

# Handling Pressure and Legal Risks in Healthcare



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Practicing in the public sector compared to private practice presents different stresses and challenges. For junior practitioners, in particular the former can be very stressful and they may be more vulnerable having little control over their practice.

A common challenge is that of the workplace environment. The challenges differ but are always present whether you are a solo practitioner or working in a group practice. The hours you work and the type of practice and patients will also present challenges. What is vital is to manage your professional life properly. This includes professional support such as peer review, second opinions and interest groups.

What is equally important is to manage your personal and social life. This means balancing work, play, rest, exercise, relationships, family life, social rhythms, therapy if required and visiting your own GP regularly (this is also stated in AHPRA Codes of conduct Section 9 'Ensuring doctors' health').

As a young practitioner, you are likely to be in your first role for a short period, move between practices (if dental) or within the hospital system (if medical), have no primary allegiance and can at any time walk away from problem, patients, colleagues and settings when you move on to your next role.

## Cognitive dissonance regarding exams for trainees

There is some discomfort in knowing there are two different beliefs. On the one hand, there is 'say what I do' and on the other hand there is, 'what training says I should do'. Consultants need to recognise and manage any conflicts, recognise risk and support trainees. If daily practice is performed to the examination standards, then 'what I do' will be the same as 'what training says I should do'.

Legal hazards can commence with complaints. Some of these can be anticipated but many are unforeseen. Engagement, building trust, doing your best, informed consent and managing complaints professionally and promptly can mitigate consequences.

All practitioners need to be aware of mandatory reporting – of them or by them. Alcohol, or drug use while practicing and sexual misconduct are totally avoidable. The more difficult area to identify and deal with is impairment. Show insight and avoid the cognitive bias that you alone have unique patients needing unique interventions.

All practitioners are fallible and all practice has risks, some inherent. If you can demonstrate the exercise of all reasonable care and skill according to your peers, there can be a successful legal defence.

Finally, some strategies to avoid complaints. These are not new but are worthwhile repeating:

- Keep well, fresh, fit and healthy
- Recognise when you need to rest and avoid exhaustion
- Do not harass others
- Communicate well at the point of consultation
- Obtain informed consent
- Be honest with colleagues and patients and don't raise false expectations
- Do not practice beyond your training, experience and skills – get help when you need it
- Remember the Codes of Conduct ([amc.org.au](http://amc.org.au))
- Utilise open disclosure
- Prompt notification to MIPS of an adverse or unexpected adverse outcome, complaint, claim or investigation (a policy condition)
- Be totally candid with MIPS about what happened
- Reflect and take MIPS' advice

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