PRACTICAL POINTERS
WHILE ON VACATION OR AWAY FROM YOUR PRACTICE

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It is summer and you have finally managed to clear your schedule long enough to take a much-deserved break. Unfortunately, unlike the case for many people, clearing your desk and leaving a message on your voicemail is not sufficient to prevent problems from occurring in your absence. Before taking time away from your practice, consider the following:

1. Make certain your staff has accurate telephone numbers and other contact information. Discuss with them situations in which you absolutely want to be contacted, which may include problems with specific patients. Remember, your staff knows how hard you work and may be reluctant to contact you on your vacation so clear guidance (preferably in writing) will take the burden off of them and ensure that you receive needed information.

2. Coverage instructions should include procedures for staff on how to deal with potentially or increasingly suicidal patients or those with other dangerous behaviors. After directing a patient per your coverage instruction, the staff should notify you immediately.

3. Leave specific instructions on your voicemail and/or your answering service as to how patients may be directed to services for assistance in your absence. Make sure the information includes instructions about where patients can access care in an emergency, including going to the patient’s local emergency department.

4. Discuss with your partners, or other physicians who will be covering in your absence, those patients about whom you have particular concerns. Again, discuss with them those situations in which you will want to be consulted.

5. Get caught up on dictation (or EHR entry) and sign off on all transcription. If there are patients whom you suspect will need care in your absence, review their individual charts to ensure that someone stepping into your shoes will have the necessary information to maintain continuity of care. Remember, your colleague will not have the benefit of an already established relationship with your patient and may have to gain their trust. Do not put your colleague in the position of looking unsure or inept by leaving behind inadequate records.

6. Prepare patients for scheduled absences. Be specific about the length of time of the absence, and the actual dates of your departure and return.

7. If any of your patients are currently hospitalized, make certain the hospital knows of your absence and your plans for coverage. As necessary, also prepare these patients for your absence.

8. Instruct staff not to release confidential information to any person without your advance approval.

9. Be attentive to potential breaches of confidentiality when using mobile phones, laptops/computers, faxes, voicemail, etc. All the requirements to protect and secure confidential patient information must be maintained although you are away from your usual environment and routine.
10. If you are responsible for the supervision of a non-physician provider (NPP), determine who will act as the supervising physician in your absence and whether it is necessary to convey this information to the NPP’s licensing board.

11. Maintain documentation of all calls to and from a patient and to and from a third party concerning a patient. If you use a paper chart, a form the size of an index card with an adhesive backing that easily fits into a pocket or purse can be used to document calls received outside of the office and can be readily filed in the medical record upon your return to the office.

12. Always lock up prescription pads.

13. Try to anticipate medication refills and determine which of those will require on-going monitoring during your absence.

WHEN COVERING FOR A COLLEAGUE . . .

1. Spend some time with your colleague to learn more about those patients who might require continued assistance during their psychiatrist’s absence.

2. Find out, before your colleague leaves, how to gain access to pertinent medical information about patients during his absence.

3. Know exactly when you are covering and to which institutions your colleague refers patients for hospitalization/in-patient care. Do you have privileges there?

4. Determine whether you will be expected to act in the role of supervising physician for NPPs that your colleague supervises. What obligations must you fulfill? Will this require notification to the NPP’s board? Will this be covered under your malpractice policy?

5. If your colleague’s practice includes managed care patients, will you be paid for covering these patients in his absence?

6. If your colleague will be away for an extended period (more than two weeks), who is expected to handle correspondence and non-medical requests?

Before leaving for that medical conference or a little R&R, remember that advance planning and some risk management steps will go a long way in ensuring your time spent away from the office is pleasurable rather than problematic.

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