



LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES
HARBOR-UCLA MEDICAL CENTER

SUBJECT: COMPLEX PATIENT CONSULTATION

POLICY NO. 360C

CATEGORY: Provision of Care	EFFECTIVE DATE: 11/17
POLICY CONTACT: Susan Stein, MD	UPDATE/REVISION DATE: 1/23
REVIEWED BY COMMITTEE(S):	

PURPOSE:

To ensure that all Harbor-UCLA staff have access to support, guidance, and intervention from a Complex Patient Consultation team.

POLICY:

Harbor UCLA shall have a Complex Patient Consultation Team.

DEPARTMENTS: All.

DEFINITION:

Complex Patient: Is defined as a patient (or visitor/parent) whose behavior evokes feelings of frustration, fear, or anger in the provider or staff member. A Complex Patient Consultation may also be requested for a patient with a complex illness which requires multi-specialty expert input in order to solidify a plan of care. Examples:

- Repetitive verbal or physical abuse
- Unusual barriers to placement
- Complex medical/surgical care requiring input from multiple disciplines
- Manipulative
- Surrogate decision makers not acting in the best interest of the patient
- Excessive non-compliance
- Inappropriate use of controlled substance
- Other patterns of behavior that represent excessive lack of respect or responsibility on the part of the patient
- Litigious threats
- Patient or surrogate is refusing placement once hospitalization is no longer required
- Patients for which Harbor-UCLA desires to terminate the patient-physician relationship
- Or any unresolved conflict between staff and patient which compromises optimal care delivery.

REVISED: 1/23

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APPROVED BY: _____

Anish Mahajan, MD
Chief Executive Officer
Chief Medical Officer

Griselda Gutierrez, MD
Associate Chief Medical Officer

Jason Black, MBA, DNP, RN
Chief Nursing Officer



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PROCEDURE:

A. Consultations

1. All staff should attempt resolution at the local level. Resolution attempts can include discussion with patient, active listening, de-escalation and allowing reasonable requests. Complex patient problems should also be locally escalated to supervisor, Nurse Manager, or Attending physician prior to initiating a complex patient consultation.
2. Any staff (physician, nurse, ancillary staff, etc.) can ask for a consultation.
3. The procedure for obtaining a consult is as follows:
 - a. Call Inpatient or Outpatient Associate Medical Director (AMD) at extension 66379 for consultation.
 - b. AMD will screen with the following criteria:
 1. Have you discussed with your supervisor (Chain of Command)?
 2. Was there a case/team conference?
 3. AMD may attempt to resolve issues during the consultation request conversation.
4. After these steps, if the issue(s) is/are still not resolved:
 - a. A Consultation will be scheduled.
 - b. The AMD in consultation with the Primary Team will select team members and invite participants.

If a health care provider or other employee perceives that the patient's behavior may cause imminent harm to either the patient or staff member, the Los Angeles County Sheriff's Department Dispatch at extension 64450 should be contacted for assistance or a Code Gold should be called.

B. Consultation Team Membership

The Complex Patient Consultation team may be comprised of the following members:

1. Attending physician of record
2. Social Work
3. Nursing
4. Administration representative
5. Risk Management
6. Bioethics Committee representative
7. Appropriate Health Care Specialists
8. Chief/Senior Resident of respective service and any other members as deemed necessary by the staff involved or the Risk Manager.
9. Psychiatry consultation & liaison physician may be invited as a team member in appropriate circumstances.

C. Duties of Consultation Members

1. To provide consultation and support for the staff and organization.
2. To review situation and develop plans for addressing, improving, and resolving the situation.
3. To develop a comprehensive multidisciplinary plan of care for the patient.
4. To educate the staff how to manage problem behaviors, how to discuss these with patients, how to prepare an effective behavioral contract, and how to recognize and manage common causes of difficult patients.



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5. The Primary team or designee will document the outcome of the multidisciplinary meeting in the medical record as appropriate.

Reviewed and approved by:
Medical Executive Committee - 1/2023

A handwritten signature in cursive script that reads "Beverley A. Petrie".

Beverley A. Petrie, M.D.
President, Professional Staff Association