

<u>MANUAL TITLE</u> ADMINISTRATIVE LEADERSHIP			<u>POLICY NAME:</u> Handling the Impaired Medical Staff Clinician Policy	
<u>MANUAL OWNER</u>	<u>DATE OF ISSUE</u>	<u>DATE OF LAST REVIEW</u>	<u>DATE OF REVISION</u>	<u>EFFECTIVE DATE</u>
<u>POLICY OWNER:</u> MEC	November 6, 2025	November 6, 2025		November 6, 2025
<u>REVIEW INTERVAL</u> 36 Months	<u>REVIEWED / APPROVED BY: (Committees)</u> Medical Executive Committees (MEC),			
<u>THIS POLICY IS APPLICABLE TO:</u> Virtua Mount Holly Hospital Virtua Voorhees Hospital Virtua Marlton Hospital Virtua Our Lady of Lourdes Hospital Virtua Willingboro Hospital				

POLICY

Together with Virtua, the Medical Staff strives to provide a safe work environment so that patient care, employee and Medical Staff Clinician safety will not be compromised. There is no intent on the part of the Medical Staff leadership to intrude upon the private lives of the clinical staff more than necessary to comply with the law, ensure the safety of patients and co-workers, and deliver quality medical care. Any impairment, whether acute or chronic in nature, as defined below, will be addressed by established Medical Staff policies and procedures and/or treatment efforts on behalf of the clinician.

In this policy, “Medical Staff Clinician” or “clinician” refers to all Medical Staff physicians/CNM, Advanced Practice Providers, Trainees, House Physicians, and students practicing at Virtua Health.

GENERAL GUIDELINES

Issues of employee conduct will be dealt with in accordance with Virtua’s Human Resources Policies and this Policy, as appropriate. Issues of conduct by non-employed members of the Medical Staff will be addressed in accordance with this Policy. If the matter involves an employed Medical Staff Clinician, hospital management in consultation with appropriate medical staff leaders and legal counsel will determine which of any applicable policies will be applied.

IDENTIFYING THE IMPAIRED MEDICAL STAFF CLINICIAN

1. Impairment shall be determined based on a Medical Staff Clinician’s ability to perform his or her job duties.
2. Impairment, and the effects of the impairment on job performance, can be acute or chronic.

- a. Acute impairment requires immediate attention to assure the real time safety of patients, employees, and Medical Staff Clinicians.
- b. Chronic impairment is generally demonstrated over time through behaviors such as: absenteeism, lateness, inappropriate attire, repeated mistakes or poor productivities etc. Concerns regarding chronic impairment should be forwarded to the Clinician Support Committee. See Medical Staff Clinician Support Policy.

REPORTING OF IMPAIRMENT

1. Concerns of acute impairment should be reported immediately to any hospital or physician leader.
2. Complaints or concerns regarding potential impairment by a Medical Staff Clinician received by a physician leader, any Virtua or Hospital personnel, the Board, Virtua Human Resources, or Virtua's Corporate Compliance office will be forwarded to the Vice President of Medical Affairs and at least one or more of the following: the President of the Medical Staff, the Department Chairperson, the System CMO, the Hospital CMO, or the Hospital President (or their designee) (the "Medical Administrative Contacts").
3. Medical Staff Clinicians who observe potential impairment by another Medical Staff Clinician and/or other Hospital personnel, shall notify their supervisor about the incident or, if their supervisor's behavior is at issue, shall notify any of the Medical Administrative Contacts. The supervisor will in turn forward the information to one of the Medical Administrative Contacts.
4. Impairment concerns may also be reported to the anonymous Corporate Compliance Hotline at (800) 268-0502.
5. When a concern of impairment is noted outside of business hours, it should be reported immediately to the Administrator On Call ("AOC") for the division. The AOC will notify the Vice President of Medical Affairs and one or more of the Medical Administrative Contacts, who will provide direction on following this policy.

MEDICAL ADMINISTRATIVE CONTACT RESPONSIBILITY IN HANDLING AN IMPAIRED CLINICIAN

1. If a Medical Staff Clinician is deemed to be unfit or unsafe to continue performing his/her job duties, the Medical Administrative Contact or designee will immediately relieve the Medical Staff Clinician from duty, and the clinician will be placed on precautionary suspension in accordance with the Medical Staff Credentials policy.
2. The Medical Administrative Contact or designee will follow the SOP for Handling the Impaired Clinician (see Attachment A to this policy).

3. In accordance with the SOP for Handling the Impaired Clinician, **two trained observers (generally, hospital supervisors/management who have been trained)** will observe the Medical Staff Clinician utilizing the Reasonable Suspicion Observation Report (*available on the Colleague Corner → Human Resources → Policies → Employee Health and Safety*)
4. If a combination of one or more observable signs and symptoms of drug or alcohol use is observed -- *based on specific, contemporaneous, articulable observations concerning the appearance, behavior, body odors or speech of the clinician* – then there is reasonable suspicion for drug and alcohol testing. The final decision on whether to test must be made with input from the VPMA and/or Medical Administrative Contact.
5. If testing is warranted, the Medical Administrative Contact or designee will follow the testing procedure outlined below.

TESTING PROCEDURE

1. When it has been determined that reasonable suspicion testing (for cause) is required, the Medical Administrative Contact or designee should contact Virtua's drug/alcohol testing vendor, Ship to Shore, at 800-560-8186, and press 1. See **Attachment B** for instructions and information that must be provided to Ship to Shore. Ship to Shore will dispatch a technician, who will arrive within 2 hours of contact.
2. With attention to privacy concerns, the Medical Administrative Contact or designee should state to the Medical Staff Clinician that, based on their appearance/behavior/odor/speech, it is Medical Staff policy that they be required to submit to a reasonable suspicion drug and alcohol test.
3. The Medical Staff Clinician should be given a copies of this Handling the Impaired Medical Staff Clinician Policy, as well as the Clinician Support Policy to review.
4. Consent Form. A Medical Staff Clinician who is required to submit to drug and alcohol testing shall sign a Consent Form which acknowledges consent to testing and the release of the rest results to the VPMA. The Consent Form is attached as **Attachment C** to this policy.
5. Refusal to Test. If a Medical Staff Clinician refuses to be tested, no attempt should be made to force the clinician. Instead, they should be reminded that refusal to test is grounds for termination from the Medical Staff. If the clinician continues to refuse they will remain precautionarily suspended until the matter can be reviewed by the Medical Executive Committee, which will begin an automatic formal investigation. The Medical Administrative Contact or designee should

- document the clinician's refusal to test. The clinician should sign the Refusal Form, attached as **Attachment C** to this policy. The clinician should not be permitted to leave the premises operating a vehicle (see section 12 below).
6. If the clinician becomes violent, the Security Department is to be called to provide assistance, as needed.
 7. The Medical Administrative Contact or designee will escort the Medical Staff Clinician to be tested in a private area away from other staff. This area should provide access to a restroom as well as privacy. Once this process starts, the clinician must not be left alone until the testing is completed and transportation home is arranged.
 8. The Ship to Shore technician will come to the appropriate facility with all the necessary equipment within 2 hours of the request to complete the breath alcohol and urine drug screening testing.
 9. For the urine drug screening, the technician will bring bluing agent for the toilet bowl and instruct clinician not to flush the toilet or run sink water. The technician will also stay stationed at the door.
 10. The technician will follow the necessary "chain of custody" process to assure appropriate handling of the specimen. The technician will take the specimen with them.
 11. Test Results. The Medical Administrative Contact or designee will instruct the Medical Staff Clinician that they will hear from their Department Chairperson, MEC leader, Hospital CMO or VPMA on the next business day. The clinician will remain precautionarily suspended pending the test results. The clinician may not return to active status until test results are received and reviewed by the Medical Review Officer (MRO), deemed to be negative, and communicated to the VPMA. If test results are positive, the matter will be referred to the Medical Executive Committee and the Clinician Support Committee.
 12. Once testing is complete, the Medical Staff Clinician must then be sent home and should not be permitted to leave the premises operating a vehicle. The Medical Administrative Contact or designee should first look to have the clinician identify someone to pick them up or, if that is not possible, the Medical Administrative Contact or designee should call a cab or driving service, with instructions to drive the clinician to a designated address only. Cab/driving service fees are the responsibility of the clinician. If the clinician insists on driving, advise them that the police will be notified (this is a public safety issue). At that point, if the individual still drives, notify the police. The Medical Administrative Contact or designee should document how the clinician left Virtua.

Attachment A

Standard Operating Procedure (SOP) Handling the Impaired Clinician

1. A concern of impairment is observed or reported.
2. Whoever observes or receives the report immediately notifies their direct supervisor or manager (leader), who will notify the Vice President of Medical Affairs and at least one or more of the following: the President of the Medical Staff, the Department Chairperson, the System CMO, the Hospital CMO, or the Hospital President (or their designee) (the “Medical Administrative Contacts”).
3. Outside of normal business hours, whoever receives the concern will notify the Administrator On Call (AOC), who will notify the VPMA and at least one of the Medical Administrative Contacts.
4. The Medical Administrative Contact or designee will remove the Medical Staff Clinician from duty and remain with the clinician in a private area and/or have security remain with the clinician. Security should be present and remain with the clinician if there is a safety concern of harm to the clinician or others.
5. The Medical Administrative Contact or designee and AOC, if applicable, will determine which hospital supervisors will act as the two observers. The observers can come from another facility, if needed, but should be able to report in-person for observation within approximately 30 minutes.
 - a. If a second observer cannot be identified and deployed within approximately 30 minutes, the Medical Administrative Contact or designee or AOC should call the on-duty EMS manager (856-207-0698), who will deploy a trained observer to the location.
6. Both observers review the Reasonable Suspicion Observation Report (*available on the Colleague Corner → Human Resources → Policies → Employee Health and Safety*)
7. In the private location, with both observers present, the lead observer will begin conversation with Medical Staff Clinician to determine if impairment is noted. The second observer should take notes during the conversation. During the entire conversation and interaction, both observers should pay close attention to the appearance, behavior, body odors or speech of the clinician.
 - a. Begin the conversation by stating that the concern being raised is about safety for others and the clinician.
 - b. State the concern (what was observed or what the report/complaint was) in an unbiased and factual manner. Do not make assumptions.
 - c. Express the concerns by using statements such as:
 - i. We would like to talk to you as we have noticed the following actions or behaviors. We are concerned for your safety and that you or someone else may get hurt.

- ii. It was reported that you were almost involved in an incident. Can we discuss what happened leading to this event?
 - iii. You don't seem yourself today and we are concerned. Can we talk?
 - iv. For your safety and the safety of others, we would like to discuss...
- d. Be clear that the intent is to maintain a safe working environment and that you are concerned for their well-being.
- 8. **Required**: Summarize what has been observed and ask the Medical Staff Clinician : **“Explain the behaviors we have observed”** (Note: the clinicians’ response to this question must be recorded on the Reasonable Suspicion Observation Report).
- 9. One observer should remain with the clinician while the other calls the VPMA and/or Medical Administrative Contact to review the Reasonable Suspicion Observation Report. The observers should then switch places so that both have the opportunity to speak with the VPMA and/or Medical Administrative Contact about their observations, and the clinician is not left alone. *(Note: If there is another supervisor or security officer who can remain with the clinician, both observers can call together).*
- 10. If a combination of one or more observable signs and symptoms of drug or alcohol use is observed -- *based on specific, contemporaneous, articulable observations concerning the appearance, behavior, body odors or speech of the clinician* – then there is reasonable suspicion for drug and alcohol testing.
- 11. After speaking with both observers, the VPMA and/or Medical Administrative Contact will make the final decision whether to initiate the testing process.
- 12. If testing is warranted, the leader will continue following the Testing Procedure outlined in this policy.
- 13. As soon as possible (but no more than 24 hours later) both observers must complete and sign the Reasonable Suspicion Observation Report and forward to the VPMA and/or Medical Administrative Contact.

Attachment B

MEDICAL STAFF DRUG AND ALCOHOL TESTING
PROCEDURE

Reasonable Suspicion Testing

**For Drug/Alcohol Testing please call
800-560-8186 and Press 1 - 'Ship to Shore' will arrange testing**

Please have the following information ready to provide to the customer service representative:

1. Company's name (Virtua Health)
2. Company contact name and phone number for this incident (The VPMA or Medical Administrative Contact or designee)
3. Medical Staff Clinician to be tested name (must have a picture ID – employee badge is sufficient)
4. Please state the specific type of testing needed:
 - Request both breath alcohol and Urine Drug Screening (specify **Non DOT**)
5. Reason for testing: Reasonable Suspicion
6. Location of preferred testing site – company address, specific ER, etc.

If emergency medical treatment is required, testing will be performed after medical care. Emergency/Critical care may prevent specimens from being provided. If this occurs, the VPMA or Medical Administrative Contact will be notified.

The Ship to Shore Technician will arrive within 2 hours of contact. The technician will allow for 1 hour wait time for clinician needing testing to arrive. If the clinician does not present within this time period a No Show fee will be charged.

Attachment C

Drug and Alcohol Testing Consent/Refusal Form

CONSENT TO TESTING

I, _____, understand, authorize, and consent to drug and/or alcohol testing consistent with the Handling the Impaired Medical Staff Clinician policy. My signature below indicates that I have read and understand the Handling the Impaired Medical Staff Clinician policy. I further acknowledge that I am voluntarily participating in the testing process, understand the reason for this test and that the test results will be forwarded to the Vice President of Medical Affairs and may be shared on a need-to-know basis with Medical Staff leadership, the Clinician Support Committee and/or the Medical Executive Committee.

I understand that if this test is positive, that I will be given the opportunity to explain the results of this test.

Medical Staff Clinician Signature

Date

Supervisor/Witness Signature

Date

REFUSAL TO TEST

I, _____, refuse to consent to drug and/or alcohol testing under the Handling the Impaired Medical Staff Clinician policy and acknowledge that such refusal may lead to disciplinary action up to and including termination from the Medical Staff. I acknowledge that I have been given time to review the following policies: Handling the Impaired Medical Staff Clinician policy and Clinician Support Policy and still wish to refuse to participate.

Medical Staff Clinician Signature

Date

Supervisor/Witness Signature Date

Sign here if Medical Staff Clinician refuses to sign _____

Supervisor Signature/ Date

cc:

Vice President Medical Affairs

Medical Staff Clinician