I. PURPOSE
To support quality and safe patient care at IU Health North Hospital it is important to identify impaired medical staff members and facilitate treatment and rehabilitation. It is the intent of this policy 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.

II. SCOPE
This policy applies to all members of the IU Health North Hospital Medical Staff and practitioners credentialed to provide care to IU Health North Hospital patients.

III. EXCEPTIONS
None

IV. 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.

V. POLICY STATEMENTS
A. It is the belief of the IU Health North Hospital Medical Staff that an impaired practitioner 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 practitioner will enter and complete treatment, in order to return to practice as soon as possible.

B. Observations or behaviors that may cause physicians, nurses or other caregivers to suspect impairment may include but not be limited to:
   1. lack of judgment
   2. uncommon behavior as compared to the norm for the individual
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3. inappropriate behavior
4. odor of alcohol
5. observed use of alcohol or a controlled substance
6. evidence of fraud or stealing
7. procuring of medications/narcotics

C. Self-Reporting
When a staff member wishes to self-report his/her impairment, they may refer themselves to the Performance Assessment and Improvement Committee (PA&I) for assistance, in line with its charge under the Bylaws and Medical Staff Policy.

VI. PROCEDURES

A. Identification/Suspcion of Impairment
If a member of the IU Health North Hospital Medical Staff has reason to believe that another practitioner is rendering care while impaired, he/she shall immediately contact the President of the Medical Staff, the Chief Medical Officer, or the Administrator on Call when those individuals are unavailable.

If hospital staff/employee reasonably believes, or a patient or a patient’s family expresses a reasonable concern that a practitioner 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, or the Administrator on Call if they are unavailable. Security should also be called to have an officer report to the area. The guidelines established in the Practitioner Health Policy should be followed.

The practitioner with suspected impairment will be escorted to a private area (e.g. conference room, office) by individuals who have witnessed the suspected impairment to await the arrival of the Medical Staff officer.

B. Intervention
1. Alcohol or Substance Abuse
If a practitioner is believed to be under the influence of drugs or alcohol, the practitioner 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. Escort will be
provided by Security. 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 practitioner 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 practitioner’s patient.

Should the urine screen and/or the blood alcohol level be positive, the practitioner decline to be tested, or if it is negative and the President, Chief Medical Officer or designee determines the practitioner to be otherwise psychologically and/or physically impaired, the practitioner in question may be immediately suspended by the President, Chief Medical Officer or designee in order to safeguard patient care. They will notify the respective section chair to ensure patient care responsibilities can be immediately reassigned.

Positive results will require confirmatory testing and may require drawing blood levels as needed. The practitioner will be directed to contact family or other appropriate person for transportation home. If family or other significant others are not available, the Employee Health or Security personnel will secure a taxi to transport the practitioner home.

The President, Chief Medical Officer or designee will make a full report of such matters 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 practitioner in question will be notified of this procedure.

If the results are negative, the practitioner will be allowed to return to patient care activities. IU Health’s employee health services will also keep record of allegations proved to be negative through testing to assess at intervals for trends which might indicate need for focused education on signs of impairment.

2. **Other Impairments**
If the practitioner 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
  practitioners, 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 practitioner has been suspended, the procedure set forth in the IU
Health North Hospital Medical Staff 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
practitioner is impaired, action on this matter shall include contacting the
ISMA PAP and working in conjunction with them.

The ISMA PAP will work with the President of the Medical Staff,
designee, or PA&I Chair to evaluate and investigate the complaint. When
an initial report lacks sufficient information to warrant further action, the
report will be kept in a confidential file. If further information is received,
the case will be reinvestigated.

If reports prove substantial and the practitioner is recommended to
undergo an appropriate evaluation by a facility or physician through the
ISMA PAP, the practitioner must agree to follow the recommendation of
the evaluation. Consent to undergo evaluation and follow treatment
recommendations will be verified when the practitioner enters into an
evaluation contract with the ISMA PAP.

If the ISMA PAP recommends treatment, the practitioner 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:
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- 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 practitioner.

E. Staff Education
The Impaired Medical Staff Policy is available to all members of the Medical Staff via the Policies/Procedures tab on the PULSE page or by contacting the Medical Staff Office at IU Health North Hospital. Program staff of the ISMA PAP will present educational seminars on request.

VII. CONFIDENTIALITY
All participant information is confidential according to federal law and ISMA program policies. Practitioners are not automatically referred.

VIII. CROSS-REFERENCES
Code of Conduct Policy
IUH North Hospital Credentials Manual
IUH North Hospital Medical Staff Bylaws
Medical Staff Organizational Manual
Peer Review Policy
Practitioner Health Policy

IX. RESPONSIBILITY
Medical Staff
X APPROVAL
Medical Executive Committee
IU Health North Hospital Board of Directors

XI. APPROVAL SIGNATURES

Approved by:

__________________________________  ________________________
Paul Calkins, MD  Date
Chief Medical Officer

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

__________________________________  ________________________
Kevin Smith, MD  Date
President, Medical Staff