

**PITT COUNTY MEMORIAL HOSPITAL  
GRADUATE MEDICAL EDUCATION  
POLICY/PROCEDURE**

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**SUBJECT: Resident Impairment      NUMBER: Exhibit E      PAGE: 1 OF 2**

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**ORIG: April 26, 2002                  REVISED: 12/2011                  REVIEWED:**

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**RESPONSIBLE PARTY: Graduate Medical Education**

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**APPROVED BY GMEC April 26, 2002, 12/20/2011**

**APPROVED BY: GMEPC May 2, 2002**

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## **INTRODUCTION**

Residents have the same, or greater, risk of physical, emotional and behavioral health problems as the general population. Recognition of impaired performance or suspected substance abuse along with prompt, appropriate response, will help assure that residents will provide quality health care to their patients. This policy and associated procedures are designed to enhance the quality of care provided by residents and to facilitate the rehabilitation of the affected resident.

## **ASSESSMENT AND INTERVENTION**

Institutions primary goal is to restore the resident to a high functioning learner and physician. Resident impairment issues shall ordinarily be initially dealt with by the Program Director and, if necessary, by disciplinary action. Consultation with the the GME Office and/or Institutional Official shall be sought, however. If the issue warrants, a meeting of the Committee on Resident Health and Behavior will be called.

## **COMMITTEE ON RESIDENT HEALTH AND BEHAVIOR**

In any particular circumstance a Committee on Resident Health and Behavior composed of the Chief of the Service, the Program Director in the resident's training program, the Designated Institutional Official, the Manager of GME in PCMH and the Chair of the Medical Staff COPH Committee or designee with resident education experience, may be convened. Additional members may be invited by the committee to serve on an ad hoc basis. The committee is chaired by the Designated Institutional official. Since the actions of this committee involve aspects of peer review and quality improvement, all investigations, assessments and evaluations conducted by the committee shall be treated in a confidential manner.

The committee shall investigate and evaluate as necessary, with consultation as it deems appropriate.

Possible interventions may include:

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- D) no action,
- 2) logging the issue for future reference,
- 2) simply bringing the issue to the resident's attention,
- 3) counseling,
- 4) requiring the resident to obtain a physical or mental health evaluation by an individual identified by the Program Director or the committee,
- 5) requiring the resident to attend an anger management course,
- 6) participation in the PCMH employee assistance program(InSight) and/or use of the North Carolina Physician Health Program (NCPHP),
- 7) invocation of disciplinary action, summary suspension, or other appropriate action.

Inability or failure of the resident to meet the expectations for improvement may lead to disciplinary action.