

The Non-Compliant and Non-Adherent Patient

These tips will help you take the appropriate actions.

BY JOHN V. GUILIANA, DPM, MS



As a podiatrist, you are likely accustomed to dealing with a variety of patients and personalities. Occasionally, you may be challenged by non-compliant patients, a behavior that's detrimental to all care, but even more concerning when treating a patient with diabetes.

Understanding the reasons behind non-compliance can help you determine the most appropriate responses.

Non-Compliant vs Non-Adherent: What's the Difference?

The term "non-compliant patient" generally refers to a patient who intentionally refuses to follow the doctor's treatment recommendations. A non-adherent patient, on the other hand, refers to someone who unintentionally refuses treatment. This resistance could be due to a variety of reasons, such as confusion, not understanding, or feeling overwhelmed. Naturally, non-compliance can be much more difficult to overcome than non-adherence.

Understanding the Non-Compliant Patient

Patient non-compliance and non-adherence is actually more common than most providers think. This is especially true when treating complex conditions like diabetes, where a patient must focus on medication adherence, eye care, foot care, and many other multi-organ system evaluations.

It's important for healthcare providers to remain compassionate and understanding while trying to determine the cause of the non-compliant behavior.

Some of the more common reasons for non-compliance and non-adherence include:

- * Cost and affordability of the proposed care
- * Lack of understanding or comprehension of the advice due to language barriers, cognitive abilities, etc.
- * Lack of a strong patient-provider

relationship. The patient may experience when trying to understand your requests. To stay calm, use breathing techniques and brief "time outs" to help you maintain your professionalism when things feel unmanageable.

2) Document, document, document. It's obviously particularly important to maintain meticulous records when dealing with non-compliant patients. Document what you

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er relationship based on trust

* Denial. The patient may not believe they have a condition that needs to be treated.

* The proposed treatment regimen might be too complex for the patient to manage.

5 Tips for Treating Non-Compliant Patients

1) Be understanding. Be empathetic and recognize the challenges

discussed with the patient all diagnosis and treatment plans, what consequences could occur because of non-compliance, and any questions or concerns the patient or their family may have,

3) Educate. Your patient may exhibit non-compliant behaviors because they simply do not understand the diagnosis or instructions for treatment. Take responsibility for

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helping them. Ask them to repeat back to you what you've said or take the time to describe your instructions in their own words or words they fully comprehend.

4) Set boundaries and enforce them. A patient might exhibit non-compliant behavior because they have strong-willed tendencies to test how far they can push their own agenda. Don't let this common personality trait frustrate you or disarm you. If you impose limits and enforce them, you will be better positioned to help the patient consider the very real consequences of their non-compliance. Always be prepared to follow through with limits that you set, even if they include patient discharge.

5) Avoid ultimatums. Don't threaten a non-compliant patient with ultimatums, but, rather, be ob-

measure physiological functions such as temperature or sweat gland activity. When a patient monitoring system identifies a potential risk factor, such as increased focal skin temperature or decreased skin moisture index, it triggers an alert that can be escalated to your staff, if necessary.

When you receive alerts, addressing them expeditiously helps reduce

care to another provider. Although most states do not require any particular form of notice, a certified letter may help confirm that the letter is received.

Explain the reason for termination in an appropriate manner. Give the patient a reasonable period of time to transfer care to another provider. Although 30 days is common,

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jective when explaining their options to them. Stay focused on the positive outcomes of being compliant, such as avoiding wounds and amputations. Try to avoid a power struggle while you explain the potential scenarios and consequences. Make the patient feel involved in their decisions.

Remote Patient Monitoring and its Effect on Compliance

Remote Patient Monitoring (RPM) refers to the use of tools and medical devices to monitor and collect health data from patients outside of a clinical setting, usually via Internet and Bluetooth technology. It's a significant tool that can help improve patient compliance.

As an example, from a diabetes perspective, RPM often includes tracking glucose levels. For a podiatrist, however, skin integrity, which is crucial for the prevention of wounds and amputations, can be monitored through devices or wearables that

to improve compliance and avoid more devastating and costly complications. According to a study by Mayo Clinic, RPM has shown impressive results, with RPM patient compliance at 72.5% with care plan tasks and lower hospital re-admission rates.

Remote patient monitoring provides opportunities for podiatrists to generate more revenue from reimbursements, while at the same time, not affecting the cost of overheads such as staffing and supplies used during in-person visits.

What If You Need to Terminate a Patient for Non-compliance?

It's essential to understand the balance that exists between terminating a patient properly and abandonment. To avoid any allegations of abandonment, you should start by notifying the patient. You must notify the patient that you are terminating the doctor/patient relationship so that the patient may transfer their

the amount of time required will depend on the circumstances, including the patient's condition. Provide any necessary care during the transition, the extent of which will depend upon the patient's medical condition.

You are not necessarily obligated to find another provider to care for the patient or even recommend another provider, but the patient should act reasonably in facilitating the transfer. At the very least, refer the patient to their insurer or other resources such as your state society that may assist the patient in finding another provider.

Seek advice from your malpractice company before terminating any patient, with the exception of situations in which immediate termination may be justified... if continuing care would pose a serious and imminent threat of harm to the patient, the provider, staff, or others. **PM**



Dr. Guiliana is a nationally recognized speaker and author on topics pertaining to medical practice management. He is a Fellow of the American Academy of Podiatric Practice Management and holds a Master's Degree in Healthcare Management. He has authored numerous columns in various journals and is the co-author of *31½ Essentials to Running Your Medical Practice*, as well as *The Million Dollar Practice...Keys to Success*. Dr. Guiliana is currently a Medical Director of Podiatry for Modernizing Medicine's award-winning technology. He can be reached at John.guiliana@modmed.com.