Impaired Medical Staff Policy

I. PURPOSE
In support of IU Health North Hospital’s goal of providing quality patient care it is important to recognize situations where patient care is compromised by provider impairment. It is the intent of this policy to provide a means to recognize impaired members of the medical staff with the goal of rehabilitating physicians, ensuring patient safety and maintaining positive staff relationships.

II. SCOPE
This policy applies to all members of the IU Health North Hospital Medical Staff and any physicians involved in the care of IU Health North Hospital patients.

III. DEFINITIONS
A. IMPAIRMENT: “The inability to practice medicine with reasonable skill and safety to patients by reason of physical or mental illnesses or alcoholism or drug dependency.” (American Medical Association, 1972)
B. INDIANA STATE MEDICAL ASSOCIATION PHYSICIAN ASSISTANCE PROGRAM (ISMA PAP): A program of the Indiana State Medical Association that addresses the needs of physicians impaired by chemical dependence, psychiatric disorders and physical disability, as well as the disruptive physician.
C. HOSPITAL PHYSICIAN ASSISTANCE PROGRAM (HOSPITAL PAP): A program that works in conjunction with the ISMA PAP and the Performance Assessment and Improvement Committee (PA&I) or a designated sub-committee in advocacy for impaired physician members of the IU Health North Hospital Medical Staff.

IV. GENERAL INFORMATION
Policy Statement: It is the belief of the IU Health North Hospital Medical Staff that an impaired physician is an ill colleague in need of treatment. The approach to impairment should be through medical intervention, care and compassion, as opposed to punitive or threatening methods. It is expected that the impaired physician will enter and complete treatment, in order to return to practice as soon as possible.

V. PROCEDURE
A. Identification/Suspicion of Impairment
North Hospital

If a member of the IU Health North Hospital Medical Staff has reason to believe that another physician is rendering care while impaired, he/she shall immediately contact the President of the Medical Staff, the Chief Medical Officer, a designee in their absence, or a member of the Indiana State Medical Association Physician Assistance Program to report those concerns.

If hospital staff reasonably believe, or a patient or a patient’s family expresses a reasonable concern that a physician appears impaired while rendering patient care, the hospital employee shall contact his/her supervisor, manager or director, who will immediately contact the President of the Medical Staff, the Chief Medical Officer, a designee, or a member of the Indiana Medical Association Physician Assistance Program. The guidelines established in the Practitioner Health Policy should be followed.

A practitioner, who voluntarily submits himself/herself to a course of treatment for impairment, shall contact his/her clinical section chair, who will contact the President of the Medical Staff, the Chief Medical Officer (CMO), designee, or a member of the Indiana State Medical Association Physician Assistance Program.

B. Intervention

1. Alcohol or Substance Abuse

If a physician is believed to be under the influence of drugs or alcohol the physician in question will be directed to wait until the President of the Medical Staff, Chief Medical Officer, or designee arrives, at which time a urine drug screen and blood alcohol level will be obtained in the Emergency Department or the Associate Occupational Health Services Office. Chain of custody procedure will be followed in the collection of the specimens. The President, Chief Medical Officer or designee may at his/her discretion direct the physician to cease providing patient care pending the results of the testing, should the President, Chief Medical Officer or designee determine that such action is necessary to safeguard patient care. In such instance, the President, Chief Medical Officer or designee will arrange for immediate alternative care for the physician’s patient.

Should the urine screen and/or the blood alcohol level be positive, or if it is negative and the President, Chief Medical Officer or designee determines the physician to be otherwise psychologically and/or physically impaired, the physician in question may be
immediately suspended by the President, Chief Medical Officer or designee in order to safeguard patient care.

The President, Chief Medical Officer or designee will make a full report of such matter for immediate review by the Performance Assessment and Improvement Committee or a designated sub-committee, the Physician Assistance Program if applicable to the impairment, and as appropriate to the Medical Executive Committee. The physician in question will be notified of this procedure.

2. Other Impairments
If the physician displays conduct that raises suspicion of physical or mental impairment that could compromise patient care, hospital staff or a fellow member of the Medical Staff will immediately notify the President of the Medical Staff, Chief Medical Officer or designee directly or in writing of such concern. The President of the Medical Staff, Chief Medical Officer or designee will review the circumstances of the complaint and may take statements from witnesses as appropriate. The President, Chief Medical Officer or designee may refer the matter for peer review by the PA&I Committee, or designated sub-committee in accordance with the Practitioner Health Policy. Types of conduct that may indicate impairment would include a pattern of questionable performance issues including, but not limited to:

- An increase in number of medical errors;
- Behavioral changes such as unprofessional approach to other physicians, hospital staff, patients and/or families;
- Frequent lateness, unavailability or inappropriate response to telephone calls and pages;
- Reports of incoherent orders, slurred speech, etc.

C. Suspension
If the physician has been suspended, the procedure set forth in the IU Health North Hospital Bylaws shall be followed.

D. Referral
If the President of the Medical Staff, Chief Medical Officer, designee or PA&I Committee believes that there is reasonable likelihood that the physician is impaired, action on this matter shall be referred to the ISMA PAP.

The ISMA PAP will evaluate and investigate the complaint. When an initial report lacks sufficient information to warrant further action, the
If reports prove substantial and the physician is recommended to undergo an appropriate evaluation by a facility or physician approved by the ISMA PAP, the physician must agree to follow the recommendation of the evaluation. Consent to undergo evaluation and follow treatment recommendations will be verified when the physician enters into an evaluation contract with the ISMA PAP.

If the ISMA PAP recommends treatment, the physician will sign a monitoring contract with the ISMA PAP. A typical contract regarding drug/substance abuse remains in effect for five (5) years and may include, as appropriate, the following areas:

- Attendance at 12-step support groups;
- Random urine drug-screen testing;
- Individual, family and/or group counseling;
- Communication with all appropriate therapists and treating physicians;
- Attendance at Caduceus meetings, a support group for health care professionals;
- Regular meetings with an approved physician advocate;
- Other requirements deemed necessary to aid recovery;
- Approval to send regular reports to the appropriate hospital personnel documenting contract compliance

Failure to comply with a request for evaluation or with terms of the contract will result in a report to the Medical Executive Committee and may result in a report to the Indiana Medical Licensing Board. In such instance, disciplinary proceedings may be initiated against the physician.

E. **Staff Education**

The Impaired Medical Staff Physician Policy is available to all members of the Medical Staff, by contacting the medical staff office at IU Health North Hospital. Program Staff of the ISMA PAP will present educational seminars on request.

VI. **CONFIDENTIALITY**

All participant information is confidential according to federal law and ISMA program policies. Practitioners are not automatically referred.
VII. CROSS-REFERENCES
Practitioner Health Policy

VIII. RESPONSIBILITY
Medical Executive Committee

IX. APPROVAL BODY
Medical Executive Committee
IU Health North Hospital Board

X. APPROVAL SIGNATURES

__________________________________                ______________________
Paul Calkins, MD                               Date
Chief Medical Officer and Vice President Surgical Services

__________________________________                 ______________________
Jonathan R. Goble, MHA, MBA, FACHE   Date
President and Chief Executive Officer

__________________________________                 ______________________
Kevin Smith, MD                                                        Date
President, Medical Staff