# **CAPsules**®



# **CASE OF THE MONTH**



# When Was the Last Time You or Your Staff Dealt With a Disruptive Patient?

by Dona Constantine, RN, BS

The Risk Management and Patient Safety Department at the Cooperative of American Physicians (CAP) has recently received an increased number of requests for assistance with managing disruptive patients.

While the physician's first inclination may be to discharge the patient, this action may not always be the optimal solution. De-escalation techniques and protocols can help equip you and your staff with strategies for navigating these challenges to minimize potential disruptions.

Learning to recognize when a patient is upset is an important first step. Minor verbal complaints (e.g., "The wait is too long," "There are too many people in the waiting room") may serve as initial signs of worsening behaviors, like yelling, expressing degrading comments, swearing, or threatening statements in a belligerent tone of voice.

STAMP is an an easy-to-remember acronym to help identify five specific behavior elements characteristic of potentially disruptive patients. It is an effective risk assessment tool that can help health providers recognize an aggressive patient.

#### STAMP:

**Staring and eye contact:** looking directly at the provider or away from the provider;

**Tone and volume of voice:** speaking loudly in a sarcastic or aggressive tone;

**Anxiety:** showing signs of restlessness, irritability, or agitation;

**Mumbling:** not speaking with the provider, but to themselves; and

Pacing: moving about without clear direction."1

Recognizing when a situation may escalate allows you to be prepared to manage the behaviors and de-escalate the matter.

The following scenario is based on a compilation of facts from various cases but demonstrates an effective approach to mitigating a potentially disruptive situation.

A well-known patient named Tom arrived at the physician's office only to be informed that his appointment was scheduled for two days later.

Despite his mistake in arriving on the wrong day, Tom, who typically conducted himself in a calm manner, was upset that he couldn't be seen immediately and grew increasingly agitated at the situation. It is worth noting that he had been living away from his home and had driven for over an hour to reach the office.

Upon hearing the commotion, the office manager promptly went to the waiting room to address the situation. She approached Tom in a calm and composed manner, and asked him to accompany her to a more private area to discuss his concerns.

Although still upset, Tom reluctantly followed the office manager to the designated space. Sensing his distress, she inquired about the reason behind his agitation. Tom explained that he was feeling overwhelmed because recent personal events had turned his life upside down. He acknowledged that he knew he had an appointment but was uncertain of the exact date. Expressing sympathy, the office manager assured Tom that she would explore potential ways to assist him.

She requested Tom wait in her office while she looked into the matter. She proceeded to the front desk to review the schedule, which was fully booked for the day. Additionally, she informed the physician about Tom's situation. The physician, understanding the circumstances, agreed to see Tom during his lunch break.

The office manager approached Tom with this option, asking him if he wouldn't mind waiting an hour to see the physician. Tom's agitation resurfaced as he struggled to comprehend why he couldn't be seen immediately. In a calm and empathetic tone, the office manager expressed her sincere apologies for his situation and acknowledged that she understood his frustration. She invited Tom to stay in her office for lunch and continued to lend an ear. Tom gradually calmed down and patiently waited for the physician, who eventually completed his visit with Tom.

The office manager in the case above used several techniques found in Dr. Dike Drummond's "Universal Upset Person Protocol" for de-escalating a disruptive situation.

#### STEP ONE: Acknowledge the emotion.

Tell the patient that they look or sound upset and that you'd like to help.

#### STEP TWO: Hear them out.

Ask the patient what is wrong. Listen to their story and try to find the real intent behind their words. Patients may have a variety of issues and concerns and come to their visits with anxiety or worry about the cost, transportation difficulties, their potential diagnosis, treatment regimen, or recovery process. Certain barriers may be at play, such as language or literacy, or different cultural norms.<sup>2</sup>

#### STEP THREE: Look them in the eye.

When the patient is finished explaining their problem, look the patient in the eye and express sympathy and compassion for what they are going through.

#### STEP FOUR: Offer assistance.

Ask the patient what you can do to help them and listen carefully to their answer, even if you already have an idea of what would solve their issue. The patient's response to this question will give you a much better understanding of what they need to help them feel calm and understood.

#### STEP FIVE: Articulate next steps.

The next steps do not have to be the same ones expressed by the patient, but rather the best solution you can offer that is within your abilities as a medical professional.

#### STEP SIX: End on the same page.

Once the problem has been resolved, take time to thank your patient for expressing their feelings with you. After moments of emotion, many people can feel anxious or embarrassed, so it is important to show empathy and respect by clarifying that you appreciate their vulnerability in sharing their story with you.<sup>3,4</sup>

Remember it is also important to educate patients on your office policies regarding both patient and provider expectations. Consider placing a poster regarding a Zero Tolerance policy for disrespectful, disruptive, and/or threatening language or behavior.

Once de-escalation techniques have been successfully implemented to re-establish the physician-patient relationship, document the incident factually without emotion as soon as possible in the medical record. Use quotation marks to denote the patient's specific behaviors and verbal threats, or unacceptable language.

There may be situations where the patient might not respond positively to the de-escalation techniques or other interventions putting the provider, staff, or others at risk of harm. Depending on the circumstances, termination of the patient-physician relationship should be considered and may be the appropriate next step.



Dona Constantine, RN, BS, is a Senior Risk Management and Patient Safety Specialist. Questions or comments related to this article should be directed to DConstantine@CAPphysicians.com.

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<sup>1</sup>Wenske, Wayne. (2021). "De-Escalation of Angry or Disruptive Patients." Texas Medical Liability Trust. The Reporter. https://cdn.prod.website-files. com/6790ae6ff3e4aa35f74b86d5/67bdc147d914e10856f97d96\_reporter-q4-2021.pdf

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# RISK MANAGEMENT **PATIENT SAFETY NEWS**



## Virtual Assistants in Healthcare—The Cost of Convenience

by Deborah Kichler, RN, MSHCA

As healthcare practices continue to face the challenges imposed by high operational costs and overwhelmed staff, the demand for virtual administrative assistants has increased. While outsourcing certain operations, such as billing, is not a new practice, virtual assistants are being hired to handle administrative tasks such as appointment scheduling and insurance verification, allowing office staff and providers to focus on other office functions.

A virtual assistant is an individual who works remotely and has access to electronic medical records and other technological services of the practice. By working remotely, these independent contractors can help businesses reduce costs. It is important to note that a virtual assistant is different from an "Al assistant," which utilizes artificial intelligence (AI) to automate tasks, such as an Al scribe.

Within healthcare, there are third-party agencies specializing in virtual assistants who act as intermediaries between you and potential contractors. These agencies have a vast network of resources, often spanning various countries, providing access to a diverse pool of experienced and skilled professionals. These companies thoroughly assess the necessary competencies, conduct interviews, and conduct comprehensive background checks on applicants before adding them to their resource pool. The goal of using these agencies is to find a virtual assistant who is well-matched to effectively meet the specific requirements of your practice.

When considering hiring virtual assistants, it is essential to be aware of the following key points.

1. Choose and vet the right candidate for your practice. Even if using a third-party vendor, conduct a thorough screening process to ensure the virtual assistant has the necessary qualifications and experience in the tasks you are asking them to be involved with. Verify their education, certifications, and any relevant background checks. It is recommended to have legal counsel review any agreements with thirdparty agencies and the hiring of a virtual assistant.

#### 2. Implement a Business Associates Agreement.

Ensure you have a Business Associates Agreement (BAA) with the appropriate entity involved in the remote process.1 The BAA outlines the responsibilities of the virtual assistant (business associate) in safeguarding protected health information (PHI) and ensuring compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations.

3. Defining roles and responsibilities. It is important to clearly communicate the specific tasks and responsibilities assigned to the virtual assistant, while also outlining any limitations on their scope of practice. To ensure a comprehensive understanding of their role in patient care and the boundaries they must adhere to, provide detailed instructions and guidelines. Create a job description and clearly define job duties, including when the virtual assistant should seek assistance from the office staff.

#### 4. Maintain regular communication and supervision.

Consistently evaluate the job performance of virtual assistants. Maintain open lines of communication to address any concerns or questions, and provide feedback and guidance. Consider patient input to address identified issues. By promptly addressing these concerns, you can help mitigate risks and ensure the delivery of quality and safe healthcare services by the virtual assistants.

#### 5. Implement training and oversight programs.

Ensure that the virtual assistant has the training and experience in the tasks you are asking them to be involved with. Provide ongoing training to keep the virtual assistant updated on the latest regulations, protocols, and best practices. Regular check-ins and performance evaluations can help identify and address any issues promptly.

6. Have a contingency plan in place. Develop a contingency plan to address potential disruptions, absence of the virtual assistant, or technical issues. This plan ensures continuity of care and minimizes potential risks to patients.

Virtual assistants offer technological benefits but also bring challenges to cybersecurity and adherence to HIPAA regulations. HIPAA established national standards involving the confidentiality, integrity, and availability of electronic PHI. Compliance with HIPAA regulations prevents data breaches and unauthorized access to patient records, which can lead to significant legal, financial, and reputational consequences.2

Out-of-state virtual assistants may handle patient information across state borders, which can introduce additional privacy and data protection challenges. It is essential to implement robust data security measures and ensure compliance with applicable privacy laws to protect patient information during transmission and storage.

Implementing HIPAA-compliant practices with virtual assistants:

- 1. Establish reliable technology infrastructure and connectivity: Reliable technology infrastructure and connectivity are crucial when utilizing virtual assistants. Ensuring that the virtual assistant has access to stable internet connections, secure communication channels, and reliable technology platforms is important to mitigate the risk of service disruptions or compromised data transmission. If your virtual assistant uses public Wi-Fi, the risk of your business being compromised is significantly higher.<sup>3</sup>
- 2. Provide secure communication channels: Have virtual assistants connect to your network through virtual private networks (VPNs). VPNs enhance security for remote workers accessing the company's IT network. VPNs mask IP addresses and encrypt connections, ensuring secure data.
- Consider adding a two-factor authentication password system for an additional layer of security. Require password updates regularly.
- Enforce role-based access controls (RBAC) for virtual assistants, ensuring that only authorized individuals access sensitive patient information.
- Utilize strong encryption methods to protect data against cybercrime. Install antivirus, ransomware, spyware, and malware protection on all company devices.
- 3. Conduct a risk assessment: Regular risk assessments should be conducted on how PHI is managed remotely. Evaluating the remote use of individual devices for accessing, storing, and sharing electronic health records should be regularly undertaken.4 Keep records of your risk assessment and HIPAA risk analysis for any necessary audits.

- **4. Implement contingency plans:** Develop a contingency plan with backup protocols to address potential disruptions, such as the virtual assistant being unavailable, or technical issues.
- **5. Secure CyberRisk insurance:** Utilizing technology to connect virtual assistants with your medical practice and confidential PHI increases the risk of breaches. Ensure you have adequate coverage.

As technology has advanced, the virtual assistant has evolved. Outsourcing certain workflow tasks can be a cost-effective solution for a busy medical practice, leading to improved patient care services. However,

it's important to acknowledge that there are potential risks that come with these benefits. Prioritizing preparation and risk mitigation when adopting new technologies is crucial for ensuring the safety of both you and your patients.

Deborah Kichler, RN, MSHCA, is a Senior Risk Management and Patient Safety Specialist. Questions or comments related to this article should be directed to DKichler@CAPphysicians.com.

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<sup>1</sup>Practice Compliance Solutions. (2022, November 24). "Virtual Assistants – Legal but Beware." https://practicecompliancesolutions.com/virtual-assistants-legal-but-beware/

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# FDA Extends the Dates of Delayed Enforcement Against Drug Compounders

In the February edition of *CAPsules*, a featured article "Beyond the Prescription: The Role of Compounding Pharmacies in Safe, Effective Treatment," indicated that, "At the time of this writing, the Food and Drug Administration (FDA) delayed enforcement of its regulations until **February 18**, **2025**, for state-licensed pharmacists and physicians compounding, and until **March 19**, **2025**, for outsourcing facilities."

The FDA announced after the February edition *CAPsules* was circulated that these dates have now been extended to **April 22**, **2025**, and **May 22**, **2025**, respectively.

To view the original article, please click here.

### Many Medicare Telehealth Flexibilities Extended Through September 30, 2025

Recent legislation authorized an extension of many of the Medicare telehealth flexibilities that were in place during the COVID-19 public health emergency through September 30, 2025. For more information and details on the extended telehealth access options, please click here.

## **Federal Budget Impact on Healthcare**

by Gabriela Villanueva

Congress has long struggled to fully fund the federal government by passing all twelve appropriations bills on time. The last time there was a fully funded government was in 1997. Since then, there have been a variety of mechanisms used to either partially fund appropriations bills, fully fund some and not others, and offer continuing resolutions (CR) to extend the deadlines. When no compromise can be reached, these issues can lead to either a full or partial government shutdown.

In 2025, Congress was once again unable to pass a complete budget resolution outlining the overall revenue and spending plan for the fiscal year that begins on October 1st. Instead, on March 15, 2025, the President signed a continuing resolution (H.R. 1968) that runs through September 30, 2025, unlocking a budget reconciliation process and averting a government shutdown. This resets the clock for Congress to ultimately continue negotiations. With the current administration focused on cost-cutting and budget reductions, there is increased concern about the potential implications of any agreements reached or resolutions passed unilaterally.

The House Republican majority has set out a budget blueprint directing several congressional committees to procure \$1.5 trillion in spending cuts across programs under their jurisdictions.¹ Healthcare, a critical item of the budget, is speculated to receive a considerable blow as Medicaid (Medi-Cal in California) has become a target for major cuts during this budget reconciliation cycle.

The House Energy and Commerce Committee that oversees Medicaid was tasked to find \$880 billion in savings.<sup>2</sup> The bulk of that amount would come from making funding changes to Medicaid—concerning, since Medicaid currently insures more than 94 million people nationwide and is a popular and heavily relied-upon

safety-net program.<sup>3</sup> The proposed savings would come from changing funding formulas to a per-capita caps amount, also known as a block grant, paid for based on population and not open-ended enrollment.

Per-capita or block grant funding has been proposed before without much success due to heavy opposition by Democrat lawmakers. As a fixed amount of money that the federal government gives to states to provide benefits or services, a block grant results in creating extensive limitations in access and delivery of care. Fixed funding levels would require states to absorb higher costs, or to cut eligibility or benefits. As an enrollment funding model, it provides flexibility and funding security as needs change.

Specific to California is the recently passed ballot proposition securing revenue from the Managed Care Organization (MCO) tax, which amongst other things, is meant for increased reimbursement to physicians for Medi-Cal services. A block grant funding model would deeply curtail the potential of a tax revenue that is based on enrollment numbers.

Recent reports indicate that California has more Medicaid (Medi-Cal) and Children's Health Insurance Program (CHIP) enrollees than any other state in the country. As of April 2023, approximately 13 million people were enrolled in the Medicaid health insurance programs in California.<sup>4</sup>

Gabriela Villanueva is CAP's Government and External Affairs Analyst. Questions or comments related to this article should be directed to GVillanueva@CAPphysicians.com.

<sup>&</sup>lt;sup>1</sup>Hill, Meredith Lee. (2025, February 12). "House budget resolution in limbo as conservatives push deeper spending cuts and work requirements." https://www.politico.com/live-updates/2025/02/12/congress/conservatives-pan-house-budget-resolution-00203868

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# Healthcare Compliance Training For Private Practices: A Key to Operational Success

As a physician, your dedication to delivering exceptional patient care is a priority. That's why it's important to ensure your practice stays compliant with necessary regulations.

Compliance training is an ongoing responsibility that helps maintain a safe, respectful, and sound environment for both your patients and your team.

Staying up to date with regulations like HIPAA, workplace safety, sexual harassment prevention, and OSHA standards is essential for the continued success and sustainability of your practice.

#### **Best Practices for Staying On Top of Compliance Training**

#### 1. Establish a Compliance Culture

Creating a culture of compliance begins with leadership. Cultivate an environment where compliance is part of the daily conversation, not just a box to check off. This means ensuring your entire team understands that compliance matters because it supports the safety and integrity of the practice. From hiring and onboarding to continuing education, your leadership is vital in maintaining a culture of accountability.

#### 2. Regularly Review and Update Policies

The healthcare industry is constantly changing, and so are the regulations that govern it. HIPAA, OSHA standards, and other compliance-related guidelines are updated frequently. It is essential for you and your staff to stay informed about these changes. Make it a habit to review your practice's policies on a regular basis, so that your procedures align with the latest requirements. Proactively updating your policies not only ensures compliance but also reduces the risk of penalties due to non-compliance.

#### 3. Online Training Platforms

Consider using online platforms for quick and easy access to compliance training. There are many platforms and services that offer courses tailored to medical professionals and healthcare settings, so staying up to date is convenient. CAP provides members with access to free HIPAA and Sexual Harassment Avoidance Training and offers discounts on OSHA and Workplace Violence required courses.

#### 4. Conduct Regular Audits

Self-audits are a vital part of staying on top of compliance. By regularly auditing your practice, you can catch potential issues and make improvements before an external agency steps in. This may mean reviewing how patient information

is managed to ensure HIPAA compliance, checking your workplace safety practices, or making sure your sexual harassment policies are being properly followed. It is all about staying proactive and making sure everything runs smoothly.

#### 5. Create a Compliance Checklist

One of the most effective ways to stay organized is by creating a compliance checklist for your practice. This checklist can include key compliance areas such as HIPAA training, workplace safety protocols, sexual harassment prevention, and OSHA standards. By maintaining a clear list of tasks and deadlines, you can ensure that no important compliance details slip through the cracks. A checklist also helps with consistency, so your practice stays on track and compliant, no matter how busy things get.

#### 6. Ongoing Education for Your Team

Ongoing education is essential to keep everyone in your practice informed and up to date. Schedule regular refresher courses to ensure that your team remains well-versed in the latest compliance standards. Additionally, make sure that new staff members receive the necessary training as they join your practice. This ongoing commitment to education reinforces the importance of compliance and helps create a culture of continuous improvement.

Tracking healthcare compliance can feel overwhelming at times, but it is a key part of your practice's long-term success. By making training compliance an ongoing priority and giving your team the right tools and knowledge, you will not only reduce risk but also create a culture of integrity, safety, and professionalism.

Take advantage of resources like CAP's free training and special discounts on courses today.

Contact *My Practice* at 213-473-8630 or via email at ATena@CAPphysicians.com.

Andie Tena is CAP's
Assistant Vice President
of Practice Management
Services. Questions or
comments related to this
column should be
directed to
ATena@CAPphysicians.com.

### Spring 2025 Litigation Education Retreat

## Supporting CAP Members During a Medical Professional Liability Lawsuit

Date: Saturday, April 12, 2025
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3

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4

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Cooperative of American Physicians, Inc. 333 S. Hope St., 12th Floor Los Angeles, CA 90071

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