



PRACTICE ADVICE

CORRECTING MISTAKES

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HELP! I'VE MADE A MISTAKE!

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Many of us are working in pressurized environments trying to juggle many tasks at one time. Sometimes it seems as though we are always rushing but never catching up. It is at such times that we are vulnerable to making mistakes. I remember sending out my first e-mail blast to the entire CASLPO membership with the wrong Survey Monkey™ link. I was in a rush, and my heart sank as I realized what I had done. For this edition of Practice Advice, we are providing the following advice for the mistakes that some of our brave members have shared with us.

FREQUENTLY ASKED QUESTIONS

Q: I work in a busy hospital and we are currently short staffed. In the rush of the day I forgot to chart on a patient, how should I go about rectifying the situation?

The Proposed Records Regulation states that you must document the date and purpose of each professional contact. CASLPO's [Code of Ethics](#) states

4.1 'Legal Standards Governing Practice' that audiologists and speech language pathologists shall be honourable and truthful in all their professional relations.

When writing a chart note out of time synchronization you should do the following: write actual date of entry and a heading; 'Regarding visit/session carried out on October 30th 2012', then write your chart note. This should be done regardless of whether the chart is paper or electronic. It is very tempting to insert a forgotten note into an electronic chart, however, there is a 'behind the scenes' time stamp in most, if not all, computer systems.

Q: I have sent the wrong patient/client report to a doctor's office, what should I do?

First, contact the doctor's office and ask if they have received the report. If they can locate the report you have two options: one, ask the office to send it back to you, or two, ask them to securely destroy the report through shredding. With either option you must document what happened in your patient/client record along with the proposed solution. If they cannot find the report, it is considered a privacy breach and must be reported. If you work for an organization where there is a designated Privacy Officer, you should report the breach to that individual. If not, you must contact the Information and Privacy Commissioner's

Office of Ontario. It would also be prudent to report the privacy breach to your manager. You will be instructed by the IPC office, which will include contacting the patient/client or family member and explain what has happened. The Information and Privacy Commission provide a notification template which we are including here:

Q: The parents of a child I am seeing have pointed out that I made an error in the assessment report. I inadvertently used the pronoun 'she' instead of 'he'. Do they need to make a request in writing to amend this or can I just go ahead and make the changes and give them the modified report?

A patient/client, or in this case a substitute decision maker (parent) may request alterations in the record. [Personal Health Information Protection Act \(PHIPA\)](#) states:

"If the individual makes an oral request that the health information custodian correct the record, nothing in this Part prevents the custodian from making the requested correction."

In this situation the change in information is undisputed so there is no need to have the family put the request in writing. Certainly you can, and should, make the appropriate change and provide the family with the modified copy of the report. You should also make the change in the patient/client's record in a manner that does not obliterate the original information. In this situation, it would be simple enough to cross out 'she', write 'he', and initial the change. You should also document the whole incident and your solution in the child's chart. An effort should also be made to provide a note of correction to any other recipient of the report.

Remember, whatever the reason, please do not hesitate to contact us here at the College for practice advice. We look forward to hearing from you.