

Managing Patients Who Refuse to Wear Face Masks or Adhere to Other COVID-19 Safety Precautions

Laura M. Cascella, MA, CPHRM

PEACE OF MIND

EXPERTISE

CHOICE

THE MEDPRO GROUP DIFFERENCE

As each week passes, the United States enters uncharted territory in the COVID-19 pandemic. Vaccines have become more widely available, and recent data from the Centers for Disease Control and Prevention show that one-third of the population 18 years or older is fully vaccinated, and more than half of U.S. adults have received at least one dose of a vaccine. Yet, even as vaccination progresses, the rates of COVID-19 continue tick up in many areas.¹

The persistence of the virus brings into question the need to continue with various public health precautions, such as wearing masks, social distancing, and using enhanced hygiene practices. At the same time, COVID-19 fatigue and various other factors have led to increasing pressure for a “return to normal” and loosening of some restrictions. More than a dozen states that previously had mask mandates have lifted them, while slightly more than half of states still have mandates in place.²

Even as state regulations and guidance evolve, healthcare practices may decide – for both safety and liability purposes – to continue requiring masks within some or all parts of the facility, enforcing social distancing, having patients wait outside rather than in common areas, performing temperature checks, asking screening questions, and more.

Because no two practices are alike, each practice should evaluate potential risks and benefits and determine an approach that is in the best interests of their workers and patient population. In doing so, however, practice management and staff should recognize that these decisions might be a point of contention for some individuals, and they should consider how they will manage patients (or others, such as family members or visitors) who might dispute or resist practice policies.

The following strategies can help healthcare practices set expectations related to their protocols, communicate clearly with patients, and manage potentially difficult situations:³

- Develop written policies that reflect the practice's most up-to-date COVID-19 safety protocols. Policies should note the precautions in place, the rationale for these safeguards, and what patients can expect during their visits. Make sure all providers and staff members within the organization are aware of COVID-19 policies and protocols, and clearly and promptly communicate any changes as they occur.
- If the practice's policies differ from state or local standards, consider providing a clear and specific reason for the deviation – e.g., to protect vulnerable patients, patients who haven't had the opportunity to get vaccinated, or patients who are ineligible for vaccination, such as children. Providing an explanation might help educate patients and support adherence.
- Post written policies on the practice's website and communicate them via social media, email, and portal messaging. Make patients aware of policies during appointment scheduling. Reinforce that COVID-19 precautions are part of the practice's overall commitment to maintaining health and safety for patients, providers, staff members, and others who visit the practice.
- Call patients prior to appointments to remind them of the practice's COVID-19 protocols and specific steps they should follow (e.g., bringing masks, waiting outside, answering screening questions, and so on).
- Post signage in appropriate languages at entryways alerting patients and other visitors to safety requirements.
- Make sure that patients are aware that following the practice's policies is a requirement for their appointments. Patients who do not want to adhere will need to reschedule for another time when either (a) they are willing to follow the practice's policies, or (b) the policies have changed in a way that is more acceptable to them.
- Have providers work directly with patients who have serious concerns about wearing a mask due to health issues or medical conditions. In these situations, providers can

address patients' concerns and find possible alternative care options (e.g., the provision of a mask alternative, such as a face shield; after-hours appointments; or telehealth options).

- Keep extra masks in stock to provide to patients in case they forget their masks but are otherwise willing to adhere to the practice's protocols.
- If patients arrive and refuse to wear masks or follow other safety precautions, remind them of the practice's policies as well as the efforts that were made to communicate expectations in advance. As long as patients don't require acute care, they should be asked if they would like to reschedule the appointment for another time (when they can commit to following the practice's policies) or have a telehealth appointment (if appropriate).
- Don't engage in arguments or debates with patients about the validity of COVID-19 precautions or individual civil liberties and rights. Simply explain the practice's policies and commitment to safety and reinforce that they are not negotiable.
- Consider designating certain individuals within the practice to communicate with patients who resist policies or become argumentative. Having a chain of command for escalating situations might be helpful, particularly for staff members who may feel uncomfortable or unprepared to deal with difficult behavior.
- Have a plan in place for dealing with patients who become angry, threatening, or violent. Train staff on de-escalation techniques and security protocols. The safety and well-being of patients and staff members should be the utmost priority, and practices should establish verbal and physical triggers that initiate a call to security or law enforcement.
- Consider role-playing exercises as part of preparing providers and staff members for dealing with patients who are not receptive to the practice's COVID-19 protocols. This type of training can help individuals become more comfortable and ready to manage these situations.

- Document all instances of nonadherence to the practice’s COVID-19 policies in patients’ health records, including the information communicated to them prior to the appointment, the objective circumstances of the encounter, and how the situation was resolved (e.g., the appointment was rescheduled, the patient chose a telehealth appointment, or the patient left the practice without a clear resolution).

Resources

For additional information and guidance, see the following resources:

- [Journal of General Internal Medicine: Responding to Patients Who Refuse to Wear Masks During the Covid-19 Pandemic](#)
- [Medscape: Patients Who Refuse to Wear a Mask: Responses That Won't Get You Sued](#)
- [Physicians Practice: Prepare for Patients Who Refuse to Wear a Mask in Your Practice](#)

Endnotes

¹ Centers for Disease Control and Prevention. (2021, April 19). COVID-19 vaccinations in the United States. Retrieved from <https://covid.cdc.gov/covid-data-tracker/#vaccinations>; Centers for Disease Control and Prevention. (2021, April 18). Trends in number of COVID-19 cases and deaths in the US reported to CDC, by state/territory. Retrieved from https://covid.cdc.gov/covid-data-tracker/#trends_dailytrendscases

² Markowitz, A. (2021, April 16). *State-by-state guide to face mask requirements*. AARP. Retrieved from <https://www.aarp.org/health/healthy-living/info-2020/states-mask-mandates-coronavirus.htm>

³ Adler, E. L. (2020, July 21). *Prepare for patients who refuse to wear a mask in your practice*. Physicians Practice. Retrieved from www.physicianspractice.com/view/prepare-for-patients-who-refuse-to-wear-a-mask-in-your-practice; Lehmann, E. Y., & Lehmann, L. S. (2020). Responding to patients who refuse to wear masks during the Covid-19 pandemic. *Journal of General Internal Medicine*, 1-2. Advance online publication. <https://doi.org/10.1007/s11606-020-06323-x>

This document does not constitute legal or medical advice and should not be construed as rules or establishing a standard of care. Because the facts applicable to your situation may vary, or the laws applicable in your jurisdiction may differ, please contact your attorney or other professional advisors if you have any questions related to your legal or medical obligations or rights, state or federal laws, contract interpretation, or other legal questions.

MedPro Group is the marketing name used to refer to the insurance operations of The Medical Protective Company, Princeton Insurance Company, PLICO, Inc. and MedPro RRG Risk Retention Group. All insurance products are underwritten and administered by these and other Berkshire Hathaway affiliates, including National Fire & Marine Insurance Company. Product availability is based upon business and/or regulatory approval and/or may differ among companies.

© 2021 MedPro Group Inc. All rights reserved.