

MEDICAL STAFF

POLICY:

Torrance Memorial Medical Staff provides members of the Medical Staff and Allies Health Professionals (AHP's) with professional and confidential assistance through a Medical Staff Assistance Program (MSAP) at no cost to members for ten (ten) crisis and intervention visits per calendar year. This service provides a constructive way to deal with personal problems which may be affecting behavior and clinical performance. It is the belief that dealing with these problems preemptively may alleviate issues related to clinical performance, clinical privileges and/or membership. However, involvement in this or any other rehabilitation program does not excuse or limit the obligation of members to meet Torrance Memorial Medical Staff's Bylaws, Rules and Regulations and policies/procedures or standards of both the Medical Staff and the Medical Center. This program is funded by the Medical Staff Dues Fund.

PROCEDURES:

Eligibility:

All Medical Staff members of the Active, Associate, Courtesy and Provisional staffs and credentialed AHP's are eligible to receive assistance through this Program

Self-Referral:

Eligible Medical Staff members and AHP's may self-refer to the Program by calling the Morris (Moe) Gelbart at (310) 257-5751. Inquiries will be held in strictest confidence.

Self-referrals are limited to up to ten (10) visits to Program counselors. The Program counselor may immediately refer clients to a qualified professional in the community for continued care after an initial assessment, if the counselor determines that more than ten (10) visits are necessary.

Medical Staff Directed Interventions:

When members or AHP's are unable or unwilling to correct behavioral or clinical performance problems, a referral to the Program by any medical staff leader (department chief, committee chair, chief of staff, vice chief of staff or secretary/ treasurer) may be warranted. Such referrals can be based solely on the members' documented unsatisfactory performance or behavior. Members and AHP's must voluntarily agree to the referral. Members' or AHP's acceptance of the referral cannot be a requirement for continued membership and/or clinical privileges or the basis for disciplinary action.

Members' or AHP's Responsibilities for Medical Staff Referrals:

Members or AHP complying with a referral to the Program will be monitored by the Practitioner Well Being (PWB) Chair and will be expected to sign a "release of information form" so that the Practitioner Well Being Chair can receive the following information:

- Member's attendance at the Program session
- Date of the next session ٠
- Progress of the case

Follow-Up of Medical Staff Referrals:

The PWB Committee shall follow up on its referrals on a monthly basis either through the department chief or the member or AHP to monitor the status of the member's or AHP's performance. The Medical Staff shall track referrals for a minimum of two (2) months or until the performance problem has been at least somewhat resolved. Based on reports from the department chief or member, the PWB Committee shall determine what follow-up care should be considered.

Refusal of Referrals:

Members or AHP's have the option to refuse the Medical Staff's referral recommendation, and this refusal cannot be a cause for disciplinary action. Once a member or AHP has refused the referral, their performance or behavior problems will continue to be handled in accordance with the Medical Staff's Bylaws, Rules/Regulations, policies/procedures and protocols.

Cost:

There is no cost for the first ten (10) interventions and assessment visits to the counselor per calendar year. Self-referred members who seek assistance beyond theten (10) sessions covered by the Program, are responsible for paying all incurred costs of continued counseling. When members or AHP's are referred to a professional in the community, they will be told the cost of continued counseling and may use their private insurance coverage for services.

Confidentiality:

The Program counselors shall keep all records of those seeking assistance in strict confidence unless a particular member or AHP gives a signed release of information or unless the counselors are required by law to release information. These records are kept in secure, locked file cabinets for a minimum of two (2) years. No assessment or treatment information will be placed in credential files.

Member Access to Files:

Members are permitted to read information in their counselor's file during normal business hours in the counselor's presence.

Torrance Memorial Medical Staff's Evaluation of Program:

The Torrance Memorial Medical Staff Services Department shall receive monthly reports on how many members are using the Program. However, identifying information or names are not included in these reports.

Initial Approvals and Major Revisions:

Practitioner Well Being Committee: 05/17/2016 Bylaws Committee: 10/05/2016; 08/29/2019; 08/18/2023 Medical Executive Committee: 12/13/2016; 10/15/2019; 10/10/2023 Board of Trustees: 12/14/2016; 10/31/2019; 10/31/2023