

Open disclosure essentials



Open disclosure refers to the discussion between healthcare professionals and patients, or those close to them, after a patient experiences harm during their care.

Note: This content is a brief summary of the key issues on this topic. Further insights and information can be found on the Avant Learning Centre or by seeking medico-legal advice.

Guiding principles

The [Australian Commission on Quality and Safety in Healthcare](#) confirms the main elements of the Open Disclosure Framework are:

- Open and timely communication
- Acknowledgement of the adverse event as soon as practical
- Offering an apology using the words 'I am sorry' without saying you're liable or responsible (see more [here](#)).
- Supporting and meeting the needs and expectations of the patient
- Supporting and meeting the needs and expectations of those involved in the patient's healthcare
- Integrated clinical risk management and systems improvement
- Good governance systems and processes established prior to adverse event
- Confidentiality

Is open disclosure mandatory?

Yes. Your organisation will have their own open disclosure policies and procedures incorporating this obligation. The [Medical Board of Australia's Good medical practice: a code of conduct for doctors in Australia](#)

also includes the obligation of open and honest communication with your patients.

You may be required by the organisation to participate in the process. Ensure you are familiar with your organisation's policies and procedures on open disclosure in advance. The ACQSH also has some useful resources: [Open Disclosure resources for clinicians and health care providers | Australian Commission on Safety and Quality in Health Care](#) and also see Avant's factsheet [Avant - Open disclosure: how to say sorry](#).

The discussion

Prepare well for the meeting. Review the relevant clinical notes beforehand and have these available to you for the discussion.

Ideally, the individuals involved in the patient's treatment should be part of the discussion. There should also be a senior clinician or the head of department present, to support any junior staff who treated the patient and to demonstrate to the patient that their concerns are being taken seriously. Identify in advance who will lead the discussion. Having someone else present to take notes is also very useful.

If the incident being discussed occurred during an ongoing admission or course of treatment, it may be appropriate to give the patient a choice to continue their treatment with you or offer to transfer the patient's ongoing care to another practitioner or facility. You can also offer to arrange a second opinion for the patient if appropriate.

Documentation

At all stages in the process, documentation must be thorough, contemporaneous and accurate. Only relevant clinical information should be included in the patient record. Incident investigation processes and outcomes should not be filed in the patient record but in a separate secure location, guided by the process in your practice or hospital.

Record facts objectively and document the discussion accurately.

Want more?

Visit the Avant Learning Centre – avant.org.au/avant-learning-centre, for resources including webinars, eLearning courses, case studies, articles and checklists



Checklist

- Acknowledge the event has occurred.
- Apologise: 'I'm sorry this has happened' 'I'm sorry this hasn't turned out as expected'.
- Outline the facts.
- Actively listen to the patient's response.
- Provide information about the investigation and future prevention.
- Provide information and options about the patient's ongoing care, as appropriate.
- Document the discussions accurately and objectively.

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