

Safety Action Notice

Reference: SAN2606

Issued: 09 September 2026

System C CMM HEPMA incorrect age rounding in infants: potential impact on prescribing and clinical decision-making

Summary

System C's CareFlow Medicines Management (CMM) Hospital Electronic Prescribing and Medicines Administration (HEPMA) system may incorrectly round up the age of infants under 1 year when age is entered in months or weeks. This may adversely affect dose calculations and clinical decision-making.

Action

1. Circulate this notice with all relevant managers, clinical staff and HEPMA system users in paediatrics, neonatology and pharmacy.
2. HEPMA system managers should carry out a risk assessment:
 - assess the risk associated with use of age fields in weeks/months for patients under 1 year
 - consider whether local system configuration changes may be required to mitigate the identified risk, taking account of local clinical, digital and governance arrangements, e.g. disable or suppress display of age in months/weeks (PARMS), where clinically appropriate
 - reinforce manual verification of age when prescribing for infants under 1 year
 - review whether any infants currently receiving treatment, could be affected.
3. Report any adverse incidents or near misses related to incorrect age rounding for infants under 1 year to:
 - Your Health Board's risk management system (e.g. InPhase, Datix, Healthcare Guardian)
 - Scotland's national reporting system: [Incident Reporting and Investigation Centre](#) (IRIC)

Background Information

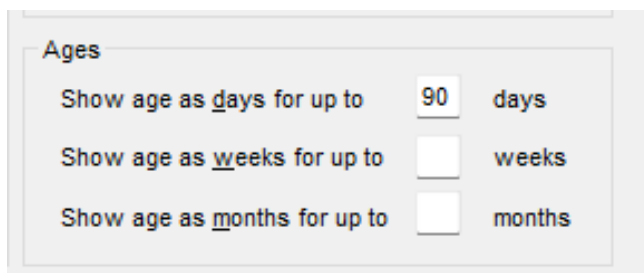
IRIC has received a report of an adverse incident where the System C CMM HEPMA system rounded up an infant's age when entered in months or weeks, leading to potential dosing errors. Clinical best practice requires rounding **down** when age is expressed in months or weeks. While the manufacturer has assessed this as low clinical risk, incorrect rounding up can result in inaccurate age display and adversely influence prescribing decisions.

Incorrect rounding up may occur if the age value entered is greater than or equal to the halfway point, e.g. 5 days rounds up to 1 week; 3 months and 16 days rounds up to 4 months.

System C is not issuing an advisory notice to customers on this issue as it has been assessed as not meeting the safety threshold of its clinical safety processes. However, System C intends to resolve the issue by removing rounding when age is calculated. This is planned for the next release, Version 9.3, which is planned for January 2027.

The user community has reported that a locally-configured workaround is available within the system which prevents display of patient's age in those < 1 years old (System C has advised that it does not currently endorse this workaround and has not recommended its implementation to customers). The workaround is to define the following values in the PARMS function which is part of the local configuration at each NHS Board that determines how age is presented within the patient banner.

Figure 1 Screen capture of locally configured workaround



The screenshot shows a configuration window titled 'Ages'. It contains three rows of settings:

Configuration Option	Value	Unit
Show age as <u>d</u> ays for up to	90	days
Show age as <u>w</u> eeks for up to		weeks
Show age as <u>m</u> onths for up to		months

This presents the patient as '0 years' if between 91 days old and < 1 year old and correctly displays the patients age in days up to 90 days. NHS Boards considering implementation of this locally-developed configuration should undertake appropriate clinical, digital and information governance review and satisfy themselves that the change does not introduce unintended consequences within their local environment.

This Safety Action Notice is intended to raise awareness of the issue, its potential adverse effects, and information provided by users regarding a possible local mitigation pending implementation of the planned software update.

The risk applies not only to prescribing decisions but also to any clinical processes that relies on patient age being displayed accurately.

Enquiries - manufacturer or supplier contact details

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Steve Reggione – Product Director Healthcare Clinical – steve.reggione@systemc.com

Distribution of this alert

This alert has been distributed to Incidents and Alerts Safety Officers (IASOs) in all health boards and local authorities in Scotland. **If you wish to share the alert informally with colleagues**, please inform them that they may also receive it through the formal local distribution. The local distribution may include additional actions tailored to address local needs, agreed upon by the IASO in consultation with department heads and professional leads.

You can contact your local IASO to discuss this alert and who it should be distributed to. If you do not know who your IASO is, you can find their contact details here: [Find your Incidents and Alerts Safety Officer](#).

Suggested onward distribution (may not include all affected departments)

Clinical Director (Paediatrics)
Clinical Director (Neonatology)
Clinical Informatics
Digital Health
Health & Safety
Neonatology

Nursing Directors
Paediatrics
Paediatric Intensive Care Units (PICU)
Pharmacy
Risk Management
Special Care Baby Units (SCBU)

Information about IRIC

Incident Reporting & Investigation Centre (IRIC), Facilities Division, NHS Scotland Assure
Public Services Delivery Scotland, Tel: 0131 275 7575, email: nss.irc@nhs.scot

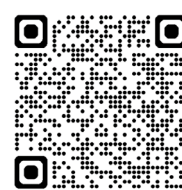
Accessibility: Please contact us using the above details if you are blind or have a sight impairment and would like to request this alert in a more suitable format.

IRIC remit: general information about adverse incidents, safety alerts and IRIC's role can be found in [DL\(2024\)32](#), *Safety of Health, Social Care, Estates and Facilities Equipment: NHS Board and Local Authority Responsibilities*, issued 16 December 2024.

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Public Services Delivery Scotland is the common name for the Common Services Agency for the Scottish Health Service <https://www.nss.nhs.scot/>