

## Medical Legal considerations for the ER Team Nov 2019 CMPA Plenary

**Objectives:** Understand the principles and liability associated with delegation and supervision

Develop strategies to improve documentation to enhance patient safety

Demonstrate behaviours that improve team functioning in the ER

What would the courts consider if you were involved in an adverse event?

- A. The trainee's level of training and experience
- B. Whether the delegation was reasonable
- C. Whether the trainee acted in a reasonable and prudent manner
- D. Whether the attending appropriately supervised the trainee
- E. Whether the patient was informed

UBC Faculty of Medicine Postgraduate Medical Education Trainee Supervision Policy:

- Consider first the well-being of the patient
- Recognize your limitations
- Each patient has an MRP
- Educational environment must facilitate safe patient care and effective learning

Responsibility of supervisors:

- Do I have sufficient knowledge of the patient's condition?
- Is it reasonable to delegate?
  - Level of training or expertise
  - Individual's experience and capabilities
- What degree of supervision is required?

PG Trainee Supervision Policy 2019 : Responsibility of the Postgraduate trainee supervisor

- Review the residents findings in a timely fashion (...) and should document in medical record
- Ensure residents are aware of their responsibilities

- Be available (...) and respond in a timely manner
- Consider need for direct supervision
- If trainee performing procedure without direct observation: advise patient and obtain specific consent

Supervisor's scope of practice and training:

- Confine practice to areas of medicine in which they are trained and experienced
- Must not delegate an act that they are not competent to perform personally

Responsibility of trainees:

- Do I have the requisite knowledge and skills?
- Do I know what is expected of me?
- Do I know what to do if a problem arises?
- Have I alerted my supervisor to all of my concerns?

PG Trainee Supervision Policy 2019 : Responsibility of the Resident

Notify the PG trainee supervisor of their assessment and actions with regard to a patient (...) specifically upon:

- Patient admission to a facility or service.
- Significant change in status.
- Prior to discharge from a facility or service.
- In emergency situations.
- When the resident, patient or designate has concerns about status or care.

Responsibility of supervisors and trainees to inform patient of:

- The educational status of the trainee and his level of training/ experience
- The degree of involvement of trainee in the patient's care
- The name of the MRP ultimately accountable for the patient's care

As a supervisor, you may be held liable for harm caused by a junior trainee if there is inappropriate delegation or inadequate supervision

## **Documentation**

What is often missing?

- History and/or physical
  - Pertinent + and -, risk factors, neuro exam
- Vital signs
- Diagnostic reasoning process (differential Dx)
- Discussion
  - Informed consent and discharge
  - Telephone advice
  - Advice from consultants
  - Team discussions

Documentation pitfalls: incomplete, unprofessional, altered, illegible

## **Teams**

What teams do:

Plan forward

Reflect back

Communicate clearly

Manage conflict

The associated behaviours:

Brief (huddles, pause, timeout, check-in)

Debrief

Structured communication (SBAR) and read back

Critical language

**S** situation

**B** background

**A** assessment and action

**R** recommendation, risks, read back

### **Tools that enhance patient safety:**

Graded assertiveness – speaking up, CUS (I'm **C**oncerned, I'm **U**ncomfortable or this is **U**nsafe, This is a **S**afety issue or I'm **S**cared)

Huddles – scheduled and unscheduled

Cross monitoring – “I've got your back”

Briefings – team members, goals, roles and responsibilities, plan of care, what is provider availability through the shift, how is workload distributed, availability of resources?

Debriefing – What went well? What did we learn so we can do better next time? What got in the way that needs to be fixed?

Structured handovers

Psychological safety