

Section:	Sponsoring Institution
Document Number:	GME0020
Title:	Impaired Physician Policy
Responsible Department:	Graduate Medical Education
Created:	09/01/2017
Revised:	09/29/2020
Superseded:	09/01/2017
GMEC Approved:	10/20/2020
Board of Directors Approved:	10/22/2020
Effective:	10/23/2020
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POLICY

It is the belief of Valley Health Team, Inc. that an impaired resident/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 resident/physician will enter and complete treatment, in order to return to practice as soon as possible.

SCOPE

This policy applies to all members of the Valley Health Team, Inc. medical staff including residents and fellows as well as any physician involved in the care of Valley Health Team, Inc. patients.

PURPOSE

In support of Valley Health Team'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 staff with the goal of rehabilitating residents and physicians, ensuring patient safety and maintaining positive staff relationships.

PROCEDURE

A. Identification/Suspicion of Impairment

If a member of the Valley Health Team, Inc. team has reason to believe that another resident or physician is rendering care while impaired, he/she shall immediately contact the CEO, the Chief Medical Officer, the Program Director, Human Resources, or a designee in their absence, or a member of the California State Medical Association Physician Assistance Program to report those concerns.

If staff reasonably believe, or a patient or patient's family expresses a reasonable concern that a resident/physician appears impaired while rendering patient care, the employee shall contact his/her supervisor, manager or director, who will immediately contact the CEO or the Chief Medical Officer, the Program Director, Human Resources, or a designee, or a member of the California State Medical Association Physician Assistance



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Program. The guidelines established in the Valley Health Team Health Policy should be followed.

A practitioner, who voluntarily submits himself/herself to a course of treatment for impairment, shall contact the Chief Medical Officer or Program Director who will in turn notify the CEO or a designee, or a member of the California State Medical Association Physician Assistance Program.

B. Intervention

1. Alcohol or Substance Abuse

If a physician or resident is believed to be under the influence of drugs or alcohol the physician in question will be directed to wait until the Chief Medical Officer or designee arrives at which time a urine drug screen and blood alcohol level will be obtained in the clinic setting. Chain of custody procedure will be followed in the collection of the specimens. The CEO, Chief Medical Officer, Program Director, or designee may at his/her discretion direct the physician to cease providing patient care pending the results of the testing, should the CEO, CMO, Program Director or designee determine that such action is necessary to safeguard patient care. In such instance, the CEO, CMO, Program Director 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 CEO, CMO, Program Director or designee determines the physician to be otherwise psychologically and/or physically impaired, the physician in question may be immediately suspended by the CEO, CMO, Program Director or designee in order to safeguard patient care.

The CEO, CMO, Program Director, or designee will make a full report of such matter for immediate review by the Clinical Competency Committee, the Physician Assistance Program if applicable to the impairment, and as appropriate to the Board of Trustees. The physician/resident in question will be notified of this procedure.



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2. Other Impairments

If the physician/resident displays conduct that raises suspicion of physical or mental impairment that could compromise patient care, any staff member is to immediately notify the CEO, the CMO or designee, or Program Director directly or in writing of such concern. The CEO, CMO, Program Director, or designee will review the circumstances of the complaint and may take statements from witnesses as appropriate. 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, staff, patients and / or families;
- Frequent lateness, unavailability or inappropriate response to telephone calls and pages;
- Reports of incoherent orders, slurred speech, etc.

Should the CEO, CMO, Program Director or designee determine the physician to be psychologically and/or physically impaired, the physician in question may be immediately suspended by the CEO, CMO, Program Director, or designee in order to safeguard patient care.

The CEO, CMO, Program Director, or designee will make a full report of such matter for immediate review by the Clinical Competency Committee, the Physician Assistance Program if applicable to the impairment, and as appropriate to the Board of Trustees. The physician/resident in question will be notified of this procedure.

C. Suspension

If the physician/resident has been suspended, the procedure set forth in the Valley Health Team employee/resident handbook should be followed.

D. Referral

If the CEO, CMO or designee, or Program Director believes that there is reasonable likelihood that the physician/resident is impaired, action on this matter shall be referred to the California State Medical Association Physician Assistance Program.



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The California State Medical Association Physician Assistance Program will 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 physician is recommended to undergo an appropriate evaluation by a facility or physician approved by the California State Medical Association Physician Assistance Program, the physician/resident 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 California State Medical Association Physician Assistance Program.

If the California State Medical Association Physician Assistance Program recommends treatment, the physician will sign a monitoring contract with the California State Medical Association Physician Assistance Program. 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 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 California State Medical Board. In such instance, disciplinary proceedings may be initiated against the physician/resident.



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DocuSigned by:

Soyla A. Reyna-Griffin, CPA

Chief Executive Officer

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Mary Ellen Pumarejo

President, Board of Directors

W/22/2020 Date