

APPENDIX E
**MONITORING AGREEMENT FOR SUBSTANCE USE, MEDICAL OR MENTAL
HEALTH CONCERNS**

The Professional Staff Health Committee (PSHC) has developed a monitoring program for the Professional Staff of Resnick Neuropsychiatric Hospital at UCLA. The Program is supportive and designed to protect the safety and welfare of our patients while aiding members with medical (including chronic pain), psychiatric, behavioral, and/or substance-use related problems that impair their ability to work and function at their best. The success of the Program is dependent upon a commitment by the member to participate in all aspects of the Program, as well as the ability of PSHC to monitor the member's progress. This agreement will be adapted depending on whether it is a substance use, medical or mental health concern.

These are the terms and conditions of the monitoring agreement between _____, M.D. ("Member") and The Regents of the University of California, on behalf of UCLA Health.

Evaluation

If the PSHC cannot determine that treatment is warranted, or that no additional action is warranted, or if there is a need to assess for other etiology; further evaluation will be conducted as follows:

1. If the Committee cannot determine if no additional action is warranted or if treatment is indicated; then further evaluation will be recommended.
2. The Professional Staff Health Committee will provide the Member with a list of several approved evaluators or evaluation programs.
3. The Member will inform the Professional Staff Health Committee of the evaluator that will be used, and will sign a release of information for the Professional Staff Health Committee to speak with the evaluator.
4. Refusal to sign the release of information may mean the Professional Staff Health Committee will be unable to form a recommendation and will report this to the Member's Service Chief.
5. If the Member is sent for an evaluation, and the evaluator determines that additional information is needed from third parties, such as the Member's Service Chief, treatment providers, family members or significant others, in order to make a recommendation, written permission shall first be obtained from the Member to speak with such third parties regarding the Member's condition. If a Member refuses to provide written permission, the Member will be asked to acknowledge that this refusal might hinder the evaluator and the Professional Staff Health Committee's ability to obtain a thorough evaluation and make a recommendation.

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6. For an evaluation to be considered complete, the Member must agree to the evaluator carrying out all elements of an approved evaluation, including but not limited to, psychological testing, cognitive testing, drug/alcohol testing, collection of collateral information and medical, neuropsychiatric and psychiatric examination, and.
7. The evaluator will send the Professional Staff Health Committee a report following the evaluation.
8. If the Member decides that he/she does not want the evaluation sent to the Professional Staff Health Committee, this will be the same as choosing to not have an evaluation. The Member may not request to do a second evaluation to supplant the original. The Member may have a second evaluation done by a different vetted program, which the Professional Staff Health Committee will consider in conjunction with the original evaluation.
9. The Professional Staff Health Committee will use the evaluation report to form a recommendation regarding the Member's need for treatment, and recommendations regarding return to patient care.

Treating Provider

The Member is required to have a healthcare provider with demonstrated relevant expertise in the treatment of healthcare professionals suffering from substance use related problems, mental health, cognitive or behavioral problems or chronic pain (the "Treating Provider"). The Treating Provider should have the ability to suitably treat the Member on an outpatient basis, but should also have the ability to provide or refer the Member to a suitable inpatient facility as needed. The PSHC needs to approve the selected Treating Provider. Monthly or more frequent visits with the treatment provider are required. In the event Member fails to select a Treating Provider, or when the PSHC does not approve the selected provider, the PSHC may select the Treating Provider for Member. In the event Member changes Treating Provider, the PSHC needs to approve the selected Treating Provider in advance. As recommended by the Treating Provider or requested by the PSHC, the Treating Provider shall be responsible for the following types of activities:

1. Obtaining appropriate laboratory tests, which may include periodic alcohol and toxicology screens;
2. Monitoring attendance at counseling sessions or support group such as a 12-step program, a healthcare professional support group, and/or licensed counseling sessions, as indicated;
3. Providing regular written progress reports to the PSHC; and
4. Notifying the PSHC if he/she believes patient safety may be adversely affected by the Member's continuing active practice or if the Member poses a physical threat to him/herself or others.

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Authorization to Release Medical Information

The Member shall complete the “Authorization to Release Medical Information” form authorizing the Treating Provider, the licensed counselor, and any drug testing service/agency to communicate regularly with the PSHC and share information relating to the Member’s participation and progress in treatment. This information shall include, but is not limited to, the Member’s personal health information (“PHI”) and the treating physician’s impressions about the Member and the Member’s progress. The Member will also complete an “Authorization to Release Medical Information” form authorizing the Committee to communicate with his/her Service Chief. This information shall relate to the Member’s compliance and progress in treatment.

Toxicology Testing [Delete if not applicable]

The Member shall enroll in a professional, vetted toxicology-testing program that will provide random testing of breath or biological specimens results of which will be sent to the Treating Provider and the Member. The selected toxicology-testing program shall use an approved laboratory with an established chain of custody for samples. Screening will be for appropriate substance of abuse or narcotic antagonist. If necessary, duplicate samples and witnessed sample screening will also occur. If the Member has a positive test, it is the Member’s responsibility to notify the PSHC immediately. In addition, the Member shall refrain from energy drinks, herbal supplements, mouthwash, or any other type of substance that may inadvertently cause false positives on drug screens.

Workplace Assignment

If at any time the Member’s Treating Provider and/or the PSHC determine that the Member is unable to safely practice, some or all of the Member’s responsibilities shall be immediately reassigned until the Treating Provider and the PSHC feel that patient safety is no longer at risk. The Member shall agree to perform whatever work assignments are determined by his/her Service Chief to be appropriate.

Workplace Monitor

A Workplace Monitor shall be appointed by the Service Chief and/or the PSHC to observe the Member on a regular basis to assess whether the Member may be impaired or unable to work safely. The Member will meet regularly with the Workplace Monitor in order to assess any ongoing or developing problems that might increase the likelihood for relapse, or might be a sign of continued substance abuse or impairment due to a mental, behavioral, or physical health condition(s). The Workplace Monitor shall immediately inform the PSHC if he/she observes any unusual or concerning behavior. The Member may propose the name of an appropriate Workplace Monitor, subject to the approval of the PSHC. In the event the Member fails to identify an approved workplace monitor, the PSHC shall make the selection.

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Professional Staff Health Committee Coordinator

The Professional Staff Health Committee coordinator will act as a case manager. The Member is required to check-in with the Coordinator at regular intervals, as determined by the Committee. The Coordinator will speak regularly with the Member's treatment provider(s) and worksite monitor. If the Member was referred to the Committee by his/her Service Chief, the Coordinator will provide broad feedback to the Referrer. In the event that the Member cannot be contacted when there is a concern about the Member's safety and wellbeing, the Coordinator, or designee, will notify the emergency contact.

Licensed Counseling or Certified Coach

The Member shall regularly attend sessions with a licensed counselor or certified coach at a frequency identified by the PSHC who has relevant experience in working with physicians who have addiction, dependence, or significant mental, behavioral health, or pain issues. Changes in the frequency of sessions, or termination of the sessions, are subject to the approval of the PSHC. If the Treating Provider is a licensed counselor, he/she may conduct the sessions. If the licensed counselor is not the Treating Provider, he/she shall inform the Treating Provider and the PSHC if an issue arises that may affect patient safety.

Self-prescribing

The Member shall have a personal primary care provider. The Member shall not self-prescribe any medications. The Member shall continue care and receive any prescriptions for medications only from the doctors involved in his/her direct care. The Treating Provider will obtain the necessary release of information to contact the Member's primary care provider periodically to monitor the Member's well-being.

External Work in Medical Capacity

The Member shall not engage employment in a medical/psychological capacity of any kind while on leave for evaluation or treatment. Once the Member has returned to the workplace, the Member will not engage employment in a medical/psychological capacity outside of his/her primary UCLA position, without prior approval of the PSHC.

Travel

The Member will not travel out of the city of Los Angeles without informing the PSHC. The PSHC may recommend that travel is restricted to insure proper monitoring.

Relapse Management

The response to a relapse may vary depending upon the Member's condition, history and the circumstances surrounding the relapse. The policy towards relapse may vary by department. For

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example, Anesthesiology has a zero tolerance policy, and in the event of substance use relapse, reporting and termination actions will be determined by the department.

If the Member's problems concern substance use disorder, the following information applies. The levels of relapse behavior include:

Level 1: Behavior that might indicate a relapse without substance use

Level 2: Relapse with substance use that is not in the context of patient care

Level 3: Relapse with substance use in the context of active practice

In the event of a relapse, the Member shall immediately stop active patient contact and immediately notify the PSHC or the Chief of Staff. The relapse shall be reviewed by the PSHC to determine what action should be taken, including referral to the appropriate administrative bodies within UCLA Health. The Chief of Staff, or designee, shall determine the appropriate notification to the Medical Board of California/Psychology Board of California.

Effect of Non-Compliance

In the event the Member fails to comply with any requirement of this Agreement, or terminates his/her participation in the Program against medical advice or refuses recommended treatment, the Treating Provider shall inform the PSHC who will report it to the Chief of Staff and Member's Service Chief. The Chief of Staff and the Medical Director shall determine whether the Member shall be subject to disciplinary action and what notification, if any, will be made to the Medical Board of California/Psychology Board of California.

Duration of Monitoring Agreement

Member's participation in the Program begins ____/____/____ and shall end ____/____/____, assuming satisfactory progress and absence of relapse. The PSHC shall review this Monitoring Agreement every six (6) months. The PSHC also has the right to make modifications as needed.

Cost of Monitoring

All costs of the Member's participation in the Program, including, but not limited to, costs for the Treating Provider, toxicology screens, and licensed counselor shall be the responsibility of the Member.

Confidentiality

The confidentiality of the Member's Personal Health Information (PHI) and his/her participation in the Program shall be protected unless prohibited by law. PSHC records shall be maintained separately from the Member's credentials file. The PSHC shall inform the Chief of Staff and the Member's Service Chief of general information about the Member's condition as necessary,

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including his/her status related to participation in the Program as well as ability to work safely, but will not otherwise share the Member's PHI.

PSHC Chair Rights

At all times, the Chair of the PSHC or Professional Staff designee, shall have the right to act on behalf of the PSHC on any matter until a time in which the PSHC has had an opportunity to vote on that matter.

By signing below, you have read and understand the above information and agree to comply with its terms.

MEMBER:

Signature: _____ Date: _____

Print Name: _____

TREATING PROVIDER:

Print Name: _____

WORKPLACE MONITOR:

Print Name: _____

COMMITTEE CHAIR:

Signature: _____ Date: _____

Print Name: _____

CHIEF OF THE PROFESSIONAL STAFF or designee:

Signature: _____ Date: _____

Print Name: _____