

## TORRANCE MEMORIAL MEDICAL CENTER

---

<b>DEPARTMENT:</b>	<b>MEDICAL STAFF</b>	
<b>POLICY / PROCEDURE:</b>	<b>PRACTITIONER'S WELL-BEING COMMITTEE PRACTITIONER RETURN TO WORK</b>	
<b>DATE APPROVED:</b>	<b>PRACTITIONER WELL-BEING COMMITTEE MEDICAL EXECUTIVE COMMITTEE BOARD OF TRUSTEES</b>	<b>12/13/05, 3/18/14 02/14/06, 7/8/14 7/31/14</b>

---

**POLICY:** Members of the Medical Staff of Torrance Memorial Medical Center who return to work following a formal or informal medical leave of absence must be medically evaluated to ensure they maintain adequate physical and mental health status to provide care to patients at the hospital, as required under the Medical Staff Bylaws.

**PURPOSE:** It is recognized that impairment of certain of a physician's physical or cognitive abilities can place patients at risk. To ensure that only physicians who maintain adequate physical and mental health provide clinical care and treatment of patients at Torrance Memorial Medical Center, members of the medical staff who return to work following any formal or informal leave of absence that is based in whole or in part on any medical event or physical or mental impairment ("Medical Absence"), must undergo a medical or other evaluation as set forth in this policy.

The Medical Staff of Torrance Memorial Medical Center has the authority to determine whether or not a member of the medical staff maintains the physical and mental health necessary to exercise clinical privileges after such member returns to work following a medical absence. To that end, the Practitioner's Well Being Committee will review and evaluate the physical or mental health, as appropriate, of a medical staff member who returns to work following a medical absence, in accordance with the procedure outlined below.

### **PROCEDURE:**

- A. **Medical Staff Member Responsibility.** The Medical Staff Bylaws require that a member of the medical staff be able to document his/her "adequate physical and mental health status." As such, a medical staff member returning from a medical absence must do the following:
1. Notify Medical Staff Services of when he/she is returning from a medical absence and identify any health-related issues that could affect his/her performance of clinical privileges. A medical staff member who was granted a leave of absence of the Medical Staff Bylaws must provide notice in accordance with the Bylaws.

AND

**PROCEDURE**: CONTINUED

A. Medical Staff Member Responsibility. CONTINUED

2. Review his/her current clinical privileges and submit a new request to Medical Staff Services for clinical privileges. This review is to encourage any changes or modification due to health and fitness limitation or status.

AND

3. Arrange for his/her attending physician to provide medical clearance which identifies any possible limitations the medical staff member may have in connection with exercising the requested clinical privileges.

AND

4. Sign a consent for the release of medical information from the medical staff member's attending physician to the Practitioners' Well Being Committee.
5. Any medical staff member who returns from a medical leave and who refuses to arrange for medical clearance; refuses to consent to the release of the medical clearance and other medical information to the Practitioners' Well Being Committee; or refuses to undergo any other clinical examination as may be required by the Practitioner's Well Being Committee, may be required to appear before the Medical Executive Committee to discuss such medical staff member's ability to document his/her physical and mental health status, as required by the Medical Staff Bylaws.

B. Medical Staff Responsibility. Where a medical staff member returns to work following a medical absence, the Practitioner's Well Being Committee shall:

1. Review the requested clinical privileges and the physician's list of any health-related issues that could affect his/her performance of clinical privileges; and review the physician's medical clearance. The Practitioner's Well Being Committee may obtain input from the Chief of the physician's clinical department when appropriate.
2. Require the physician to undergo an independent medical assessment if the Practitioner's Well-being Committee determines that the information provided in the medical clearance is not sufficient to document the medical staff member's physical and mental health status.

**PROCEDURE**: CONTINUED

B. Medical Staff Responsibility. continued

3. Upon reviewing all information, make a recommendation to the Chief of Staff or the Medical Executive Committee as to whether the physician maintains the health and fitness to perform the requested clinical privileges. If the recommendation is to reduce the physician's current clinical privileges or deny the requested privileges, and if the Medical Executive Committee affirms that recommendation, the affected physician shall be provided with a notice of the adverse recommendation and of his/her right to a hearing under Article IX of the Medical Staff Bylaws.
4. All medical information obtained by the Practitioners' Well Being Committee concerning a physician's physical and mental health under this Policy shall be treated in a confidential matter and not disclosed to any third party except in accordance with committee and/or hospital policies and procedures.