

PROCEDURE GME 37

Subject:
FITNESS FOR DUTY EVALUATION

Effective Date:
DECEMBER 1, 2020

Applies to:
HOUSTON METHODIST HOSPITAL
GME PROGRAMS

Date Revised:
OCTOBER 2024

Originating Area:
GRADUATE MEDICAL EDUCATION COMMITTEE

Target Review Date:
OCTOBER 2027

I. GENERAL STATEMENT

Houston Methodist and its Programs of GME are committed to promoting a safe and healthy environment for its Residents. This objective is optimally achievable when Residents are able to perform their job duties in a safe and effective manner and remain able to do so throughout the duration of their appointment. Residents who are not fit for duty may present a safety risk to themselves and to others.

This policy outlines the responsible parties and necessary actions when a Resident's fitness for duty (FFD) is in question, the steps necessary to assess and address the Resident's physical or mental capacity, necessary follow-up, and return to work status. This procedure supplements Houston Methodist EH002 Fitness for Duty.

This procedure covers only those situations in which a Resident is (1) having observable difficulty performing his/her essential job functions, and/or training requirements or (2) posing a serious safety threat (i.e. threat of harm) to self or others.

The procedure prescribes the circumstances under which a Resident may be referred to a health care provider for a FFD evaluation should either of those situations be present. A Resident shall not be allowed to work unless he/she maintains a fitness for duty necessary for the safe performance of essential job functions, with or without reasonable accommodation. Residents are required to report to work in an emotional, mental, and physical condition necessary to perform their job in a safe and satisfactory manner, with or without reasonable accommodation.

II. DEFINITIONS

Fitness for duty: Mentally and physically able to effectively perform required duties and promote patient safety.

Resident: Intended to include all GME administered post-graduate medical trainee positions including Interns, Residents, and Fellows.

III. PROCEDURES – COORDINATING TEAMS

The Coordinating Team Includes: Program Leadership, Employee Health, Human Resources and Graduate Medical Education

- A. A request for an FFD may or may not be associated with an Adverse Academic Action taken by Program Leadership for deficiencies in a Resident's performance that have been previously observed and identified by the Program. Program Leadership may notice changes in performance, behavior, appearance, etc., that may prompt the request for the FFD. Before initiating an evaluation, Program leadership, along with the DIO and the Director of GME shall consult to gain a clear understanding of the objective behavior/circumstances that have raised questions about the Resident's FFD and make a reasonable determination based on the objective information available whether an FFD evaluation will be requested.
- B. In any situation when an FFD is being requested as a result of suspicion of alcohol or drugs/controlled substances, Policy HR88 will be followed.
- C. Program leadership in coordination with the DIO and GME Director shall notify the Resident of the need to undergo an FFD evaluation. The GME Office will contact Employee Health to conduct an intake interview with the Resident. Employee Health, in consultation with Program Leadership and the GME Office, will determine if the Resident should be referred for an FFD evaluation.
- D. Should it be determined that an FFD evaluation is necessary, the GME Office will contact an outside licensed provider.
- E. Program leadership shall complete all necessary FFD paperwork required by the licensed provider who will perform the FFD evaluation.
- F. Employee Health will request consent from the Resident and provide any relevant previous medical or psychological records, or portions thereof, to the licensed provider evaluating the Resident.
- G. Employee Health, in cooperation with program leadership, will provide the referring provider with a written request, outlining the issue and the need for clearly delineated work restrictions, if any.

IV. PROCEDURES - RESULTS OF THE EVALUATION

- A. The results of FFD evaluations performed by a qualified licensed health care provider shall be presumed to be valid.
- B. Results of the evaluation will be received by Houston Methodist Employee Health department and/or Human Resources.
- C. The Resident shall be notified of the results of the FFD by the Houston Methodist Employee Health department and/or the referring provider. Upon receipt of a consent or release form, Employee Health will provide the results to Program leadership and the GME Office.
- D. Program leadership and the GME Office will be informed regarding necessary restrictions on the work or duties of the Resident and necessary accommodations. In those cases where it is determined that the Program or GME Office needs additional information about the results of the medical exam or a specific medical condition in order to effectively implement an accommodation or plan of action, the Resident will be consulted in advance.
- E. First aid and safety personnel may be informed, when appropriate, if any medical condition suffered by a Resident might require emergency treatment.
- F. Relevant information obtained pursuant to a medical examination under this Procedure may be provided to government officials investigating compliance with the law and state workers' compensation offices or "second injury" funds, in accordance with state law.

- G. Human Resources will communicate to the Program leadership and the GME Office whether and when the Resident may return to work.
- H. After an evaluation, information given to the Resident's Program and Human Resources shall be limited to whether the Resident may:
 - Return to full duty;
 - Not return to full duty, in which case the Program leadership shall confer with Human Resources and the GME Office to discuss options; or
 - Return to full duty if reasonable accommodations are made. (See policy [HR36 ACCOMMODATIONS FOR DISABILITIES POLICY](#) and procedure [HR36 ACCOMMODATIONS FOR DISABILITIES - REQUEST PROCEDURE](#))
- I Throughout the FFD process, the Resident shall remain on paid leave.
- J. Upon return to work Program Leadership or the GME Office may pursue an Adverse Academic Action as set forth in GME Procedure 10.

V. PROCEDURES - CONFIDENTIALITY/PRIVACY OF FITNESS FOR DUTY EVALUATIONS

- A. Under the Health Insurance Portability and Accountability Act (HIPAA) and other applicable law, any document containing medical information about a Resident is considered a medical record and is regarded as confidential.
- B. Records of FFD evaluations shall be treated as confidential medical records and maintained solely by Houston Methodist Employee Health in a location that is accessible only to authorized personnel. This information will not be made part of a Resident's personnel file.
- C. Residents may obtain a copy of the medical report from Houston Methodist Employee Health upon request.

VI. RESIDENT RESPONSIBILITIES

- A. Performing his/her job responsibilities in a safe and effective manner, with or without reasonable accommodations during the entire time at work;
- B. Notifying the Program Director when the Resident believes he/she may not be fit for duty;
- C. Notifying the Program Director when a co-worker is observed acting in a manner that indicates the co-worker may not be fit for duty;
- D. Contacting Human Resources for further guidance, if the program leadership or faculty behavior is the focus of concern;
- E. Providing relevant medical and psychological information to Employee Health when requested or given the opportunity to do so;
- F. Signing any necessary consent and release forms that will allow the Program and the GME Office to obtain a copy of the results of the FFD evaluation; and
- G. Complying with this Procedure and any authorized request to submit to a FFD evaluation.

VII. PROGRAM RESPONSIBILITIES

- A. Observing the attendance, performance, and behavior of all Residents in the Program;
- B. Notifying Human Resources and the GME Office when a Resident is exhibiting behavior that suggests he/she may not be fit for duty;
- C. Completing the Request for Certification of Fitness for Duty form (Attachment 1) for documenting observations when presented with circumstances or knowledge that indicate that a Resident may not be fit for duty;
- D. Coordinating with Employee Health and the GME Office for referral and coordination of further evaluation;
- E. Removing and escorting a Resident deemed not fit for duty to the appropriate location (i.e.: Employee Health or the Emergency Department);
- F. Arranging transportation for the Resident from the work site if necessary;
- G. Maintaining the confidentiality of a Resident's medical information.

VIII. EMPLOYEE HEALTH RESPONSIBILITIES

- A. Soliciting relevant information from the Program regarding Resident behaviors or performance, and from the Resident regarding any (and only) relevant previous medical or psychological treatment information;
- B. Identifying who will conduct the FFD evaluation;
- C. Receiving the results of the fitness for duty evaluation;
- D. Communicating the results to the Resident, Program Leadership and the GME Office, if not done so by the Provider;
- E. Maintaining confidentiality.

IX. HUMAN RESOURCES RESPONSIBILITIES

- A. Communicating with the Resident as to their rights, responsibilities and employment status.
- B. Discussing recommendations and implementation of subsequent accommodations with the Resident and the department. (See policy [HR36 ACCOMMODATIONS FOR DISABILITIES POLICY](#) and procedure [HR36 ACCOMMODATIONS FOR DISABILITIES – REQUEST PROCEDURE](#))

COMMITTEE REVIEWING OR APPROVING PROCEDURE:

1. Graduate Medical Education Committee [12 November 2020] [09 October 2024]

AUTHORITATIVE REFERENCES:

1. System EH002 Fitness for Duty
2. System HR36 Accommodations for Disabilities
3. System HR88 Alcohol and Drugs in the Workplace
4. ACGME Institutional Requirements (2018) Section III.B.6 b), and Section III.B.7.
5. ACGME Common Program Requirements (2020) Section VI.B.1.

Attachment 1 - Request for Certification of Fitness for Duty