



## 1. Pharmacist to handle the incident

Ensure the matter is handled by a pharmacist and preferably the pharmacist involved in the incident. Show concern and willingness to address the situation. If another pharmacist responds to an incident, PDL recommends the pharmacist responsible or involved in the incident considers a personal response to the consumer\* as soon as convenient.

## 2. The importance of saying sorry

Apologising in a way that will not constitute an admission of liability will often calm the situation and may prevent it escalating to a regulator or a demand from a consumer. Examples of apologising without admitting liability include: "I am sorry this has happened"; "I'm sorry this situation has caused you concern/distress." Refer to "The importance of saying sorry" and other relevant articles via member login at [pdl.org.au](https://pdl.org.au)

## 3. Empathise and invite open discussion

Be empathetic and give the individual an opportunity to express their feelings, which may provide further insight for the pharmacist or pharmacy.

## 4. Obtain the contact details of the consumer

Obtain contact details from the consumer if possible. If the person has left the pharmacy and you suspect an error has been made, act promptly to correct the problem, without causing unnecessary alarm. Take all reasonable steps to contact the consumer. This may include going to the consumer's home, with their permission, to retrieve and replace

the item. (Prescribers may not be willing to provide contact details, however they can be asked to contact the consumer and request the person call the pharmacy).

## 5. Assess the clinical impact of the incident

Assess the impact of the incident, including the overall risk of harm. Determine if the wrong drug has been used, or if a dose has been missed. Has any adverse reaction been experienced? If so, immediately contact the prescriber for advice. If the prescriber is unavailable, or in the case of serious concern, it may be appropriate to contact a drug information or poisons information centre for advice or refer the consumer to the hospital. Appendix E in AMH has a list of resources that may be valuable.

## 6. Seek expert advice from PDL immediately

Call PDL on **1300 854 838** to discuss the incident and further actions that may be required.

Report ALL incidents to PDL which involve a patient or their carer, even if the incorrectly dispensed item has not left the premises. Any error that has come to the attention of the patient or carer is an incident. A claim or complaint could be lodged months, or even years later.

## 7. Responding to an incident

Review and verify the reported error. Replacement with the prescribed medicine may be appropriate if it doesn't worsen the outcome for the patient. Consideration of the clinical implications of

a replacement should be undertaken by a pharmacist and/or the prescriber. Do not charge for the replacement. If it was dispensed at another pharmacy, check with that pharmacy and replace if possible.

Retain any evidence such as the returned item, or an image of it, and a copy of the prescription. Occasionally the consumer may seek to retain the incorrectly supplied medicine as evidence of the error. In this instance, allowing the consumer to retain the packaging and offering to dispose of the medicine may be reasonable to minimise the ongoing risk of harm.

Inform the prescriber in the case of a missed dose or incorrect medication as a professional courtesy, including any actions taken.

## 8. DO NOT OFFER COMPENSATION or mention insurance

DO NOT OFFER COMPENSATION – it may be misunderstood as a bribe. A refund is not an offer of compensation and can be provided. DO NOT mention your insurance cover. Do not refer to the regulators unless asked directly. Provide your name and registration number if this is specifically requested.

## 9. Record the incident and retain a personal copy

Record incident details in your organisation's recording system and make a copy for your personal records. These notes may be extremely important in any subsequent defence of a claim or complaint. If the incident involves a dispensing error, make a note on the patient's file. The PDL member portal allows for retention of an incident report logged with PDL. If the internal incident report has more detail, consider retaining a copy for future reference in case you move from that location and further action or complaint occurs.

## 10. Inform the owner and management

Inform the owner and/or senior management of the incident at the earliest opportunity. Regulators expect pharmacy owners to have oversight of incidents. Management may be first to receive a complaint or demand and therefore need to be aware of the incident.

It is important to reflect on the incident and consider any professional practice and procedural changes that may prevent similar incidents in future. Any practice and procedural changes should be documented with protocol version control updated to reflect the change date. Staff meetings, training held and further education completed as a result of the incident should also be recorded.

## 11. Seeking more resources?

Use your member login to the PDL portal at [pdl.org.au](https://pdl.org.au) to access articles designed to support and assist you further with incident management. Call PDL anytime for a non-judgmental discussion or confidential incident and reporting guidance.

\*The Australian Commission on Safety and Quality in Health Care (ACSQHC) produces the Australian Charter of Health Care Rights. This document refers to a consumer as being a patient, carer, family member or other support person.



Call 1300 854 838 or log in at [pdl.org.au](https://pdl.org.au) if you need advice or support in relation to an incident.