

## MAIN LINE HOSPITALS

### PHYSICIANS' HEALTH COMMITTEE

**Statement of Intent:** In order to establish procedures that will identify and manage matters of physician health-related performance in confidence, and in a spirit of responsible collegial advocacy, the Physicians' Health Committee (PHC) of the Main Line Health (MLH) Medical Staff (MS) has been created as a non-disciplinary body advisory to members of the MS, the leadership of the MS and/or its Executive Committee (the MEC), and MLH Administration.

**Composition:** The PHC consists of two members selected from the MS practicing at each of the MLH acute care hospitals, the Bryn Mawr Hospital, Lankenau Hospital, and Paoli Memorial Hospital. The PHC Chairperson is appointed by the Chairman of the MEC.

PHC members are selected for their specific expertise, experience and willingness to serve. Insofar as possible, the composition of the PHC will strike a reasonable balance in terms of gender and specialty orientation.

**Mission of the PHC:** The PHC functions as an identified point to which information or concerns about a physician's health can be directed. It is a "Review Organization" in accordance with the Pennsylvania Peer Review Protection Act, 63 P.S.425.1. *et seq*, and the Health Care Quality Improvement Act of 1986. It receives peer review information in confidence, seeking corroboration and/or additional information where required.

It offers its expertise and resources to all members of the MS (self-referral is welcomed) and to MLH Administration, including but not limited to the Senior Vice President of Medical Affairs (Sr. VPMA), to Chiefs of Service (Chief) and/or Directors of Departments (Director) when there is a good-faith concern about the actual or potential health-related problems of an individual MS member. It further seeks to educate its members and the MS about physician health, well-being and impairment through brief presentations at system staff meetings and annual reminders to Departmental Chiefs and Directors at the time of their reappointment as MS leaders.

**Meetings:** The PHC meets as needed to establish or revise policy and/or to make recommendations regarding specific cases when requested by the MEC, MLH Administration, a Chief or Director, the Sr. VPMA, or required by the Bylaws of the MS.

**Procedure:** Whenever a concern about an individual physician is referred to the PHC, the PHC shall satisfy itself, through reasonable means, that the concern is based on information that the referring party reasonably believes is credible.

All documents, discussion, activities and deliberations of the PHC shall be 'peer review information' and maintained in confidence and shall include without limitation, inquiries, referrals, reevaluation, and treatment and rehabilitation program plans. Whenever the PHC determines a MS member is unable to perform safely the privileges he or she has been granted, the PHC will immediately inform the Sr. VPMA, in writing, so that he/she may take whatever

actions are necessary and appropriate to preserve patient safety or the efficient operation of MLH, in accordance with the MS Bylaws, and state or federal law.

In cases in which any member of the MS or of the MLH Administration, which may include the Sr. VPMA, has requested advice or guidance from the PHC Chairperson for a matter not yet referred to the MEC, the PHC Chairperson may recommend an appropriate referral for voluntary evaluation without involvement of the PHC membership. If such referral and subsequent evaluation meets the needs of the referring party, no report is required to be submitted to the MEC but such actions must be documented in the confidential files of the PHC. All files of the PHC shall be the property of MLH and shall be maintained and secured by the MLH MS Office as confidential, peer review, records.

**Evaluation and Follow-up:** Evaluation of and follow-up regarding an individual physician who has been referred to the PHC shall be in accordance with the agreement between the PHC, the individual physician and the referring party.

Where warranted, the PHC may operate in cooperation with the Physicians' Health Program (PHP) of the Foundation of the Pennsylvania Medical Society. For alcohol or substance abuse problems, even in cases determined by the PHC to be manageable within the MS structure, the resources of the PHP should be employed to ensure careful monitoring through the early years of rehabilitation from problems of alcohol/substance abuse.