



**Complex cases shared
management from therapeutic
and regulatory perspective.**

20 years experience of shared
responsibility

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The PAIMM: Caring programme

- Created in 1998 by Barcelona Medical Council with Healthcare Administration support
- 2001 Galatea Foundation was created
- Aimed at Catalan doctors who suffer from mental disorders and/or addictive behaviours
- Assure adequate treatment so that they can work in the best health conditions

Assure the general population that our physicians are “fit to practice”

PAIMMs' conceptual basis

- Responds to deontological rules
- Non persecutory
- Non punitive if not absolutely necessary
- Voluntary access
- Promote rehabilitation of professionals
- Confidential and Anonymous

“Rehabilitation of our professionals”

The PAIMM activity

- 40,408 doctors (134,154 health professionals in Catalonia)
- 36,274 doctors working
- Doctors: >600 active medical records. 160 cases/y
- Other healthcare professionals: 400 a.m.r. / 75-80 cases/y
- 1998-2018: 4,000 HP / 2,500 doctors attended

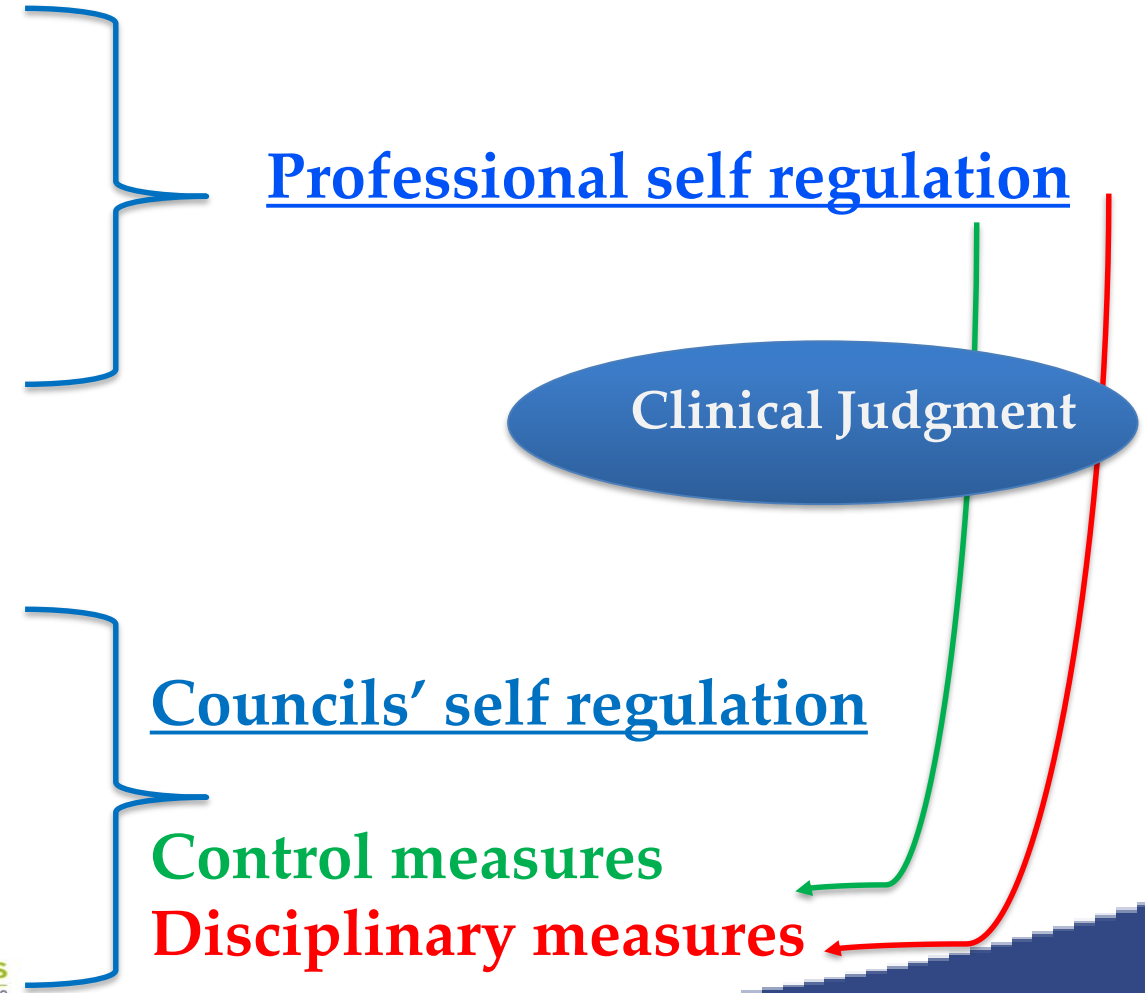
Access to the programme

Voluntary path:

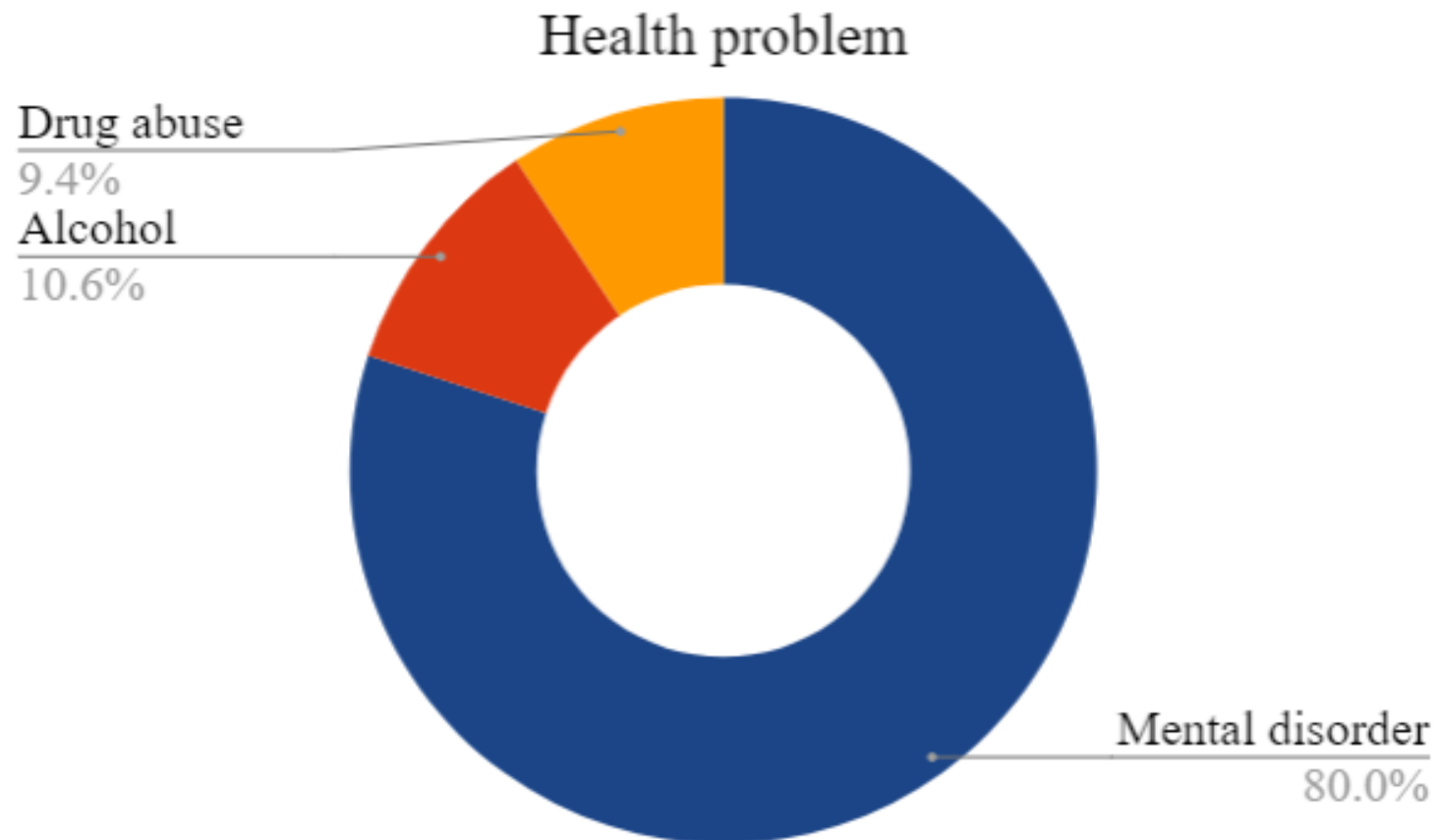
- Confidential
- Anonymous
- Therapeutic-rehabilitating

Regulatory path:

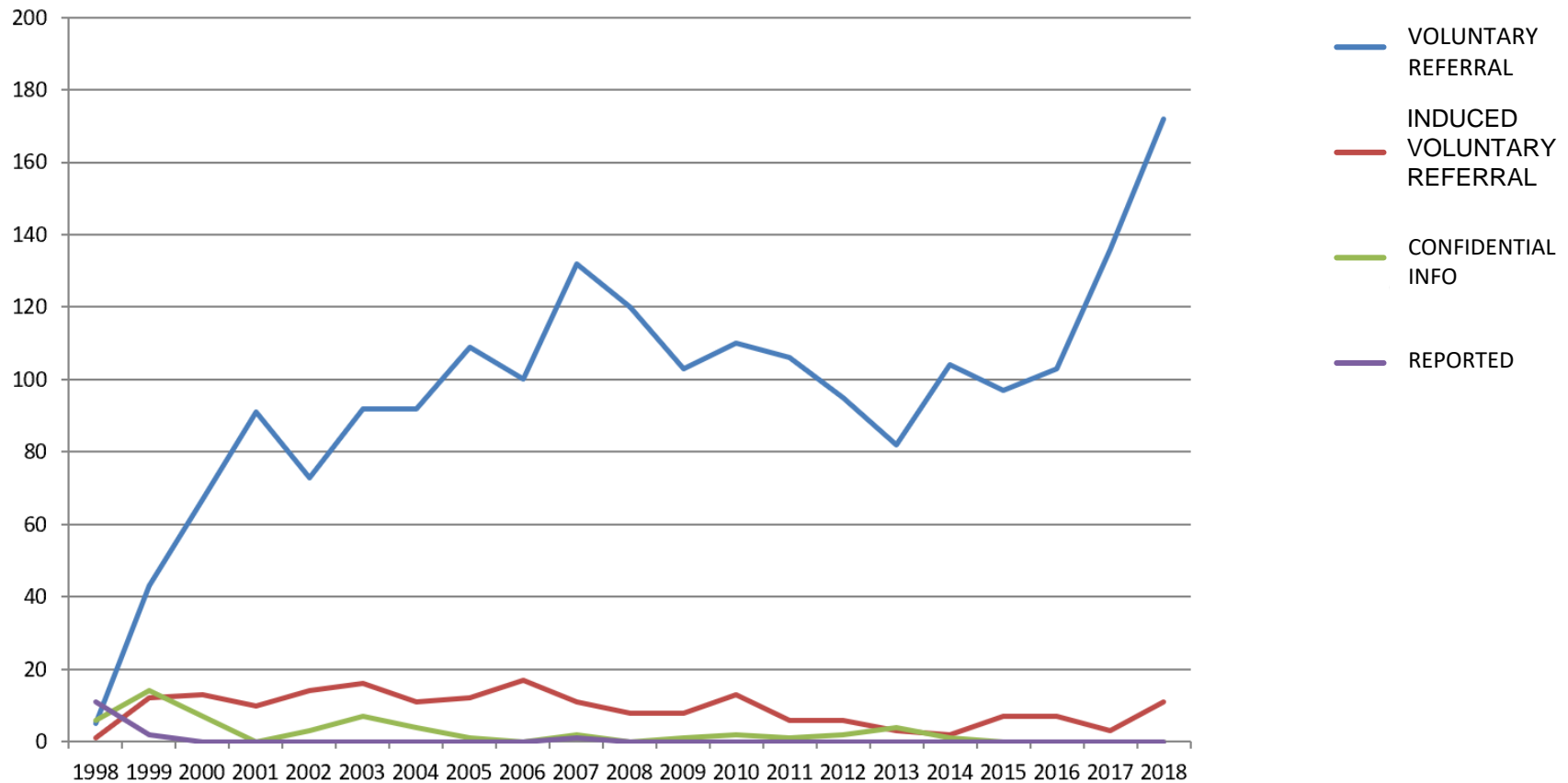
- Confidential communication / report
- Evaluation
- Therapeutic-rehabilitating



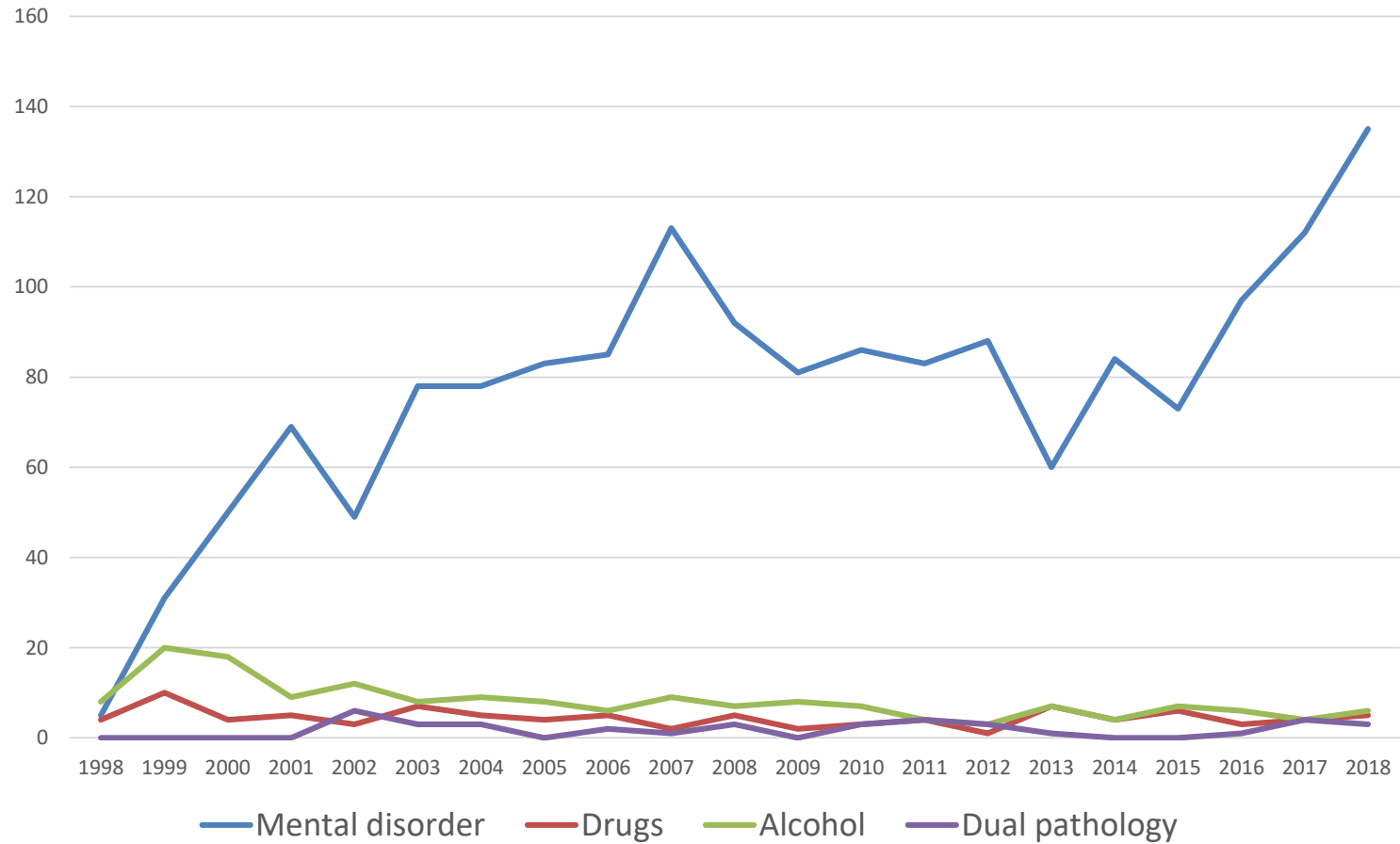
Main diagnostics



Refferal to the programme



Diagnostics access to PAIMM Barcelona



Complex cases always rise dilemmas on how to proceed...

The right balance between populations' safety and rehabilitation of sick physicians is at stake.



Complex cases comission

Complex cases commission

Goals and functioning:

- ✓ Annalise and assess complex cases on therapist, entry unit or governing boards' demand
- ✓ Cases are dealt on covered names.
- ✓ Seeking for best course of actions, that includes the need to communicate to the Council for regulatory purpose

Composició:

- Coordinator for the entry unit
- Board member
- President of the Deontological commission
- Legal advisory
- Director of the PAIMM
- Clinical director of the Clinical programme
- Therapist on charge
- Social worker
- Occupational Medicine Consultant

Complex cases commission

Activity 2010-2019

- 31 sessions (3 sessions/year)
- 74 Physicians
- 150 case discussions
 - 42 cases 2 or more discussions (~57%)
 - 32 cases 1 occasion
- 26 Mental disease (1.73 discussions)
- 48 Addictions (2.18 discussions)

Case analysis

- 55 (36.6%) were working
 - 145 (96%) had problems at work or with relatives
 - 13 (23%) without therapeutic contract
- 13 physicians were required to take sick leaves by the Council (non punitive)
 - Mean duration 3.6 months
 - 6 ended as permanent sick leaves

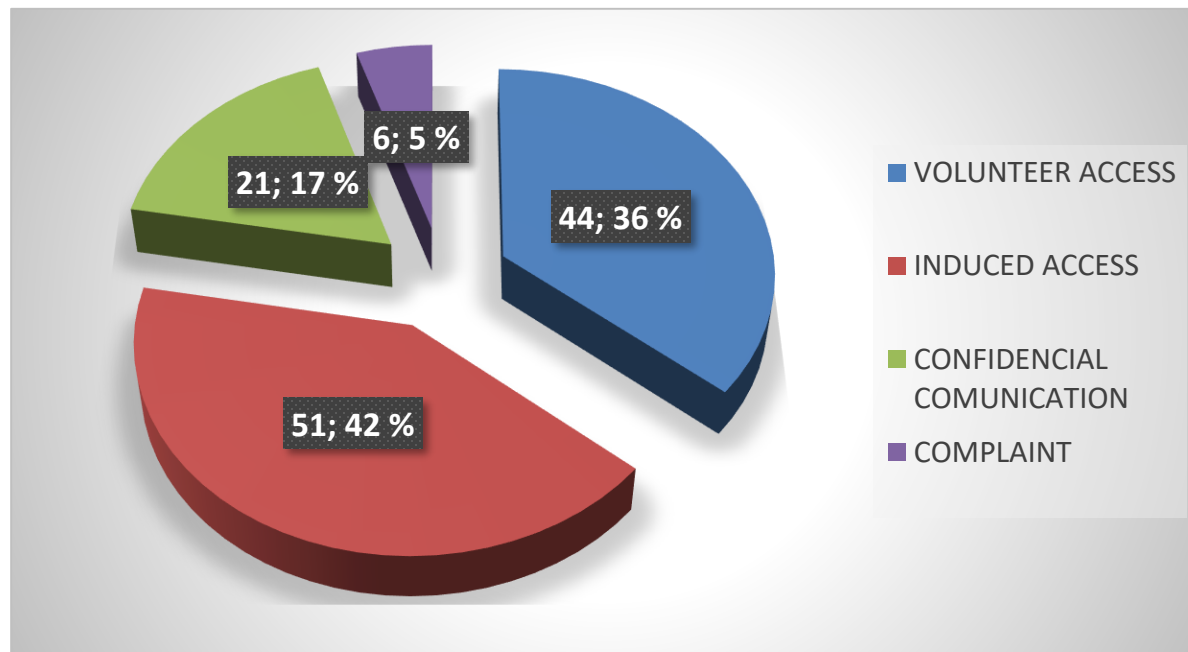
Therapeutic contract

Indications:

- Denial of disease or to follow treatment
 - Severity of symptoms
 - Frequent relapse
 - Risk of malpractice
 - Risky environment (especially in Anaesthetists)
- It reflects the parties commitment and alerts of the consequences of not following treatment.
- BMC can include “special measures”

- Who is signing?
 - Sick doctor
 - Psychiatrist
 - Board representative
 - Tutor (colleague or relative)
- 6 month period
- Clinical revaluation on renewal

Access to TC



Therapeutic contract

Total : 122 cases

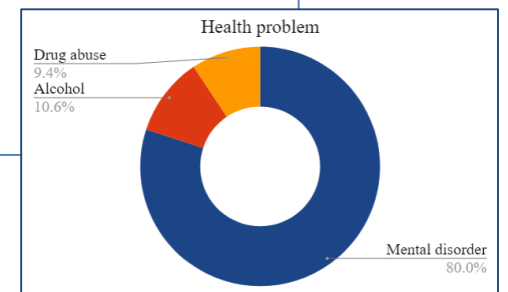
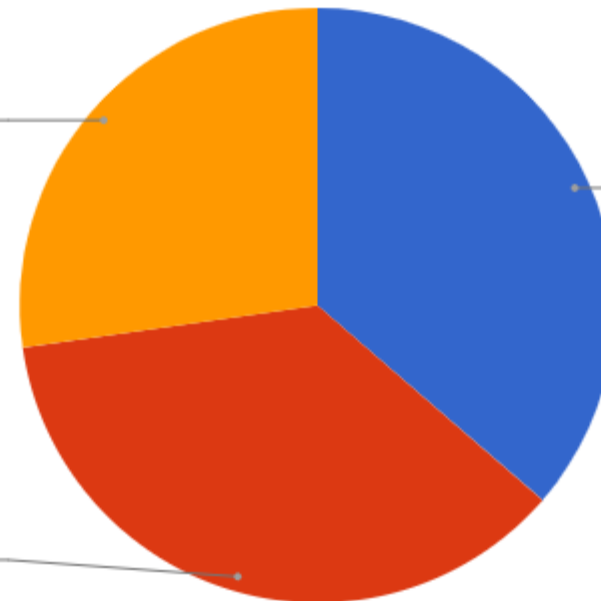
- 11 Overlap
- 41 Alcohol
- 39 Drugs
- 31 Mental disorder

Diagnosis on Therapeutic contract

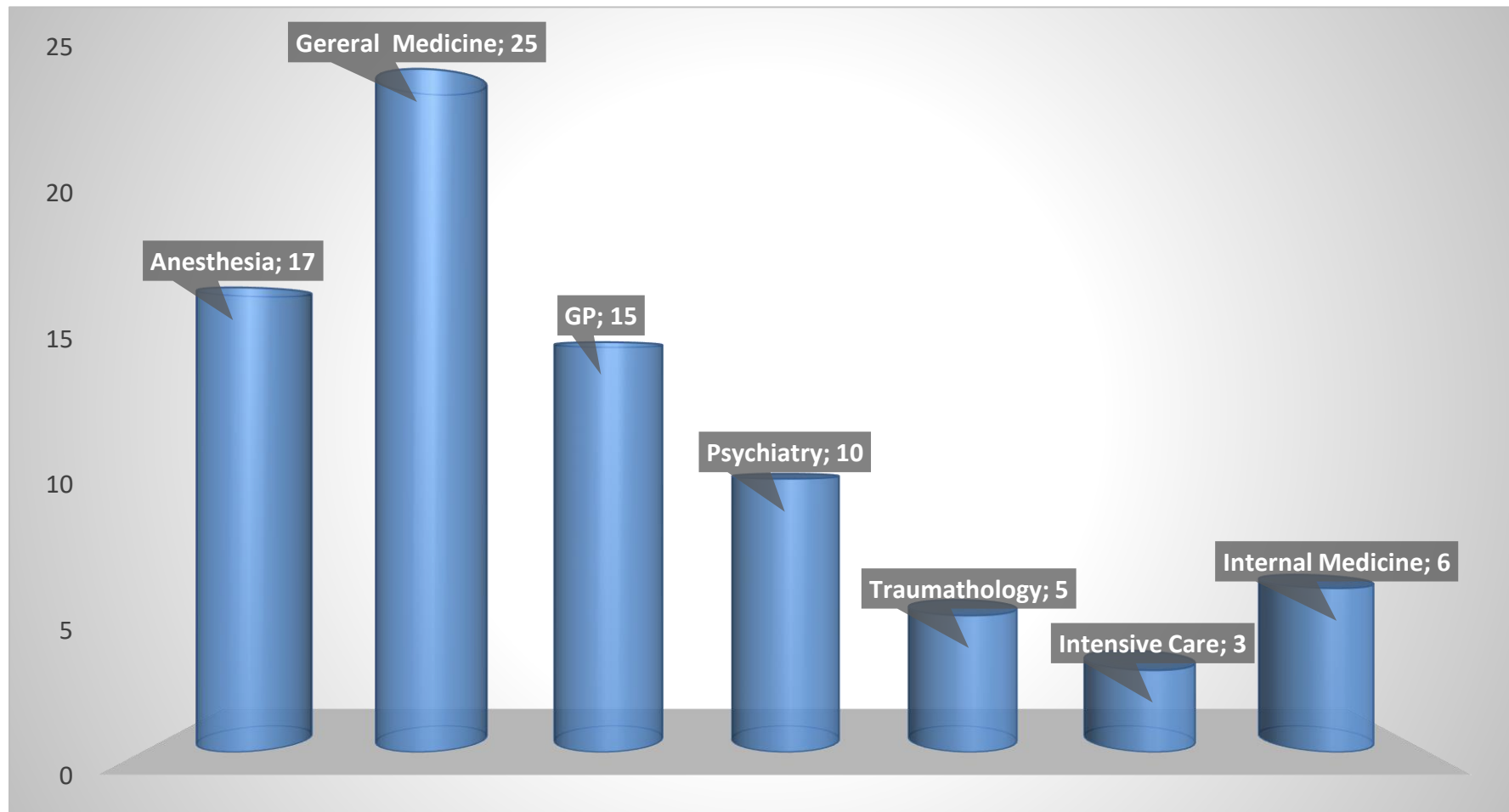
Mental disorder
27.3%

Drugs
36.4%

Alcohol
36.4%



Main medical specialty on TC



Therapeutic contract

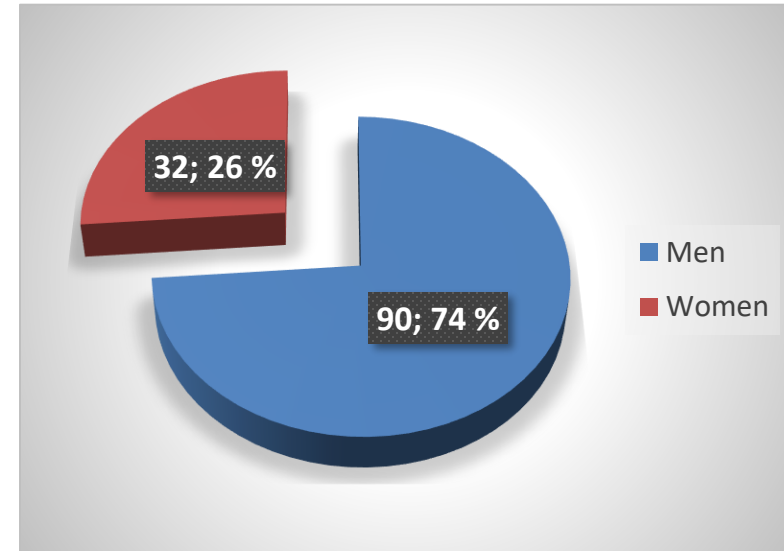
First Contract: 15th December of 1998

122 Doctors Involved

15 cases during the Residency

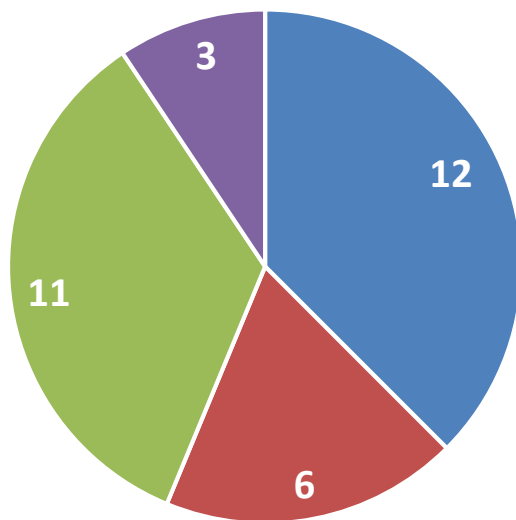
32 Women- 90 Men

Mean TC: 3

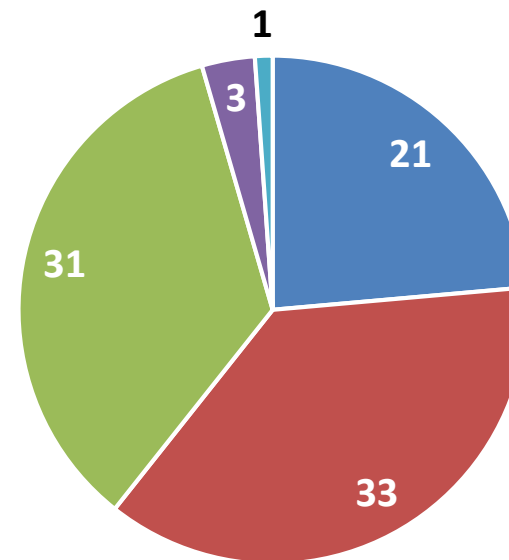


Diagnostics on TC

Female under TC



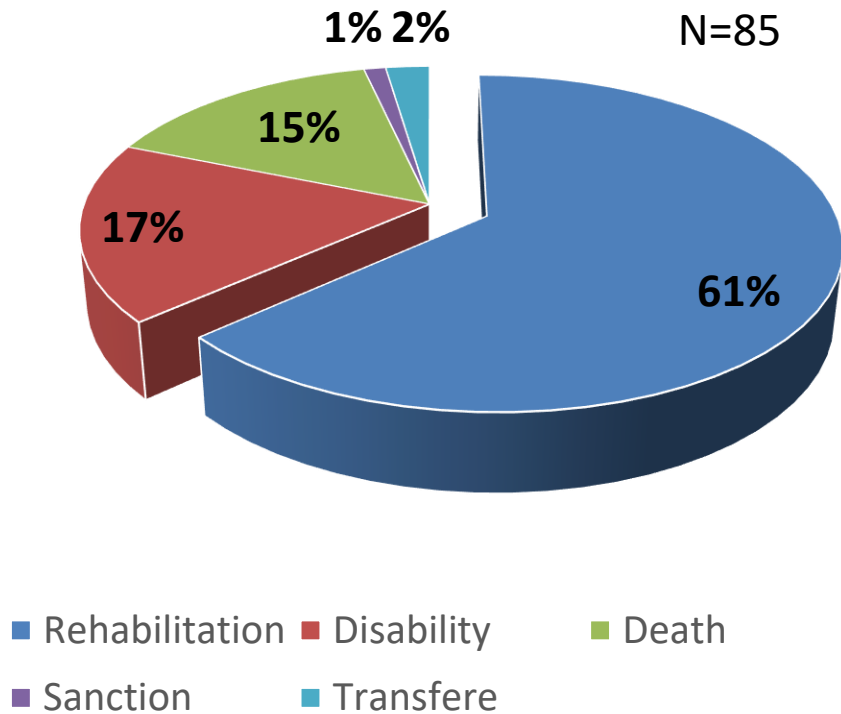
Male under TC



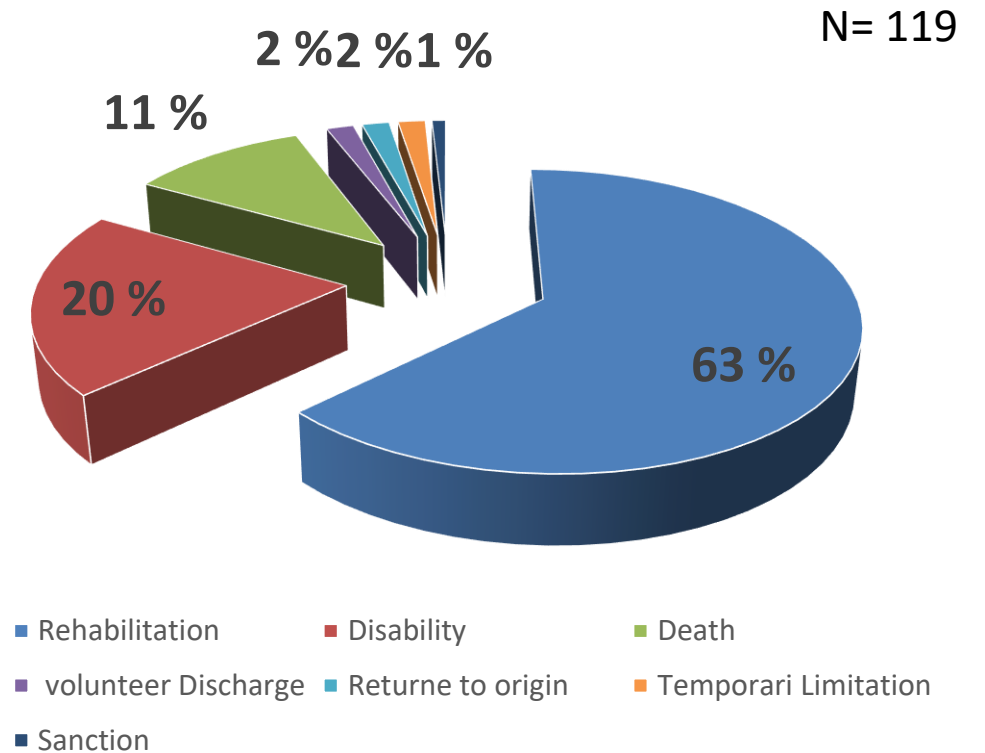
■ Mental Disorder ■ Other drugs ■ Alcohol ■ Dual pathology

Outcome of TC

Drugs Outcomes



1 % General Outcomes



Supervised activity

1998-2018

- 310 TC signed with the BMC and 28 in the rest of Catalunya
- 154 were led to Permanent Sick Leaves
- 1 involuntary admission (ruled by a judge)
- 6 sanctions in 20 years

During 2018

- 37 ongoing TC:
 - ✓ 22 physicians with TC during this year
 - ✓ 4 physicians signed their first TC

Take home messages:

1. Regulating our profession is much more than punitive measures.
2. Self-regulation begins with self awareness.
3. Programmes promoted by regulating agents can be successful based on clinical decisions.
4. Therapeutic Contract is a tool to enhance engagement instead of punitive measures
5. Accurate balance between confidentiality and good coordination with therapeutic team is crucial to make regulatory goal effective.
6. Regulatory perspective combined with clinical approach are complementary and not a burden

