

# Mind the glitch

Australian  
Doctor.

Software problems could result in a medicolegal disaster for GPs.

**A**CCURATE clinical records — preferably electronic — and robust recall management systems can go a long way in protecting GPs and their medical clinics from adverse legal actions.

Yet inaccurate or incomplete clinical notes can at times result from a glitch in the software system. I have heard many horror stories of clinical data being lost, often during software upgrades or in the migration process. Sometimes these issues were slow to be resolved.

So who is at fault if a doctor is sued for negligence based on a glitch in the computer system?

Karen Stephens, risk adviser with Avant Mutual Group, says some of Avant's members have complained of patient data being corrupted. Examples include the loss of patient summary/history information such as marital history, sexuality, smoking status, alcohol intake and occupation, and even progress notes disappearing into the ether.

Ms Stephens says members have also complained that

some software vendors are slow to respond to complaints.

"Doctors have approached us as they are concerned ... they may get sued for an adverse event or delayed diagnosis due to insufficient or incorrect information in the notes," she says.

"I am unaware of any claims that have been made against our members where the cause of harm to a patient was tied up with a software issue."

If a claim was made against one of their members in which a software package was implicated in causing harm to a patient, what would Avant do? Ms Stephens says Avant would investigate the degree to which the software issue was responsible for the adverse event.

She suggests five common-sense steps to ensure better medicolegal protection:

- Inform the software vendor of the problem and keep copies of those communications.
- Remember the primary source of information is the patient. Involving patients in their treatment by providing an explanation of the importance and relevance of the tests and investigations means they are better placed to be responsible for their own care and follow-up.



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Inform the software vendor of problems and keep copies of those communications.

- Institute your own systems to overcome any shortcomings in the software (eg, undertake random audits of a sample of records over several consultations to identify any possible loss of data).
- Ensure you and your staff are appropriately trained in using the software.
- Ensure appropriate backup of data and updates of software and of hardware to support software.

Training GPs and staff in clinical software use, good record-keeping and documenting problems with vendors is your best protection.

In my division, one doctor has been sued twice for negligence. Both cases were thrown out by the judge because the doctor was meticulous in his electronic record-keeping. Not only had he followed the correct procedures, but he had accurate records to prove his case in both circumstances. ●

**Mr Stewart is the information management program officer for the North East Valley Division of General Practice, Melbourne.**