Avoiding Ahpra Notifications: 12 Key Tips

Reading time: Donna Dalby

Date created: 28/02/2022

By Daniel Spencer, Panetta McGrath



Despite the instant anxiety brought on by the word 'notification', healthcare practitioners can take positive steps to ensure they are well placed to deal with one that (inevitably) comes their way.

While the receipt of a notification is not within your control, what you do in caring for your patients – from an initial consult through to discharge – certainly is. While it is the quality of the care which is critically important, the documentation of such care is equally so.

We believe that there are a number of 'controllables' for practitioners in seeking to mitigate any adverse finding by the Board. While they may seem onerous at the time, your future self may just praise you for going the extra distance.

We recommend that you:

- Keep full, accurate and contemporaneous clinical records (see Health Records 1hr CPD). This is a challenge with the busyness
 of everyday practice. It is critical for you to record the process of taking informed consent, the actual risks discussed (rather
 than simply stating that they were discussed) and making a note of any documentation you have provided the patient.
 Templates can assist in this regard, provided they are thorough and up-to-date.
- 2. Communicate clearly with patients and colleagues. This cannot be overstated. Try to document all conversations or follow up important conversations with an email where there is potential for dispute (pretty much always!).
- 3. Be open and honest and apologise if something goes wrong. Importantly, do not actively dissuade aggrieved patients (or anyone) from making a notification. That said, be careful about apologising where it could be construed as an admission of liability (see commandment 12).
- 4. Seek the advice of colleagues or mentors when unsure. This may help you defend your decision-making and assists in developing a collegiate profession.
- 5. Respect professional boundaries. Be aware of professional boundaries with patients and colleagues. Seek to terminate a therapeutic relationship at the first sign of a relationship evolving into something personal.
- 6. Use a chaperone where appropriate. Chaperones are there to protect you (as well as the patient). Their presence can be critical when defending allegations of sexual misconduct. It can also be the difference in being out of practice for 12 months or more.

- 7. Be informed and cognisant of Medicare requirements. Be aware of requirements regarding the billing of items. Regularly review Medicare updates and engage in open discussion with colleagues. Don't assume your billing is fine "because everyone else is doing it". This defence won't fly with Medicare.
- 8. Don't self-prescribe and don't prescribe for your friends and family (see Drugs and Prescribing 1011hr CPD). The various codes of conduct stipulate that this should be avoided wherever possible. If you have to do so, be prepared to justify your decision, make a clear record of what you have done, and advise the patient's GP in writing, including your clinical reasoning (unless the patient objects).
- 9. Use Social Media Conduct with caution. Be very careful when using social media (even on your personal pages), when authoring papers or when appearing in interviews. Health practitioners are obliged to ensure their views are consistent with public health messaging. This is particularly relevant in current times. Views expressed which may be consistent with evidence-based material may not necessarily be consistent with public health messaging.
- 10. Engage regularly with a GP and/or psychiatrist/psychologist (See Being the doctor's doctor 1hr CPD). As well as maintaining good mental health, this can assist you if concerns are ever raised that you may have a health impairment which is affecting your practise. Again, it can be the difference between sitting on the side-lines and continuing to practise.
- 11. Be a good colleague and allow your colleagues to support you. Asking for help can prevent a situation escalating out of control.
- 12. Your MDO is your lifeline. Seek advice from your medical defence organisation (MDO) before responding to any complaint. They have generally been there and done it. Put your faith in them and trust their advice.

Any queries, contact MIPS

This information is not intended to be legal advice and as such should not be relied on as a substitute. You may need to consider seeking legal or other professional advice about your individual circumstances as appropriate. Should you wish to obtain further information about products offered by MIPS, you can call us on 1800 061 113 or you can review our Member Handbook Combined PDS and FSG. You may need to consider seeking legal or other professional advice about your individual circumstances as appropriate. Information is current as at the date published.