

Policy #: 014.002
Policy Title: Trainee Impairment
Sponsor: David Brown, MD; DIO
Approved by: Graduate Medical Education Committee

Purpose

FIU has adopted the following policy to address physician impairment.

This policy addresses ACGME Institutional Requirement IV.I.2. **Physician Impairment:** The Sponsoring Institution must have a policy, not necessarily GME-specific, which addresses physician impairment.

Definitions

Physician Impairment: The inability to practice medicine with reasonable skill or safety as a result of dependence or use of mind- or mood-altering substances; distorted thought processes resulting from mental illness or physical condition; or disruptive social tendencies. Examples of conditions that may cause impairment include mood disorders such as major depression; anxiety, sleep, or stress disorders; “burnout”; brain injury; or medical disorders such as endocrinopathies, central nervous system infections, etc.

Professionals Resource Network: The Professionals Resource Network, Inc. (PRN) is a legislatively enacted private non-profit organization for impaired healthcare professionals. The primary mission of PRN is to protect the health, safety and welfare of the public while supporting the integrity of the healthcare team and other professionals. PRN serves as the Consultant to the Florida Department of Health (DOH) and the Department of Business and Professional Regulation (DBPR) on matters relating to practitioner impairment. The DOH and the DBPR contract with PRN to provide mandated services of the Florida Statutes in Chapters 455 and 456, each individual’s practice act. PRN is a voluntary alternative to the DOH/DBPR disciplinary process.

Background

Impaired physicians may put their patients, coworkers, and themselves at risk. Physicians are known to be at increased risk for completed suicide. Recognizing this, we provide confidential resources for identification of at-risk physicians, referral for evaluation and treatment, monitoring recovery, and advocating for the safety of physicians that might have a physical or mental condition that could affect their ability to practice safely and skillfully.

Illness does not constitute impairment. However, impairment, whether physical, mental, or a substance use disorder, is managed as an illness permitting diagnosis and the opportunity for treatment. Further, impairment can change over time rather than remaining static. With successful recovery, physicians may return to work in an appropriate capacity. However, untreated and/or relapsing, impairment may preclude safe clinical performance. The Office of Graduate Medical Education (OGME) and the Office of Employee Assistance (OEA) have developed comprehensive didactic programs to educate faculty and trainees about impairment, including patient and personal risks associated with these conditions. Education

includes training on recognition of impairment, risk for physician suicide, and problems of substance use.

This policy serves to address impairment of any type in trainees, protect patients from risks associated with an impaired trainee, and compassionately address impairment to allow diagnosis, treatment, and rehabilitation.

Policy

All trainees are expected to be present, fit to provide the services required by their patients, and prepared to carry out their obligations. Program directors and faculty must monitor trainees for signs of impairment, especially those related to depression, burnout, suicidality, substance use, and behavioral disorders. When a concern for trainee impairment arises, faculty must report their concern to the Program Director. Trainees are also responsible to report concerns about their own impairment, or possible impairment of their fellow trainees. This reporting requirement applies to anyone who observes that a physician *may* be impaired. Actual evidence of impairment is not required. If there is a concern that a trainee *may* be impaired, he/she must be removed from patient contact until approved to return to work by the Program Director.

Programs and FIU must educate their trainees and faculty on physician impairment.

1. Trainees and faculty must be able to recognize signs and symptoms of impairment.
2. Trainees who perceive that they or another trainee are exhibiting behaviors which may potentially interfere with their ability to practice have the professional responsibility to immediately notify a senior trainee, supervising attending, and/or Program Director without fear of reprisal.
3. If a trainee is suspected of or demonstrating impairment of their ability to provide safe care, the supervising attending, or Program Director must consider immediate release of the trainee from any further patient care responsibilities at the time of recognition and referral for appropriate evaluation.

In achieving these goals, several principles are involved:

1. The safety of both the impaired trainee and his/her patients are of prime importance.
2. The privacy and dignity of the impaired trainee should be maintained as much as is possible in the context of safe patient care and departmental administration.
3. Program Leadership will work together to facilitate education, diagnosis and management.

Trainees are expected to remain in good standing at all participating sites. As such, trainees are to abide by the policies and procedures of all participating sites and are subject to policies and procedures as denoted by the individual institution.

A Trainee found in violation of this policy either directly possessing or using alcohol or drugs as described above or through a confirmed, positive drug test may be referred to the PRN and subject to appropriate discipline.

Related Policies

Drug and Alcohol Policy for Trainees

Author	Maryam Shakir	03/15/2022
Revised		08/24/2024
DIO Review	David Brown, MD	08/26/2024
GMEC Approval	Reviewed and approved	08/29/2024