

## Policy #4: Resident Impairment

- 1. It is the responsibility of the Family Medicine Training Program to ensure resident physicians function within a safe and supportive environment where they may provide compassionate and safe medical care to patients at all times.
- 2. Program Directors and faculty must monitor residents for the signs of impairment, including those related to depression, burnout, suicidal, substance abuse, and behavioral disorders.
- 3. It is the responsibility of every individual—including Program Director, faculty, preceptors, and trainees—licensed by the Washington State Department of Health (DOH) to report any licensed healthcare practitioner who may not be able to practice with reasonable skill and safety as a result of a physical or mental condition according to WAC 246.16.200.
- 4. This reporting requirement applies to anyone who observes that a physician may be impaired.
  - a. Actual evidence of impairment is not required.
  - b. In the absence of patient harm, sexual misconduct, or professional misconduct, this reporting requirement may be fulfilled by confidentially reporting the individual to the Washington Physicians Health Program (WPHP).
  - c. Trainees may make this report to the WPHP directly, or may make their concerns known to the Program Director, Chief of Service, GME Office or another responsible individual.
- 5. For new trainees with a history of impairment as well as current trainees who exhibit evidence of impairment, evaluation, treatment and monitoring will be performed under the auspices of the WPHP or applicable physicians' health program.
  - a. When a trainee is referred to the WPHP for assessment, the trainee is required to sign a release allowing the Program Director and the GME Office to receive information on the outcome of the assessment and ongoing monitoring.
- 6. CHI-Franciscan Health Harrison Medical Center (HaMC) conducts a thorough background check on all new trainees upon appointment to residency training.
  - a. If a history of DUI or other alcohol/substance abuse related crime(s) is revealed, a referral may be made to the WPHP in order to determine if ongoing evaluation, treatment and/or monitoring is required.
- 7. As a condition of appointment, all trainees are required to comply with the Program Director or faculty member's decision to remove them from participation in clinical duties and other professional activities and to refer them to WPHP should impairment be suspected and/or confirmed.

- a. The WPHP is solely authorized to determine fitness for duty and endorse the return to work (i.e., the resumption of training and clinical care responsibilities) of all trainees who experience and/or exhibit signs of impairment.
- b. The Family Medicine Residency Program, HaMC and WPHP support full confidentiality to the extent allowed by program policy and law.
- c. Confidentiality of evaluation, treatment, and monitoring by WPHP is assured by the WPHP Confidentiality Assurance Policy.
- d. However, the Family Medicine Residency Program will disclose impairment and successful return to practice, if applicable, for hospital or medical licensing board training verification and/or credentialing inquiries.

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Program Director

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Date