

Medico-legal risk and your practice

Checklist for Obstetrics and Gynaecology

Understanding your risk is a process of identifying, analysing and evaluating medico-legal risks in your practice.

Managing your risk is a process of selecting the most advantageous method of reducing your exposure to medico-legal risk.

The following checklist will assist you to:

- Assess the medico-legal risk in your practice
- Identify preventable and predictable medico-legal risks
- Develop practical and accessible strategies to minimise your medico-legal risk
- Reduce exposure to litigation and complaints.

This checklist is a starting point that aims to help you identify areas in your practice where you may like assistance. Please note that it does not represent benchmarks for best practice and it does not purport to be fully inclusive or to provide any legal or medical advice.

As a member of Avant you and your staff are entitled to access the Medico-Legal Risk Advisory Service for advice on developing strategies to reduce your exposure to the risk of litigation or complaints.

For more information contact Avant's Medico-Legal Risk Advisory Service on **1800 128 268** or e-mail riskadvisory@avant.org.au



Avant
Australia's Largest MDO

Risk Assessment Checklist

1. Communication with patients

- Patients are familiarised with practice policies, including fees and billing arrangements
- Difficult communication with patients is identified and addressed
- Interruptions are minimised during consultations
- Bad news is delivered to patients with care and sensitivity
- The boundaries of the therapeutic relationship are recognised

2. Patient expectations and patient selection

- Patients' suitability to undergo a procedure is assessed
- Patients know what to expect from their treatment, including post-operative pain, rate of recovery and likely outcome
- Unrealistic expectations are identified and resolved
- Patients who are demanding, hostile, do not take your advice or are disinterested in discussion of treatment are managed appropriately

3. Communication with colleagues and staff

- Roles and responsibilities are clarified with colleagues and staff in relation to continuing patient care
- You work collaboratively with other members of the health care team
- You are available for consultation with junior staff under supervision
- Practice staff have clear roles and responsibilities
- Staff understand about safety, privacy and confidentiality

4. Diagnosis and treatment

- Past entries in the notes are reviewed
- Past and current medical conditions are taken into consideration
- Explanation is given about the need to disrobe, specific instructions are given about what clothing needs to be removed and draping provided.
- A chaperone is offered for any intimate examination
- Colleagues are consulted when you are unsure about patient management, and a second opinion is offered if appropriate
- The need to refer a patient to another doctor is recognised
- Social history is considered when determining treatment plan
- Patients understand the treatment plan
- Treatment is reviewed over time for effectiveness
- Medications are reviewed over time for effectiveness and potential harm
- A multi-disciplinary approach is taken to managing complex problems

5. Consent and disclosure of risks

- General and specific procedural risks are discussed and recorded
- Risks of procedure or treatment that are of concern to or are specific to the individual patient are identified and recorded
- Consent discussions are reflected in the notes and/or in the letter to the referring doctor
- Treatment options are discussed and documented
- Tools such as diagrams and brochures are used to assist explanations to patients
- Patients provide feedback on their level of understanding
- The attendance of family members or partner is welcomed when discussing proposed procedures and consent
- Responsibility for the consent process is taken by the treating doctor
- Estimated costs are discussed and documented prior to a procedure, including likely additional costs associated with procedures
- Interpreter service is available for patients who do not speak English

6. Operative care

- All equipment is checked prior to use
- You are familiar with the theatre environment and team
- If relevant in your state or territory of practice the mandatory "Time out" policy is observed before commencing a procedure
- You personally clarify the operative site and supervise patient positioning
- You know the policies and procedures specific to the facilities you attend
- You comply with the process for reporting incidents and adverse outcomes at facilities you attend
- Junior staff are adequately supervised

7. Post-operative care

- A written protocol is followed for managing patients in the post-operative period
- Discussion is held with patients regarding what they may expect in the post-operative period, including when and how to contact you
- Written instructions are provided to the patient on discharge, including what they should do to aid recovery
- Surgeon and anaesthetist (if necessary) are available to review patients, or responsibility is clearly delegated to an appropriate person
- Arrangements are in place to review patients prior to discharge
- Patients are sufficiently recovered from procedures and sedation prior to discharge

- A plan has been made for managing patients who have travelled a long way or are from out of town
- A report is provided to other treating or referring doctors on the outcome of surgery

8. Antenatal Care

- Patient expectations of labour and delivery are established early in the antenatal period
- Patients are advised of all fees relating to their obstetric care
- Discussion and explanation of all tests and monitoring is undertaken, including the associated risks
- A thorough medical history and health assessment is recorded
- Discussion is held regarding obstetrician availability for delivery and alternative arrangements
- Disclosure on arrangements for shared care and how this affects the patient

9. Labour and delivery

- There is a written protocol for hospital staff on management of patients who present in labour, including when and how you would like to be notified of admission
- CTG tracing is faxed to you if unable to attend immediately when notified of a problem
- Patients administered oxytocins are monitored closely
- Where labour is not going according to plan, discussion with patients regarding a change in the specific mode of delivery is documented, including your advice eg conversion to LSCS for trial of scar
- When reviewing patient in labour the following are documented
 - Time, dilation, effacement, station
 - Any variations in foetal monitoring
 - Time of viewing CTG tracing
 - Any discrepancies between your findings and those in the nursing record
- Your own account of delivery is documented, including:
 - Appearance of liquor
 - If assisted delivery, type of assistance
 - If shoulder dystocia, manoeuvres performed
 - Loops in cord

10. Postnatal care

- Written protocol for postnatal care
- Patients are given written contact details if they have concerns
- Appointment for postnatal check made on discharge
- Patient information provided on postnatal depression, feeding problems, settling in at home etc

11. Diagnostic test tracking

- System in place for tracking specimens/tests
- The practitioner reviews, and signs and dates or electronically verifies every result
- System in place for actioning abnormal results

12. Patient referral and follow up

- Urgent appointments are made by the doctor or receptionist and the details are recorded in the patient's file
- Referral letters contain relevant history and clinical details
- A patient follow-up system is in place to monitor compliance or attendance for review
- Attempts to contact or follow up the patient are documented in the patient's file
- Other attending practitioners are kept informed of patient care issues

13. Medical records

- Compliance with Commonwealth and State-based regulations and policies governing medical records
- Data security is maintained
- If computerised, data is backed up regularly. The back-up is kept off-site, is tamper-proof and can be restored
- Records are legible and contain the following information:
 - What the patient tells you about their condition and concerns
 - Objective examination, diagnosis and management plan
 - Discussion of risks and complications of a proposed procedure
 - Details of telephone discussion(s) with patient or colleagues
 - Copies of results and operation reports
 - Copies of referral letters to and from other practitioners
 - Degree of urgency in referral letters
 - Details of post-operative visit and examination

14. Managing adverse events

- Steps are taken to minimise the likelihood of adverse events
- The practice has a protocol for recording and dealing with adverse events and near misses
- The underlying cause of an adverse outcome is identified
- Response to an adverse event is timely and empathetic
- Avant is notified of incidents that may give rise to a claim and/or a complaint

15. Complaints handling

To a complaints body:

- Avant is notified of all complaints to your registration board or complaints body
- Advice is sought from Avant before responding to such complaints

Direct patient complaints:

- There is a written policy in your practice for dealing with complaints, with which staff are familiar
- Complaints are responded to in a timely manner
- There is a willingness to resolve grievances and complaints
- Staff have designated roles and appropriate training in dealing with complaints
- The practice encourages feedback from patients
- The practice has a procedure for review of complaints
- Avant is notified of serious complaints

16. Appointment systems

- The doctor determines action for cancellations and 'did not attends'
- A permanent record kept of cancellations and 'did not attends'
- Provision is made for urgent consultations
- A backup/restore system is used for computerised appointments
- A schedule of antenatal visits is included in the patient information kit

17. Telephone enquiries

- Protocol in place on what and when information can be disclosed over the telephone
- Telephone calls recorded in book/carbonised pad/electronically
- System in place to ensure phone calls are returned

18. Confidentiality and Privacy

- The practice complies with Privacy legislation and has a written policy
- Practice staff understand when patient information can be released and to whom
- Patient details cannot be overheard or viewed by patients in the waiting room
- Medical records, appointment book and computer screens are away from public view
- All staff sign a confidentiality agreement

19. Policy and procedure manual

- Contains current policies and procedures
- Staff are familiar with the content of the manual

20. Staff orientation and training

- Orientation program for new staff
- Job descriptions reflect what staff are expected to do in the practice
- Job descriptions are signed by staff and employer

- Clear delineation of roles and level of authority
- Training is available to staff to reflect the needs of their position

21. Medication storage and prescribing

- Controlled substances are stored and prescribed in accordance with state regulations
- Each patient's file contains a medication summary
- Patients are assessed before prescriptions are prepared
- Patients are provided with information about any medication prescribed, including risks and alternatives
- Consent is obtained when prescribing new medication
- There is a system for monitoring patients who have been prescribed addictive medications or those with serious side effects, including dosage, frequency and authorities
- Any samples provided to patients are documented
- Repeat prescriptions are not provided without seeing the patient
- State and Territory legislation is complied with in regard to prescription of addictive or off-label use of medication

22. Advertising, Websites and Publications

- Products and services are advertised in accordance with the relevant legislation (Medical Practice Regulations, the Fair Trading Act, Trade Practices Act, Therapeutic Goods Act)
- Photographs represent realistic results. They are de-identified and used with patient permission
- Promotional material is accurate and realistic and includes sufficient information about the risks and limitations of the procedure
- Promotional material is not misleading and does not raise unrealistic patient expectations
- Website users are clearly informed that information on the site is not a substitute for professional medical advice
- Website content is regularly reviewed, updated and complies with relevant legislation

Avant Mutual Group Limited

ABN 58 123 154 898

Website www.avant.org.au

Freecall 1800 128 268

Freefax 1800 228 268