

<b>MH Policy and Procedures:</b>	<b>Risk rating</b>	<b>Extreme High</b>	<b>High</b> x	<b>Medium</b>	<b>Low</b>
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**Enter into Risk Management Reporting System any Breakdown in Policy, Process, Issue, Incident or suggestion to improve**

**AIM:**

To respond proactively, and in accordance with the NSQHS Open disclosure Framework, to the patient/ support person concerns, incidents and complaints in a structured and open manner.

**PURPOSE:**

The objectives of the Open Disclosure policy are to:

1. Establish a framework for communicating with patients and their support person, and other stakeholders after an incident or complaint.
2. Ensure that communication with, and support for affected patients and their support person, occurs in an empathetic and timely manner.
3. Ensure that Montserrat has established consistent open disclosure processes.

The key Open Disclosure Principles are:

- To openness and timeliness of communication
- To provide an apology for impact (not admission of fault)
- To discuss a clinical incident with a patient
- To support and train staff
- To provide Patient support
- Clinical governance system for Open Disclosure
- To be confidential
- To be fair

**Related Policy:** Complaint Management document

**RESPONSIBILITIES:**

- The CEO will support the system that staff and Doctors acknowledge when an incident has occurred and initiate the open disclosure process.
- The Director of Clinical Services will ensure the Open Disclosure documentation is in accordance with the policy and procedures.
- All Clinical Managers are responsible for participating in the open disclosure process and will provide support to all staff involved by ensuring staff are adequately trained.
- All staff members are responsible for participating in the open disclosure process.

**DEFINITIONS:**

- **Apology:** an apology to the patient and their support person following an incident/complaint for what has occurred/impression/impact. An apology does not constitute an admission of fault or liability and neither is it relevant to the determination of fault or liability.
- **General Level response:** Involves elements of the open disclosure process. Usually, it involves meeting with the patient, documentation of the incident, and notification to the Clinical Manager.
- **High Level response:** Involves all the steps in the open disclosure process.
- **Incident:** Any event resulting in, or with the potential for, injury, damage or other loss. For the purpose of the open disclosure process an incident will exclude a near miss, or care/services that have not met the expectations of the patient/carer.

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## PROCESS

All Facilities must adhere to any relevant State legislation in regards to Open Disclosure

Refer to Appendix 1 below for a flow chart of the process

1. Patient safety must remain first priority
2. Inform the Manager of the incident/complaint
3. Inform the Doctor of the incident/complaint
4. Inform Executive of incident via the telephone, as soon as is possible dependent upon urgency
5. Enter details of the incident into the Montserrat Day Hospital (MDH) electronic Risk Management System as close to the time of the incident as is possible.
6. Ring the patient or carer to apologise for the impact of the incident/issue, receive their feedback and provide explanation of what you will do and give a time frame for feedback
7. Investigate and Act on investigation findings
8. Ring and/or write the Patient/carer to provide outcome feedback and to see how they are
9. Action plan to resolve causative factor (if relevant)
10. Once the open disclosure process has been triggered, the patient or carer may desire a face to face meeting.
11. The first meeting with the patient and family should occur within 7 days.
12. Information relevant to the process can be included below template (appendix 2), to aid the process and facilitate communication within the health care team.
13. All personnel involved in the first meeting with the patient must read and agree upon the contents of this document.
14. If a complaint is received via email a 24 hour acknowledgement of email is required.
15. There is a survey form to provide patient and carers to establish satisfaction with the process (appendix 3).

### Education for Staff/Patients:

1. Open disclosure learning for all existing and new staff
2. Staff will be informed of resource material at clinical staff meetings
3. Staff will have access to the NSQHS website
4. Patient Pamphlets and handbooks will be available in the reception area of the site
5. Patient handover to include the carer

### Record keeping:

The open disclosure process must be recorded in the "Montserrat Risk System" form

### Reference:

- [2014 NSW Health Policy Directive Open Disclosure](#)
- [Open Disclosure Flowchart Victorian Government Department of Health](#)
- [Health Ombudsman QLD – How to make a complaint form](#)
- [2009 WA Policy Open Disclosure amended July 2012](#)
- [2013 NSQHS the Australian Open Disclosure Framework](#)

### Resources:

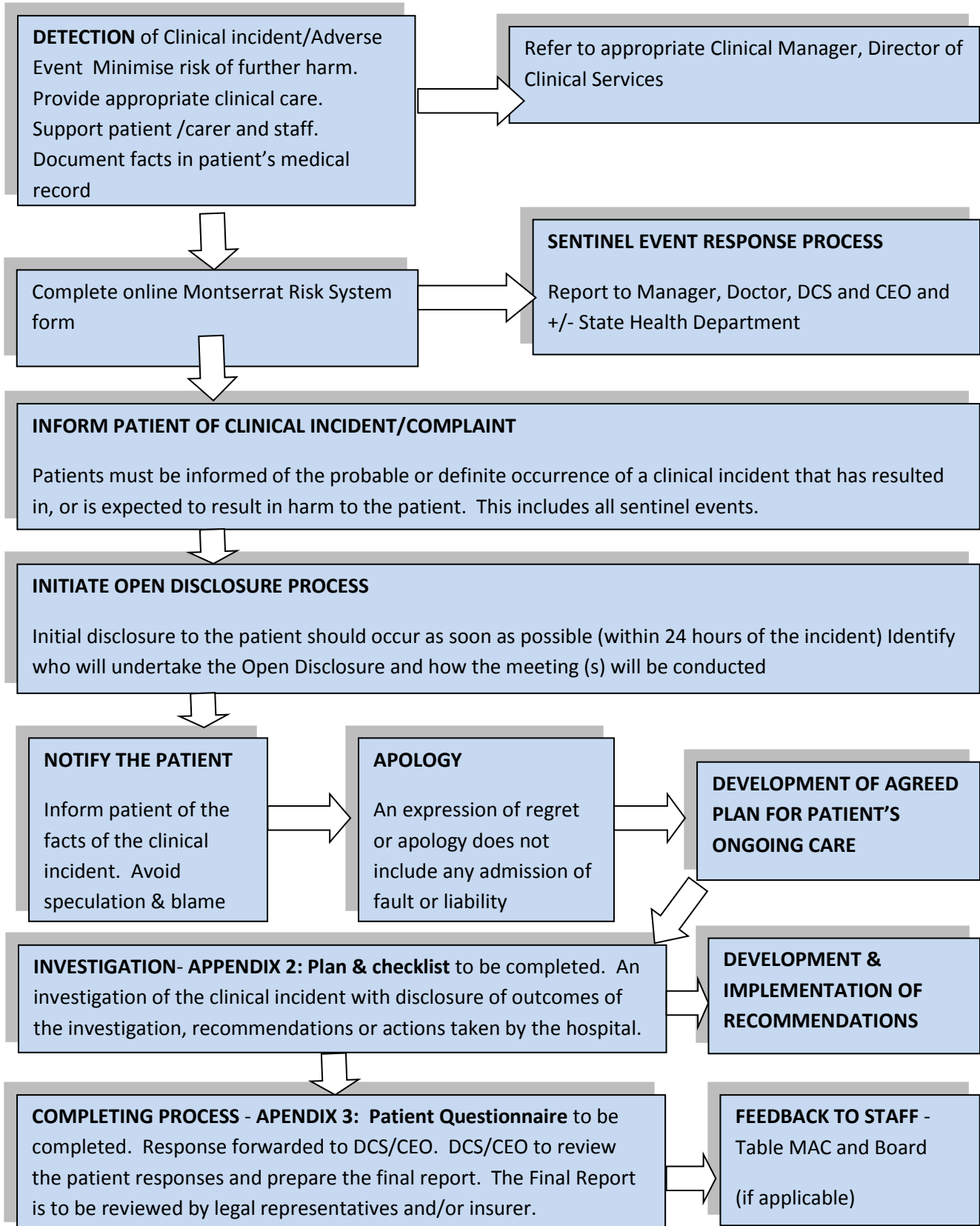
The resources below are available on the Australian Commission on Safety and Quality in health Care National web page under National Safety Quality health Service Standards (NSQHSS) Open Disclosure Resources

#### [NSQHSS Resources](#)

- Resources for Consumers (INCLUDES PATIENT HANDOUT)
- Resources for clinicians and healthcare providers
- Resources for Health Service organisation

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## Appendix 1: FLOW CHART Open Disclosure Flowchart:



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## Appendix 2: OPEN DISCLOSURE PLAN & CHECKLIST Page 1

Patient's full name (including title)	
UR and date of birth	
Admission diagnosis and comments about management etc.	
Patient admission date	
Names and relationships of relevant next of kin/family members/carers	
Date of incident/complaint triggering the open disclosure process	
Incident/complaint description <i>Known facts only</i>	
Incident/complaint outcome <i>Known facts only, avoid cause and effect statements or blame</i>	
Plan for further incident/complaint management and investigation <i>(such as RCA, report to department, Coroner)</i>	
Health professionals involved in patient care <i>Include consultants, anaesthetists and others as appropriate</i>	

### First meeting

Does the patient require an interpreter? <i>If yes, provide details of language and arrangements that have been or to be made</i>	
Has the patient (if able) consented to sharing information with family members/others? <i>Give details</i>	
Has the insurer been notified? <i>Include date of notification</i>	
Date of first meeting	
Location of first meeting <i>Other details such as room booking, arrangements to ensure confidentiality</i>	
Patient/family understanding of the incident/complaint prior to the first meeting	
Person to be responsible for note taking	

### Planning the disclosure dialogue

### Notes

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Who will speak first, provide introductions and so on?	
Anticipated patient concerns at this time if known	
Apology or expression of regret <i>Avoid admissions of liability</i>	
Description of what happened <i>Known facts only, avoid blaming individuals and self</i>	
Listening to patient/family concerns (ensure they feel listened to)	
Discussion of what will happen next <i>(such as OR, further treatment, investigation into the incident)</i>	
Information to be provided about short/long-term effects	

## Appendix 2: OPEN DISCLOSURE PLAN & CHECKLIST Page 2

Assurance for patient/support person that they will be informed when further information comes to hand ( <i>DOCTOR ONLY</i> )	
Information about further support available to the patient and family	
Information provided in relation to how to take the matter further at any time <i>(Such as internal and external complaint process. Avoid discussion about compensation without insurer consent, do not give legal advice but suggest patient seeks legal advice if information about compensation sought.)</i>	
Next meeting date and location	

### First meeting outcomes

Actual date and location of meeting	
Names of all present at first meeting <i>Include titles/position/relationship to patient etc.</i>	
Concerns expressed by patient/family including requests for further information to be supplied	
Further support personnel identified <i>(such as social worker)</i>	
Responsibility for documentation of the meeting in the medical record	

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Name(s) of personnel given to patient/family if they have further questions prior to subsequent meetings	
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**Evaluation**

Evaluation of this open disclosure process	

## Appendix 3: OPEN DISCLOSURE PATIENT/CARERS FEEDBACK

**Patient Name:**
**Patient DOB:**
**No. Question**
**Legend : Strongly disagree – SD  
 Disagree – D Neutral - N  
 Agree – A Strongly Agree - SA**

		SD	D	N	A	SA
1	I could have the people I wanted present during discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	I received enough information after the event to understand what happened	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	I understand what the organisation will do to prevent this happening to someone else	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	The doctors and nurses involved in discussions with me were helpful and supportive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	I was provided with an opportunity to speak and be listened to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	My questions were answered to my satisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	I understand how the health organisations investigate a serious incident and tell families about them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	I am satisfied with the outcome of the open disclosure meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	My questions were answered to my satisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	I know who to contact if I have any further questions or if I disagree with the outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	I would rather not have known about what happened	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please add any comments you would like to make about your experience of open disclosure

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