

<b>ADMINISTRATIVE DIVISION</b> STAF Division of Student Affairs and Academic Support		<b>POLICY NUMBER</b> STAF 7.09
<b>POLICY TITLE</b> Dismissal from Care or Refused Care		
<b>SCOPE OF POLICY</b> Columbia Campus		<b>DATE OF REVISION</b> July 21, 2020
<b>RESPONSIBLE OFFICER</b> Vice President for Student Affairs		<b>ADMINISTRATIVE OFFICE</b> Office of the Vice President

## **PURPOSE**

As part of Student Health Services' (SHS) risk management program, the provision of safe, effective health care is based on a relationship that is therapeutic, collaborative and consists of mutual trust, honesty and respect between the healthcare provider and the patient. To maintain a sound therapeutic environment, good order and civil interaction should be maintained within the facility. Occasionally this collaborative relationship, and/or that healthy environment, may be seriously disrupted by acts or omissions of the patient or others that may require the dismissal of the patient from care and/or loss of his/her eligibility for care. This policy outlines when SHS can dismiss a patient from care.

## **POLICY STATEMENT**

If a patient refuses to participate in therapeutic care, omits or provides inaccurate information, exhibits behavior that disrupts the safety of care or the environment, SHS may end the patient/client relationship and dismiss the patient/client from care. The criteria for dismissing a patient/client from care includes but may not be limited to:

- A. Situations which may warrant dismissal of a patient/client from care or loss of eligibility for care at Student Health Services include:
  1. Persistent refusal to follow, or a history of failure to comply with, prescribed treatment protocols and procedures.
  2. Tampering, altering, improper or illegal use or misuse of prescriptions or medications.
  3. Misrepresentation of information or misrepresentation of the truth or falsifying medical history.
  4. Exhibiting behavior(s) that is/are threatening, aggressive, violent or abusive to medical providers, staff members, other patients or visitors.
  5. Violent or aggressive behavior or threats directed toward medical providers, staff members, patients or visitors.

6. Disruptive, persistently rude or otherwise offensive behavior toward medical provider, staff members, patients, or visitors.
- B. Recommendations for dismissal from care or termination of eligibility for care will be addressed, in writing, by concerned staff members and forwarded to the Medical Director and/or the Executive Director for review.
- C. The recommendation for dismissal of care must be thoroughly supported by documentation and evidence of ongoing communications with the patient/client regarding the issues that are of concern and corrective measures.

## **PROCEDURES**

- A. Staff members who have concerns about a patient/client should discuss the matter with their department or clinic manager/supervisor to determine if other interventions should be considered and/or if the matter should be forwarded to the Executive Director or the Medical Director for review.
- B. If the care and concerns reach the level at which dismissal from care is being considered, the circumstances must be submitted to the Executive Director and/or Medical Director for review. Upon approval of the intent to dismiss from care the provider will advise the patient/client of the intent. If the reason for dismissal of care is due to a verbal or physical threat against the medical provider or staff, the patient/client may be dismissed from care immediately without a letter of intent.
- C. The patient/client must receive in writing the intent to dismiss from care outlining the criteria that must be met and/or time frame in which to meet the criteria (if appropriate). A copy of this letter must be approved by the Executive Director and/or Medical Director prior to being sent to the patient/client.
- D. If the criteria/time frame are not met and the provider intends to dismiss from care, the recommendation for dismissal from care or termination of eligibility will include a summary of circumstances and copies of any correspondence or other documentation relevant to the situation. This includes the previous letter sent to the patient/client outlining the intent to dismiss from care. Care will be taken to ensure that patient confidentiality is appropriately respected under HIPAA and FERPA (if applicable).
- E. The final decision to dismiss patients/clients from care or termination of eligibility rests with the Executive Director after careful review and advice from the Medical Director, legal counsel and/or other appropriate University officials as applicable.
- F. The patient/client will receive a letter, via registered U.S. Mail, stating the dismissal from care and outlining the reasons for the action. It shall include:
  1. A statement of the reason for dismissal.

2. The date on which dismissal becomes effective. The minimum number of days must be at least 30 days unless the reason for dismissal involves a threat to the safety of the health care provider and/or staff member.
  3. Definition of the grace period (if applicable) that will be allowed for the patient/client to find an alternative source(s) of care with written stipulation of the circumstances and process the patient must follow if he/she wishes to be seen during that period. Staff members must ensure the patient's health care is not in immediate danger and must assist with referring outside medical care as appropriate.
  4. A statement that, with the patient/client's written authorization, a copy of his/her medical record will be sent to the new care provider.
  5. A statement that reminds the patient/client of their responsibility for all follow-up care and continued medical/mental health care.
  6. If applicable, a statement that explains the duration of medication and/or prescription refills that will be provided.
  7. A statement of the process to follow to appeal the dismissal of care decision. This appeal must be in writing and directed to the Vice President for Student Affairs.
  8. If relevant, a statement of the duration of the dismissal and the procedure to follow to have the eligibility for care reinstated.
  9. Cases may also be referred to the Office of Student Conduct for review. This office may also take necessary action as indicated by University policies and procedures.
  10. If the intent to dismiss a patient from care is based on the patient/client's difficulty in complying with therapeutic modalities and/or conduct appears rooted in emotional/psychological factors the patient may be referred to the Counseling and Psychiatry Services for evaluation.
  11. Illegal, disorderly, disruptive or other inappropriate, non-clinical behavioral matters will be reported immediately through normal supervisory channels. Assistance from the Campus Police, the Office of Student Conduct, Human Resources (for patients who are also employees) or other departments as necessary, will be requested as appropriate. Reports of the events will be documented after the matter has been resolved and include specifics regarding the resolution.
- G. A patient/client who is dismissed from care from the Health Center, but who is still eligible to use the Counseling and Psychiatry Services, will continue to be billed for the Student Health Fee.

H. A patient/client who is dismissed from care at the Counseling and Psychiatry Services, but is still eligible to use the health center, will continue to be billed for the student health fee.

If a patient/client is dismissed from care at both the Health Center and the Counseling and Psychiatry Services, the patient/client will be charged only for the semester in which the dismissal took place (the fee will not be prorated nor refunded).

#### **HISTORY OF REVISIONS**

<b>DATE OF REVISION</b>	<b>REASON FOR REVISION</b>
June 2011	New Policy Approval
May 2014	Updates for accuracy and content
July 2017	Updates for accuracy and content
July 21, 2020	New policy format, update for accuracy and content