# 'Sorry' isn't admission

By Leslie Berry

Independent practitioners have been reassured by a defence body that they are not admitting liability if they apologise when something has gone wrong with their treatment of a patient.

Medical Defence Union chief executive Dr Christine Tomkins said: 'Patients should receive a prompt, open, sympathetic and honest account of what has happened.

'Any patient who has had the misfortune to suffer through an error of whatever nature should receive a full explanation and a genuine apology.'

She said there were no legal concerns about taking this course of action. It was now enshrined in law in Section 2 of The Compensation Act 2006 which said 'an apology, offer of treat-



ment or other redress, shall not of itself amount to an admission of negligence or breach of statutory duty'.

Dr Tomkins added: 'In the

MDU's experience, an explanation and apology at an early stage can help reduce the risk of a complaint and is often all that a patient or a relative wants to hear.' 'In the MDU's experience, an explanation and apology at an early stage can help reduce the risk of a complaint'

**Dr Christine Tomkins (left)** 

New NHS Litigation Authority guidance emphasises that an apology is 'natural and desirable' where there has been an adverse outcome and that an explanation can help patients and their families in these circumstances.

Dr Tomkins added: 'It is occasionally suggested that medical defence organisations actively discourage our members from saying sorry. This is a myth and we welcome another opportunity to set the record straight.

'Doctors have an ethical obligation to offer an apology and an explanation if something has gone wrong and there is no legal reason not to do so.'

### **Insurers criticised**

Policies of some private healthcare insurance companies have been criticised by the BMA's UK consultants conference for 'preventing or restricting patients from exercising choice' about the specialists who treat them.

The meeting also unanimously voiced extreme concern at restrictions on the hospital where patients are treated and the practice of top-up payments to cover any gap between the insurer's funding and the treatment cost.

In a related motion, conference also condemned AXA PPP and BMI hospitals 'in fixing fees for newly-recognised consultants and radiologists respectively'. Consultants demanded a return to setting their own fees.

BMA private practice committee chairman Mr Derek Machin revealed he is to work with patients' representatives to increase the information available to the public about the difficulties that can arise when they buy PMI.

### Cancer buildings kitemark

Macmillan Cancer Support is introducing a kitemark for patient-friendly quality standards in cancer buildings. It will be piloted in November this year and launched nationwide in 2010.

Project manager Nicola Cook said patients would help set standards recognising and rewarding good practice. The Macmillan Cancer Support kitemark will be available to all public, voluntary and private healthcare providers and act as a visible symbol to prove their environmental quality to patients, staff and visitors.

Approved facilities will be highlighted on the Macmillan website

## BMA takes 'more positive' view of electronic billing

The BMA is being described as 'positive' about electronic billing and the role it plays in helping consultants run more efficient private practices.

Electronic bills clearer Healthcode has been asked by the doctors' association to draw up a list of practice software vendors that offer consultants the electronic billing option.

The provider will submit an overview of the process and its advantages for an autumn review of BMA guidance, which recently advised doctors they risked losing control of private practice if handing over billing to third parties.

After clarification talks with Healthcode's managing director Steve Carroll, the association was reported to recognise electronic billing's speed and efficiency.

The company said BMA private practice committee chairman Mr Derek Machin accepted the advantages for consultants in having

bills receipted and not having to chase patients for payments, although he 'understandably' could not guarantee any revised guidance would include a reference to electronic billing.

#### Healthcode wins accolade

Meanwhile, Healthcode has achieved a top security award.

Managing director Steve Carroll explained: 'The protection of patient-identifiable data is critical, with independent practitioners, hospitals and insurers under pressure to ensure the right controls are in place.

'Achieving ISO/IEC 27001 certification demonstrates to our clients our commitment to maintaining data security systems of the highest standard.'

Healthcode processes over £2.5bn bills a year alongside private practice web applications aimed at helping specialists and medical secretaries manage.