

SUBJECT	NUMBER
IMPAIRED RESIDENT/FELLOW POLICY	GME-10
	Attachments <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
KEY WORDS	EFFECTIVE DATE
Impairment, Investigation, Report	July 1, 1999
CATEGORY	LAST REVIEW DATE
Human Resources (HR)	January 2018
MANUAL	NEXT REVIEW DATE
Graduate Medical Education	January 2021
ISSUED BY	ORIGINATION DATE
Graduate Medical Education	July 1, 1999
APPLICABLE	RETIRED DATE
Applies to all training programs with residents rotating at a HealthPartners facility	Not Applicable
REVIEW RESPONSIBILITY	CONTACT
Graduate Medical Education Committee (GMEC)	Graduate Medical Education

PURPOSE

Any employee, staff member, or medical staff who believes that a member of the Resident staff is functioning while impaired for any reason should report such concerns to the Program Director/Site Director.

SCOPE

This policy applies to all training programs sponsored by the HealthPartners Institute and affiliate training programs whose residents rotate through a HealthPartners facility.

DEFINITION

An impaired resident/fellow shall be defined as any resident/fellow who, by virtue of physical disability, mental illness, psychological impairment, chemical substance abuse or misconduct, is unable to safely care for patients, perform duties normally expected of a resident physician or engage in peer interaction necessary for patient care.

POLICY

All residents/fellows have a responsibility to report to work in a fit condition to perform. If it is suspected that a resident is impaired, the Program Director/Site Director shall obtain as much detailed information as possible at that time and begin an investigation. Site Directors should report the incident to the affiliate Program Director and ideally should be involved in any resulting action. HealthPartners Institute - sponsored residency Program Directors are to determine whether an investigation should be carried out by himself/herself, by a committee, or by an outside consultant or some other appropriate mechanism. If an investigation reveals possible impairment the Program Director/Site Director should notify the Executive Director of Health Professional Education or Designee.

If based on the initial report, the conclusion is that there is no substance to the report, such report will be discarded and will not appear in the file of the resident. In any case, the results of the investigation shall be communicated to the Executive Director of Health Professional Education or Designee.

PROCEDURES

1. There should be regular monitoring of resident/fellow performance by the Program Director and the faculty. When a suspicion of impairment is detected, an in-depth interview with the resident/fellow by the Program Director and one other faculty member shall be carried out. Mutually agreeable resources may be utilized to establish the fact and severity of the impairment.
2. As soon as the Program Director is aware of a problem with resident/fellow impairment, an immediate method of handling the problem should be determined.
3. The Program Director and the resident/fellow, after discussion, will formulate a plan for reduction, and/or elimination, of the impairment. The plan should stipulate specific goals and objectives. If agreement is reached, the Program Director and the resident/fellow shall both sign the plan. The original is kept in the resident's/fellow's file; copies are sent to the resident/fellow and the Program Director. There shall be a periodic review of the impairment by the Program Director.
4. If a leave of absence is involved in the plan, it must meet the criteria stated in the regulations of the appropriate specialty Board.
5. If the Program Director and the resident/fellow cannot agree on either the fact of the impairment or plan for remediation of the impairment, then the regular dismissal policies and procedures of the HealthPartners Institute may be utilized.
6. If required, reporting of the impaired physician to the Board of Medical Examiners shall be carried out under the provisions of State of Minnesota Statutes.

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