



TAHOE
FOREST
HEALTH
SYSTEM

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Department:	Credentialing and Privileging - MSCP
Applies To:	

Late Career Provider Policy

PURPOSE:

Clinical excellence is a complex composite of performance in many domains, including, among others, cognitive ability, technical proficiency, communication skills, professional judgment, productivity, and stamina. As individuals age, the natural aging process may have the potential to adversely affect the capacity of practitioners to carry out their clinical responsibilities. Given this reality, it is imperative from the point of view of patient safety as well as physician well-being, to establish a process by which late career clinicians' performance and capacities can be fairly and accurately evaluated. The purpose of this policy is to establish this evaluation process.

Key elements of this policy are to assure high quality care for patients, to be supportive of the practitioner and to address issues that the individual may not recognize.

The Medical Staff of Tahoe Forest Hospital System and its clinics adopts this policy in order to:

- Provide patients with medical care of high quality and safety and protect them from harm
- Identify issues that may be pertinent to the health and clinical practice of medical staff members
- Support members of the medical staff
- Apply evaluation criteria objectively, respectfully, and confidentially

POLICY:

Any practitioner aged 70 or older who applies for initial appointment to the Medical Staff will complete, as part of the application process, a physical and mental health evaluation to screen for possible issues that may affect his/her capacity to competently perform the clinical privileges requested. Physicians who are currently on the medical staff who are 70 or older will be required to complete these assessments every 2 years, starting from the member's next scheduled reappointment.

PROCEDURE:

A. Components of the assessment: Any practitioner who wishes to apply for initial appointment and is age 70 or will reach the age of 70 within the next six (6) months, must complete this process. For any practitioner who has reached the age of 70 or will reach the age of 70 before his or her next scheduled reappointment to the Medical Staff, the Medical Staff Services Department will notify the practitioner of the assessment and screenings required by this policy. These are as follows:

1. The physician will be required to undergo a screening evaluation at U.C. San Diego PACE Aging Physician

Assessment (PAPA). PAPA is a physical and mental health screening intended for late career physicians who have reached a certain age, but otherwise have no known impairment or competency problems. PAPA is designed to detect the presence of physical or mental health problems affecting a physician's ability to practice. Components of PAPA include:

- Review of self-reported health questionnaire
- A comprehensive physical examination
- MicroCog™ Cognitive screening examination
- Psychological screening
- Dexterity test (for proceduralists only)

2. The cost of the initial examination for current Medical Staff members will be paid by Tahoe Forest Hospital District (TFHD). Travel expenses will be paid as per the TFHD Travel Policy. For initial applicants, the costs will be borne by the applicant.

3. For initial applicants, obtaining an evaluation and submitting documentation of the results shall be a prerequisite to deeming an initial application for appointment to the Medical Staff complete for processing. Failure to render the application complete within a reasonable period of time, or by such deadline as may be specified, shall be grounds for determining the application incomplete with no action being taken on the application, as provided in the Medical Staff Bylaws.

A current member of the Medical Staff who has reached the age of 70 or will reach the age of 70 before his/her next scheduled reappointment shall obtain the required evaluation at least four (4) months prior to the expiration of his/her reappointment. Failure to comply within this time frame will be considered a withdrawal of his/her application with no action being taken on the reappointment application.

B. Notification to the practitioner will include:

For physicians currently holding medical staff membership and privileges, the practitioner who has reached the age of 70 or will reach the age of 70 before his/her next scheduled reappointment, will be notified six months prior to the expiration of their next reappointment of the date on which the results of the health screening are due to the Medical Staff Services Department.

1. A Letter of Intent for Assessment of Practitioner Health.
2. The PACE Aging Physician Assessment (PAPA) Enrollment Form.
3. A copy of this policy.
4. A copy of the current clinical privileges held (or privileges requested) by the practitioner.
5. An Authorization Form, to be signed and returned by the practitioner, allowing the results of the evaluation to be disclosed to appropriate representatives of the Medical Staff for purposes consistent with this Policy.

C. Review of assessments

1. The completed PAPA report will be submitted to the Medical Staff Services Department.
2. This information, which will be treated as highly confidential, will be reviewed by the Chief of Staff and the Chief Medical Officer and the Chief of the Department as deemed appropriate. If further evaluation is recommended, and assistance is needed in obtaining an appropriate referral, the Well-Being Committee may be consulted. Additional evaluation and consultations may be sought regarding the interpretation of the results as needed. Costs of any additional evaluations will be borne by the practitioner. However, TFHD and the Medical Staff may reimburse you for some of your out-of-pocket expenses.

D. Outcomes of review

1. If the PAPA report does not identify potential patient care concerns in relation to the expected level of performance in exercising the clinical privileges at issue, the report will be filed in a confidential envelope maintained by the Medical Staff Services Department as part of the Credentials File, and the remainder of the Credentials File that is accessible for routine reappointment credentialing and peer review purposes will only reflect that the assessment and screening process has been completed with no significant concerns identified. The initial appointment process will then proceed as specified in the Medical Staff Bylaws. Current members of the Medical Staff will be notified that their screening obligation has been discharged.

2. If the PAPA report identifies the need for further evaluation, the Chief of Staff and the Chief Medical Officer, and the Chief of the Department, as deemed appropriate, will decide how to proceed. The options shall include:

a) Consulting with the relevant department chair and/or the Medical Executive Committee. If it appears that an accommodation will be necessary, the practitioner may choose to voluntarily adjust their practice; otherwise, the Corrective Action provisions of the Medical Staff Bylaws may be invoked.

b) If the evaluation was obtained in connection with an initial application for appointment, the review process shall include the Medical Staff officials and committees that have credentialing responsibilities under the Medical Staff Bylaws.

c) The Well Being Committee may be consulted if assistance is needed in obtaining an appropriate referral or other resources.

All of these functions will be performed in a way that is respectful and supportive of the practitioner, while being consistent with the Medical Staff's overarching responsibility for maintaining the Medical Staff's professional standards and protecting the interests of patients. If the practitioner is determined to have a condition for which reasonable accommodations might be made in order to protect the interests of patients while allowing the practitioner to hold some or all of the clinical privileges requested or in effect, this issue will be explored at the practitioner's request.

Throughout this process the intent of each step is to protect patient safety, provide support to the practitioner and assist in any resulting changes in practice patterns or transitions. This process is also available to individual practitioners, who, on their own, express concerns. Inquiries by such practitioners should be directed to the Chief of Staff or designee.

Special Instructions / Definitions:

Related Policies/Forms:

References:

- A. Stanford University Medical Center Late Career Practitioner Policy
- B. UC San Diego Physician Assessment and Clinical Education (PACE) Program
- C. CME Report 5-A-15, Assuring Safe and Effective Care for Patients by Senior/Late Career Physicians, Council on Medical Education. American Medical Association
- D. Smart DR. Physician Characteristics and Distribution in the US. American Medical Association. 2015 Ed.
- E. Burroughs MD, MBA, FACHE, FACPE, Jonathan H., Hogan, Esq., James B., and Richter, Esq., Jennifer

H., "The Aging Physician: Balancing Safety, Respect, and Compliance," Med Staff New, March 2013. (citing Powell, Douglas H., Profiles in Cognitive Aging, *Harvard University Press* , December 1994)

F. Norcross, MD, Ching, MFT, Sieber, PhD. Toward a More Accountable Profession: The Case of the Aging Physician. Medical Board of California Action Report, Jan 2006

G. Pitkanen. "Doctor's Health and Fitness to Practice: Performance Problems in Doctors and Cognitive Impairments." *Occup Med*, 2008

H. Waljee, MD, MPH, Greenfield, MD, Dimick MD, MPH, Birkmeyer, MD, "Surgeon Age and Operative Mortality in the United States," *Annals of Surgery*, Vol 244, No. 3, September 2006

I. Choudhry NK, Fletcher RH, Soumerai SB. Systematic review: the relationship between clinical experience and quality of health care. *Ann Intern Med*. 2005; 142:260-273

J. AMA Code of Medical Ethics Opinion 9.0305- Physician Health and Wellness. <http://www.ama-assn.org/ama/pib/physician/resources/medical-ethics/code-medical-ethics/opinion90305.page#>

K. Assessing Late Career Practitioners: Policies and Procedures for Age Based Screening. A Guideline for California Public Protection & Physician Health/ 2015. <http://www.cppph.org/cppph/wp-content/uploads/2015/07/assessing-late-career-practitioners-adopted-by-cppph-changes-6-10-151.pdf>

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Attachments:

No Attachments

Approval Signatures

Step Description	Approver	Date
	Harry Weis: CEO	07/2017
	Jean Steinberg: Director, Medical Staff Svs.	07/2017