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FACILITY:	HSHS St. Vincent Hospital HSHS St. Mary's Hospital HSHS St. Nicholas Hospital HSHS St. Clare Hospital Libertas Treatment Center	MANUAL: Medical Staff
TITLE:	Committee for Physicians Health	ORIGINATING DEPARTMENT: Medical Staff Services
SUPERSEDES:	SVGB 200-03-001 SMGB CL-3165 SNS HA-Me.8 SCO ---	POLICY NUMBER: MS-018

I. POLICY:

The Committee for Physicians Health addresses information and concerns about the health of an individual Medical Staff Appointee or Allied Health Professional.

II. PURPOSE:

- To compassionately assist Medical Staff Appointees and Allied Health Professionals in the maintenance of appropriate standards of personal performance.
- To recognize and evaluate issues related to the health, wellbeing or impairment of Medical Staff Appointees and Allied Health Professionals.
- To provide advisory recommendations and reports to the Medical Executive Committee and other appropriate Medical Staff committees as the Executive Committee designates.
- Maintaining informant confidentiality for self-referral and referral by others.

III. COMMITTEE COMPOSITION:

The Committee for Physicians Health is composed of at least two members of the active Medical Staff who are willing to serve and are selected for specific expertise and experience. The appointments are made by the Medical Staff President with input by the chairperson of the Committee.

The committee has no authority to take disciplinary action.

IV. GUIDELINES/PROCEDURES:

- A. The Committee is a combined committee that is shared by St. Vincent Hospital, Libertas, St. Mary's Memorial Hospital and St. Clare Hospital. St. Nicholas Hospital has a separate committee.
- B. The committee's primary focus is:
 1. The development of assessment protocols and basic standards that encompass aspects of possible impairments including addiction, psychiatric illness, stress, physical illness, and behavioral problems.
 2. To receive and assess information and to seek corroboration and additional information concerning these Medical Staff Appointees or Allied Health Professionals who do not meet standards or who have self-referred

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themselves for assessment or treatment. The process for reporting and investigating concerns with a Medical Staff Appointee or Allied Health Professional is detailed in *Medical Staff – Impaired* policy (MS-007).

3. To provide advice, recommendations and assistance to these Medical Staff Appointees or Allied Health Professionals in question and to the referring source, provide recommendation for treatment and/or education, and provide assistance in following through on recommendations.
4. To monitor these Medical Staff Appointees or Allied Health Professionals for compliance with the terms of a monitoring agreement as outlined by treating individual or agency.
5. To assist these Medical Staff Appointees or Allied Health Professionals with re-entry into practice at the hospital.
6. To educate its members and the Medical Staff Appointees and Allied Health Professionals about:
 - a. standards of provider health, well-being and impairment, including self-referral
 - b. appropriate responses to findings of impairment
 - c. treatment, recovery and monitoring
 - d. the responsibilities of the Medical Staff as a whole in response to concerns about Medical Staff Appointees' or Allied Health Professionals' health
 - e. appropriate resources for prevention, treatment, rehabilitation, monitoring and re-entry
 - f. confidentiality for all self and others referrals will be kept confidential to the Committee members and supporting staff

V. MEETINGS:

The Committee meets in accordance with its policies and procedures.

VI. REPORTING:

The Committee reports its intervention, recommendations and monitoring regarding any Medical Staff Appointee or Allied Health Professional to the hospital where the staff member currently maintains privileges or scope of practice.

VII. CONFIDENTIALITY:

The committee maintains strict confidentiality in its proceedings. It is considered a Medical Staff Committee for purposes of claiming confidentiality protections afforded by Wisconsin Statutes §§146.37 and 146.38.