Physicians Over Age 70.

There was extensive discussion about the existing status and proposed status of physicians over the age of 70 employed in the state institutions. All but one of these is employed in the state institutions under the jurisdiction of the Medical Services Division.

In summary, the Committee made no recommendations concerning certification of the physicians over age 70 to remain in state employment. Rather the Committee recommended that there be considerable further discussion and investigation into this matter.

The Committee expressed its concern about these physicians as a general category. The Committee believes that the proportion of physicians over age 70 (around 12 - 14 per cent of all those physicians in the state Civil Service) is excessive. There is reason to believe that this might deter the recruitment of younger physicians. The Committee urged that Dr. Vail take steps to stimulate the obtaining of younger physicians and noted that this aim may not be achieved until the number and proportion of physicians over age 70 is reduced. It is recommended that forceful steps be taken by the Medical Services Division in the Department of Public Welfare to develop arrangements other than the full time medical staff concept at state institutions and to develop greater utilization of innovative arrangements with regard to local medical manpower. To this end physicians in retirement status might be continued on a part-time basis.

The Committee requested that the hospitals state the very minimum medical staff that they need. They should submit this statement to Dr. Vail in the context of a general review of the medical staff structure, table of organizations, and job descriptions. The statements should include a base line of minimum medical staff required to carry on the various medical and health service functions of the institution. Such a statement and proposed table of organization is subject to review and approval by the Medical Services Division.

The continued employment of physicians over age 70 should be based on exceptional service, that is extraordinary reasons for the physician to continue in service. The burden of proof is on the physician and/or the hospital to document the extraordinary circumstances justifying his continuing in state employment; the statement must make a case that the particular facility cannot function without the services of this individual.
The various reports on medical status were reviewed. Some of these were satisfactory and others were not. The health report must contain all pertinent information, including statements about vital signs and at least a brief systems review. In certain cases, where we know that physicians have had significant health problems, the medical statements made no reference to the known pathology; this situation should be corrected.

There was brief discussion about the possibility of rewording or abolishing the present statute providing for special exemption from mandatory retirement for physicians over the age of 70. Eliminating this exemption would save a great deal of time and irritation for numerous people, including the Medical Services Division Director and the Policy Committee, for the retirement would then be mandatory and automatic. The Committee, however, recommended that the present statute should stand, for it is unquestionably true from time to time that circumstances do arise in which we cannot function without the services of physicians over the age of 70.

Regarding adequate coverage the Committee referred to military practice, where on psychiatry wards it is proposed that a psychiatrist can handle one or two admissions a day and cover a ward of 60 patients. A psychiatrist in private general hospital practice in the Twin Cities on a half-time basis can handle 10-20 admissions per month and at any given time be responsible for 10-20 hospitalized persons.

Individual instances of physicians were discussed, in which the hospital medical director has made strong supporting statements; but at the same time direct observations by Medical Services Division staff and comments from community agencies suggest that the functioning of the physicians is inadequate. The Committee believes that if it is to in effect countermand the recommendation of the hospital medical director in such instances it must have concrete, specific, and detailed information in writing about the alleged inadequacies of the physicians in question.