

IDENTIFICATION AND REPORTING OF SUSPECTED PRACTITIONER IMPAIRMENT OR DISRUPTIVE BEHAVIOR

SUSPECTED IMPAIRMENT

The American Medical Association defines the impaired practitioner 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 the aging process or loss of motor skill, or excessive use or abuse of drugs, including alcohol."

Background: It is the intent of Bay Regional Medical Center to provide our patients with a safe environment and excellent practitioners to allow appropriate treatment for rapid improvement. A practitioner who is impaired, as defined above, creates an environment contrary to rendering the best possible care. Every effort must be taken to simultaneously protect the patient from irrational behavior and provide services to the impaired practitioner so they may return to providing appropriate care. Due to the potential implications of impairment for a practitioner, every effort must be taken to assure confidentiality. Due to the potential implications of practitioner impairment for the patient, every effort must be taken to quickly resolve any allegations of impairment.

Reporting of Impairment:

- A. By Others: Any individual who has a reasonable suspicion that a practitioner may be impaired should convey the reason for that suspicion to a Bay Regional Medical Center Director, Vice President, President, or Chief of the Medical Staff. All such information will be transmitted and maintained in a confidential, locked file in the office of the Vice President of Medical Affairs (VPMA) until resolved. The VPMA shall personally investigate the allegation(s) to determine their legitimacy. The VPMA will discuss the allegation with the individual making the allegation and request a written, signed report attesting to the allegation.

- B. Self Referral: Any practitioner who believes he/she may be impaired or is subject to a monitoring contract (or program with) a rehabilitation program, or has had his/her privileges or employment duties limited by any health care organization shall report that circumstance to the CEO or VPMA. This information shall be maintained in a confidential, locked file in the office of the VPMA.

Intervention may include referral of the practitioner to the Michigan's Health Professional Recovery Program (HPRP) or another appropriate professional internal and external resource for evaluation, diagnosis, and treatment of the condition or concern.

There is a policy in the Medical Staff Office, No. 5 titled "Practitioner Health" that outlines established procedures to identify and address practitioner health issues and to protect the impaired practitioner and his/her patients.

DISRUPTIVE BEHAVIOR

It is a requirement that each patient and every employee of Bay Regional Medical Center have a hospital environment that is non-threatening. It is the expectation that every physician providing services at Bay Regional Medical Center shall exhibit professional behavior, and that disruptive behavior shall not be tolerated as a matter of

Medical Staff Bylaws, policy, and practice. The Medical Staff Bylaws 3.1-9 PROFESSIONAL CONDUCT state:

“It is the policy of this hospital that all individuals within the facilities be treated courteously, respectfully, and with dignity. To that end, the hospital requires all physicians, and other practitioners to conduct themselves in a professional manner while in the hospital.”

Whenever a practitioner with clinical privileges engages in, makes or exhibits acts, statements, demeanor or professional conduct within the hospital and the same is, or is reasonably likely to be, detrimental to patient safety or to the delivery of quality patient care, disruptive to hospital operations or an impairment to the community's confidence in the hospital, corrective action against the practitioner may be initiated by an officer of the Medical Staff or by the chairman of any department in which he holds membership or exercises clinical privileges, by the Chief Executive Officer, by the Professional Affairs Committee, or by the Board. The procedure for processing a routine corrective action matter is contained in the Credentialing Procedures Manual (Part 4.1).

There is a Medical Staff Policy, No. 1 titled “Code of Conduct” that identifies disruptive behavior and outlines an action plan to deal with code of conduct. This policy includes a confidential Code of Conduct Reporting Form which is privileged as peer review material and protected from discovery.

QUESTIONS (SUSPECTED IMPAIRMENT OR DISRUPTIVE BEHAVIOR)	
1.	Any individual who has a reasonable suspicion that a practitioner may be impaired should convey the reason for that suspicion to a BRMC Director, Vice President,, President or Chief of Staff. a. True b. False
2.	There is a policy in place that outlines established procedures to identify and address practitioner health issues. a. True b. False
3.	It is the expectation that every practitioner providing services at BRMC shall exhibit professional behavior. a. True b. False
4.	There is a Medical Staff policy in place that outlines an action plan to deal with disruptive behavior. a. True b. False