

# LAC+USC MEDICAL CENTER POLICY

Subject: <b>PROBLEMATIC PATIENT BEHAVIOR AND TERMINATION</b>	Original Issue Date: 3/13/2022	Policy # <b>242</b>
	Supersedes: 3/13/2022	Effective Date: 3/13/2022
Departments Consulted: Office of Risk Management Ethics, Rights, and Responsibilities Fetus/Infant/Child Ethics Committee Nursing Services	Reviewed & Approved by:  Attending Staff Association Executive Committee Senior Executive Council	Approved by: Chief Medical Officer (Signature on File)  Chief Executive Officer (Signature on File)

## PURPOSE

To establish a policy and procedure for defining unacceptable patient behavior, communicating with patients when they exhibit unacceptable behavior, and terminating the care relationship at an LAC+USC ambulatory primary care or specialty clinic appropriate medical and behavioral health evaluation and referral and explicit communication around their inappropriate behavior when they continue to exhibit such behavior after being given appropriate warnings as defined below.

## POLICY

Although LAC+USC considers termination of care as a last resort, it may become necessary to do so based on behaviors that are inappropriate. A patient's care may be terminated for any of the following reasons:

- Recurrent non-compliance with provider's recommendations, including failure to keep appointments, to an extent that endangers the patient's well-being and/or places staff and DHS at risk.
- Disruptive behavior, including the use of vulgar or discriminatory language, while on or near the premises of an LAC+USC clinic, on the telephone, or via any form of communication including electronic communication.
- Any violent, threatening, or display of behavior that creates fear in, or endangers staff, patients, or visitors, including physical or verbal confrontations towards to other patients, staff, or providers, and any possession or use of weapons\*.
- Any sexual suggestive or sexually explicit language, sexual harassment of any kind, any inappropriate touching, groping or sexual assault.
- There is an irreconcilable breakdown in the provider-member relationship that cannot be resolved.
- Deliberate act to damage county property\*.
- Theft of any kind while on the premises of an LAC+USC facility\*.
- \*Will be reported to local law enforcement following the established process at the facility.
- All patients are expected to be familiar with the responsibilities of being a patient as set forth in the Patient Rights and Responsibilities Guidelines.

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## **PROCEDURE**

To ensure that patients and staff are aware of behavioral expectations and consequences related to violations of this policy, Patient Rights and Responsibilities will be posted in all lobbies and clinical areas as well as provided to patients who may also request it from staff when signing the Conditions of Admission (General Consent) at the clinic or at the Patient Relations office.

- When a patient, parent or guardian of patients under the age of 18, displays any behavior that creates a major disruption of any kind or threatens the wellbeing of any staff, patient, or visitor, an appropriate Emergency Code (i.e. Silver, Gray. See DHS Policy No. 905.000) will be called immediately to the area where the situation exists. The care of patients who present a threat to the well-being of staff, patients, or visitors may be terminated immediately without a formal warning. Parents or guardians of minors may be immediately excluded from the facility, along with a simultaneous call to DCFS, if indicated. The care of children should not be terminated without parental or DCFS surrogate consent.
- Less severe violations of this policy should be addressed during a meeting, with the patient, which includes the division chief, the nursing supervisor and, as needed, the facility's Associate Medical Director or Medical Director, Director, and/or the Nurse Manager and or patient's primary care provider.
- Clinic staff should evaluate patient for medical and behavioral health related to the inappropriate behavior before proceeding to terminate the care relationship. Clinic staff should also complete complex care plan as appropriate.
- Patients may be afforded up to three written warnings before termination of care is pursued. All actions to terminate the care of a patient must be coordinated with the facility's Administrator, Medical Director, Risk Manager, and the patient's provider. All warnings must be documented in the patient's medical record.
- Non-managed care patients must be provided with a list of three clinics where they may seek care after their care is terminated by an LAC+USC clinic. This list may include other LAC+USC or DHS facilities as well as Community Partner clinics located in proximity to the patient's home.
- For patients participating in a managed care health plan who have been assigned to an LAC+USC facility, the Director or his/her designee must call DHS Grievance and Appeals Unit to report the reasons as to why the patient care relationship is being terminated. Managed care patients' care cannot be terminated without initiating a formal disenrollment process, as per Provider Request for Reassignment and/or Disenrollment of a Member DHS Member Reassignment/ Disenrollment procedure (MCS-GA.002 policy).
- When the decision is made to terminate patient care, care will continue to be provided to the patient for up to 30 days following the date of the termination letter. However, if a situation with a patient is determined by facility leadership to be unsafe for clinical care team, the 30-day extension may be denied.
- If a patient would like to grieve the termination, they should follow the grievance process by filing a grievance with Patient Relations staff or with their Health Plan

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**PROCEDURE DOCUMENTATION**

All documents related to the termination of care or any warnings prior to termination (including mail receipts) should be retained in the patient's medical record. Any discussions with the patient and/or patient's family prior to termination of care must be documented in the patient's medical record by the provider and/or other staff involved with the incident(s).

- The Director or designee will make a note in the patient's electronic medical record ORCHID (registration screen), under comment notes section, as follows: "DO NOT REGISTER PATIENT EFFECTIVE [DATE] FOR ELECTIVE CARE. PATIENT HAS BEEN TERMINATED FROM CARE. PLEASE REFER PATIENT TO PATIENT ACCESS CENTER". Urgent or emergent care should not be deferred. The patient's record will also be flagged that indicates the patient is terminated from care with the effective date.

**RESPONSIBILITY**

Administration  
 Attending Staff  
 Medical Administration  
 Nursing  
 Patient Relations  
 Registration  
 Risk Management

**REFERENCES**

Ambulatory Care Network Policy PR-01.001, Problematic Patient Behavior and Termination Of Care  
 Managed Care Services-Grievance & Appeal Policy and Procedure MCS-GA.0002,  
 Provider Request for Reassignment/Disenrollment of Member  
 DHS Policy 792, Threat Management "Zero Tolerance"  
 DHS Policy 905.000, Emergency Codes

**ATTACHMENTS** (if any)