cpsa

Service Provider Team for Biological Monitoring (including Health Monitoring)

Schedule A - ("Criteria and Competencies")

General Requirements		Yes	No	N/A
1.	The monitoring team ("Team") includes at least one CPSA regulated professional, in good standing, with relevant scope of practice.			
2.	Commitment to adhere to all relevant CPSA Standards of Practice, as well as the Canadian Medical Association (CMA) Code of Ethics and Professionalism.			
3.	Commitment to adhere to 2019 Federation of State Physician Health Program (FSPHP) guidelines, and to discuss with CPSA in advance the rationale for any material deviation.			
4.	Commitment to adhere to fitness to work principles as outlined in the American College of Occupational and Environmental Medicine (ACOEM) or reasonable alternative guidelines for fitness determinations in safety-sensitive settings, including the impact of medications and substances.			
5.	Access to relevant expertise / experience in Addiction Medicine. (Acceptable to CPSA)			
6.	Access to relevant expertise / experience in Occupational Medicine. (Acceptable to CPSA)			
7.	Access to relevant expertise / experience in Mental Health. (Acceptable to CPSA)			
8.	Access to relevant expertise / experience in determining fitness for duty in safety-sensitive occupations. (Acceptable to CPSA)			
9.	Experience with working with legal counsel/patient advocates.			
10.	Well-developed interpersonal boundary setting skills.			
11.	Excellent communication and conflict resolution skills.			
12.	Professional credibility: ability to effectively liaise with other health professionals.			
13.	Knowledge of medical and pharmacological terminology.			
14.	It is the responsibility of the individual physician service provider to identify and mitigate any dual agency concerns. The regulated member undergoing an assessment and/or monitoring, in consultation with legal counsel or PFSP, should make the decision on their choice for the most appropriate IME and/or monitoring provider. For example: The individual physician service provider conducting the IME should not be the same individual physician service provider subsequently performing health monitoring, and vice versa. The individual physician service provider can provide either an IME or monitoring services, but not both services for the same regulated member.			
15.	Without delay, and as soon as reasonably possible, report to CPSA of any monitored member's non-compliance (including but not limited to missed clinical interviews, missed tests, non-compliance with therapeutic components of a monitoring agreement e.g., psychiatric specialist treatment adherence, mutual support group participation, professional accountability peer group program involvement, etc.).			
Monitoring Agreement		**Yes**	**No**	**N/A**
1.	Formal enrolment and orientation process should include all consents reviewing / explaining / initialing all components of the Monitoring Agreement (MA).			

2.	Capacity for face to face/secure virtual or in-person meetings, as determined with the regulated member. Compliance with respect to the requested frequency of meeting as outlined in the MA is to be adequately adhered to.			
3.	Capacity to receive written or verbal reports from practice monitors and health monitors periodically as requested.			
4.	Capacity to liaise promptly and collaboratively with attending treatment providers / medical / psychiatric specialists, as well as practice monitors, and other key stakeholders.			
5.	Working professional relationships with other specialized groups e.g., access to professional accountability group facilitators, professional assistance program directors.			
6.	Service provider is engaged in ongoing quality improvement and relevant continuing professional education.			
Toxicology Testing		**Yes**	**No**	**N/A**
1.	Team must include a member that has completed training in biological sample collection with knowledge of testing methodologies and current Medical Review Officer (MRO) certification.			
2.	System infrastructure to generate truly random 7-day/week notification of testing / specimen collection.			
3.	Collection process that meets legal and regulatory body standards including chain of custody processes etc., including split specimen testing.			
4.	Capacity for collection and testing of urine, hair, oral fluids, blood, nails, and other specimens required under specified circumstances.			
5.	Established relationship with collection sites across Alberta that are / link to certified testing laboratories with capability for testing for substances not routinely tested e.g., ethyl glucuronide, ethylsulfate, zopiclone, fentanyl, hydromorphone, tramadol, etc. Where testing is conducted outside of Canada, adherence to pertinent privacy legislation is required.			
6.	Access to testing that includes immunoassay screening and spectrophotometric / Gas chromatography (GC) / Mass spectrometry (MS) or equivalent standard confirmatory testing capability.			
7.	Immunoassay results (non-negative) are considered presumptive requiring confirmatory testing. All point-of-care testing requires laboratory confirmation of results.			
8.	MRO processing of all non-negative results and a sample of negative results are to occur as per the Medical Review Officer Certification Council (MROCC) guidelines.			
9.	Without delay, and as soon as reasonably possible, report to CPSA of any monitored member's non-compliance including but not limited to non-negative tests or missed tests.			

Schedule B ("The Duties")

1. To ensure consent has been obtained for monitoring to occur.
2. Establish a monitoring agreement with the member and furnish a copy of the agreement to CPSA.
3. To ensure consent has been obtained to share monitoring information with CPSA.
4. To liaise with the CPSA as required/requested. Expectation that communication between the service provider team or member and CPSA will be conducted in a timely fashion.
5. Within three (3) business days of contact, confirm with CPSA that the regulated member is enrolled in their monitoring.
6. As scheduled and upon request, confirm with CPSA that the regulated member is compliant with monitoring and other recommendations impacting fitness to practice.
7. To provide periodic confirmation reports monitoring-informed fitness to practice as requested by CPSA.
8. To provide regular reports to the CPSA, at a frequency to be determined, including:
    - Ongoing Fitness to practice
    - Any modifications, limitations, and restrictions
    - Ongoing monitoring required
    - Practice condition recommendations
9. To immediately notify the CPSA of any urgent concerns about regulated members in their program, especially regarding fitness to practice, and any identified factors that may adversely impact the safe care of patients.
10. Without delay, advise CPSA of any actual or suspected relapse by a monitored physician.
11. To create and maintain appropriate records relating to the services provided.
12. To maintain liaison with the regulated member's primary treatment provider(s) to ensure that the treatment provider(s) is notified of any concerns, with the consent of the member.
13. To maintain liaison with the Alberta Medical Association's Physician and Family Support Program (PFSP), about regulated members who are engaged with PFSP, to ensure that PFSP is notified of any concerns, with the consent of the member.
14. Advise CPSA in a timely fashion if the regulated member is no longer requiring monitoring.
15. Within three (3) business days, advise CPSA when a member's file has been closed.
16. To negotiate remuneration for monitoring directly with the regulated member.