

## **MEDICAL STAFF HEALTH POLICY (IMPAIRED PHYSICIAN)**

### POLICY:

It is the policy of the Medical Center to identify impaired medical staff members, and facilitate treatment and rehabilitation while assuring the safety of patients. The purpose is to provide assistance and rehabilitation rather than discipline to aid a medical staff member in retaining optimal professional functioning, consistent with protection of patients.

When a member is suspected of impairment, a confidential process will occur that will validate whether or not the physician is impaired. If it is determined that a physician is impaired, such individuals will be referred to the Medical Staff Health Committee for evaluation and referral for treatment. Recommendations of the Medical Staff Health Committee will be taken into consideration when the medical staff considers a privileging decision on an impaired member. All efforts will be made to enable the physician to return to safe practice. An impaired physician may self refer to the Medical Staff Health Committee under the bylaws of the medical staff.

### PURPOSE AND OBJECTIVES:

The purpose of this policy is:

- ❑ To offer assistance to the medical staff by creating an environment and consultation mechanism that is conducive to self-referral and rehabilitation of members who may be suffering from a disabling mental or physical condition that poses a threat to patient care.
- ❑ To assure patient safety by establishing a mechanism to identify and treat impaired medical staff members.

The objectives of this policy are:

- ❑ Educating the medical staff and other members of the organization about illness and impairment recognition.
- ❑ Enhancing the safety of UCLA Medical Center patients, medical staff, trainees and employees.
- ❑ Providing oversight, treatment and assistance for a potentially impaired medical staff member by:
  1. Ensuring the reporting of a potentially impaired medical staff member to the appropriate leadership as specified in the procedure below.
  2. Making an assessment of the credibility of a third party complaint or allegation of impairment.
  3. Maintaining all deliberations and records as confidentially as possible.
  4. Referring the impaired medical staff member to the appropriate internal or external resource for diagnosis and treatment of the illness or addiction under the guidance of the Medical Staff Health Committee.
  5. Monitoring the re-integration into active medical staff status according to a contract established between the medical staff member and the MSHC.
  6. When deemed necessary, facilitating the safe removal of the impaired medical staff member from the UCLA Medical Center.

## DEFINITIONS:

An impaired medical staff member is a medical staff member who is suffering from a disabling mental or physical condition that affects their ability to treat patients safely. The impairment may either be emotional or physical or both, and includes but is not limited to, members under emotional distress, and those under the influence of alcohol or other mood altering medications.

The Medical Staff Health Committee's role is to be supportive for the medical staff member, and to educate the medical staff on the scope of its activities and other resources for assisting impaired members. It aims to assist referred members to achieve rehabilitation so that they can continue to practice. It serves as an objective, concerned group of the medical staff, maintains confidentiality, and reports in a limited, non-detailed format to the Medical Staff Executive Committee. It will also ensure patient safety by consulting with the Chief of Staff if it determines there is imminent danger to patients.

## PROCEDURE:

### I. **Self-Reporting**

When a member staff member wishes to self-report his/her impairment, they may refer themselves to the Medical Staff Health Committee for assistance, in line with its charge under the Bylaws.

### II. **Third-Party Reporting**

#### A. No Imminent Danger to Patients

If a UCLA Medical Center employee or member of the medical staff (including House Staff) suspects that a medical staff member may be impaired, but is not thought to be an imminent danger to patients, he/she should complete a Report of Observed Behavior Form and submit it to the Chief of Staff or designee. The Chief of Staff will investigate and make a determination.

#### B. Potential Imminent Danger to Patients

If an observer suspects that a medical staff member may be practicing in an impaired state which may reasonably be thought to be an imminent risk to patients, the following procedure will be followed:

- Observer will notify program director.
- Program director will make an assessment of whether there is imminent danger to patients. If so, the program director will call the Chief of Staff and Administrator on Call.
- The Chief or Staff or their physician designee will come to the unit and meet in a private location with the member who is suspected of being impaired. The Chief of Staff will make a determination regarding the allegation.

#### C. Upon completion of the investigation one of the following decisions will be made concerning the allegation:

- 1) No action required

- 2) Initiate the Disruptive Physician Policy
  - 3) Refer the physician to the Medical Staff Health Committee
  - 4) Invoke immediate correction action pursuant to the Medical staff Bylaws
- D. If the medical staff member is suspended:
- 1) The member will be requested to sign a consent form for obtaining a sample of blood/urine and the collection of this sample will be supervised by the Chief or Staff or their designee. The sample will be transported to an outside reference lab for drug screening.
  - 2) Failure to give consent for this testing will be grounds for separation from the medical staff.
  - 3) The same day or next working day if after hours, after suspension, the member will be referred to the Medical Staff Health Committee, which will be requested to make a recommendation within 3 days.
- E. If the member is referred to the Medical Staff Health Committee without summary suspension, that Committee will recommend to the medical staff one of the following within 14 days. The Committee, in consultation with the Department Chair, may seek formal psychiatric or substance abuse consultation in order to assist them with their determination.
- 1) No evidence of impairment, no further action required.
  - 2) Member impaired, not presently in treatment. Treatment recommended in order to maintain privileges.
  - 3) Member impaired, in diversion program or counseling, and should be allowed to continue to practice.
  - 4) Member impaired, in diversion program or counseling, and should not be allowed to practice until reevaluation during therapy.

### **III. Billing**

Medical costs related to the evaluation for fitness for duty are the responsibility of the Medical staff member.

Approved by the Medical Staff Health Committee 12/12/02

MSEC 4/23/03

Approved by the GMEC 11/29/04