I. Introduction

The Hospital, along with the Medical/Dental Staff, is committed to providing safe, effective, timely and respectful medical care while fostering an environment that promotes physician health. The Medical/Dental Staff affirms that substance use disorders and other behavioral health disorders are treatable illnesses and after treatment, physicians can return to safe and effective practice of medicine with appropriate monitoring. All employees and Medical/Dental Staff members should relay concerns about physicians who may be suffering from illnesses with the potential of leading to impairment in their practice by making a confidential referral, which is detailed in the following paragraphs.

II. Definition

The term “impaired physician” is used to describe a practitioner who may be prevented by reasons of illness or other health problems or conditions from performing professional duties at the expected level of skill and competency to practice medicine safely and effectively. Some illnesses may also decrease the ability and/or willingness on the part of the affected individual to acknowledge the problem or seek help to recover. Such a situation places the practitioner and the Hospital at risk and may pose an actual or potential risk to the health and safety of our patients.

III. Policy

A. Physician health status records and reports are confidential and will be maintained separately from physician quality assurance, credentials and disciplinary files. Physician health assessments will be reviewed only by the appropriate Clinical Service Director and designated governance representatives.

B. Upon initial appointment and annually thereafter, physicians will be oriented to recognize indicators of impairment in physicians and other health professionals and how to confidentially report this information. The Committee for Physicians Health (CPH) is a division of the Medical Society of the State of New York and not part of any government agency. CPH is authorized by Section 230-11 of the Public Health Law to confidentially contact and refer to treatment, physicians who are troubled with behavioral health concerns including substance abuse and other psychiatric disorders.

C. CPH activities are confidential, its records are not discoverable, and the law provides immunity for those who make referrals. CPH accepts referrals for all behavioral health disorders including substance abuse disorders, addictive condition disorders (i.e. eating, gambling, sexual compulsion), psychiatric disorders including depression, bipolar and personality disorders, obsessive compulsive disorders, cognitive disorders and disruptive behaviors. CPH will also coordinate evaluation of potential organic brain disorders.

IV. Procedure

Any licensed health professional with information which reasonably appears to show that a physician practices or has practiced in an impaired state, shall transmit such information as appropriate Department Chairman, Medical Director or an administrative officer of the Hospital. Nothing in this policy relieves the Hospital of its obligations to report incidents of possible professional misconduct under Sections 230 and 2803-e of the New York Public Health Law and other applicable laws and regulations. If there is reasonable suspicion to suspect that a physician may be impaired, the following steps should be taken:

A. A report shall be given to the President and Chief Executive Officer (CEO), or the Medical Director, and/or the Department Chairman. The report shall include a description of the event(s) that led to the belief that the physician may be impaired.
The report does not need to give proof of the impairment, but must state the facts leading to the suspicion.

B. If, after discussion with the individual who filed the report, there is sufficient information to warrant an investigation, the Medical Director in consultation with the Department Chairman shall direct that an investigation be instituted and appoint at least two (2) physicians from the medical staff as part of the investigative committee. The Medical Director, on behalf of the committee will render a report.

C. If, after investigation, it is found that evidence exists that a physician has impairment, the physician is to be informed that the results of the investigation indicate that the physician may have an impairment that affects, or may affect, his/her practice and be referred to The Committee for Physician Health (CPH).

D. Physicians determined incapable of safely performing clinical duties shall be referred to the Hospital Medical Staff leadership for action consistent with Public Health law and Medical/Dental Staff Bylaws. Public Health Law requires that physicians and hospital CEO’s report to the Office of Professional Medical Conduct (OPMC) information which reasonably appears to show that a physician is guilty of professional misconduct as defined by New York State Education Law. All other physician health matters will be kept strictly confidential, with no reporting requirements other than to CPH. Those physicians reported to OPMC for disciplinary action will also be referred to CPH for rehabilitation.

E. Depending on the severity of the problem and the nature of the impairment, the Department Chairman after discussion with management may:

   • require that the physician undergo a rehabilitation program as a condition of continued appointment or clinical privileges;
   • impose appropriate restrictions on the physician’s practice;
   • immediately suspend the physician’s privileges until rehabilitation has been accomplished if the physician does not agree to discontinue practice voluntarily.

F. If a recommendation for rehabilitation is made and the physician does not accept the recommendation, the Department Chairman will refer the issue to the Credentials Committee for review and recommendation. These recommendations will subsequently be forwarded to the Medical Board.

G. The original report and a description of the actions taken are to be included in the physician’s confidential file in the Medical Board Office. If the investigation reveals that there may be some merit to the report but not enough to warrant immediate action, the report shall be included in the physician’s confidential file in the Medical Board Office and the physician’s activities and practice shall be monitored until it can be established that there is, or is not, an impairment problem.

V Treatment and Rehabilitation

If a physician is referred to CPH and a condition is diagnosed, CPH will obtain the physician’s approval to contact the appropriate medical staff leaders of the Hospital. Physicians requiring time off for treatment and/or rehabilitation will be encouraged to request a Medical Leave of Absence. CPH will coordinate appropriate treatment and notify the Hospital Medical/Dental Staff Officer or the Hospital Medical Director when the physician is medically cleared for duty and appropriate monitoring is in place. The Hospital Medical Staff leadership will work with CPH staff to facilitate the physicians return
to the work place. CPH will continue monitoring the physician to assure continuation of treatment and recovery.

VI. Reinstatement

Upon receipt of appropriate documentation that a physician who has been found to be suffering impairment has successfully completed a rehabilitation program, the Department Chairman may consider that physician for reinstatement to the medical staff.

The hospital should obtain a letter from the physician directing the rehabilitation program where the impaired physician was treated indicating that the physician participated in the program; that the physician was in compliance with all the terms of the program; that the physician attends self-help meetings regularly; whether an after-care program has been recommended to the physician and, if so, a description of that program; whether, in the opinion of the director of the program, the physician is rehabilitated and is capable of resuming medical practice and providing competent care to patients.

The impaired physician must authorize, in writing, the release of this information to the hospital.

The hospital has the right to require an opinion from other physician consultants, including the impaired physician's primary care physician, with written consent from the impaired physician.

References

JCAHO Medical Staff Standard  MS 2.6
NYS Education Law Section 6530, Subsections 7 and 8
NYS Public Health Law Section 230, Subsection 11
NYS Public Health Law Section 2803, Subsection e
NYS Public Health Law Section 2805, Subsections j-m

Resources

The Committee for Physicians Health can be contacted at: 1-800-338-1833 or by e-mailing: info@mssny.org or by visiting website: www.mssny.org, then click on Resource Center.