

**DRUG AND ALCOHOL FREE WORKPLACE**

**Graduate Medical Education**

MISSION: MedStar Health is dedicated to delivering exceptional PATIENT FIRST health care. We provide the region with the highest quality and latest medical advances through excellence in patient care, education, and research.

I. Purpose

To establish a policy and procedures for substance abuse screening of residents and fellows (house staff).

II. Statement of Policy

MedStar Health maintains workplaces free from substance abuse. Residents and fellows who use possess, sell or transfer illicit drugs, or who offer to buy or sell such substances, are subject to disciplinary action up to and including dismissal. Likewise, residents and fellows who use alcohol during work hours or whose use of alcohol off duty affects their job performance are subject to discipline or dismissal. “Illicit drugs” includes street drugs, such as marijuana, cocaine or heroin, but also includes lawful medications used without a valid prescription from a treating provider or used for a non-therapeutic purpose.

III. Procedure

A. Pre-employment Testing

1. Pre-employment drug testing and confirmation of a satisfactory test result is a condition of employment, as stated in the *GME Selection Policy* and the *House Staff Agreement*.
2. Candidates for enrollment in GME programs will receive a copy of the Drug Free Workplace policy during the interview process, and again with their employment agreement. A consent form for drug testing during the pre-employment medical evaluation must be completed (alcohol testing will also be completed if the clinical assessment so indicates). Any refusal or failure to provide a specimen for testing, or the provision of an invalid sample (diluted, cold, etc.) will result in withdrawal of the conditional offer of employment.
3. The drug test must be completed and satisfactory results received prior to any house officer commencing their first day of the residency program, including orientation.
4. If the drug test is confirmed positive, the candidate will not be medically cleared to begin the GME program. The results of the positive test will be communicated to the hospital’s Vice President for Medical Affairs and the Corporate Vice President for Academic Affairs. The enrollment in the GME program, and the employment agreement, will be immediately withdrawn for failure to meet pre-employment requirements.
5. Reporting of the positive test will be communicated to others as appropriate, i.e., the State Board of Medicine or linked GME programs.
6. A candidate whose offer of employment is withdrawn due to confirmed positive drug test results will not be eligible for enrollment in any MedStar Health residency program, or any employment within MedStar Health, for at least one (1) year.
   1. If a resident/fellow wishes to be considered for future enrollment in a MedStar Health residency program, it is his/her responsibility to seek formal evaluation and, if recommended, treatment at the resident/fellow’s own expense. The hospital can refer the resident/fellow to reputable treatment facilities in the area.
   2. Residents/Fellows may reapply to a MedStar Health GME program, through the Match (or other approved application process) for the subsequent academic year.
   3. Any resident/fellow who is accepted for re-entry into any MedStar GME program will enter the program on a *Last Chance Agreement*.
7. Reasonable Suspicion Testing

Program directors and faculty are responsible for removing an enrolled resident/fellow from the worksite where there is reasonable suspicion that the resident/fellow may be under the influence of illicit drugs or alcohol at work.

Reasonable suspicion may be based on reports or direct observation of appearance, behavior, or conduct that includes, but is not limited to: slurred speech; glassy eyes; inability to perform tasks; sleeping or inability to stay awake; accident involving or on hospital property/premises; agitated or violent behavior; disorientation; loss of coordination; possession of alcohol or illegal drugs; unauthorized or inappropriate possession of controlled substances; discrepancies regarding narcotic counts or administration; or odor of alcohol/drugs on breath or clothing.

*Enrolled Residents/Fellow*

Program Directors (or designee) will accompany the resident/fellow to the Occupational Health department (or the Emergency Department (ED) during off shifts/weekends) for evaluation and completion of reasonable suspicion drug and alcohol testing. House officer will be relieved of all duties pending the results of drug and alcohol testing. House officers should not be sent home, unless a safe means of transport can be arranged. Program Directors should consult with the Director of GME regarding next steps. As with any other Fitness for Duty evaluation, the house officer must be cleared by the Occupational Health department prior to returning to work.

*Rotating Residents/Fellows/Students*

Rotating residents/fellow or studentsmay also be requested to be evaluated by Occupational Health department (or by the ED during off shift and weekend hours) based on a reasonable suspicion of illicit drug or alcohol use, following the same protocol outlined for enrolled residents/fellows, except as follows: Immediately contact the Director of GME regarding next steps and communication with the sponsoring institution and/or school of medicine.

1. Disciplinary Action and Rehabilitation
   * 1. Self-Identification  
        1. MedStar Health encourages house officers to self-identify substance abuse and dependency issues and voluntarily seek assistance for any perceived dependency. A “safe haven” will be provided to any house officer who willingly comes forward to admit a substance abuse problem and seek help prior to coming to the attention of his/her program for performance or other behavior/conduct issues.
        2. The hospital will assist the house officer in locating an appropriate treatment facility. House officer’s medical insurance should be utilized to cover the cost of treatment; but the hospital may elect to cover costs not covered by the resident’s insurance. In addition, eligible house officer’s will be offered a leave of absence under the Family Medical Leave Act, if needed to pursue treatment, and the house officer may be eligible to receive short term disability benefits during any period of approved medical leave.
        3. Reporting will be required to appropriate agencies, i.e., The Board of Medicine, other State/Local agencies, etc. Hospitals utilizing a Physician Health Committee will also refer to that committee.
        4. If a house officer successfully completes treatment, and if the house officer’s treating provider recommends the resumption of residency training, the house officer may be eligible to re-enroll in the GME program subject to a last chance agreement.
        5. A last chance agreement is one that provides for on-going monitoring of the house officer’s well-being, including, random drug and/or alcohol testing, as well as observing any and all treatment recommendations from the house officer’s treatment program, on the condition that any violation of the terms of the agreement will result in immediate dismissal, without the opportunity for any future enrollment.
     2. Events not Self-Identified  
        1. Working while impaired or under the influence is unacceptable. This includes rotations to all affiliate sites.
        2. In the event a house officer is determined to be in violation of this policy, the individual will be immediately suspended from all duties. The program director, Director of GME, and VPMA will confer to determine next steps, including adherence to the *GME Misconduct Policy*.
        3. Based on the situation, an inquiry may need to be conducted (i.e., diversion of medications, theft, or other related matters).
        4. The house officer’s status in the program will be determined based on the scope of the situation. Misconduct may lead to dismissal from the GME program or leave of absence from the program. In any event, a house officer will not be reinstated to the program, unless or until he or she can produce sufficient evidence of fitness for duty, which could include, without limitation, the recommendation of a qualified treating provider, after full evaluation, that the house officer is fit to resume training. The decision whether to permit reinstatement will be made by the Vice President for Medical Affairs, in consultation with the Program Director and Legal.
        5. Reporting will be required to appropriate agencies, i.e., The Board of Medicine, other State/Local agencies, etc., as well as future verification requests. Hospitals utilizing a Physician Health Committee will also refer the matter to that committee as appropriate.
        6. Reportable actions resulting from the misconduct are eligible for review per the *Misconduct Policy*.
2. Return to Work Testing and Evaluation

Following any suspension or leave of absence for violations of this policy, and prior to returning to duty, the house staff officer must report to the Occupational Health department for successful completion of a new fitness for duty evaluation, including a drug/alcohol screen. Only if medical cleared to return to work, after receipt of a negative drug/alcohol test, may the house officer resume training/work. Failure to appear or refusal to test may result further disciplinary action up to and including dismissal.

Policy approved by: VPMA Council, September 21, 2011

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Policy maintained by: Corporate Academic Affairs