



# TAHOE FOREST HOSPITAL DISTRICT

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

## POLICY

A mechanism will be provided wherein the impaired staff member can be identified and, when possible, rehabilitated, and to provide protection for the patients who may be exposed to an impaired staff members.

## PURPOSE OF WELL BEING COMMITTEE

- 1) Provide advice, counseling, or referrals per request.
- 2) Handle impairment issues.
- 3) Provide education.

## DEFINITIONS

### **Impaired:**

The inability to practice the member's profession with reasonable skill, care, and diligence due to a physical or mental disability including, but not limited to, deterioration due to the aging process, psychiatric disorders, loss of motor sensory skills or abuse of drugs or alcohol. Impairment may also manifest as aberrant or disruptive behavior, which may result in a practitioner's inability to work with others, a disregard for rules, unethical conduct, or patient endangerment.

## REFERENCES:

- 1) CMA Guidelines for Physician Well Being Committees
- 2) Medical Staff Bylaws 10.3.2(k)
- 3) Tahoe Forest Hospital District Executive Committee Policy for "Well Being Policy".
- 4) Title 22 Section 70703(d)
- 5) Nevada Administrative Code 449
- 6) California Civil Code GG56.10, California Health and Safety Codes 11977 and 11812, California Evidence Code 1157, California Lanterman-Petris-Short (LPS) Act, Federal Health Care Quality Improvement Act.

## COMMITTEE

A committee, advisory to the Medical Executive Committee, will be established to handle issues of physician impairment. It will be called the Well Being Committee. It will consist of (at least) two (2) active members of the medical staff, the majority of the committee, including the Chair, shall be physicians and other participants, as appropriate, with strong consideration toward including a hospital representative, to carry out its function.

Pursuant to the Bylaws (8.2.1(f); 10.3.2.1 and 10.12) the Chief of Staff, with the approval of the executive Committee will appoint the members of the Well Being Committee. Unless not feasible, members of the Well Being Committee should not service on other committees having review or authority over members of the Medical Staff (e.g.; Executive or Judicial Review Committees). Membership terms should be several years so as to provide continuity and development of expertise.

The committee will meet as frequently as necessary. It will report to the Executive Committee. The committee is advisory in nature and does not provide treatment or take disciplinary action.

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

1

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



**TAHOE FOREST  
HOSPITAL DISTRICT**

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

PROCEDURE:

I) REPORT

If there is a reasonable suspicion that a physician having privileges on the medical staff is impaired, the following steps should be taken:

- A) The concerned party shall provide a written report to the Chief of Staff, (with a copy to the appropriate administrative representative), Chief of appropriate medical staff department; House Supervisor; Human Resources Director and/or appropriate Hospital Department Director. If the concern regards the Chief of Staff, the Vice Chief of Staff shall receive the information and initiate the evaluation process. The report must be factual and contain an explanation of what circumstances and specific incident(s) led to the belief that the physician may be impaired. Confidentiality of the person submitting the report will be assured, unless permission to disclose is obtained in writing.
- B) If patient harm is in question, pursuant to Bylaws, Article VI., the Chief of Staff will initiate immediate corrective action (which may include immediate suspension of privileges of that physician).
- C) The Chief of Staff will inform the Executive Committee and the Well Being Committee of the report. The Well Being Committee will meet within seven (7) days to address the concerns.

II) INVESTIGATION/EVALUATION

The Well Being Committee shall:

- A) Receive and assess information and seek corroboration and additional information concerning the probability of such impairment or other problem.
- B) Provide advice, counseling or referrals on a voluntary basis.
- C) Meet with identified individual, discuss the concerns and establish a program or plan by which the individual will address identified and acknowledged concerns and problems. When appropriate, have the physician sign a release of information so that the committee can communicate with those providing evaluation and/or treatment. Depending on the type, severity, and/or number of reports, the committee may:
  - 1) Record the incident only.

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

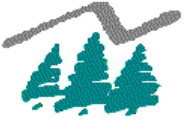
2

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



# TAHOE FOREST HOSPITAL DISTRICT

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

- 2) Record the incident and monitor, i.e., assign a committee member to have repeated contact with the member for a specified length of time.
- 3) Record the incident and request the member submit to an examination (physical, psychiatric, laboratory screening, as appropriate).
- 4) Record the incident and arrange for immediate intervention, at which time the physician will be told that the results of the investigation indicate that the physician suffers from an impairment that affects his or her practice. Immediate recommendation of evaluation and treatment alternatives (including arrangements for entry to a rehabilitation program) will follow.

- D) Respond formally to the referral source, i.e., the author of the original written report of concern.
- E) Respond and make recommendations to the Executive Committee.

### III) RESPONSE

A) Depending upon the severity of the problem and the nature of the impairment as found by the Well Being Committee, the Chief of Staff, with guidance of the Executive Committee, can require the physician to attend an approved rehabilitation program for evaluation (and treatment if recommended) within twenty-four (24) hours after notice to the physician of the finding. This will be a condition of continued appointment and clinical privileges.

- 1) **Voluntary:** The physician can request a leave of absence and discontinue his/her practice "voluntarily". This can be considered for first offenses in which there is not an adverse patient outcome or when the impaired physician self reports his problem. Reduction or revocation of privileges need not occur.
- 2) **Suspension of privileges:** Suspension should occur for documented repeat offenses that are discovered due to a third party report or in cases of adverse patient outcomes due to impairment.

### B) **Reporting**

- 1) Priority is given to rehabilitation whenever possible, rather than punitive measures. Physicians who voluntarily seek assistance without discipline are not reported to the State Medical Boards or the National Practitioner Data Bank, although they may be referred in confidence to the Diversion Program of the Board. A physician whose privileges are suspended or restricted as a result of disciplinary action is potentially reportable to the National Practitioner Data Bank and the Medical Board, regardless of referral for assessment by the Well Being Committee.

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

3

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



**TAHOE FOREST  
HOSPITAL DISTRICT**

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

- 2) When appropriate, when civil or criminal laws have been broken, law enforcement shall be notified. Reporting to legal authorities will be consistent with hospital policy.

**C) Confidentiality**

Throughout this process confidentiality shall be respected. All parties should avoid speculation, conclusions, gossip, and any discussions of this matter with anyone outside those described in this policy.

**IV. RETURN TO PRACTICE**

**Recommendation Guidelines**

Since the practice of medicine at the hospital is a privilege, it is the physician's responsibility to provide the information required by the medical staff as a prerequisite for re-entry. It is the recovering physician's duty to assure the public, the profession, and the hospital of returned health and continued responsibility for personal well-being and patient safety.

- A) Each physician should be treated individually. Factors to be considered are the type of practice the physician intends to pursue, recommendations from the treatment program, the privileges requested, the legal status of the physician's licensure, and situational relationship with law enforcement or federal regulatory agencies. Should the Well Being Committee have questions regarding the ability of the physician to practice, appropriate expert opinion(s) will be obtained. Not all provisions listed under recommended guidelines need apply to every physician.

- B) The returning physician must supply the following to the hospital at the time of request for reinstatement:

- 1) A signed, limited release of information waiving the physician's confidentiality protection permitting the Chief of Staff or his designee to make inquiries. Records released through such waivers are released only to those named in the release.

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

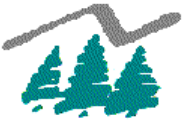
4

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



**TAHOE FOREST  
HOSPITAL DISTRICT**

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

- 2) Evidence of successful completion of all recommended treatment in a program approved by the State Medical Board and the hospital Well Being Committee.
  - 3) A written recommendation to return to practice from the treatment provider.
  - 4) Pursuant to Bylaws IV.6.2, the returning physician shall submit a written request to the Executive Committee to reinstate privileges upon return from a leave of absence.
- C) The affected physician should identify his impairment circumstance to the Medical Staff of each hospital where he/she has privileges: To the Physician Well Being Committee, if one exists, or to the Chief of Staff or Chief Executive Officer, if no Physician Well Being Committee exists.
- D) **Monitoring Program**
- 1) A personalized written monitoring plan will be established for a recovering physician, which includes elements of an aftercare and recovery plan. Specific requirements/responsibilities of the recovering physician will be explained therein. It will be designed to accumulate information, which will, over time, document the physician's participation in the recovery/aftercare plan and assure the Medical Staff that the physician can practice medicine safely. The monitoring shall be overseen by the Well Being Committee (a member of which will be designated as coordinator) and shall include:
    - a) A written report from the physician's personal physician (defined as the physician who will provide the general medical care of the recovering physician).
    - b) A written report from the supervising physician (defined as the physician who will oversee the medical activities/practice of the recovering physician).
    - c) A written report from the physician or therapist who treated the recovering physician's specific impairment problem.
    - d) Evidence, through personal affidavit of continued attendance, at the following therapeutic activities:
      - (1) Physician recovery group
      - (2) Monitored aftercare program
      - (3) AA/NA (if appropriate to the physician's impairment)

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

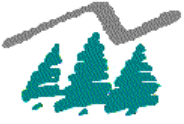
5

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



**TAHOE FOREST  
HOSPITAL DISTRICT**

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

(4) Individual therapist

- e) Random urine/blood samples for chemical analysis when requested by the Chief of Staff, Department Chairperson, Well Being Committee or other monitoring program designee. These tests will be performed at the expense of the recovering physician.
- f) Maintenance of chemical free lifestyle using only medications prescribed by the personal physician or the treatment provider.
- g) Written reports may be required from several sources, such as office colleagues, hospital work place, family, etc., and are the responsibility of the recovering physician. The frequency of these reports should be determined for each physician on an individual basis.
- h) Assurance that any required medication (e.g., deterrents as Antabuse or Naltrexone) is being taken.

- 2) The Well Being Committee shall provide a quarterly report to the Medical Executive Committee.
- 3) Noncompliance by the recovering physician with any of the above requirements will result in consideration of suspension of privileges.

**E) Reinstatement**

Assuming all of the information received indicates that the physician is rehabilitated and capable of resuming care of patients. The hospital must take the following additional precautions when restoring clinical privileges:

- 1) **Monitoring:** Ensure the monitoring program (as established in IV.D.1. of this policy) is operational. Ensure that the physician submits periodic written reports from his aftercare program to the Well Being Committee. Reports

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

6

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



**TAHOE FOREST  
HOSPITAL DISTRICT**

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

should document that the physician is continuing treatment or therapy, as appropriate, and that his or her ability to treat and care for patients in the hospital is not impaired.

- 2) A care provider with similar privileges at Tahoe Forest Hospital District may need to be identified, who is willing to assume responsibility for the care of the affected physician's patients in the event of his or her inability or unavailability.
- 3) Proctoring and/or care reviews (concurrent peer review and regular record review) may be required and should be considered for those physicians who perform procedures in the hospital. The physician's exercise of clinical privileges in the hospital shall be monitored by the Chief of Staff or by a physician appointed by the Chief of Staff.
- 4) All requests for information concerning the impaired physician shall be forwarded to the Chief of Staff for response. The physician's confidentiality will be maintained in the course of information exchanges. Whenever possible, written acknowledgement of the authorization for disclosure shall be obtained from the affected physician. Information will be disclosed only those named in the release.
- 5) Individualized recovery/aftercare plan(s) will be re-evaluated (as needed, outside experts may be consulted) at least annually by the Well Being Committee to assure that it remains appropriate and does not require elements no longer necessary to the situation. Changes made will be in writing and signed by the recovering physician.

**F) Relapse**

A relapse or resumption of the use of alcohol or drugs is not an uncommon phenomenon for those recovering from chemical dependency. The committee will meet and review information after a relapse has been reported. Possible responses to a verified relapse include:

- 1) Although it is preferable that the recovering physician self-reports any relapse, privileges may be suspended even if he self-reports or if it is the first relapse.

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

7

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



**TAHOE FOREST  
HOSPITAL DISTRICT**

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

- 2) Privileges will be suspended if it is not the first relapse and such relapse isn't self-reported (i.e., the circumstances are discovered by third party or urine/blood test).
- 3) (Re)entry into a treatment program for evaluation and/or treatment.
- 4) Revision of the recovery/aftercare plan to include stricter requirements.
- 5) The physician must show proof that the relapse has been rectified and he/she is again free of chemicals.
- 6) If a contingency contract exists and its conditions are met, the license or privileges—surrendering letter will be sent.
- 7) In the event of a relapse, a report will be given back to the Executive Committee.

**V) RECORD KEEPING**

- A) Records should be kept which are appropriate to the responsibilities given to the Well Being Committee. Detailed records of the deliberations about an individual physician are not appropriate; however, each recovering physician will have a file maintained which will include copies of the original written report of concern, intervention, evaluation and/or treatment reports, monitoring plan, agreements between the physician and monitoring committee, random urine/blood test results, reports required for aftercare, etc.
- B) All records of the Well Being Committee should be maintained in the strictest confidence, preferably in locked files to which only certain key committee members and staff have access. The records will be used strictly for quality assurance activities and be maintained exclusively as part of the peer review committee records.
- C) A simple form indicating a Well Being file exists on a physician will be kept in the physician's credential file.

**VI. RELEASE OF INFORMATION**

- A) Whenever possible, signed authorization by the impaired physician should be obtained to allow release of information regarding his treatment and rehabilitation.
- B) In the event that any outside party attempts to obtain discovery of these documents, the peer review committee will assert the protections available under Evidence Code Section 1157 and other confidentiality laws to the fullest extent permitted by law.
- C) Voluntary disclosure of information by the committee in furtherance of its goals of protecting patients and rehabilitating physicians must be distinguished from

FORMULATED BY: Executive Committee EFFECTIVE DATE: 2/1995 8

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director DATE REVISED: 8/11/2004

APPROVAL: DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



# TAHOE FOREST HOSPITAL DISTRICT

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

disclosure in response to a subpoena or other demand, which is generally discouraged by laws.

There are special laws which protect not only quality of care related to medical staff records, but also drug and alcohol abuse and mental health treatment records from discovery and/or disclosure.

- D) Consistent with the charges to the committee, the committee is encouraged to communicate voluntarily with physician well being committees of other hospital medical staffs, as appropriate, at any stage in its work with a physician. Such sharing of information will assist the recipient medical staff in its monitoring functions and may also benefit the subject physician (e.g., by avoiding duplicative monitoring activities, such as drug testing).

Such communications, which might otherwise violate privacy and lead to liability, are specially protected under both state and federal law. For example, California Civil Code Section 43.8 provides an unconditional immunity to communications made by any person, to certain groups and individuals engaged in physician peer review, of information intended to aid in the evaluation of the qualifications, fitness, character or insurability of a physician or other health care practitioner.

Absent a signed authorization from the affected physician for disclosure to another Medical Staff's Credentials Committee or other such committee, this policy provides for the sharing of information only with the Well Being Committee of other Medical Staff's.

There should be a written agreement on the part of the receiving committee that the records will be used strictly for quality assurance activities and will be maintained exclusively as part of the Peer Review Committee records, thus protected under Evidence Code Section 1157.

- E) Legal counsel will be consulted to develop a protocol and procedure for governing the release of committee information.
- F) Appropriate guidelines, letter and forms have been developed to assist with the process of intervention and return to practice.

## VII) BOARD OF DIRECTORS

FORMULATED BY: Executive Committee

EFFECTIVE DATE: 2/1995

9

ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director

DATE REVISED: 8/11/2004

APPROVAL:

DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007



# TAHOE FOREST HOSPITAL DISTRICT

POLICY/PROCEDURE

NO. \_\_\_\_\_

SECTION MEDICAL STAFF

TITLE: WELL BEING POLICY

P.O. Box 759 Truckee, CA 96160 (530) 587-6011  
880 Alder Ave. Incline Village, NV 89451 (775) 832-3810

The Executive Committee shall, at least quarterly, generally report to the Tahoe Forest Hospital District Board of Directors concerning its activities in the area of health, impairment and substance abuse. Such reports shall be sufficient to indicate to the Board of Directors that the Executive Committee is discharging its responsibilities. These reports will not reveal the identity of a particular Medical Staff member who sought assistance from the Executive Committee or who has been referred to it for health reasons.

FORMULATED BY: Executive Committee	EFFECTIVE DATE: 2/1995	10
ADMINISTRATIVE APPROVAL: Terri Schnieder, CPMSM, Director	DATE REVISED: 8/11/2004	
APPROVAL:	DATE REVIEWED: 7/199; 9/11/2002; 11/2003; 8/11/2004; 11/2005; 2/2007	