



MANAGEMENT OF NONCOMPLIANT PATIENTS

**Medical Protective
Clinical Risk Management Department**

OCTOBER 2013

For questions, products, or services, please contact 800-4MEDPRO or visit <http://www.medpro.com/>. This document should not be construed as medical or legal advice. Since the facts applicable to your situation may vary, or the laws applicable in your jurisdiction may differ, please contact your attorney if you have any questions related to your legal obligations or rights, application of state or federal laws, contract interpretation, or other legal questions that may potentially impact the applicability of the information provided in this document.

© The Medical Protective Company. 2013. All rights reserved.

CONTENTS

INTRODUCTION 2

OBJECTIVES..... 2

MANAGING NONCOMPLIANT PATIENTS 2

RISK STRATEGIES AND RECOMMENDATIONS 3

CONTINUED NONCOMPLIANCE 4

CONCLUSION 4

RESOURCES 5

APPENDIX A. SAMPLE NONCOMPLIANCE LETTER — APPOINTMENT NONCOMPLIANCE 6

APPENDIX B. SAMPLE NONCOMPLIANCE LETTER — TREATMENT NONCOMPLIANCE 7

INTRODUCTION

Patients who do not comply with recommended care might be more likely to have negative outcomes as a result of their noncompliance. However, the label “noncompliant patient” is one that should be considered carefully.

Although some patients may simply refuse to take their prescribed medications or may frequently cancel or skip appointments due to poor schedule management, other patients might have educational, emotional, financial, or physical limitations that contribute to their noncompliance.

For example, patients who are cognitively limited may be unable to follow instructions regarding their treatments. Patients who have financial struggles might cut corners because they cannot afford their medications.

Consideration of patients’ limitations may help healthcare providers better manage noncompliance and patient care.

OBJECTIVES

The objectives of this guideline are to:

- Explain some of the various reasons why patients might become noncompliant;
- Emphasize the need to evaluate subjective and objective information surrounding noncompliance to determine the best course of action;
- Describe various strategies that healthcare providers and staff can use to encourage compliance and address noncompliance when it occurs; and
- Discuss situations in which a healthcare provider might consider terminating the provider–patient relationship because of failure to comply with treatment protocols or care recommendations.

MANAGING NONCOMPLIANT PATIENTS

To a certain degree, providers have the right to choose which patients they want to treat, and a provider may also choose to terminate the relationship with a noncompliant patient.

However, when determining how to manage noncompliance, providers should consider both subjective and objective information about the patient’s noncompliant behaviors and activities. Analysis of the situation may lead to a solution to the problem without severing ties.

For example, a patient may stop taking her medication because it has relieved her symptoms. Because she feels better, she may not realize the importance of continuing

the treatment. Educating the patient about her condition and the need to follow through on her treatment plan could resolve the issue of noncompliance and help ensure the patient receives appropriate care.

Effective provider–patient communication and a well-trained staff can help identify, address, and possibly resolve some of the causes of noncompliance. But staff must first be educated and enabled, and practitioners must respond and support interventions.

RISK STRATEGIES AND RECOMMENDATIONS

Healthcare providers can take a number of steps to help patients stay compliant and to address noncompliance when it occurs. For example:

- Establish a policy defining the basic rights and responsibilities of each patient. This provides a foundation on which to build an effective provider–patient relationship. Display or make this information available to all patients.
- During each patient encounter, emphasize the importance of following the prescribed plan of treatment. Explain the possible consequences of not following the agreed-upon treatment plan.
- Educate patients about the importance of adhering to a treatment regimen until otherwise directed, even if symptoms subside. Consider patients' lifestyles and medication costs when prescribing.
- Use the teach-back, or repeat-back, technique to ensure that patients fully understand the information and instructions provided. Patients from all racial, ethnic, socioeconomic, and educational backgrounds may have limited health literacy, which can lead to noncompliance.
- With the patient's permission, include his or her family/significant other in education about the importance of following the treatment plan.
- Provide noncompliant patients with education about their treatment plans both verbally and in writing — especially if the patient has serious health problems.
- If a patient has financial, physical, or emotional limitations that lead to noncompliance, determine whether any community services are available to assist the patient and improve compliance.
- Create a patient care contract that details the responsibilities of both the provider and the patient relative to the treatment regimen. Both the provider and patient should sign the contract.
- If a patient is missing appointments, try to determine the reason why. Consider transportation, family care, or financial issues that may prevent the patient from keeping appointments.

- After several missed appointments, consider sending the patient a letter stressing the importance of keeping the appointments and complying with the treatment plan. (See Appendix A for a sample letter.)
- Document missed or cancelled appointments by noting either “patient no-show” or “cancelled” in the patient’s record. If possible, document the reason for a cancellation — e.g., “no transportation” or “child care issues.”
- Do not delete original appointment entries, as the appointment log may become a valuable tool if you have to demonstrate a patient’s continued noncompliance with appointments.
- Document a description of all clinical noncompliance, as well any education provided to the patient and/or family regarding the consequences of not following the treatment regimen. When documenting noncompliance, use subjective statements from the patient and/or family and objective information obtained through the patient encounters.
- Avoid disparaging remarks or editorializing when documenting information related to a patient’s noncompliant behaviors.

CONTINUED NONCOMPLIANCE

Despite best efforts on the part of healthcare providers and their staffs, some patients may continue to engage in noncompliant activities and behaviors. A provider who continues a relationship with a noncompliant patient might be at risk for allegations of failure to treat in accordance with the standard of care.

If a patient continues to be noncompliant, the provider may want to terminate his or her relationship with the patient — particularly if the patient does not return for treatment or refuses to comply with the recommended plan of care.

For more information about terminating a provider–patient relationship, talk with your MedPro risk management consultant, who can provide additional materials and resources.

CONCLUSION

Patient noncompliance can occur for various reasons. Some patients may have legitimate limitations that prevent them from following through with treatment recommendations, while others may simply be uncooperative.

Communicating effectively with patients, carefully considering the possible reasons for noncompliance, and implementing strategies for addressing these issues may help healthcare providers and their staffs better manage difficult patients or determine when to terminate the provider–patient relationship.

RESOURCES

- American Society for Healthcare Risk Management: Pearls to enhance communication in healthcare settings — http://www.ashrm.org/ashrm/online_store/index.shtml
- O'Reilly, K. B. (2012, February 20). Study: Doctors often lecture noncompliant patients too much. *American Medical News*. Retrieved from <http://www.amednews.com/article/20120220/profession/302209933/7/>
- Medscape: Physicians Top Ethical Dilemmas: Medscape 2012 Survey Results (requires site registration) — <http://www.medscape.com/features/slideshow/public/ethics2012#12>

APPENDIX A. SAMPLE NONCOMPLIANCE LETTER — APPOINTMENT NONCOMPLIANCE

<Practice/Organization Name>

<Address 1>

<Address 2>

<City, State ZIP>

<Date>

<Patient Name>

<Address 1>

<Address 2>

<City, State ZIP>

Dear <Patient Name>:

Our records show that you have missed <number> appointments. We have tried to reschedule, but have been unable to reach you.

Our practice wants to help you maintain and manage your health through high-quality care and treatment. To do so, you need continued and timely care.

Please contact our office at <phone number> to schedule an appointment. Our staff is happy to review our schedule and find a date and time that works well for you.

Sincerely,

<Name>

<Title>

APPENDIX B. SAMPLE NONCOMPLIANCE LETTER — TREATMENT NONCOMPLIANCE

<Practice/Organization Name>

<Address 1>

<Address 2>

<City, State ZIP>

<Date>

<Patient Name>

<Address 1>

<Address 2>

<City, State ZIP>

Dear <Patient Name>:

It has come to my attention that you are not following your medical treatment plan. For the important health reasons that we discussed during your office visits, you should [insert the advice/recommendations/treatment plan].

If you do not follow these recommendations, you could have problems, such as [list most significant consequences of not following treatment].

Our practice is committed to providing you with high-quality health care. But to do so, we need you to follow your treatment plan. You are a very important member of your own healthcare team.

Please contact our office if you have any questions or concerns about your treatment plan.

Sincerely,

<Name>

<Title>