

# **Practitioner Impairment in the Workplace**

# Faculty:

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# Purpose

The purpose of this CME activity is to provide information regarding practitioner impairment in the workplace, including emphasis on recognition and rehabilitation, rather than punitive discipline, thereby aiding practitioners in retaining or regaining optimal professional functioning, consistent with protection of patients.

# Professional Practice Gap:

This CME activity fulfills Florida legislative medical licensing requirements for physicians, PAs and APRNs.

# Disclaimer

- This information in this educational activity is provided for general medical education purposes only and is not meant to substitute for the independent medical judgment of the practitioner relative to diagnostic and treatment options of a specific patient's medical condition. The viewpoints expressed in this CME activity are those of the authors/faculty. They do not represent an endorsement by Flagler Hospital, Inc. In no event will Flagler Hospital, Inc. be liable for any decision made or action taken in reliance upon the information provided through this CME activity.
- It is the practitioner's responsibility to understand and abide by the full text of specific Florida Statutes and Administrative Codes governing Healthcare Provider Impairment summarized in the following slides. Links to the Florida Statutes and Florida Administrative Codes content are provided within the slides.

# Objectives:

At the conclusion of this continuing medical education, participants will be able to:

1. Describe the relationship of practitioner impairment on patient safety in a high reliability organization.
2. Discuss the factors contributing to practitioner impairment in the workplace.
3. Identify signs of impairment in the workplace.
4. Explain how statutory requirements impact practitioner impairment.
5. Discuss the Florida impairment reporting laws.
6. Describe Florida treatment programs for impaired practitioners.

# Promoting a Culture of Safety:

By becoming a ***“High Reliability Organization (HRO) thereby establishing an enterprise-wide culture of safety promoting consistent, reliable quality healthcare”***.

*Reference: Flagler Hospital Culture of Safety Policy-MR-008*

# Supporting a Culture of Safety:

## Joint Commission- MS.11.01.01:

**The medical staff implements a process to identify and manage matters of individual health for licensed independent practitioners which is separate from actions taken for disciplinary purposes.**

**Rationale:** The organized medical staff and organization leaders have an obligation to protect patients, its members, and other persons present in the hospital from harm. Therefore, the organized medical staff designs a process that provides education about licensed independent practitioner health; addresses prevention of physical, psychiatric, or emotional illness; and facilitates confidential diagnosis, treatment, and rehabilitation of licensed independent practitioners who suffer from a potentially impairing condition. The purpose of the process is to facilitate the rehabilitation, rather than discipline, by assisting a practitioner to retain and to regain optimal professional functioning that is consistent with protection of patients. If at any time during the diagnosis, treatment, or rehabilitation phase of the process it is determined that a practitioner is unable to safely perform the privileges he or she has been granted, the matter is forwarded for appropriate corrective action that includes strict adherence to any state or federally mandated reporting requirements...

# Flagler Hospital: Promoting a Culture of Safety

**As stated in the *Practitioner Impairment Policy (MS-009)* “Flagler Hospital has an obligation to protect patients and hospital personnel from harm...[including] treatment and rehabilitation of practitioners who suffer from a potentially impairing condition. [Accordingly] all Flagler Hospital employees and practitioners are strongly encouraged to express concern about an impaired practitioner and to make a referral [per policy and legislation]...”**

# Practitioners: Promoting a Culture of Safety

- ▶ **The roles of practitioners (Physicians, APRNs, and PAs) are integral in establishing an enterprise-wide culture of safety by promoting consistent, reliable, high quality healthcare.**

# Profession: Defined

- ▶ **A profession has a specialized body of knowledge defined by a code of ethics applied to service that in the medical field, elevates patient care above self-interest; and allows the privilege of self-regulation as granted by society.**

# Practitioners: Self-Regulation

- ▶ **Practitioners (physicians, APRNs, and PAs) “must be professionally competent, act responsibly, seek consultation when necessary, and treat the patient with compassion and respect”. In addition, the obligation of professional self-regulation requires practitioners to identify and report impairment of their colleagues in promoting a high reliability organization.**

# Practitioner Impairment: Described

## American Medical Association

*“The AMA defines physician impairment as any physical, mental or behavioral disorder that interferes with ability to engage safely in professional activities...”*<sup>1</sup>

## Intervention Project for Nurses

*“impairment is a condition that results from the use of mind/mood-altering substances, distorted thought processes found in the psychologically impaired, or a physical condition that prevents the nurse from providing safe patient care. Impairment is characterized by the inability to carry out the professional duties and responsibilities in a reasonable manner consistent with nursing standards”*<sup>2</sup>

## Recognizing Alcohol and Drug Impairment in the Workplace in Florida

*“The inability or impending inability to provide safe, professional activities and duties due to a behavioral, mental, or physical disorder related to alcohol or drugs.”*<sup>3</sup>

## Florida Statutes 456.076(e)

*“ ‘Impairment’ means a potentially impairing health condition that is the result of the misuse or abuse of alcohol, drugs, or both, or a mental or physical condition that could affect a practitioner’s ability to practice with skill and safety.”*<sup>4</sup>

1. American Medical Association. (2019). Physician Impairment H-95.955

2. Intervention Project for Nurses. (n.d.) . <https://www.ipnfl.org/about/>

3. Toney-Butler, T. & Siela, D. (2020). *Recognizing alcohol and drug impairment in the workplace in Florida*. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK507774/>

4. Florida Statute (2019). Impaired practitioner program. Retrieved from

[http://www.leg.state.fl.us/Statutes/index.cfm?App\\_mode=Display\\_Statute&URL=0400-0499/0456/Sections/0456.076.html](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0456/Sections/0456.076.html)

# Workplace Impairment:

- ▶ **Occurs when practitioners (physicians, APRNs, PAs)**
  - ▶ **are incapable of providing competent and safe care to patients because they are impaired by alcohol, prescription or nonprescription drugs, or other mind-altering substances**
  - ▶ **demonstrate psychological or neurological conditions that alter their judgement**
- ▶ **Causes increased risk of injury and death to patients and their families and their healthcare team members**

Toney-Butler, T. J. & Siela, D. (2020). Recognizing alcohol and drug impairment in the workplace in Florida. StatPearls. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK507774/>

Worksafe BC (2019). *Substance use & impairment in the workplace*. Retrieved from <https://www.worksafebc.com/en/health-safety/hazards-exposures/substance-use-impairment>

# Workplace Impairment: Contributing Factors

- ▶ **Genetic pre-disposition to dementia, Alzheimer's and/or substance abuse**
- ▶ **Chronic staffing shortages**
- ▶ **Consistent lack of necessary equipment and supplies**
- ▶ **Chronic sleep deprivation and/or variable work shift changes**
- ▶ **Medical issues, chronic and/or recurring pain**
- ▶ **Relationship and/or communication issues (personal and/or work-related)**
- ▶ **Financial-related issues**
- ▶ **Undisclosed physical disabilities**
- ▶ **Consistently increased workload**
- ▶ **Psychological related stressors (Depression, Anxiety and/or low self-esteem)**
- ▶ **Physical and/or Mental addictions (alcohol, prescriptions, illegal drugs)**
- ▶ **Inability to cope with personal and/or work-related stress**
- ▶ **Lack of and/or poor education and training**
- ▶ **Performance inconsistencies among providers**
- ▶ **Habitually working long shifts**
- ▶ **Consistently unexpected changes in job responsibilities**

Toney-Butler, T. J. & Siela, D. (2020). *Recognizing alcohol and drug impairment in the workplace in Florida*. StatPearls.

Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK507774/>

# Impairment: Identifying Signs

## Physical

- ▶ Tremors
- ▶ Excessive fatigue
- ▶ Slurred speech
- ▶ Watery eyes
- ▶ Unsteady gait
- ▶ Unexplained weight gain or loss
- ▶ Change in grooming
- ▶ Frequent runny nose
- ▶ Frequent nausea, vomiting, and/or diarrhea
- ▶ Excessive changes in activity (hyperactive and/or hypoactive)
- ▶ Reduced motor-coordination and/or reduced response time

## Behavioral

- ▶ Unexplained, brief absences
- ▶ Rounding at odd hours
- ▶ Lack of concentration and/or periods of memory lapse
- ▶ Frequent lying and/or making excuses
- ▶ Decreased judgement
- ▶ Increased inaccuracy and/or forging documentation
- ▶ Habitual lateness/tardiness/job shrinkage (do just enough to get by)
- ▶ Frequent mishaps/incidents/emergencies
- ▶ Frequent mood changes and/or outbursts of anger
- ▶ Personality changes after meals and/or breaks
- ▶ Disengagement/self-isolation/apathy

Thomas, C. M. & Siela, D. (2011). *The impaired nurse: Would you know what to do if you suspected abuse?*. American Nurse Today. Retrieved from <https://www.americannursetoday.com/the-impaired-nurse-would-you-know-what-to-do-if-you-suspected-substance-abuse/>

# Impairment: Effects on

## ▶ Patients

- ▶ Loss of trust in healthcare team
- ▶ Decreased satisfaction with their care
- ▶ Subjected to increased medical errors (e.g. wrong-site surgery, wrong medication, improper or missed diagnosis)
- ▶ Decreased quality of care (e.g. diversion of pain medication by providers resulting in increased signs and/or symptoms of patients' pain)
- ▶ Potential for increased mortality

## ▶ Healthcare Team

- ▶ Increased liability with shared responsibilities for patient care/Decreased morale
- ▶ Increased responsibility to report signs of impairment/potential punishment for failure to report
- ▶ Increased absenteeism
- ▶ Decreased work quality
- ▶ Increased potential for malpractice
- ▶ Potential revenue decrease
- ▶ Increased potential for mortality

# Obligation to Ensure Patient Safety

## American Medical Association (AMA) Code of Medical Ethics

Physicians collectively, through self-regulation have the obligation to unequivocally ensure safe patient care. This ethical obligation is met by:

- Intervening in a timely manner to ensure that impaired physician colleagues cease practicing and receive appropriate intervention from a physician health program (PHP).
- Supporting physicians in identifying and reporting impaired physician colleagues in keeping with ethical guidelines and applicable law.
- Assisting recovered physician colleagues as they resume patient care.
- Promoting maintenance of health and wellness among physicians including establishing and/or supporting physician health programs.

# Obligation to Ensure Patient Safety

## **The American College of Physicians (ACP): “Physician Impairment and Rehabilitation: Reintegration Into Medical Practice While Ensuring Patient Safety: A Position Paper From the American College of Physicians”**

1. The professional duties of competence and self-regulation require physicians to recognize and address physician illness and impairment.
2. The distinction between functional impairment and potentially impairing illness should guide identification of and assistance for the impaired physician.
3. Best practices for [Physician Health Programs] PHPs should be developed systematically, informed by available evidence and further research.
4. PHPs should meet the goals of physician rehabilitation and reintegration in the context of established standards of ethics and with safeguards for both patient safety and physician rights.
5. Maintenance of physician wellness with the goal of well-being must be a professional priority of the health care community promoted among colleagues and learners.

Candilis, P.J., Kim, T. D., & Sulmasy, L.S. (2019, June 18) Physician impairment and rehabilitation: reintegration into medical practice while ensuring patient safety: a position paper from the American College of Physicians. *Annals of Internal Medicine* 170(12):871-879. Retrieve from <https://doi.org/10.7326/M18-3605>

# Obligation to Ensure Patient Safety

## Flagler Hospital, Inc. Medical Staff Bylaws

### Advanced Health Professionals (APRNs and PAs)

#### 16.4 QUALIFICATIONS

Advanced Health Professionals shall document their qualifications, status, clinical competence, training, demonstrated ability and physical and mental health condition with sufficient adequacy to demonstrate that (a) they can exercise judgment within their areas of competence, although a Staff Member [physician] may be ultimately responsible for patient care; (b) they may participate directly in patient care within the scope authorized by law and the Hospital; and (c) they are qualified to provide a needed service in the Hospital. **AHPs must be determined, on the basis of documented references, to adhere strictly to the ethics of their respective professions and to work cooperatively with others; may be individually assigned to an appropriate clinical department; and shall carry out their activities subject to the policies, procedures, rules and regulations of the Hospital and these Bylaws...**

# Obligation to Ensure Patient Safety

## American Academy of Physician Assistants (PA)

“PAs have an ethical responsibility to protect patients and the public by identifying and assisting impaired colleagues. “Impaired” means being unable to practice medicine with reasonable skill and safety because of physical or mental illness, loss of motor skills, or excessive use or abuse of drugs and alcohol. PAs should be able to recognize impairment in physician supervisors, PAs, and other health care providers and should seek assistance from appropriate resources to encourage these individuals to obtain treatment.”

# Obligation to Ensure Patient Safety

## American Nurses Association (ANA)

### The American Nurses Association (2015) Code of Ethics for Nurses with Interpretive Statements

Provision 3: The nurse promotes, advocates for, and protects the rights, health, and safety of the patient. <sup>1</sup>

**“The Code’s Interpretive Statement 3.6 states, “The nurse’s duty is to take action to protect patients and to ensure that the impaired individual receives assistance. This process begins with consulting supervisory personnel, followed by approaching the individual in a clear and supportive manner and by helping the individual access appropriate resources. The nurse should extend compassion and caring to colleagues throughout the processes of identification, remediation, and recovery. Care must also be taken in identifying any impairment in one’s own practice and in seeking immediate assistance.” <sup>2</sup>**

Provision 7: **The nurse, in all roles and settings,** advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy. <sup>1</sup>

American Nurses Association Code of Ethics for Nurses. (2015) Retrieved from <https://nursing.rutgers.edu/wp-content/uploads/2019/06/ANA-Code-of-Ethics-for-Nurses.pdf>

What to do when a colleague is impaired. (2017, September 26). American Nurse. Retrieved from <https://www.myamericannurse.com/colleague-impaired/>

# Obligation to Identify & Report Impairment

## 2019 Florida Statute Chapter 456: Health Professions and Occupations: General Provisions

### 456.072: Grounds for discipline; penalties; enforcement

(i) Except as provided in s. 465.016, failing to report to the department any person who the licensee knows is in violation of this chapter, the chapter regulating the alleged violator, or the rules of the department or the board. However, a person who the licensee knows is unable to practice with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of a mental or physical condition, may be reported to a consultant operating an impaired practitioner program as described in s. 456.076 rather than to the department.

(z) Being unable to practice with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition. In enforcing this paragraph, the department shall have, upon a finding of the State Surgeon General or the State Surgeon General's designee that probable cause exists to believe that the licensee is unable to practice because of the reasons stated in this paragraph, the authority to issue an order to compel a licensee to submit to a mental or physical examination by physicians designated by the department...A licensee or certificate holder affected under this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that he or she can resume the competent practice of his or her profession with reasonable skill and safety to patients.

# Obligation to Identify & Report Impairment

## The Nurse Practice Act (Florida Statute 464.018)

The following acts constitute grounds for denial of a license or disciplinary action, as specified in ss. 456.072(2) and 464.0095:

(j) Being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition. In enforcing this paragraph, the department shall have, upon a finding of the State Surgeon General or the State Surgeon General's designee that probable cause exists to believe that the nurse is unable to practice nursing because of the reasons stated in this paragraph, the authority to issue an order to compel a nurse to submit to a mental or physical examination by physicians designated by the department. If the nurse refuses to comply with such order, the department's order directing such examination may be enforced by filing a petition for enforcement in the circuit court where the nurse resides or does business. The nurse against whom the petition is filed shall not be named or identified by initials in any public court records or documents, and the proceedings shall be closed to the public...A nurse affected by this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that she or he can resume the competent practice of nursing with reasonable skill and safety to patients.

(k) Failing to report to the department any person who the nurse knows is in violation of this part or of the rules of the department or the board. However, a person who the licensee knows is unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of a mental or physical condition, may be reported to a consultant operating an impaired practitioner program...

# Reasons For Not Reporting Impairment

- ▶ Impaired practitioners cannot admit they have a problem
- ▶ Practitioners tend to diagnose and treat themselves
- ▶ Fear of retaliation from peers
- ▶ Fear of damaging a practitioner's reputation
- ▶ Emotional conflicts due to relationship (mentor, supervisor, trainer, friend, partner) with impaired practitioner
- ▶ Patients are uncomfortable reporting practitioners responsible for their care

DesRoches, C.M., et al, (2010). Physicians' perceptions, preparedness for reporting, and experiences related to impaired and incompetent colleagues. *JAMA*, 304(2), 187

Toney-Butler, T. J. & Siela, D. (2019). *Recognizing alcohol and drug impairment in the workplace in Florida*. StatPearls. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK507774/>

# Obligation to Treat Impairment

## Flagler Hospital, Inc. Medical Staff Bylaws

### 4.9 Physician Recovery Network

If a Practitioner becomes enrolled in the Physician Recovery Network (PRN), the Practitioner will be placed on an immediate medical Leave of Absence (not considered an adverse action) until such time an initial “good standing” letter is received from the PRN. If a Practitioner is enrolled, or becomes enrolled, in the Physician recovery Network (PRN), the Practitioner will be required to have the PRN submit a “good standing” letter to the Medical Staff Services Department at least annually, or more frequently if requested by the MEC or the Board, for as long as the Practitioner is enrolled in the PRN.

If the Practitioner has a relapse, the Practitioner will be:

- (a) Placed on an immediate medical Leave of Absence until a “good standing” letter is received from the PRN;
- (b) Required to have PRN submit a “good standing” letter to the Medical Staff Services Department as least semi-annually, or more frequently if requested by the MEC;
- (c) Required to meet at least semi-annually with the Chief Medical Officer and appropriate Department Chief, who will report their findings to the MEC, until such time the MEC recommends disconnection of these meetings;
- (d) Place on a Focused Professional practice Evaluation (FPPE) with duration and specificity requirements outline by the MEC.

Failure to have the PRN submit a “good standing” letter at the required frequency may result in a loss of Membership and/or Privileges. This will be considered a voluntary resignation for not meeting required qualifications, and will not be considered an adverse action. Therefore, the Practitioner will not be entitled to procedural rights under Article VII. Once the Practitioner has satisfactorily completed their contract with the PRN, the Medical Executive Committee reserves the right to request continuation of the PRN and/or reserves the right to continued random testing, without prior notice to the Practitioner.

# Obligation to Treat Impairment

## Florida Physician Health Program is Professional Resource Network (PRN)

- The PRN serves as consultant to the Florida Department of Health (DOH) and the Department of Business and Professional Regulation (DBPR). It is a Florida PHP required to oversee rehabilitation for physicians, APRNs, PAs, among other licensed health professionals who have been identified with conditions related to substance abuse, alcohol abuse, mental impairment, behavioral health issues, stress management and physical illness
- Health care practitioners often participate in the PRN voluntarily instead of being reported to DOH/DBPR or reported by DOH/DBPR in a disciplinary process.

**Independent Reading:** The 2019 Florida Statute 456.076:  
Impaired practitioner programs  
[http://www.leg.state.fl.us/Statutes/index.cfm?App\\_mode=Display\\_Statute&URL=0400-0499/0456/Sections/0456.076.html](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0400-0499/0456/Sections/0456.076.html)

# Obligation to Treat Impairment

## Professionals Resource Network (PRN): Impaired Practitioners Program of Florida

“The PRN program was originally created to serve physicians, and has **grown to serve a wide range of health care professionals...** The primary mission of PRN is to protect the health, safety and welfare of the public while supporting the integrity of the health care team and other professionals. PRN and its Medical Director serve 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.”

# Obligation to Treat Impairment

## Florida Nurse Health Program: Intervention Project for Nurses (IPN)

- Serves as consultant to the Florida Department of Health (DOH) providing on-going monitoring for all levels of nurses who have been identified with conditions related to substance abuse, alcohol abuse, mental impairment, behavioral health issues, stress management and physical illness.
- Assures safe nursing practice by requiring program participants to:
  - complete formal evaluations by DOH/IPN approved physicians
  - successfully complete recommended treatment,
  - provide random negative toxicology screens and
  - have their practice monitored at the workplace by a work site monitor.
- Provides expert consultation to the Florida Board of Nursing on an on-going basis.

# Summary

Practitioners and health care organizations are obligated to promote patient safety in achieving a high-reliability organization practice environment. As part of a high reliability organization, practitioner wellness and well-being are continually emphasized to ensure patient safety. Therefore, impaired practitioners should be identified and rehabilitated as a quality marker for high reliability organizations and the professions.

**Independent Reading:** Candilis, P. J., Kim, D. T. et al. (2019). Physician impairment and rehabilitation: reintegration into medical practice while ensuring patient safety: a position paper from the American College of Physicians. [https://www.acpjournals.org/doi/10.7326/M18-3605?url\\_ver=Z39.88-2003&rfr\\_id=ori:rid:crossref.org&rfr\\_dat=cr\\_pub%20%20pubmed](https://www.acpjournals.org/doi/10.7326/M18-3605?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%20pubmed)