



# TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER™

School of Medicine

Operating Policy and Procedure

**SOM OP:** 40.07, **Impaired Students**

**PURPOSE:** The purpose of this School of Medicine (SOM) Policy and Procedure is to identify and provide assistance, within ethical and legal parameters, for students who previously have been or are currently impaired.

**REVIEW:** This SOM Policy and Procedure shall be reviewed within each even-numbered fiscal year by the Student Affairs Committee. Revisions will be forwarded to the Office of the Dean for approval and publication.

## **POLICY/PROCEDURE:**

**1. General.** This policy is intended to:

- a. Identify and adequately address the needs of medical students with ongoing impairment.
- b. Enhance awareness among faculty and students of the typical characteristics of the impaired medical student in an effort to identify students in need of help.
- c. Promote educational programs and other methods of primary prevention of impairment of all medical students.
- d. Provide treatment and monitoring of students identified as impaired.
- e. Take administrative actions as necessary.
- f. Preclude non-treatable or unresponsive individuals from achieving professional status necessary to practice medicine.

**2. Definitions.**

- a. Impaired student: A medical student who demonstrates behavior that interferes with normally expected performance as a medical student in the healthcare delivery system, whose actions endanger the public or himself/herself, and/or who violates the rules, regulations, traditions and ethics of the School of Medicine.
- b. Student Health and Rehabilitation Committee (SHRC):
  - 1) An SHRC shall consist of two medical students (appointed as set forth below), and three faculty members from the Physicians Health and Rehabilitation Committee (PHRC). The SHRC shall be responsible to carry out actions under this policy.
  - 2) Separate SHRCs will operate on the Amarillo, El Paso and Lubbock and Permian Basin campuses.

- c. Physician Health and Rehabilitation Committee (PHR Committee) of the School of Medicine:
  - 1) The PHR Committee is defined under [SOM OP 20.12, Evaluation and Treatment of Impaired Physicians or House Staff](#).
  - 2) There is a PHR Committee on each campus, and each is composed of five members, one of who will be a psychiatrist or a psychologist and one of who shall be house staff.
  - 3) PHR Committee members are appointed by each regional MPIP Regional Policy Committee pursuant to Article 3 of the MPIP Bylaws.

**3. Committee Structure and Operation.**

a. Appointments:

- 1) All appointments will be for the academic year and made in August each year.
- 2) *Students.* For the first year, the Dean and/or Regional Dean shall appoint a junior medical student to serve a two-year term and a senior medical student to serve a one-year term. In subsequent years, one medical student beginning the junior year on that campus will be appointed annually by the Regional Dean and will serve a two-year term.
- 3) *Faculty.* For the first year, the Regional PHR Committee shall appoint three faculty members from among its members to serve one-, two- and three-year terms on the SHRC. In subsequent years, one new member will be appointed each year. Faculty members may be reappointed to no more than two additional consecutive terms without rotating off the committee for one year.

- b. Officers: The SHRC shall elect its Chair and Chair-Elect from among the faculty members at its first meeting after appointments have been made. No member may be elected to serve in an office for a period starting after the expiration of his or her current appointment.

c. Meetings:

- 1) Committee meetings will be scheduled at regular quarterly intervals beginning in September.
- 2) Special meetings may be called at any time to address issues brought forward by Committee members.

- d. Presentations: To promote prevention of impairments, the SHRC Chair, or designee, shall make a presentation each year at Freshman Orientation to promote awareness of the this policy by:

- 1) Discussing this policy with the entering class.
- 2) Introducing the members of the SHRC.
- 3) Distributing other helpful, applicable educational literature, which will be developed by the SHRC and made available to all medical students.

**4. Reporting Possible Impairment.**

- a. Self-reporting: Any medical student who is concerned that he/she might be impaired or likely to become impaired should contact a member of the SHRC who will bring the matter to the SHRC to formulate a plan of action to provide appropriate assistance resources to the student.
- b. Report by others: Any person (i.e., student, faculty, staff, or administrator) who has reasonable cause to suspect that the ability of a medical student to perform may be impaired shall, in good faith, report the student to a member of the SHRC. If a report is determined to be made in bad faith or malicious, that person will be reported to the Dean and may be subject to action under applicable institutional policies and/or laws and regulations.

**5. Basis for Intervention.** Behavior that may be associated with, but not limited to, the following conditions:

- a. Demonstrated ineffectiveness in handling the stress of school and/or other outside personal problems.
- b. Psychoactive substance abuse or dependence.
- c. A psychiatric disorder.
- d. A physical illness with pathophysiological and/or psychological manifestations.
- e. Self-reporting by consulting with a member of the SHRC.
- f. Concern expressed to the SHRC by a faculty member, administrator or another student.

**6. Verification.**

- a. Reports of impairment will be reviewed by the SHRC, and the SHRC will decide whether to go forward under this policy based on the evidence presented, or document the file that no further action is warranted.
- b. The SHRC may consult with representatives of the Texas Medical Association Physician Health and Rehabilitation Committee at the local or state level.

**7. Early Intervention.**

- a. The SHRC will appoint an intervention team in appropriate cases. This team will generally consist of two faculty members, one of whom will be selected by the SHRC to receive information and to monitor outcomes as noted below, and one student member from the SHRC. Additionally, the Program Director of the Employee Assistance Program and/or Medical Director of the Department of Neuropsychiatry Southwest Institute of Addictive Diseases Program will be available to assist any campus SHRC intervention.
- b. The person reporting the student in question should be encouraged to attend the intervention. Other people beneficial or critical to the intervention, such as spouse, family members and close friends may also be asked to attend.

- c. If the intervention team is successful and encourages the individual to seek treatment, the appropriate treatment facility and modality will be recommended. Inpatient and outpatient facilities will be identified and recommended from a list approved by the Texas Medical Association Physician Health and Rehabilitation Committee.
- d. Costs of treatment will be the student's responsibility.

**8. Evaluation and Treatment.**

- a. If a student agrees to the recommended treatment, he or she may then be evaluated by the Medical Director or Staff Physician of the selected facility.
- b. The student must sign a release form agreeing to the release of all treatment information to the designated faculty member of the intervention team who will report in confidence to the other SHRC intervention team members.
- c. If the facility evaluator recommends therapy, the student must, within a reasonable time, and in no event later than two weeks, begin the therapy.
- d. The therapist will meet with the designated faculty member prior to onset of treatment to advise them of the treatment plan and the approximate amount of time required. The therapist will make periodic progress reports to the designated member. At the end of the projected treatment period, the therapist will report to the designated member that 1) treatment has been completed successfully; 2) further treatment is required and likely to produce a favorable outcome; or 3) treatment was unsuccessful.

**9. Monitoring.**

- a. A student successfully completing the treatment obligation will be monitored by the designated faculty member of the intervention team. The faculty member will prepare a report of the anticipated scope and time frame of monitoring which the student will acknowledge by signature, and a copy will be given to the student.
- b. Monitoring may include, but is not limited to, random drug and alcohol testing, after-care therapy sessions and formal or informal meetings with the selected SHRC faculty member.
- c. If post-graduate monitoring is recommended, the appropriate Impaired Health Professions Committee (i.e., TMA) will be notified.

**10. Leave of Absence and Re-entry.**

- a. An impaired medical student will be allowed a leave-of-absence in accordance with the policy set forth in this TTUHSC SOM Student Handbook.
- b. If the student requests a medical leave-of-absence, the designated faculty member described above may provide the written statement from a physician as required in the TTUHSC SOM Student Handbook.

**11. Unresponsiveness to Intervention.** If the SHRC determines that evaluation, treatment and/or monitoring are warranted and the student does not responsibly cooperate or respond, the SHRC, by majority vote of the Committee, may refer the student to school

officials for administrative action, which may include, but is not limited to, administrative leave of absence, suspension, or dismissal.

**12. Student Participation.**

- a. The input of students is vital to the realization of the SHRC goals.
- b. Participation is not obligatory, but it will be encouraged and should be considered the responsibility of each student.

**13. Confidentiality.**

- a. All Committee activities shall remain confidential.
- b. Representatives of administration will not be notified of specific cases unless the impaired student refuses or is unresponsive to the appropriate treatment, the student's actions endanger the public or himself/herself, or a leave-of-absence is sought by the SHRC and/or student.
- c. Although specific cases will be presented to the SHRC, confidentiality will be maintained to the extent reasonably possible.

**14. File Maintenance and Disposition.**

- a. All files will be kept by the Chair of the SHRC and destroyed when the student graduates.
- b. For those who require post-graduate monitoring, the file will be transferred to the appropriate Impaired Health Professionals Committee in the state where the individual resides in accordance with laws and regulations governing such actions.