



## **Impaired Professionals: Addictive and Psychiatric Disorders**

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Physicians, health professionals and society may have the mistaken belief that health providers are immune from developing behavioral problems, addictive or psychiatric disorders, or will seek treatment if they do. The opposite is true. They have the same risk as the general population, and usually don't seek help on their own. Colleagues often exacerbate this by enabling affected peers. They may wish to not get involved, fear consequences if they do, or simply don't know how to proceed or where to refer. Hospital culture may also promote "looking the other way." The results are physicians and other practitioners who become ill and practice in impaired states, risking patient harm, and creating havoc among colleagues, hospital personnel and patients and families. It is therefore imperative for all physicians and health professionals and those who work with them to be educated about the diagnoses that affect them, the signs and symptoms that occur, and the options for intervention and treatment. Addressing issues of resistance to helping themselves and their colleagues is also critical. These seminars address these topics in depth.

### **GOAL: AS A RESULT OF ATTENDING THESE SEMINARS, PARTICIPANTS WILL:**

- Have a heightened awareness of issues related to physician and health professional health and impairment due to addiction, and behavioral, psychiatric and cognitive disorders
- Develop a willingness to effectively address these issues when they arise
- Describe elements of a positive hospital culture that promote safety for all hospital personnel to intervene
- Be able to identify practitioners who may be affected
- Have resources for and knowledge about referring practitioners
- Have knowledge about OPMC reporting laws regarding impairment
- Have knowledge of The Joint Commission Standards and ACGME educational requirements for these topics

### **SEMINAR OBJECTIVES: AS A RESULT OF ATTENDING THIS SEMINAR, PARTICIPANTS WILL BE ABLE TO:**

- Explain the seriousness of impairment and disruptive behavior in practitioners
- Believe it is their responsibility to address these issues and see the importance of early intervention
- List reasons why practitioners don't seek help on their own
- List reasons it is difficult to intervene, and their positive counter-arguments
- List the risk factors for impairment and disruptive behavior in practitioners
- Describe prevalence of and risk factors for physician suicide
- List impairment diagnoses/problems, including alcoholism, substance use and other addictions, and other psychiatric and cognitive disorders
- Define addiction as per the DSM IV and define addiction as a progressive medical disease
- List/recognize signs/symptoms of addiction, psychiatric and cognitive disorders in self and colleagues
- List/recognize signs/symptoms of disruptive behaviors in self and colleagues
- Describe basic stress management strategies for physicians
- Describe several strategies for intervention with impaired/disruptive colleagues
- Describe elements of hospital culture that will promote a willingness for all personnel to intervene
- Describe the role and services provided by state physician health committees, i.e., the Committee for Physician Health in NY, for physicians, physician assistants, and medical and PA students
- Describe resources for other impaired practitioners including nurses, dentists, pharmacists, etc.
- Explain reporting laws to the Office of Professional Medical Conduct (OPMC) of impaired MD's/PA's
- Describe new OPMC laws as of 11/8/08 affecting reported physicians