature to avoid dealing with problems
• Time constraint to meet frequently, communicate with staff, monitor behavior
• Afraid saying something could “push them over the edge”
Reasons to Act

• 2013 FEO 8 – Ethical Responsibility
  – Recognize and respond
• Authorized practice issues (smaller firms)
• Ethical violations/State Bar Discipline
• Reputational Harm
• Rules of Professional Conduct require it
• Possible malpractice
• Time spent now saves time and money in the long run
• Emotional wear and tear on staff
• Save a life/career/family

Fears & Misconceptions

• LAP will report lawyer to State Bar
• Not really confidential (stigma)
  – Clients or other firms will find out our firm has these problems and it will not look good
• LAP only deals with drinking problems
• LAP always makes lawyers go to treatment (only if clinically indicated)

A Lot or Not? Perspective

• These layers can seem like “a lot” when seen from a bird’s eye view, but from the perspective of an incoming associate, it is a one hour training at orientation, a MH/SA CLE (required anyway), & some fun activities that are actually life affirming at the firm retreat.
• For partners it is a stand-alone training and an additional 20 min summary once a year.
• For the firm you will have a comprehensive program in place and be positioned to take informed and meaningful action when needed.
Discussion

• What are your thoughts so far?
• What would you be comfortable implementing?
• What would you be uncomfortable implementing?
• We open the floor to you….

If you need to reach us:

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Thank you!
10 Principles of Leading Change Management

1. Lead with the culture.
2. Start at the top.
3. Involve every layer.
4. Make the rational and emotional case together.
5. Act your way into new thinking.
7. Lead outside the lines.
8. Leverage formal solutions.
9. Leverage informal solutions.
10. Assess and adapt.

For further insights: See strategy-business.com/10PrinciplesChangeManagement
Infographic: 6pto Design/Martin Leon Berreto
Identifying Illness Based Impairment in Colleagues

Depression, Anxiety and Stress
Alcoholism and Substance Abuse

Every aspect of an addicted or depressed attorney’s life is affected. When there are problems at work or home, with health or finances, or there is police involvement, chances are the attorney is suffering from a medically based illness which can be successfully treated. If you recognize the following warning signs in a colleague, call us. **We can help.** Visit [NCLAP.org](http://NCLAP.org)

### Relationship Problems
- Complaints from clients
- Problems with supervisors
- Disagreements or inability to work with colleagues
- Avoidance of others
- Irritable, impatient
- Angry outbursts
- Inconsistencies or discrepancies in describing events
- Hostile attitude
- Overreacts to criticism
- Unpredictable, rapid mood swings
- Non-responsive communication

### Performance Problems
- Missed deadlines
- Decreased efficiency
- Decreased performance after long lunches involving alcohol
- Inadequate follow through
- Lack of attention
- Poor judgment
- Inability to concentrate
- Difficulty remembering details or instructions
- General difficulty with recall
- Blaming or making excuses for poor performance
- Erratic work patterns

### Personal Problems
- Legal separation or divorce
- Credit problems, judgments, tax liens, bankruptcy
- Decreased performance after lunches involving alcohol
- Frequent illnesses or accidents
- Arrests or warnings while under the influence of alcohol or drugs
- Isolating from friends, family and social activities

### Attendance Problems
- Arrive late and/or leaving early
- Taking “long lunches”
- Not returning to work after lunch
- Missing appointments
- Unable to be located
- Ill with vague ailments
- Absent (especially Mondays/Fridays)
- Frequent rest room breaks
- Improbable excuses for absences
- Last minute cancellations
When “Helping” Hurts—A Guide for Law Firms and Families, Part 1

Most lawyers, regardless of practice area, are accustomed to solving others’ problems and providing solutions. Lawyers are helpers by nature. While many of us may try to project a certain image, and despite whatever lawyer-joke-du-jour may be fashionable, most lawyers have big hearts and want to help people. It only makes sense that when a colleague or family member is struggling with alcoholism or addiction in any form, we want to help. But if we do not understand the disease of addiction (to alcohol or any other substance or process), our help can become a hindrance.

Do you remember “Opposite Day” as a child? When I was growing up, once a year all the elementary school kids and our teachers had an Opposite Day. It was great fun. The teacher would dramatically pronounce, “OK class, line up at the door,” and we would settle down at our desks. When she said, “Let’s settle down,” we’d all run to the door and line up to go outside to play. It always made for a fun day trying to figure out the coded messages of our teachers and friends.

Alcoholism is like Opposite Day. It turns everything on its head. Helping an alcoholic by enabling an alcoholic to avoid the consequences of addiction may feel like helping, but it actually hurts him and his chance of recovery. What feels to us like hurting or betraying, actually helps an alcoholic find recovery. Let’s consider some real world examples.

When a non-alcoholic family member is in the middle of a contentious divorce (with lots of fighting at home), we may offer to have the kids stay over for a while and take them to school. When a non-alcoholic colleague has an unexpected family emergency, we may offer to cover for her and handle some work in the immediate short term. If a non-alcoholic friend suddenly became unemployed, we might be willing to lend money to cover living expenses for a few months until he got back on his feet. If a non-alcoholic lawyer recently suffered a personal family loss and is grieving, judges and opposing counsel might go to great lengths to have cases continued. None of these helping impulses is wrong or misplaced. In fact, these are the very types of interactions that build connections and strengthen community, all of which are imperative for maintaining good mental health as a lawyer.

When carrying out these very loving, helpful actions while dealing with an alcoholic or addicted lawyer, however, suddenly “helping” becomes “hurting,” although it does not seem like it or feel like it to the one offering the help. Often, when family and friends try to help alcoholic or addicted lawyers, they are actually—albeit unwittingly—making it easier for the lawyer to continue in the progression of the disease. Whatever form of conventional help (as described above) we provide to someone who is engaged in the disease of addiction, that help often boomerangs and begins to hurt the addicted person (and us) because it allows him or her to avoid the consequences of the disease. The specific word for the phenomenon when help has crossed the line and starts to hurt is “enabling” because the help provided enables the disease to continue unimpeded.

The disease of addiction is progressive in nature; it builds up over time and gains momentum. Over any considerable period of time it gets worse, not better. What started out as the one-time lending of money or continuing of cases gradually turns into a pattern of behavior. Our first response is to give the lawyer the benefit of the doubt: “Joe is in a rough patch. Give him some time.” But usually a precedent has been set, so if Joe is an alcoholic or addict, he knows you are willing to cover for him in whatever way you have done so in the past. So he continues to come to you—maybe more frequently now—for help. This help in turn allows him to continue to engage in the destructive behavior of his addiction while simultaneously avoiding the consequences. The person giving help (or even the law firm that continues to look the other way) has unknowingly and unconsciously become an ally of the disease.

Wikipedia describes an ally as, “...people, groups, or nations that have joined in an association for mutual benefit or to achieve some common purpose, whether or not explicit agreement has been worked out between them.” Ouch. For those of us who only sincerely wanted to help, it can be a devastating blow to learn that we have been assisting the disease of addiction, not the lawyer who suffers from it. If we step out of the helper role, the alcoholic lawyer is forced to face consequences and may find recovery sooner. It can be hard to discover we have been actually hurting the alcoholic lawyer’s chance for recovery.

As long as the alcoholic lawyer has enabling devices and people in place, it is easy for him to continue to deny he has a problem, because most of his problems are being solved by those around him. Only when he is forced to face the consequences of his own actions and inactions will it finally begin to sink in how deep his problem has become.
Some of these choices are not easy for the friends or families of alcoholics. For example, if the alcoholic drinks up the money that was supposed to pay the utility bill, he is not the only one who will be living in a dark, cold, or sweltering house. The rest of the family will suffer right along with him. If the alcoholic lawyer is a high-profile, high-functioning lawyer with a reputable practice, the law firm may not want to suffer a revenue loss or reputational harm. (Not to mention, it is just plain hard emotionally for all of us to talk about these things.) So the firm as a whole may ignore a known, growing problem until one day a catastrophe happens in a public forum. Often times the firm is left with no choice but to fire the lawyer. But it does not need to happen this way.

When “Hurting” Helps

So let’s change the verbage and now discuss what I will call “unconventional help,” which, to be frank, will feel to the helper like something less than a betrayal of the alcoholic lawyer friend or colleague. Unconventional help is an action (or a refusal to act) we take in response to requests for help from the alcoholic lawyer that does not shield him or her from the consequences of the disease. In almost all cases, only when faced with consequences is an alcoholic or addicted lawyer able to begin to gain some clarity about the nature of the impairment.

The acts that truly help an alcoholic or addict are those actions (or inactions) which point the alcoholic in the direction of recovery. We may refuse to lend money, except to help pay for treatment (always give the money directly to the treatment center, not to the alcoholic or the family of the alcoholic). We may refuse to cover a case load or to have cases continued, unless it is because the lawyer goes to treatment. We may agree to represent the lawyer in a contempt hearing before a judge or a discipline matter before the State Bar on the condition that the lawyer agrees to get help and follows all directives from the EAP, LAP, or treatment center.2 Saying “no” or setting these conditions can be very difficult for us (the helpers) emotionally, particularly because we can see so clearly what the impaired attorney cannot—the almost sure consequences coming down the pipeline. These actions can be very painful for us to carry out, and our every instinct urges us to try to prevent those consequences and pain that he or she will face as a result. But remember, we’re living in Opposite Day when dealing with alcoholism or addiction. Sometimes when we cannot help an alcoholic up, we need to step out of the way as he or she falls down. It is sometimes only in that falling down that an alcoholic or addicted attorney can then begin to wake up to the situation and ask for help.

It may feel to us like we are hurting the alcoholic when we stop helping. In fact, depending upon how close we are to the addicted lawyer, he may actually accuse us of hurting him or of causing the consequences. If we are very tied to the person emotionally, while we understand intellectually we are not causing consequences, it can feel like we are because we are not preventing them from occurring. It is so important to remember that when the alcoholic lawyer is blaming us or others, it is just the disease talking. Because it is hard to remember this and not take the blaming personally, often the person who has been put into the helping role needs support of his own in order to stand his ground. The LAP offers this kind of support.

The following short story is from one of our volunteers.

Years ago when I lived in another state and before I enrolled in law school I began dating a man who lived downstairs from me in my quadruplex. He was a very successful computer engineer. One day he was unexpectedly fired from his job. He downplayed the incident and obtained another job of equal stature quickly. Then one day he was very late in meeting me for an event. When he arrived he seemed rushed and preoccupied. He said he had been tied up at work. I had no reason not to believe him. Soon after, he asked me for money so that he could make his car payment. I asked him why he needed it and he told me that he had some old debts he was paying off and had come up short that particular month. I was uneasy, but I lent him the money against my better judgment. Within the next few months things unraveled very quickly for him. I learned that he was a cocaine addict, but he had managed to keep it hidden for years, even from me. I sincerely cared for this man, and we had been in a relationship for a few years at that point. I began attending Al-Anon meetings and open AA meetings to learn about the disease of addiction. In the few months that followed, he had four different jobs, eventually working part-time at a fast food burger place. He parked his car several blocks away from the quadruplex in an attempt to avoid repossession of the vehicle. He had been spending all of his money on cocaine and had not paid rent for many months. An eviction notice was served on him. At this point we were broken up, but I lived right upstairs and had helped him before. He continued to ask me for money to pay for his car and rent. I started saying no and it was incredibly difficult. He began blaming me, telling me that if he was evicted or had his car repossessed it would be my fault. I leaned heavily on my friends in Al-Anon for support during this time. Then the day came that the car was repossessed. Soon after, he was evicted and asked if he could sleep on my couch. I said no. That was one of the hardest days for me, but it turned out to be the day he got sober. He had been attending AA off and on for the prior months, but that night he slept outside of an AA room, leaned up against the door. When the person came to make coffee for the 7 AM meeting, he was let in the AA room, and he spent the day there attending a bunch of meetings. He began a sincere program of recovery that day. He has not had a drink since and is now about 15 years sober. He is married with two children and is back to being a successful computer engineer. There was certainly no guarantee he would get sober if I said no to his request, but it was very clear to me he most assuredly would not have gotten sober had I said yes. I got out of the way and he was able to face his disease and recover. I do not take credit for him getting sober, I take credit for getting out of the way so that he could get sober.
If you know an attorney who you suspect may be an alcoholic or addicted, give the LAP a call. We can help guide and support you as you navigate what kind of help to offer.

The North Carolina Lawyer Assistance Program is a confidential program of assistance for all North Carolina lawyers, judges, and law students, which helps address problems of stress, depression, alcoholism, addiction, or other problems that may lead to impairing a lawyer’s ability to practice. If you would like more information, go to nclap.org or call: Cathy Killian (for Charlotte and areas west) at 704-892-5699, Towanda Garner (in the Piedmont area) at 919-719-9290, or Nicole Ellington (for Raleigh and down east) at 919-719-9267.

Endnotes
1. Please tune in next quarter when we will be interviewing a managing partner who orchestrated an intervention some years ago with a leading lawyer in the firm.
2. Requiring treatment as a condition of representation is a practice known as therapeutic jurisprudence. There is a growing body of academic research in this area with guidance for lawyers, particularly in criminal practice. See David Wexler’s work.

New Look, New Logo, Same Program

This quarter marks the first official publication of our new logo for the NC Lawyer Assistance Program (“LAP”). We will continue to roll out the new brand, logo, and look via a new website and updated collateral and print materials. I have now been the director of the LAP for a year and a half. After getting to know the program from the inside out, meeting with our dedicated volunteers across the state, and working with the LAP Board and staff, we have determined that due to the size of our program and its increasing diversity, we need to streamline and consolidate some aspects of our program.

LAP History at a Glance

The Positive Action for Lawyers with Substance Abuse Subcommittee (“PALS”) was formed in 1979 as a purely volunteer-run organization, formed to help alcoholic lawyers. PALS has been extremely successful. Then in 1998, several lawyers committed suicide. These suicides were not related to alcoholism or substance abuse. In response, the leadership of the Bar recognized the need to broaden PALS’ mission to include issues of depression, anxiety, burnout, and other mental health issues. By that time, however, the PALS “brand” was totally associated with alcoholism and substance abuse. So an altogether new program was created to address depression, anxiety, and mental health issues: the FRIENDS program. The FRIENDS program developed its own logo and its own brand. The FRIENDS program was launched in 1999-2000 to widespread acceptance and success.

Reorganization – Same Services and Same Program

The LAP is experiencing quite a bit of brand confusion. Lawyers do not realize PALS and FRIENDS are programs of the LAP. Because of this brand confusion, current and expected trends in our client base, and the need to offer targeted programs based on the broader role we now play, the LAP Board and staff are in the process of reorganizing and rebranding the LAP as a single program with a single name to address all issues that may be impairing to lawyers. The LAP mission, approach, and services will remain the same. Moreover, our active volunteer base is and will continue to be comprised of lawyers helping other lawyers overcome whatever impairing issues and challenges they face.

New Logo and Symbolism

The new logo is based on Adolph A. Weinman’s image for the “Walking Liberty” half dollar issued by the United States Mint from 1916 to 1947. The image has been modified, however, to remove her Depression-era hat, the drape of the flag, and her flowers. Those elements have been replaced with a crown of liberty and scales of justice, creating the more-familiar and widely-accepted image of the Lady of Justice. She strides towards the sun, with her hand extended. For lawyers dealing with depression, anxiety, alcoholism, or other impairments, the journey of recovery is one from despair to hope and is often described by many lawyers as moving out of the darkness into the light. Her extended hand represents the work that the LAP and its volunteers have done for four decades: reaching out a helping hand to those who need it. And finally, she is not blindfolded. Instead, she sees those to whom she reaches while she also looks to the horizon and the path to be taken. It is a dynamic image that we hope conveys the compassion and strength that the Lawyer Assistance Program has come to be known for over its many years of assisting lawyers.
The LAP recently conducted an interview with a managing partner of a firm who years ago orchestrated an intervention with a leading lawyer in the firm. This example illustrates how a law firm can proactively address an issue of impairment. The following is taken from that interview and told from the point of view of the managing partner. In order to maintain the highest level of confidentiality, all gender-related personal pronouns have been removed.

We have an attorney who started as an associate and came to us as a young lateral. The attorney worked with us for years without incident. The only thing we noticed was that the attorney partied a lot and bragged about it, but it was nothing out of the ordinary. I did question the attorney’s judgment when the attorney got drunk at some firm functions early on, but the attorney’s performance was very competent. We had a lot of confidence in that attorney, and so did the clients. After the attorney had been with us for about seven years we were comfortable making the attorney a partner based on excellent work performance.

I never worked with the attorney personally; our practice areas did not overlap. But I always saw the attorney at our firm’s social events. Several years went on without incident, and then I started receiving reports occasionally from younger associate attorneys with whom the attorney worked. The reports at first were that the attorney wasn’t showing up to meetings with them or replying to their emails. They couldn’t get in touch. There was no oversight or supervision. No mentoring was occurring. Assignments would be made and that would be it. When they needed assistance, the attorney wasn’t available.

The attorney’s secretary brought to my attention that the attorney had started changing and cancelling client appointments. The attorney was calling in sick a lot. I would have never known because we really didn’t see a significant drop in billable hours. There was nothing happening other than these reports that would have raised concern.

Then I noticed that the attorney did not look well and appeared hung over, but the attorney would always attribute it to something else. The attorney began looking pale and clammy, with circles under the eyes, and started to look disheveled. Interestingly, I never smelled alcohol. Soon we were all noticing the deteriorating health and learned of significant marital and financial issues. The attorney talked with some of the partners about these various issues, but never mentioned problems with drinking, nor did we ask about it.

About a year before the firm decided to take action, I talked to the then-current LAP chair about what to do. I decided to wait and watch. I didn’t want to be wrong. The attorney was still doing competent work, trying cases and winning them, so I was comfortable knowing clients were not being hurt. I wanted to give the attorney the benefit of the doubt. Everybody liked each other at the firm, but the attorney didn’t have any real social friends within the firm.

The situation deteriorated over the year with more of the same kind of reports, so I approached the partners individually. They had noticed some things as well, though nobody had the concerns I had. To their credit, they did not dismiss my concerns, and when I suggested I would call the LAP, they thought that was a good idea.

I went over the history and the signs with a LAP staff member who confirmed my suspicions and told me that we were going to need to confront the attorney to seek recovery. I was warned going into the intervention, “The attorney will deny it and lie about it. That’s the pattern. Don’t tolerate it.”

We gathered all the partners together and brought the attorney in to talk. The attorney admitted the drinking problem, but thought it was something that could be handled without help. We told the attorney to get an evaluation from the LAP and if the LAP gave a clean bill of health, we would accept it. The attorney agreed to do this and met with a LAP staff person. The LAP concluded that there was a need for in-patient treatment, with the recommended length of stay of 90 days given the condition of the attorney.

We had another firm meeting then, and the attorney reported that the LAP staff person had recommended 90-day in-patient treatment. We all agreed with the recommendation. We told the attorney to follow what was recommended by LAP. The attorney understood our position but respectfully declined because of the financial consequences of taking three months off from work and the cost of treatment. The attorney claimed that family obligations precluded in-patient treatment and was also worried that clients would find out the reason for the departure.

We told the attorney that the firm would
lend money for treatment, but the response was that the attorney did not want to be in debt to us. The LAP staffer had alerted us that this was the likely response, so we were ready. We said—and this was the hardest part—that we wanted the attorney to get better, that the attorney was a valuable member of the firm, that we’d lend the money for treatment, that we’d pay for whatever the insurance wouldn’t pay, but if the attorney didn’t go to treatment then there would be no job at the firm. We threw the hammer down. The reaction was anger; in fact, extreme anger. But within a day or two, it sunk in that treatment wasn’t optional. There was no choice and there were no other options. The attorney borrowed money from the firm to cover what the insurance would not cover and went to treatment.

While the attorney was in treatment, the partners obviously knew about it. In order to cover the workload, we had to tell some of the associates about the attorney’s treatment because they were the ones who had to cover the work for three months. It was our understanding that the attorney would be completely incommunicado, so this had to be done. We didn’t have any problems with continuances or the local bar, and we never had to tell opposing counsel anything specific. We said there were some personal issues that were keeping the attorney away from the office. No one asked any questions and we did not tell any clients.

There was a real willingness on the part of our partners to step in and provide help. No one even questioned it. We opted to continue to pay salary and insurance benefits during treatment. Everyone supported that decision and supported the attorney during this time.

When in-patient treatment was finished, the attorney came back into the practice. The attorney continued in a recovery program as well. The attorney doesn’t talk about it much, except on the sobriety anniversary day. The attorney doesn’t come to many firm social gatherings these days. We always drink at these events, so the attorney won’t come to a firm cocktail party, but will attend a firm holiday dinner for a few hours. The loan was repaid, an action recommended by the LAP as an important part of the recovery process. It was an investment for the firm, but an extremely good one. Our attorney is one of our most successful and productive lawyers.

Over the years, I have seen a complete transformation. All aspects of the life of this attorney in recovery seem to be incredible these days. I have no idea how, but somehow the broken family life was repaired. Involvement with children increased. Physical fitness returned. Vacations are taken. Balance has been restored.

The attorney became an incredible mentor to young lawyers. Absence and a lack of instruction or guidance have been replaced by teaching, and very good teaching at that. The attorney is far more reliable and congenial and much more of a team player now within the firm.

The most amazing part is witnessing how a good practice has become an amazing practice. I was concerned initially because of the levels of stress at our firm and in that practice area in particular. It’s stressful for the most stable of us, much less someone coming out of treatment. I worried it was too much to take on all at once. But the attorney stepped up to the challenge, and has had success like never before. The attorney is very skilled at teaching, and very good teaching at that.

Looking back, I feel like I should have done something sooner. But then again, people have to be ready for help. It has all worked out well and I am grateful for the guidance the LAP gave me and our firm along the way.

The North Carolina Lawyer Assistance Program is a confidential program of assistance for all North Carolina lawyers, judges, and law students, which helps address problems of stress, depression, alcoholism, addiction, or other problems that may lead to impairing a lawyer’s ability to practice. If you would like more information, go to nclap.org or call: Cathy Killian (for Charlotte and areas west) at 704-892-5699, Towanda Garner (in the Piedmont area) at 919-719-9290, or Nicole Ellington (for Raleigh and down east) at 919-719-9267.

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The Title Company of North Carolina
RESPONDING TO THE MENTAL IMPAIRMENT OF FIRM LAWYER

Adopted: July 25, 2014

Opinion analyzes the responsibility of the partners and supervisory lawyers in a firm when another firm lawyer has a mental impairment.

Introduction:

As the lawyers from the “Baby Boomer” generation advance in years, there will be more instances of lawyers who suffer from mental impairment or diminished capacity due to age. In addition, lawyers suffer from depression and substance abuse at approximately twice the rate of the general population. This opinion examines the obligations of lawyers in a firm who learn that another firm lawyer suffers from a mental condition that impairs the lawyer's ability to practice law or has resulted in a violation of a Rule of Professional Conduct. This opinion relies upon ABA Commission on Ethics and Professional Responsibility, Formal Opinion 03-429 (2003) [hereinafter ABA Formal Op. 03-429] for its approach to the issues raised by the mental impairment of a lawyer in a firm. For further guidance, readers are encouraged to refer to the ABA opinion.

Inquiry #1:

Attorney X has been practicing law successfully for over 40 years and is a prominent lawyer in his community. In recent years, his ability to remember has diminished and he has become confused on occasion. The other lawyers in his firm are concerned that he may be suffering from the early stages of Alzheimer's disease or dementia.

What are the professional responsibilities of the other lawyers in the firm?

Opinion #1:

The partners in the firm must make reasonable efforts to ensure that Attorney X does not violate the Rules of Professional Conduct.

Mental impairment may lead to inability to competently represent a client as required by Rule 1.1, inability to complete tasks in a diligent manner as required by Rule 1.3, and inability to communicate with clients about their representation as required by Rule 1.4. Although a consequence of the lawyer's impairment, these are violations of the Rules of Professional Conduct nonetheless. As noted in ABA Formal Op. 03-429, “[i]mpaired lawyers have the same obligations under the [Rules of Professional Conduct] as other lawyers. Simply stated, mental impairment does not lessen a lawyer's obligation to provide clients with competent representation.” Under Rule 1.16(a)(2), a lawyer is prohibited from representing a client and, where representation has commenced, required to withdraw if “the lawyer's physical or mental condition materially impairs the lawyer's ability to represent the client.” Unfortunately, an impaired lawyer may not be aware or may deny that his impairment is negatively impacting his ability to represent clients. ABA Formal Op. 03-429.

Rule 5.1(a) requires partners in a firm and all lawyers with comparable managerial authority in the firm to “make reasonable efforts to ensure that the other lawyer conforms to the Rules of Professional Conduct.” Taken together, these provisions require a managerial or supervisory lawyer who suspects or knows that a lawyer is impaired to closely supervise the conduct of the impaired lawyer because of the risk that the impairment will result in violations of the Rules.

When deciding what should be done in response to a lawyer's apparent mental impairment, it may be helpful to partners and supervising lawyers to consult a mental health professional for advice about identifying mental impairment and assistance for the impaired lawyer. Id. As observed in ABA Formal Op. 03-429, “[t]he firm's paramount obligation is to take steps to protect the interest of its clients. The first step may be to confront the impaired lawyer with the facts of his impairment and insist upon steps to assure that clients are represented appropriately notwithstanding the lawyer’s impairment. Other steps include forcefully urging the impaired lawyer to accept assistance to prevent future violations or limiting the ability of the impaired lawyer to handle legal matters or deal with clients. Id.

If the lawyer's mental impairment can be accommodated by changing the lawyer's work environment or the type of work that the lawyer performs, such steps also should be taken.6 Depending on the nature, severity, and permanence (or likelihood of periodic recurrence) of the lawyer’s impairment, management of the firm has an obligation to supervise the legal services performed by the lawyer and, in an appropriate case, prevent the lawyer from rendering legal services to clients of the firm.7 Id. Making a confidential report to the State Bar’s Lawyer Assistance Program (LAP) (or to another lawyer's assistance program approved by the State Bar) would also be an appropriate step. The LAP can provide the impaired lawyer with confidential advice, referrals, and other assistance.

Inquiry #2:

Attorney X’s mental capacity continues to diminish. Apparently as a consequence of mental impairment, Attorney X failed to deliver client funds to the office manager for deposit in the trust account. It is believed that he converted the funds to his own use. In addition, Attorney X failed to complete discovery for a number of clients although he declined assistance from the other lawyers in the firm. Some clients may face court sanctions as a consequence. Although Attorney X is engaging and articulate when he meets with clients, he no longer seems able to prepare for litigation and, on more than one occasion, Attorney X’s presentation in court was muddled, meandering, and confused.

What are the professional responsibilities of the other lawyers in the firm?

Opinion #2:

Attorney X has violated Rule 1.1 by failing to place entrusted funds in the firm trust account. He has also violated Rule 1.1 and Rule 1.3 by providing incompetent representation and by failing to act with reasonable promptness in completing discovery. These are violations of the Rules of Professional Conduct that may have to be reported to the State Bar or to the court. In addition, steps may have to be taken to provide additional ongoing supervision for Attorney X or to change the circumstances or type of work that he performs to avoid additional violations of his professional duties. The other lawyers in the firm must also take steps to mitigate the adverse consequences of Attorney X’s past conduct including replacing client funds.

Rule 8.3(a) requires a lawyer “who knows that another lawyer has committed a violation of the Rules of Professional Conduct that raises a substantial question as to that lawyer's honesty, trustworthiness, or fitness as a lawyer in other respects [to] inform the North Carolina State Bar or the court having jurisdiction over the matter.” Only misconduct that raises a “substantial question” as to the lawyer’s honesty, trustworthiness, or fitness must be reported. As noted in the Comment, [this Rule limits the reporting obligations to those offenses that a self-regulating profession must vigorously endeavor to prevent. A measure of judgment is, therefore, required in complying with the provisions of this Rule. The term 'substantial' refers to the seriousness of the possible offense and not the quantum of evidence of which the lawyer is aware.]

Rule 8.3, cmt. [a].

If an impaired lawyer's misconduct is isolated and unlikely to recur because the mental impairment has ended or is controlled by medication or treatment, no report of incompetent or delinquent representation may be required. See RPC 2.13 (as “isolated incident resulting from a momentary lapse of judgment” does not raise a substantial question about honesty, trustworthiness, or fitness). “Similarly, if the firm is able to eliminate the risk of future violations of the duties of competence and diligence under the [Rules] through close supervision of the lawyer's work, it would not be required to report the impaired lawyer's violation.” ABA Formal Op. 03-429.

However, reporting is required if the misconduct is serious, such as the violation of the trust accounting rules described in this inquiry, or the lawyer insists upon continuing to practice although his mental impairment has rendered him unable to represent clients as required by the Rules of Professional Conduct. In either situation, a report of misconduct may not be made if it would require the disclosure of confidential client information in violation of Rule 1.6, and the client does not consent to disclosure. See Rule 8.3(c).

Rule 1.4(b) requires a lawyer “to explain a matter to the extent reasonably necessary to permit the client to make informed decisions regarding the representation.” If the managing lawyers determine that the impaired lawyer cannot provide competent and diligent representation and should be removed from a client’s case, the situation must be explained to the client so that the client can decide whether to agree to be represented by another lawyer in the firm or to seek other legal counsel.

Rule 5.1(c) requires a partner or a lawyer with comparable managerial authority or with supervisory authority over another lawyer to take reasonable remedial action to avoid the consequences of the lawyer’s violation of the Rules. Even if the impaired lawyer is removed from a representation, the firm lawyers must make every effort to mitigate any adverse consequences of the impaired lawyer’s prior representation of the client.

Inquiry #3:

What are the professional responsibilities of the other lawyers in the firm?
Inquiry #10: Do the responses to any of the inquiries above change if the lawyer’s impairment is due to some other reason such as substance abuse or mental illness?

Inquiry #8: If an associate lawyer in the firm observes behavior by Attorney X that indicates that Attorney X is not competent to represent clients, what should the associate lawyer do?

Inquiry #7: A subordinate lawyer is bound by the Rules of Professional Conduct notwithstanding that the subordinate lawyer acts at the direction of another lawyer in the firm. Rule 5.2(a). If the associate lawyer believes that the duty to report professional misconduct under Rule 8.3 may be triggered by the conduct of Attorney X, the associate lawyer should discuss this concern with his supervising lawyer. If the supervising lawyer declines to address the situation, the associate lawyer should seek guidance as to his professional responsibilities from the lawyers at the State Bar who provide informal ethics advice.

Inquiry #6: Assume that Attorney X is the sole principal in the firm and there is no associate lawyer. Attorney X displays behavior that may indicate that he is in the early stages of Alzheimer’s disease or dementia. There is no senior management to whom the associate lawyer can report. What should the associate lawyer do?

Inquiry #5: Associate lawyers and staff members are often the first to observe behavior indicating that a lawyer has a mental impairment. If an associate lawyer or a staff member reports behavior by Attorney X that indicates that Attorney X is impaired and may be unable to represent clients competently and diligently, what is a partner’s or supervising lawyer’s duty upon receiving such a report?

Inquiry #4: What are the duties of the remaining lawyers in the firm if Attorney X leaves and sets up his own practice?

Inquiry #3: What are the duties of the remaining lawyers in the firm if Attorney X leaves and sets up his own practice?

Inquiry #2: How can the remaining lawyers in the firm ensure that the client has sufficient information to make an informed decision about continuing to be represented by Attorney X?

Inquiry #1: The firm partners determine that Attorney X has violated the Rules and there is a duty to report under Rule 8.3, may they fulfill the duty by reporting Attorney X to the State Bar’s Lawyer Assistance Program (LAP)?

Opinion #2: No. 2003 Formal Ethics Opinion 2 addressed this issue in the context of reporting opposing counsel as follows:

The report of misconduct should be made to the Grievance Committee of the State Bar if a lawyer’s impairment results in a violation of the Rules that is sufficient to trigger the reporting requirement. The lawyer must be held professionally accountable. See, e.g., Rule 01090 of the Rules on Discipline and Disability of Attorneys, 27 N.C.A.C. 18, Section 0109 (information regarding a member’s alleged drug use will be referred to LAP; information regarding the member’s alleged misconduct will be reported to the chair of the Grievance Committee).

Making a report to the State Bar, as required under Rule 8.3(a), does not diminish the appropriateness of also making a confidential report to LAP. The Bar’s disciplinary program and LAP often deal with the same lawyer and are not mutually exclusive. The discipline program addresses conduct; LAP addresses the underlying illness that may have caused the conduct. Both programs, in the long run, protect the public interest.

Opinion #4: In addition to any duty to report, the remaining lawyers may have a duty to any current client of Attorney X to ensure that the client has sufficient information to make an informed decision about continuing to be represented by Attorney X.

As noted in Opinion #2, Rule 1.4(b) requires a lawyer to “explain a matter to the extent reasonably necessary to permit the client to make informed decisions regarding the representation.” The clients of an impaired lawyer who leaves a firm must decide whether to follow the departed lawyer to his new law practice. To make an informed decision, the clients must be informed of “the facts surrounding the withdrawal to the extent disclosure is reasonably necessary for those clients to make an informed decision about the selection of counsel.” ABA Formal Op. 03-429. There is no comparable duty to former clients of the impaired lawyer as long as the firm avoids any action that might be interpreted as an endorsement of the services of the departed, impaired lawyer, including sending a joint letter regarding the lawyer’s departure from the firm.

The remaining lawyers in the firm may conclude that, while under their supervision and support, the impaired lawyer did not violate the Rules and, therefore, there is no duty to report to the State Bar under Rule 8.5. Nevertheless, subject to the duty of confidentiality to clients under Rule 1.6, voluntarily reporting the impaired lawyer to LAP (or another lawyer assistance program approved by the State Bar) would be appropriate. The impaired lawyer will receive assistance and support from LAP and this may help to prevent harm to the interests of the impaired lawyer’s clients.

Opinion #5: If a partner or supervising lawyer receives a report of impairment from an associate lawyer or a staff member, regardless of whether the lawyer suspected of impairment is a senior partner or an associate, the partner or supervising lawyer must investigate and, if it appears that the report is meritorious, take appropriate measures to ensure that the impaired lawyer’s conduct conforms to the Rules of Professional Conduct. See Opinion #1 and Rule 5.1(a). It is never appropriate to protect the impaired lawyer by refusing to act upon or ignoring a report of impairment or by attempting to cover up the lawyer’s impairment.

Opinion #6: The associate lawyer must report his or her observations to a supervising lawyer or the senior management of the firm as necessary to bring the situation to the attention of lawyers in the firm who can take action.

Opinion #7: An associate lawyer in the firm reports to his supervising lawyer that he suspects that Attorney X is mentally impaired. He also describes to the supervising lawyer conduct by Attorney X that violated Rules 1.1 and 1.3. The supervising lawyer tells the associate to ignore the situation and to not say anything to anyone about his observations including clients, other lawyers in the firm, or staff members. The associate concludes that no action will be taken to investigate or address Attorney X’s behavior. Does the associate lawyer have any further obligation?

Opinion #8: Assume that Attorney X is the sole principal in the firm and there is no associate lawyer. Attorney X displays behavior that may indicate that he is in the early stages of Alzheimer’s disease or dementia. There is no senior management to whom the associate lawyer can report. What should the associate lawyer do?

Opinion #9: If the associate lawyer believes that the duty to report professional misconduct under Rule 8.3 may be triggered by the conduct of Attorney X, the associate lawyer should seek guidance as to his professional responsibilities from the lawyers at the State Bar who provide informal ethics advice. See Opinion #7. Regardless of whether Attorney X’s conduct triggers the duty to report, the associate lawyer may seek advice and assistance from the LAP or from another approved lawyer assistance program, or may contact a trusted, more experienced lawyer in another firm to serve as a mentor or advisor on how to address the situation.

Opinion #10: Assume Attorney X is a sole practitioner and the lawyers in his community observe behavior that may indicate that he is in the early stages of Alzheimer’s disease or dementia. What is the responsibility of the lawyers in the community?

Opinion #11: The Rules of Professional Conduct impose no specific duty on other members of the bar to take action relative to a potentially impaired fellow lawyer except the duty to report to the State Bar if the other lawyer’s conduct raises a substantial question about his honesty, trustworthiness, or fitness to practice law and the information about the lawyer is not confidential client information. See Opinion #7. Nevertheless, as a matter of professional responsibility, attendant to the duties to seek to improve the legal profession and to protect the interests of the public that are articulated in the Preamble to the Rules of Professional Conduct, the lawyers in the community are encouraged to assist the potentially impaired lawyer to find treatment or to transition from the practice of law. A mental health professional, the LAP, or another lawyer assistance program can be consulted for advice and assistance.

Endnotes

2. This opinion does not address the issues that may arise under the Americans with Disabilities Act of 1990, 42 US C. §§12101 et seq. (2003) (the ADA) relative to an employer’s legal responsibilities to an impaired lawyer. Lawyers are advised to consult the ADA and the Equal Employment Opportunity Commission’s website, eeo.gov, for guidance.

3. “Firm” as used in the Rules of Professional Conduct and this opinion denotes “a lawyer or lawyers in a law partnership, professional corporation, sole proprietorship, or other association authorized to practice law; or lawyers employed in a legal services organization or the legal department of a corporation, government entity, or other organization.” Rule 1.0(d).

4. “Partner” as used in the Rules of Professional Conduct and this opinion denotes “a member of a partnership, a shareholder in a law firm organized as a professional corporation, or a member of an association authorized to practice law.” Rule 1.0(h).

5. It is improper for a firm to charge a client for additional supervision for an impaired lawyer if the supervision exceeds what is normally required to ensure competent representation unless the client is advised of the reason for the additional supervision and agrees to the charges. See Rule 1.5(a).

6. ABA Formal Op. 03-429 provides the following examples of accommodation: A lawyer who, because of his mental impairment, is unable to perform tasks under strict deadlines or other pressures, might be able to function in compliance with the [Rules] if he can work in an unpressured environment. In addition, the type of work involved, as opposed to the circumstances under which the work occurs, might need to be examined when considering the effect that an impairment might have on a lawyer's performance. For example, an impairment may make it impossible for a lawyer to handle a jury trial or hostile takeover competently, but not interfere at all with his performing legal research or drafting transaction documents.

7. One such program is the Transitioning Lawyers Commission (or "TLC") of the North Carolina Bar Association, which considers issues of aging and cognitive impairment and helps lawyers to wind down their law practices to "retire gracefully." See more at: tlc.ncbar.org.

8. ABA Formal Op. 03-429 cautions that when reporting an impaired lawyer pursuant to Rule 8.3, disclosure of the impairment may be necessary; however, the reporting lawyer should be careful to avoid violating the ADA.

9. ABA Formal Op. 03-429 counsels that, when providing a client with information about the departed lawyer, a firm lawyer “must be careful to limit any statement to ones for which there is a reasonable factual foundation.” This will avoid violating the prohibition on false and misleading communications in Rule 7.1 and the prohibition on deceit and misrepresentation in Rule 8.4(c).
Confronting Addiction in the Law Firm

A recent study reveals the extent of substance abuse and mental health concerns within the legal profession. Here’s what you can do about it.

COURSE DESCRIPTION

In 2016, The Journal of Addiction Medicine published a groundbreaking study by Hazelden Betty Ford and the American Bar Association Commission on Lawyer Assistance Programs: “The Prevalence of Substance Use and Other Mental Health Concerns Among American Attorneys.” Although it has been commonly presumed that the legal profession had a heightened rate of these problems as compared to the general public and other professions, nobody expected the numbers — reported by only active, practicing attorneys — to rise to the level that they did. It has now been clearly revealed as a full-blown crisis that cannot be ignored. This course will detail the findings of the study and its potential consequences, while providing insight into the disease of addiction itself and how it presents itself in a law firm setting. Further, it will provide strategies and tools for handling both present-day concerns as well as suggestions for prevention of these problems and a necessary shift in law firm culture. They from accountants and consultants themselves.
COURSE OBJECTIVES

• Review the Journal of Addiction Medicine study and describe the current extent of substance abuse and other mental health concerns among licensed attorneys.

• Identify the potential damaging consequences when a law firm does not confront these issues.

• Define addiction and how it typically manifests itself within a law firm.

• Explain the process of recovery from addiction, as well as the obstacles and rewards of the addict’s return to work as a sober employee.

• Break down what constitutes “high-functioning” addicts and why they so often elude detection.

• Examine strategies for confronting an employee’s behavioral health crisis when it occurs at the law firm.

• Discuss new strategies for building a culture of prevention, wellness and support.

THE STUDY EXPLAINED

Although it’s been commonly accepted knowledge for decades that attorneys have a high rate of alcoholism, little data and research had been generated since the 1990s. The research conducted at that time was limited in scope, but it did conclude that lawyers had approximately twice the rate of alcoholism and at least three times the rate of depression than the general population. The authors of those findings called for additional research about the extent of alcoholism and depression among practicing U.S. attorneys; however, until now, none had been forthcoming.1

In 2014, Hazelden Betty Ford (HBF) and the American Bar Association (ABA) Commission on Lawyer Assistance Programs funded and initiated an evidence-based study to ascertain rates of substance abuse and other mental health concerns among attorneys, the prevalence of these concerns among licensed attorneys, their utilization of treatment services, and what barriers existed between them and the services they may need. The study was published in The Journal of Addiction Medicine in the January/February 2016 issue.2

A total of 12,825 licensed, employed attorneys from 19 states returned a number of questionnaires specific to alcohol use, drug abuse, depression, anxiety and stress. All of them completed the Alcohol Use Disorders Identification Test (AUDIT). The first three questions of that test are objective questions that concern how much and how often an individual drinks. The remaining seven questions are more subjective and address whether the individual has failed — as a result of drinking — to meet individual expectations, caused any injury, had periods of drinking more than intended, has needed a drink in the morning to function, has failed to remember a specific drinking episode, has felt guilty about drinking, or had friends or family express concern about alcohol use. Based on the answers to the first three questions alone, an astounding 36.4 percent of the responding attorneys could be characterized as hazardous drinkers — more than 3.5 out of every 10. In a similar test given to doctors, only 15 percent who answered the first three questions were characterized in such a manner.

When all 10 questions are considered, 20.6 percent of all the attorneys were still determined to be problem, potentially dependent drinkers. Significantly, this compares to a rate of 11.8 percent for a broad, highly educated workforce screened with the same measure.

Not enough attorneys responded to the drug-use questionnaire to permit any scientific conclusions in that respect. However, this is meaningful because the anecdotal knowledge of the profession underscores systemic use of opioids, sedatives and stimulants, often in conjunction with alcohol. These either constitute separate instances of addicted impairment or, when used with alcohol, dangerous and medically counter-indicated use.
Attorneys were found to have a greatly heightened rate of depression (26 percent) — about four times the national average — and high rates of stress (23 percent) and anxiety (19 percent). It is also interesting to note that 46 percent of all the responding lawyers reported that they had experienced significant depression issues at some point in their careers. Likewise, 61 percent revealed experiencing high levels of anxiety at some career juncture.

Other findings were equally provocative. The study concluded that younger age predicted higher frequencies of drinking and quantities consumed. Attorneys in their first 10 years of practice experience the highest level of problematic use, as do attorneys under the age of 30. Law firms — along with bar associations — have the highest level of use; within a firm, the junior associates have the highest, followed by senior associates, junior partners and then senior partners.

Of the responders who acknowledged problematic alcoholic use, more than 40 percent indicated that such use began either prior to or during law school.

THE CONSEQUENCES

*The Journal of Addiction Medicine* study concluded that “although the consequences of attorney impairment may seem less direct or urgent than the threat posed by impaired physicians, they are nonetheless profound and far-reaching. As a licensed profession that influences all aspects of society, economy, and government, levels of impairment among attorneys are of great importance…”

In respect to the anticipated readers of this article, the consequences are exponential in terms of actual and potential damage. Clients approach law firm personnel with problems that can be life-or-death (capital defense). And others can certainly feel that way when related to business, estates, families, custody, health, finances, physical safety, civil rights, employment and property. And lawyers are paid by clients for their clear and robust judgment — the first attribute to desert an impaired attorney.

Although the damage lawyers may do is not as visceral as an impaired doctor botching a surgery or a pilot crashing a plane, it is nonetheless life-altering for most, if not all, of their clients.

And the law firm itself is at risk the moment one of its lawyers or staff perform services while impaired. Client relationships and trust are jeopardized. There is an enhanced potential for malpractice. The team or practice group of which that individual is a member is compromised. Productivity and quality of work decreases rapidly. Ethical issues are raised and rules of professional conduct often breached. The investment in that employee is potentially lost.

The loss in productivity due to alcoholism alone — in law offices as well as the floors of industrial plants — is calculated to be in the billions of dollars.³

Up to this point, law firms have typically not proactively addressed this issue. Unlike doctors and pilots, who are provided a structured and lengthy path back to work, lawyers are often discarded when their addiction issues become unacceptable. They may be terminated, bought out, make a lateral move to another firm or even die. But unless the lawyer is a key rainmaker in the firm, it is rare that an attorney will admit their disease and be provided a secure path to return to the firm.
Attorneys routinely hide their addiction or mental health issues — often for decades — rather than admit and treat a problem. There is still a stigma in this field about these conditions, and often one does not know what is really going on with the partner next door.

The most profound impact of this study is that it reveals why attorneys will not ask for help and treat their conditions, while highlighting the actual numbers of lawyers hiding, in pain and isolation, behind the curtain. The two common barriers to treatment reported by the respondents were 1) not wanting others to find out they needed help, and 2) concerns regarding privacy and confidentiality.

In addition, employees of law firms are competitive, concerned for their reputations, and used to being the problem-solvers. They do not want to show weakness, and they tend to have strong egos. Add this to the overall “normalized” drinking culture of law firms — from client dinners to retreats to bar events — and a toxic breeding ground emerges.

UNDERSTANDING ADDICTION

In order to understand the study and the behavior of impaired peers in a law firm, it is essential to know what addiction is and how it is typically manifested in that environment. An understanding of this misunderstood disease is also critical to make necessary changes in firm culture and to appropriately confront the attendant stigma, behaviors and dangers.

Addiction is a primary, chronic and progressive disease of the brain’s reward, motivation, memory and related circuitry. It causes compulsive alcohol or drug-seeking and use, despite harmful consequences to the addict and those in proximity. Over time, the brain continues to change, and self-control and the ability to resist substances is further eroded. Genetics and biology are now understood to account for at least 50 percent of the cause, with factors such as environment, development and mental health playing additional roles.

Although addiction is a chronic disease in a class with others such as cancer, diabetes and hypertension, its symptoms manifest as behavioral in contrast to the more objective symptoms of those other conditions (often identified through blood work, X-rays, biopsies, etc.). The behaviors associated with addiction also tend to be negative and antisocial, further complicating not only the diagnosis but the perception of peers. It is not uncommon for both the addict and his or her family and friends to moralize when these symptoms appear, and feel frustration and contempt due to a perceived “lack of willpower” or a loss of moral direction.

The brain of the addict is often referred to as having been “hijacked,” and the result is often systematic denial of any problem by the addict and the creation of a “private logic” telling the addict that everything is fine. Often this presents with addicts comparing themselves to others at a more advanced stage and believing they are not a “real addict,” or blaming their drinking on other factors, such as: “You would drink too if…”

A simple example is a cancer diagnosis. People are told by the doctor what the test results were, begin treatment, and have the support of family, friends and perhaps even a CaringBridge. In contrast, alcoholics who finally begin treatment (if they even do) have often angered their family, employer and friends, and are virtually alone and isolated. During a speech, I once asked all 200 patients at Hazelden Betty Ford if any of them had a CaringBridge for their condition. The audience was silent.

Addiction cannot be cured, but it can be successfully treated, typically with the assistance of professional help or support organizations. Clinical resources can range from residential treatment to outpatient groups and sober houses. Support groups can include abstinence-based programs such as Alcoholics Anonymous, less spiritually based organizations, and harm-reduction frameworks. When alcoholics accept treatment, they are said to be in recovery — the process of change through which an individual achieves abstinence and improved health, wellness and quality of life. As with other chronic diseases, it is essential to receive help and support from others, make fundamental lifestyle changes and alter many core values.

The first year of recovery is the most demanding for the addict. Often, he or she must make accommodations in career or life in order to make recovery the first priority. This is why the treatment of the disease and the return to work — or
the continuation of work while now sober — is often key to building a foundation of sustained recovery.

Alcoholics are told that in their first year of abstinence their recovery must come first, above anything else. Relapse during that year is not uncommon, but it does not indicate that things are hopeless. Rather, it is a message that the addict must get back on track with treatment and recovery resources. The same is true with all chronic diseases, where only 50 to 60 percent of patients typically comply fully with their treatment protocol.7

If the law firm can support its employee in recovery, the benefits can be breathtaking. Not only will the employee no longer be performing at a diminished and erratic rate, but also they can become better than ever. It is likely that this employee’s attention and judgment has been compromised for some time, and it can be exhilarating for both the impaired individual as well as the firm to heal cognitively and physically and return to the level of competence for which they were hired.

THE ALCOHOLIC IN THE LAW FIRM

This study tells us about the stark reality of impairment and mental health discord behind the closed doors of our law offices. But as discussed earlier, the attorney or staff member will often conceal or deny any problem, even in the face of overwhelming evidence to the contrary. How can you identify somebody at your firm (including yourself) with a problem? And what does a “high-functioning” alcoholic look like? Why are they often invisible to their colleagues?

Numerous warning signs are consistent with an impaired employee who has a drinking problem. Before listing many of these typical signs, a word of caution: Many of these can be due to reasons besides a substance use issue. They can be due to mental health issues, situational life matters (divorce, money problems, family situation), physical challenges and various other reasons. It is important not to “diagnose” any particular situation, but to help yourself or another by addressing the matter openly, and then, if appropriate, seeking expert consultation or assessment.

The goal is simply for you and your coworkers to be healthy and productive and to provide (or access) support to help treat the temporary or chronic condition. The key is that further consequences and damage — to all concerned — do not occur, and that the individual can begin to get better and heal. If you or the individual refuse to be treated accordingly, then at least the law firm has assisted to the extent possible. Decisions can then be made as to the current and anticipated job performance.

Some specific possible warning signs of a drinking problem at the firm:

1. Isolation
2. Change in regular patterns
3. Disappearing at unexpected times
4. Lots of excuses for unexplained issues
5. Change in physical appearance
6. Significant weight gain or loss
7. Red eyes
8. Lots of breath mints or mouthwash
9. Becoming defensive when not appropriate
10. Change in behavior — advent of fast talking, loud talking, loud laughter, extended periods of silence
11. Mood swings
12. Lateness
13. Decrease in productivity
14. Confused thinking
15. Forgetfulness
16. Being tired all the time
17. Looking tired
18. Extended breaks, lunches
19. Leaving early, working from home
20. Strained relationships with coworkers
21. Increased irritation
22. Borrowing money
23. Unplanned “emergencies”
24. Missed deadlines
25. Unsteady gait
26. Strange breath; smell of alcohol or something different
27. Lack of concentration
28. Misses work on Mondays or leaves early on Fridays
29. Avoids interactions
30. Door that was always open is now always closed
31. Inappropriate episodes of sweating
32. Unexplained bruises, injuries
But what if the addicted staff member is a high-functioning alcoholic and does not change routine or behavior? Up to 50 percent of all alcoholics are described in this manner, and lawyers and those in a law firm are especially skilled at concealing and manipulating the reality of their lives. Those individuals are adept at hiding their addiction and presenting as fully functional people for up to decades, while secretly engaging in addictive behavior.

In fact, lawyers in particular will hold onto their careers for dear life because often it is how they identify themselves — addiction often takes away family, friends and health before the surrender of the career.

Because the disease is progressive, “hiding” it is not sustainable. Often the worst consequences and damage are suffered at this moment. Further, by that point, the individual has often reached a pinnacle of authority and autonomy that permits even greater isolation and less accountability — and enhanced danger to all involved, including the law firm.

I have gathered together a list of certain traits of a high-functioning alcoholic that may be helpful in viewing yourself or others at the firm:

- Does not appear as prototypical stereotype
- Has very high tolerance and seldom, if ever, appears intoxicated
- Drinks expensive wines or liquors
- Shows up for work, has a family, fulfills obligations
- Does not drink more than others at public functions but privately drinks to excess — often before and after such functions
- Still looks terrific
- Overachiever in most areas and uses this skill set to sell others that there is not a problem
- Often very successful
- Able to compartmentalize easily

- Has tried to quit (privately) on numerous occasions, but has never succeeded
- Has not had a driving under the influence (DUI) infraction, been arrested, exhibited inappropriate behavior, engaged in any public display or shown significant obvious physical infirmity
- Often can work alone without accountability to others
- Blends into a firm culture of drinking and a “work hard, play hard” mentality
- Always finishes a drink
- Secretly craves and obsesses over use and next drinking opportunity, but does not verbalize this to others

Once again, this is not an invitation to play Sherlock Holmes, but rather to gain some insight into how this powerful brain disease can transform the best of us into strangers. We try to hide the disease because we are more afraid of the stigma than we are of the disease itself (and its eventual fatal progression). This, of course, is not logical, but explains both the mystery and power of addiction.

HOW TO CONFRONT ADDICTION IN A LAW FIRM
What do you do if you believe a colleague is impaired to the point where the work product and behavior are negatively affected? This person may not even drink at work or during the day, but it is clear to you that their drinking (or drug use) has compromised their professional performance.

If there is not a crisis, you may wish to approach the individual in a relaxed and compassionate manner and express concern, or ask questions. Based on the response, you can consider the next step. Remember, you are not diagnosing — only trying to ascertain if the behavior is temporary and being appropriately treated, or, if more serious, that resources can be accessed to address the issue.

Your law firm might consider putting a series of protocols into place that make it safe and comfortable for you or the impaired individual to confront the situation and receive expert assistance. The firm may wish to consult ahead of time.

WHY LAW FIRMS MUST GET SERIOUS ABOUT SUBSTANCE ABUSE
Join Link Christin, JD, MA, LADC, Executive Director, Legal Professionals Program Caron Treatment Centers, at our Annual Conference & Expo in Denver as he details more about substance abuse in the law firm. Learn what you can do to help keep the employee — and the law firm — safe. Learn more at alanet.org/ac2017.
with any variety of experts: human resources, the employee assistance program (EAP), interventionists, treatment centers, recovery coaches, addictionologists, detoxification facilities, therapists or other counsel. Ethical rules and responsibilities may come into play, and counsel should be consulted.

The only thing you can do wrong is to do nothing at all. Ignoring the situation only permits the individual’s disease to worsen and assures far more damage to the individual, the family, the law firm, the client and your professional standing.

This is an entirely different matter than detecting an issue with a friend or relative: In this case, you are the professional peer of the impaired person, with fiduciary duties to your firm and client and ethical obligations to your profession. On a personal note, this is your colleague, often your friend, and whether your firm is 6 employees or 600, a member of your team.

A couple of other observations: First, do not enable or hide anything in order to assist the impaired individual in covering up any matter. This is likely an ethical violation, and it is certainly a clinical misstep. Alcoholics will only get worse if their behavior is enabled (there are hundreds of books about this codependency). Second, do not gossip about situations such as these. As a member of law firms for more than 20 years, I am not naive about the steady flow of juicy gossip in any firm. However, this is truly a matter of life and death, and there can be unintended consequences of such gossip that are unpredictable.

Finally, if there is an actual crisis in the workplace with the impaired lawyer or staff member — in the office, in court or with a client while under the influence — it is helpful to have a basic emergency template to guide the firm in how to proceed. The same is true for fire or weather or health emergencies, and should be in place for these types of matters. A few suggestions as to content:

- Get the employee to a safe and secure place.
- Have at least two people present.
- Make sure the individual is mentally, physically and psychologically safe — utilize professionals at this point who are part of this protocol.
- Know who to involve and notify at this point and to whom to release any information about this event.
- Make sure confidentiality remains paramount.
- Document everything.
- Have a plan for what to do if the individual will not cooperate and leaves.
- Create at least a short-term strategy with the assistance of necessary experts.
- Safety is essential for all concerned — do not permit the individual to drive home.
- Suspend the employee with pay if appropriate.

BUILDING A CULTURE OF PREVENTION, WELLNESS AND SUPPORT

The staggering numbers in this study, which suggest that as many as 500,000 practicing lawyers are problem drinkers and close to 400,000 suffer from depression, will not be decreased with a tweak here or there. And the study does not even include those employees and staff of law firms subjected to many of the same stresses and demands. Many of the qualities that reward today’s attorney — a competitive spirit, high self-esteem, emotional detachment, an analytical skill set, high verbal skills, a win-at-all-costs mentality — are precisely the same ones that block the road to recovery.

What is required is a seismic shift in culture. More than just a refusal to toss the sick aside, we need a realization that it is in the best interests of the law firm to promote and sustain a culture of wellness and balance.

Much of the corporate world has come to this realization. Working hours of employees have been limited. Access to company emails on weekends has been denied. Company cafeterias have become nutritionally balanced. Gyms have been built, and yoga classes offered. Seminars on health topics have been provided, and incentives for good health have been offered. Working from home has been restricted. Additional leave has been created. Sabbaticals have been implemented. Counseling services have been supplemented. These corporations (and their insurers) have recognized that a lack of balance results in both physical and mental states that impair employees and often shorten their tenure.

By way of example, here some initial suggestions on how law firms might begin this process:

- Invest in resources and services to enhance the wellness of all employees.
- Provide speakers and materials about balance and wellness.
- Educate all personnel about stress, anxiety, depression, opioids, sedatives, alcohol, burnout and addiction and tools
with which to confront or prevent problems in connection with them (with CLE credits).

- Host nonalcoholic professional events and gatherings.
- Create a retreat that focuses on learning balance, relaxation, stress-reduction, meditation, team-building and breathing techniques.
- Partner on healthy initiatives with your HR department, Employee Assistance Program (EAP), health care and malpractice providers, state lawyers’ assistance program and other industry experts.
- Lower the minimum billable hours requirement and set a maximum.
- Create specific policies that permit employees to seek help for addiction or mental health issues without concern for their job security.
- Provide a back-to-work plan and path for any employee who has received help for such a problem and is treating that condition. The plan can include monitoring and accountability so that all parties can be assured there is no danger to the client or the firm, and specific conditions can be set in the event of a relapse by that employee or a failure to improve job performance.
- Use this model as a recruiting tool for law students and other lawyers and staff.

The profession itself has much it can do, and that is a topic for another day. However, within the law firm itself, change can begin. Today thousands of productive law firm employees are treating chronic illnesses and mental health conditions and are assets to their firms and clients. It is the hundreds of thousands of attorneys and others who are working with untreated addiction or mental health issues who suffer daily and pose untenable risks to others.

Certainly the best minds in our country — our most talented problem-solvers — can crack the stigma that prevents them from asking for help while at the same time building a business model that sustains productivity and personal satisfaction.

REFERENCES

ABOUT THE AUTHOR

Link Christin, JD, MA, LADC, is the first Executive Director of the Legal Professionals Program at Caron Treatment Centers. He is currently launching and managing this national program, which will provide pre-entry, residential, and post-residential educational and clinical services to lawyers, judges, law students, and paralegals admitted to Caron. Part of these services will include coordination with law firms, disciplinary boards, licensing and admission agencies, and state lawyer assistance programs (when agreed to by the patient). Most recently he served as the Chief Executive Officer of Heightened Performance LLC, a behavioral health consulting firm serving the legal community. After decades of practice as a trial attorney Christin obtained his master’s degree in Addiction Counseling and founded and directed the Legal Professionals Program at Hazelden Betty Ford.

lchristin@caron.org 610-743-6562

NOW THAT YOU’VE READ THE COURSE...

You can take the quiz to earn your CE credit. For more information on this, please refer to the web version of this article.
NEW YORK STATE BAR ASSOCIATION
LAWYER ASSISTANCE COMMITTEE
MODEL POLICY

PREAMBLE

The New York State Bar Association is committed to assisting individuals in the legal profession who are dealing with impairment issues that affect performance on the job, whether caused by alcohol, drugs, other addictive behaviors, depression or other mental health conditions.

The NYSBA Lawyer Assistance Committee has drafted the following Model Policy for adoption by law firms/legal departments throughout New York State, with the following assumptions: that early intervention and treatment are fundamental goals, and that adoption of the policy will help to maintain the integrity of the legal profession and the viability of the [law firm/legal department], while protecting clients.

Each law firm/legal department may tailor the policy for its purposes, taking into consideration such factors as size, resources and practice setting. The policy is best used to augment broader policies that cover work conduct, disciplinary procedures, paid leave and health insurance benefits. It should be adopted subject to the regulations of the Family Medical Leave Act, ABA, New York State Human Rights Law, and applicable collective bargaining agreements.

MODEL POLICY for LAW FIRMS/LEGAL DEPARTMENTS
ADDRESSING IMPAIRMENT

I. DEFINING THE PROBLEM

Impairment of a legal professional adversely affects not only the individual’s well-being, but it also directly and adversely affects the [law firm’s/legal department’s] ability to provide the highest quality legal services to its clients and may lead to professional liability, violations of ethical obligations, professional discipline, a loss of public reputation and criminal prosecution. The chief contributors to impairment of legal professionals are clinical depression and other mental health conditions, dependency on drugs and alcohol, and other addictive behaviors.

II. POLICY STATEMENT

It is the policy of this [firm/legal department] that impairment of [law firm/legal department] legal professionals is inconsistent with its mission.
Further, it is the policy of this [law firm/legal department] that impaired legal professionals are in need of assistance and treatment, and that early identification and intervention will provide the greatest hope of overcoming such impairment. This [law firm/legal department] recognizes that impairment is not a moral failing.

The purpose of this policy is to encourage self-identification, self-referral, referral, treatment and recovery. The [law firm/legal department], consistent with applicable law and the Rules of Professional Conduct, will not tolerate unlawful discrimination against a legal professional who has availed himself or herself of the [law firm’s/legal department’s] resources, as further set forth in this policy.

The [law firm/legal department] shall provide a copy of this policy to all employees and legal professionals.

III. WHO IS COVERED

This policy applies to all [law firm/legal department] legal professionals, including, but not limited to, partners and managing attorneys, associates, and paralegals, subject to any applicable collective bargaining agreement.

The [law firm/legal department] will assist and support legal professionals who voluntarily seek help for impairment or who are directed, as a result of a work performance evaluation, to seek help for impairment. The [law firm/legal department] will permit impaired legal professionals to use paid time off, be placed on a leave of absence, be referred for treatment or otherwise provide accommodations as required by law and permitted consistent with [law firm/legal department] leave policies.

IV. PROFESSIONAL RESPONSIBILITY

It is the responsibility of all legal professionals of this [law firm/legal department] to provide the highest quality legal services to its clients. Impairment due to the use of alcohol or drugs or due to mental health conditions can lead to potential incompetence and/or misconduct which compromises the [law firm/legal department]’s ability to service its clients in accordance with this responsibility.

Attendance and work performance of legal professionals of this [law firm/legal department] will be evaluated.

- Frequent lateness, absenteeism, failure to be on time for meetings and other attendance issues will not be tolerated.
- Failure to meet deadlines, failure to timely return phone calls will not be tolerated
- Disrespect for, or mistreatment of, staff or colleagues will not be tolerated.

If attendance or work performance issues or behaviors are being caused by impairment,
this [law firm/legal department] encourages self-referral or referral to its EAP (employee assistance program) or to the New York State Bar Association Lawyer Assistance Program (See, Article VII, below), as appropriate, prior to the initiation of [law firm/legal department] disciplinary action if possible and appropriate. Legal professionals of the [law firm/legal department] who fail or refuse to avail themselves of the opportunity to seek and follow through on treatment will be subject to internal discipline, up to and including possible termination.

While a legal professional may have a desire to assist another legal professional with an impairment avoid the consequences of his or her conduct, an attorney is nonetheless obligated under appropriate circumstances to report wrongful conduct of fellow attorneys pursuant to Rule 8.3 of the NY Rules of Professional Conduct (effective April 1, 2009), a portion of which is attached for reference. (See, also, N.Y. State 822.)

V. CONFIDENTIALITY

To the extent possible, this [law firm/legal department] will endeavor to maintain the confidentiality of a legal professional who has self-referred, or who has been referred, to available resources for evaluation and treatment. Please be advised that certain matters may not remain confidential (e.g., a threat to harm yourself or others, future criminal conduct, child abuse), but every attempt will be made to keep a legal professional’s personal issues confidential.

The [law firm/legal department] will designate an appropriate person or persons to assist the impaired legal professional with issues of insurance coverage, payment for treatment and covering client matters during treatment, as necessary, and compliance with Return to Work agreements. (See, Article IX, below). Cooperation in all such matters is required, and failure to cooperate may result in [law firm/legal department] discipline, up to and including possible termination.

VI. EDUCATION

The [law firm/legal department] is dedicated to providing continuing education and training to all legal professionals in relation to implementation of this and all policies as well as education related to work/life balance, stress reduction and other such topics that can support outstanding work performance and continuing success of the [law firm/legal department]’s mission.

VII. AVAILABLE RESOURCES

[Law firm/legal department]

Contact: Call (e.g. NAME at x 6021) for information about this policy, its administration and for a confidential referral if appropriate.
April 9, 2010

Referral or Self-referral to Employee Assistance Program: if applicable, insert information about the [law firm/legal department]’s health insurance carrier’s Employee Assistance Program -- e.g.

Our law firm health insurance policy includes access to an Employee Assistance Program for the purpose of self-referral or referral of individuals and their co-workers who are impaired, their families. We encourage you to contact the EAP. EAP is a confidential service provided at no cost to covered employees and others who are affected by impairment.

Referral or Self-referral to Lawyer Assistance Program: The New York State Bar Association maintains a statewide confidential Helpline at 1-800-255-0569. The NYSBA LAP provides confidential assistance, including but not limited to, relevant information about impairment, identification of appropriate assessment providers, and assistance in intervention planning, assistance in identifying potential treatment providers and resources for impaired attorneys and CLE.

Confidential communications between a legal professional and a Lawyer Assistance Program are deemed privileged. Section 499 of the Judiciary Law (as amended by Chapter 327 of the Laws of 1993 and as amended thereafter) provides the following:

1. Confidential Information Privileged. The confidential relations and communications between a member or authorized agent of a lawyer assistance committee sponsored by a state or local bar association and any person, firm or corporation communicating with such a committee, its members or authorized agents shall be deemed to be privileged on the same basis as those provided by law between attorney and client. Such privileges may be waived only by the person, firm or corporation that has furnished the information to the committee.

2. Immunity from Liability. Any person, firm or corporation in good faith providing information to, or in any other way participating in the affairs of, any of the committees referred to in subdivision one of this section shall be immune from civil liability that might otherwise result by reason of such conduct. For the purpose of any proceeding, the good faith of any such person, firm or corporation shall be presumed.

VIII. PROHIBITIONS/CONSEQUENCES

Legal professionals are prohibited from on-the-job impairment from alcohol or controlled substances. Any individual who distributes, sells, attempts to sell, transfer, possess or purchase any illegal substance while at work or while performing in a work-related capacity may be subjected to internal [law firm/legal department] disciplinary action including termination, and/or civil penalties and criminal penalties if appropriate.
IX. RETURN TO WORK AGREEMENTS

The [law firm/legal department] may require a legal professional (who has self-referred or who has been referred for treatment) to execute a Return to Work agreement.

If a legal professional -- prior to being subjected to professional disciplinary action or where internal disciplinary action has been held in abeyance during the pendency of treatment -- engages in appropriate treatment, he or she may be required to execute a Return to Work Agreement prior to returning to work.

Such Return to Work Agreement will include:

- verification of the legal professional’s participation in a treatment program,
- the legal professional’s commitment to maintain the prescribed regimen for continued wellness, to adhere to the firm’s code of conduct and professional responsibility, and to participate in aftercare,
- a commitment to undergo drug or alcohol testing if appropriate,
- authorization by the legal professional to appropriate firm representatives to discuss compliance with the foregoing requirement, but limited to a need-to-know basis [and] while maintaining privacy particularly with respect to medical records,
- an acknowledgement that a violation of the Return to Work Agreement will result in immediate sanctions.

(A sample agreement is attached).
APPENDIX A

22 NYCRR Part 1200 – NY Rules of Professional Conduct (effective April 1, 2009)

Rule 8.3 Reporting Professional Misconduct

(a) A lawyer who knows that another lawyer has committed a violation of the Rules of Professional Conduct that raises a substantial question as to that lawyer’s honesty, trustworthiness or fitness as a lawyer shall report such knowledge to a tribunal or other authority empowered to investigate or act upon such violation.

(b) A lawyer who possesses knowledge or evidence concerning another lawyer or a judge shall not fail to respond to a lawful demand for information from a tribunal or other authority empowered to investigate or act upon such conduct.

(c) This Rules does not require disclosure of:

(1) Information otherwise protected by Rule 1.6; or

(2) Information gained by a lawyer or judge while participating in a bona fide lawyer assistance program.

Rule 8.4 Misconduct

A lawyer or law firm shall not:

(a) violate or attempt to violate the Rules of Professional Conduct, knowingly assist or induce another to do so, or do so through the acts of another;

(b) engage in illegal conduct that adversely reflects on the lawyer’s honesty, trustworthiness or fitness as a lawyer;

(c) engage in conduct involving dishonesty, fraud, deceit or misrepresentation;

(d) engage in conduct that is prejudicial to the administration of justice;

(e) state or imply an ability:

(1) to influence improperly or upon irrelevant grounds any tribunal, legislative body or public official; or

(2) to achieve results using means that violate these Rules or other law;
(f) knowingly assist a judge or judicial officer in conduct that is a violation of applicable rules of judicial conduct or other law;

(g) unlawfully discriminate in the practice of law, including in hiring, promoting or otherwise determining conditions of employment on the basis of age, race, creed, color, national origin, sex, disability, marital status or sexual orientation. Where there is a tribunal with jurisdiction to hear a complaint, if timely brought, other than a Department Disciplinary Committee, a complaint based on unlawful discrimination shall be brought before such tribunal in the first instance. A certified copy of a determination by such a tribunal, which has become final and enforceable and as to which the right to judicial or appellate review has been exhausted, finding that the lawyer has engaged in an unlawful discriminatory practice shall constitute prima facie evidence of professional misconduct in a disciplinary proceeding; or

(h) engage in any other conduct that adversely reflects on the lawyer’s fitness as a lawyer.
APPENDIX B

SAMPLE: TREATMENT AND RETURN TO WORK AGREEMENT

By signing this agreement I accept and agree to the following terms and conditions which will govern my [continued employment with/association with] and my return to work with [law firm/law department].

I. TREATMENT

I acknowledge that my work performance and/or behavior have resulted in the need for intervention and have provided a basis for disciplinary action, up to and including the termination of my employment (or: define nature of relationship with the [law firm/legal department].) As a consequence, and in order to avoid the termination of my employment/expulsion from the [law firm/legal department], I voluntarily accept the terms of this agreement.

1. I agree to submit to an immediate evaluation by a health care professional of the [law firm/legal department]’s selection or approval.
2. I agree to follow all treatment and aftercare recommendations by that health care professional or treatment program.
3. I understand that I am responsible for all costs associated with the treatment program to the extent they are not covered by insurance.
4. I will authorize regular progress reports to be made to the [law firm/legal department] during treatment (tailor to specific consent).

II. RETURN TO WORK

Clearance for my return to work will be determined by my health care provider and the employer.

Upon my return to work, I agree to abide by the [law firm/legal department]’s policy regarding attendance and work performance, and I agree that my failure to do so may result in disciplinary action up to and including termination/expulsion from the [law firm/legal department].

Upon my return to work, I agree to review treatment and/or aftercare requirements with the designated [law firm/legal department] representative [on a need to know basis], and I agree to strictly comply with such treatment and aftercare requirements. My failure to do so may result in disciplinary action up to and including termination/expulsion for the [law firm/legal department].

I will ensure that, within an established time frame, my health care provider will submit
April 9, 2010

regular progress reports to the designated representative at [law firm/legal department] until my treatment is complete, upon which the health care provider will submit a summary report.

I agree to abide by all standards of professionalism, behavior and performance required of legal professionals at the [law firm/legal department], including but not limited to, those set out in its policy and procedure manual.

I agree that this agreement does not guarantee my employment, position or compensation for any period of time. I understand and acknowledge that strict adherence to these terms and conditions are a requirement of my continued work with the [law firm/legal department] and that any violation of the terms of this agreement (including its incorporated standards) may result in [law firm/legal department] disciplinary action, up to and including my immediate termination/expulsion.

By my signature below I confirm that I have reviewed and considered these terms and accept them voluntarily as a constructive part of my recovery. I also acknowledge that these terms are being provided to me as an alternate to the termination of my employment/affiliation. I understand that I may withdraw my consent at any time during the term of this agreement, but acknowledge that withdrawing my consent is a voluntary termination of my employment (consent to my expulsion from the firm).

Signature #1 (at the time of intervention):

Signature #2 (upon return to work, and incorporating aftercare recommendations)
Time is Money!

- Travel refreshes the mind, body, and soul...even if you are working a few hours each travel day
- You will be more efficient, productive, and innovative
- Travel gives you a goal and something to look forward to during those stressful days
- Plane travel, lounges, and morning coffee are productive times
- You can bill while flying or sitting by the ocean having your morning coffee – offsetting the cost of travel
- Make more money by better utilizing your time and working more efficiently.

Technology Frees You!

- Global Phone
- Project Fi
  
  https://g.co/fi/r/XDY1R4
- Same Email and Phone Number – 135 COUNTRIES!
- ONE MILLION WIFI HOTSPOTS
- Acts as a hotspot
- Never more than $80 per month
DOCUMENT STORAGE ON THE GO!

• 2-4TB External Hard Drive
• Cloud Storage
  • Box.com
  • Dropbox.com
  • Microsoft One Drive
• Sync Hard Drive and Cloud

Automate!

• Office 365 Tools/Apps
  • Boomerang
  • Tasks in a Box
  • Teams
  • Sharefile
• Google Business Suite
• Mobile Billing/Case Management Apps
  • iT imekeep
  • Clio
  • Email your assistant daily
• Other Tech Tools & Apps
Fly Business Class for Less Than Economy!

- It's all about the Points and Miles
  - Credit Cards
  - Shopping Portals
  - Earn on the things you already do

What’s In My Wallet?

Best Travel Credit Cards

- **Chase Sapphire Reserve**
  - [https://www.referyourchasecard.com/19/EHYHJFYBUH](https://www.referyourchasecard.com/19/EHYHJFYBUH)
  - 50,000 bonus points after 4,000 spend
  - 3x points on travel and dining
  - Pays for TSA Precheck or Global Entry
  - $300 travel credit – inflight internet, Uber, LYFT, taxi, subway
  - Access to airport lounges through Priority Pass
  - Transfer Partners: 9 airline programs (British Airways, Flying Blue, Korean Air, Singapore Airlines, Southwest, United, Virgin Atlantic, Aer Lingus and Iberia) and four hotel programs (Hyatt, IHG, Marriott and Ritz-Carlton).
Travel Credit Cards

AmEx Platinum

Card details
• 75,000 to 100,000 Membership Rewards® points.
• Get 5X Membership Rewards® points on flights and prepaid hotels on amextravel.com.
• Get 50% more Membership Rewards® points. That’s 1.5 points per dollar, on each eligible purchase of $5,000 or more. You can get up to 1 million additional points per year.
• $200 airline credit, TSA Precheck or Global Entry
• 35% Airline Bonus: Use Membership Rewards® Pay with Points for all or part of a flight with your selected qualifying airline, and you can get 35% of the points back, up to 500,000 bonus points per calendar year.
• 35% points back on all First and Business class flights, with all airlines available through American Express Travel.
• You can enjoy access to The American Express Global Lounge Collection™ offering access to the most lounges across the globe, when compared with other U.S. credit card offerings.
• VIP status at Hotels and Rental Car Companies
• Concierge for hard to find tickets, dinner reservations, etc.
• Lots of insurance and price protection

Travel Credit Cards

Bank of America Premium Rewards
Shop through Chase®: shop online and earn bonus points

Use your Chase Sapphire Reserve™ card to get bonus points by shopping popular online retailers through Chase.

Seasonal Offers: Valentine’s Day

- Shari’s Berries: 10 PTS/$1 bonus earn
- ProFlowers: 15 PTS/$1 bonus earn
- Groupon: 8 PTS/$1 bonus earn

Featured online stores for you

- Solos: 5 PTS/$1 bonus earn
- Ulta Beauty: 3 PTS/$1 bonus earn
- Levi’s: 2 PTS/$1 bonus earn
- Lenovo: 2 PTS/$1 bonus earn
Favorite Points, Miles, and Deals Websites

• TRAVEL
  • Thepointsguy.com
  • Onemileatatime.com
  • Secretflyingdeals.com
  • Airfarewatchdog.com
  • Google Flights: https://www.google.com/flights/
  • Mobissimo.com
  • Hotwire.com
  • Priceline.com
  • Betterbidding.com
  • Biddingfortravel.com
  • http://roomrevealer.com/

Favorite Points, Miles, and Deals Websites

• Deals Sites and Money Saving Apps
  • Slickdeals.net
  • Retailmenot.com
  • Ebates
  • Honey
  • Earny (Credit Card Price Protection)
Price Protection Made Easy!
• Amazon.com and other online retailers fluctuates by the minute
• Follows all of your credit card purchase and makes claim when price goes down
• I saved $638.10 in just 4 months!
**NC Managing Partners Summit**

**Lisa M. Angel** is the President of the Rosen Law Firm, with several locations throughout the Triangle. Lisa is considered to be an expert on family law issues. She is part of Interact's Speakers’ Bureau and has been a guest lecturer at Duke University School of Law and Campbell Law School. She's a member of the Wake County Volunteer Lawyers Program Advisory Board and Co-Chair and founding board member of Project Together, a Wake County Domestic violence pro bono project. Lisa made the Triangle Business Journal’s “40 Under 40” list in 2002 and the Triangle's list of Top 25 Women in Business in the Triangle in 2004. Lisa graduated cum laude from the University of North Carolina at Chapel Hill and received her J.D. degree from Wake Forest University School of Law. Email: langel@rosen.com.

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**Julie Beavers**, Ward and Smith, P.A.’s Director of Attorney Recruiting and Professional Development, drives attorney recruitment efforts in support of the firm's current strategic initiatives and business goals with an emphasis on the successful transition of clients, referral relationships, and practice experience from one generation to the next. Additionally, she is responsible for expanding the firm’s professional development learning programs and diversity efforts. Julie presently serves as the chair of the Transitioning Lawyers Commission of the North Carolina Bar Association (NCBA) for the 2017-2018 bar year. She is a founding member and three term president of the Triangle Association of Legal Recruitment Administrators (TALRA), and she also has held several national and regional leadership positions with the National Association of Legal Career Professionals (NALP). Julie regularly contributes to professional development programs with various legal organizations including the NCBA. Email: jdbeavers@wardandsmith.com.

**Rachel Blunk** joined the Forrest Firm's Greensboro office in February of 2018 after practicing with two North Carolina firms where she assisted businesses with dispute resolution and commercial transactions. In her litigation practice, Rachel handles business disputes regarding matters such as breach of contract, intellectual property infringement, and enforcing and defending non-competes. In her transactional practice, Rachel focuses on the protection and licensing of intellectual property, government contracting, operations, business formation, succession planning, and employment issues, including independent contractor and employment documents. She speaks and writes frequently on a variety of issues, including LGBT legal issues. Email: rachel.blunk@forrestfirm.com.

**Anna Gray Carpenter** joined the McIlveen Family Law Firm in the spring of 2013 and has worked diligently as a Associate Attorney ever since. She works hard to resolve her divorce and custody cases through mediation, collaborative law sessions, settlement meetings or judicial settlement conferences. Anna graduated from The Charlotte School of Law with her Juris Doctor after obtaining her Bachelor's degree in Cultural Anthropology from North Carolina State University. She is a graduate of the NITA Family Trial Advocacy Institute, which admits only 40 students each year. Email: anna@mcilveenfamilylaw.com.
Jordan Furlong is a consultant, author, and legal market analyst who forecasts the impact of changing market conditions on lawyers and law firms. He has given dozens of presentations over the past ten years to law firms, legal organizations, legal regulators, and courts in the United States, Canada, Europe and Australia. Jordan is a Fellow of the College of Law Practice Management, co-director of the advisory board of Suffolk University Law School’s Institute on Legal Innovation and Technology, and a member of the Advisory Board of the American Bar Association’s Center for Innovation. He is the author of Law Is A Buyer’s Market: Building a Client-First Law Firm, and he writes regularly about the changing legal market at his website, law21.ca. Email: jordan@law21.ca.

Cathy Killian is the clinical director and western clinical coordinator for the Lawyer Assistance Program and has been a counselor in the Charlotte area for over 25 years. She is a Licensed Professional Counselor, Licensed Clinical Addictions Specialist, Certified Clinical Supervisor, and Certified Clinical Hypnotherapist. Cathy’s area of expertise is with trauma-based disorders, specifically substance abuse and process addictions. She has conducted numerous trainings and workshops and provides clinical supervision on both an individual and facility level. Cathy is a current board member for Anuvia Prevention and Recovery Center, a former board member for the McLeod Institute on Substance Abuse, former board member for the North Carolina Board of Licensed Employee Assistance Professionals, and former president and board member of the Eating Disorders Education Project. Email: cathy@nclap.org.

Aaron Lay is a member of the litigation team of Hamilton Stephens Steele + Martin, PLLC. He has a broad range of experience in civil litigation matters, but his practice primarily focuses on complex construction litigation, business litigation, and litigation alternative resolutions. Aaron provides state and municipal level government relations services and consulting to clients in North Carolina and South Carolina. In addition, Aaron advises and represents 501(c)(3)-(4) entities, political action committees and political campaigns at federal, state and local levels. In 2016, Business North Carolina, in its annual Legal Elite rankings, named Aaron the top attorney under age 40 in North Carolina, and Super Lawyers magazine has named Aaron a “Rising Star” in business litigation and construction litigation – 2014 to 2017 editions. Email: mlay@lawhssm.com.

Tom Lenfestey is the Managing Member of The Law Practice Exchange, LLC as well as a practicing North Carolina attorney and licensed CPA. The Law Practice Exchange provides exit and transition plans that help preserve client goodwill, attorney legacy and allows for a value-based exchange to a buyer. Tom’s years in the legal world focused on transition and succession planning for other professions including creating, advising and implementing strategic business and estate plans for those clients. He has been appointed and serves on the Transitioning Lawyers Commission with the North Carolina Bar Association and has provided numerous educational events to attorneys hosted by state and local bar associations, legal insurers and law related professional organizations on the topics of succession planning, selling your law practice, valuing a law practice and others related to lawyer transitions. In addition, he has been interviewed or published in a number of legal publications in regard to transition planning for lawyers and law firms. Email: tom@thelawpracticeexchanage.com.

Robynn Moraites is the Director of the North Carolina State Bar’s Lawyers Assistance Program. She is a medical educator and a lawyer. She graduated from Florida State University, magna cum laude, with a BS degree. Robynn’s work as a medical educator at the University of Miami School of Medicine included running a public health program where she developed continuing education programs for medical professionals and organized events for targeted, hard-to-reach professional populations. Robynn attended the University of North Carolina School of Law and in 2004 earned her JD with honors along with a masters degree in city and regional planning. She left Bringewatt & Snover in 2011 as a partner to take the position of director of the North Carolina Lawyer Assistance Program. Robynn is a member of the North Carolina Bar Association and the ABA. Previously, she was an active LAP volunteer. Email: robynn@nclap.org.