



High Desert Health System POLICY AND PROCEDURE

POLICY NUMBER: 330
VERSION: 2

SUBJECT: PHYSICIANS' WELL-BEING COMMITTEE AND THE IMPAIRED PHYSICIAN

PURPOSE:

To describe the nature and purpose of the Physicians' Well-Being Committee of the Professional Staff of High Desert Health System (HDHS) and outline its role and responsibilities in assisting providers with matters related to health, chemical dependency, mental illness, or behavior and to provide overall guidance and direction on how to proceed when suspecting and/or confronted with a potentially impaired physician.

COMPOSITION: Members should be selected for specific expertise, experience and willingness to serve and if at all possible, members should be chosen from several specialties. No Committee member currently holding any discipline-related position within the institution, e.g., active membership on the Credentialing & Privileging Committee (C&PC) or peer review committee, should be appointed as a member to the Physicians' Well-Being Committee.

DEFINITION:

The American Medical Association defines the impaired physician as "one who is unable to practice medicine with reasonable skill and safety to patients because of a physical or mental illness, including deterioration through aging process or loss of motor skills, or excessive use or abuse of drugs, including alcohol."

POLICY:

At HDHS, the Physicians' Well-Being Committee provides the overall guidance and direction related to dealing with a potentially impaired physician. This Committee, established in accordance with this policy and accreditation requirements, serves to provide assistance to physicians who may be impaired or who demonstrate questionable behavior that may be the result of a mental or physical disorder or substance abuse.

The Committee's responsibilities include the following:

1. Be an effective resource to the Professional Staff as the body, where information and concern about the health of an individual physician can be reported for confidential consideration and evaluation;

POLICY NO: 330	SUBJECT: PHYSICIANS' WELL-BEING COMMITTEE AND THE IMPAIRED PHYSICIAN	Page 2 of 3
--------------------------	---	--------------------

2. Receive and assess information about a potentially impaired physician; the referral may be from any person working in the facility. Self-referral by a physician is also considered.
3. Evaluate the credibility of a complaint, seek corroboration and additional information.

In the event information received by the Committee clearly demonstrates that the health or known impairment of a Professional Staff creates a likelihood of harm to patients or others in the facility, that information shall be promptly conveyed to the C&PC. The Medical Director is also informed so that timely action may be taken for the sake of patient safety.

Depending upon the severity of the problem and the nature of the impairment, the C&PC has the following options:

- a. Require the physician to undertake a rehabilitation program as a condition of continued appointment with clinical privileges.
 - b. Impose appropriate restrictions on the physician's privileges.
 - c. Take both of the above actions.
4. Provide advice, recommendations, and assistance to the physician concerned; provide recommendations for treatment and assistance.
 5. Make recommendations and plans regarding treatment and monitoring as follows:
 - a. May refer the physician to appropriate resources for diagnosis and treatment of the illness or addiction.
 - b. Develop a facility-specific plan to monitor the physician while undergoing treatment/rehabilitation.
 - c. Establish monitoring agreements with the physician concerned and monitor him/her for compliance until the treatment/rehabilitation is complete.
 6. Maintain confidentiality of all contacts and communication to the fullest extent permitted by law. The Committee shall seek the advice of the facility's counsel to determine whether any conduct by the physician must be reported to law enforcement authorities or other government agencies.
 7. The Committee shall review information and, upon sufficient proof that a physician who has been found to be suffering an impairment has successfully completed a rehabilitation program, shall inform the C&PC as such and make its recommendation. The C&PC may then decide to reinstate the physician's privileges, if applicable.

POLICY NO: 330	SUBJECT: PHYSICIANS' WELL-BEING COMMITTEE AND THE IMPAIRED PHYSICIAN	Page 3 of 3
--------------------------	---	--------------------

8. Educate the Professional Staff on:

- physician health, well-being and impairment;
- appropriate responses to different levels and kinds of distress and impairment;
- treatment, recovery and monitoring;
- responsibilities of the Professional Staff in response to concerns about a physician's health;
- early intervention;
- the available resources for prevention, treatment, rehabilitation, monitoring, and re-entry.

The educational objectives may be achieved by distributing available literature on the topic to all the Professional Staff.

MEETINGS: The Committee shall meet as necessary and shall maintain a permanent record of its proceedings and actions. The chair or his/her designee shall present a written report on the Committee's activities to the Medical Director and Chief Executive Officer on an annual basis, if any meetings were held in the preceding year.

Approved By: Executive Approvers, Beryl Brooks (ADMR, COMP AMB HEALTH CARE CENTER), Ruth Oren (CHIEF PHYSICIAN I ANESTHESIOLOGY), Susan Knapp (CHIEF NURSING OFFICER I)	
Date: 06/11/2015	Original Date: 07/01/2013
Reviewed: 06/11/2015	Next Review Date: 06/11/2016
Supersedes: HDH Policy 909, Physicians' Well-Being Committee and the Impaired Physician Effective Date: 02/26/02	