Open Disclosure

Open disclosure is the open discussion with a client and/or their support person(s) about incidents that resulted, or could have resulted, in harm to a client while receiving care.

Connect: Inner West Community Transport Group Inc is committed to creating a positive culture of trusted and productive communication between clients, support persons and the workforce, in which open disclosure is standard practice. This policy forms part of our broader organisational incident management system.

The purpose of this policy is to:

- Enable Connect to communicate openly with clients, and their support person(s) when an adverse event occurs;
- Ensure that communication with, and support for all affected clients and staff, occurs in a supportive and timely manner;
- Provide a framework for open disclosure that establishes a standardised approach to open disclosure across Connect and adheres to the principles of the *Aged Care Open Disclosure Framework and Guidance*.

Record of policy development

Version	Date approved	Date for review
2	August 2021	August 2024

Responsibilities and delegations		
This policy applies to	Board; staff and /volunteers]	
Specific responsibilities	General Manager	
	Operations Manager	
Policy approval	Board	

Policy context – this policy relates to:		
Standards	National Safety and Quality Health Service Standards Aged Care Quality Standards	
Legislation		
Contractual obligations		
Organisation policies		
Forms, record keeping, other documents		

Definitions

Adverse event: is any event or circumstance which resulted in unintended and/or unnecessary psychological or physical harm to a patient during an episode of health care.

Harm: is any harmful effect arising from an incident and may include disease, injury, suffering, loss of quality of life, impairment, disability or death. Harm may be physical, social or psychological.

Near miss: is an incident that did not cause harm but had the potential to do so.

No-harm incident: means an incident where the patient was exposed, but where no harm resulted.

Procedures

Scope of policy

This policy applies to all communications with clients and their support persons following harm from an adverse event, no-harm incidents, or near misses across all areas of Connect.

While the policy focuses on adverse events, the harm suffered by a client does not have to be serious or permanent for open disclosure principles to apply.

Open disclosure: principles

- 1. Dignity and respect
- 2. Privacy and confidentiality
- 3. Transparency
- 4. Continuous quality improvement

Open disclosure: key elements

Open disclosure consists of five key elements, which are:

- 1. An apology;
- 2. A factual explanation of what happened;
- 3. An opportunity for the client to share their experience;
- 4. A discussion of the potential consequences; and
- 5. An explanation of the steps being taken to manage the incident and to prevent recurrence.

In addition to these core elements, open disclosure includes:

- Identifying when things go wrong
- Acknowledging to the client and their support persons(s) when things have gone wrong;
- Listening and responding appropriately when the client, or their support person(s) express their concerns or feelings;
- The opportunity for the client and/or their support person(s) to ask questions; and
- Providing immediate support to clients and/or their support persons(s), and workers, and addressing their needs to cope with the consequences of an incident.

Open disclosure may involve one discussion, or a series of interactions. The duration of the process will depend on the severity and nature of the incident, the needs of the client and/or their support person(s), how the investigation into the incident progresses, and whether the client has any ongoing care needs as a result of the incident.

Open disclosure: when to disclose

When a **harmful incident occurs**, Connect must inform the client and/or their support person(s). This may include harm from an outcome of an illness or its treatment that did not meet the client or staff member's expectations, or harm resulting from a risk inherent to treatment. Non-treatment incidents which cause harm to a client also require open disclosure. These may include incidents such as; a client slipping and falling while getting out of bed, a provider failing to meet a client's nutritional needs, or a staff member using abusive language towards a client.

When a **no-harm incident** has been identified, Connect will generally inform the client and/or their support person(s). Even though no harm may be immediately apparent, there may be a chance of an

ongoing client safety risk, or their support person(s) may be aware that some kind of mistake or incident has occurred.

For a **near miss incident**, disclosure is discretionary, and is based on whether Connect feels the client would benefit from knowing. This could include situations where there is an ongoing safety risk to the client. Not all near miss incidents require open disclosure, for example, if disclosure may result in distress to clients or their support person(s).

Near miss incidents must be recorded in the incident management system.

Promoting a culture of open disclosure

Connect commits to the following key actions, and will ensure that all workers are trained and supported to implement these actions. Implementation of these actions will contribute to successful open disclosure:

- Establishing good rapport and relationships with clients, as well as their support persons, from the outset of their care;
- Ensuring senior management and Board are committed to, and demonstrate a culture of honesty and effective communication;
- Ensuring that informed consent is obtained, and that the client has reasonable expectations prior to receiving the care, treatment or procedure;
- Accurately communicating the potential risks involved in health care procedures, and care facilities;
- Acknowledging an unexpected event as close to the occurrence of the event as possible, even if further investigation is needed;
- Refraining from speculating on the causes of an incident, making unrealistic promises, or attributing blame;
- Remaining respectful to the client, their support persons, and other workers at all times;
- Communicating compassion and remorse when talking with clients; and
- Listening actively to clients during disclosure of discussions and being conscious of body language.

Open disclosure: process

Connect will follow the below process when implementing open disclosure.

Step 1: Detecting and assessing incidents	 Immediate steps taken to prevent further harm Initiate response Escalate
Step 2: Signalling the need for open disclosure	 Acknowledege the adverse event to the client and/or support person(s) Signal the need for open disclosure
Step 3: Preparing for open disclosure	 Investigation Gather all necessary information to find out what happened
Step 4: Engaging in open disclosure	 Meet with the client and their support person(s) Clearly explain the incident Offer immediate practical and emotional support to the client
Step 5: Providing follow-up	Provide feedback to the client and their support person(s)
r roviding follow-up	Agree on future care
Step 6: Completing the process	 Agree on future care Reach an agreement Provide the client with final written and verbal communication
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Legal liability & precautions

Open disclosure does not, of itself, create legal liability, and acknowledgment of an adverse event is not the same as an admission of liability. However, it is important that workers use the language of apology, concern, and regret without apportioning blame or admitting liability. [Insert organisation name] understands that an apology does not equate to an admission of fault or liability. [Insert organisation name] will refer to [insert relevant state/territory] laws and authorities on details around protected statements of apology or regret.

Workers at Connect will take care not to:

- State or agree that they are liable for harm caused to a client;
- State or agree that another worker is liable for harm cause to the client;
- State or agree that Connect is liable for the harm caused to a client.

Examples of language that may be useful includes:

"I am very sorry this has happened."

"I am sorry that this hasn't turned out as expected."

Client decision making capacity

If a client does not have the capacity to make decisions, an 'authorised representative' will nominate a person to be told information of an incident if the client is subject to open disclosure processes. The authorised representative will be either a legal guardian or an attorney appointed under an enduring power of attorney. The authorised representative may also be a support person nominated by the client.

Responsibility for implementation, compliance monitoring and continuous improvement

The following management positions are responsible for implementation and compliance monitoring of the open disclosure policy in their work areas:

General Manager

Operations Manager

Connect will make every effort to ensure that the most senior staff member involved in a client's care, is responsible for communicating with the client during open disclosure.

Connect will actively seek feedback and use outcomes of open disclosure incidents to inform future improvements to open disclosure processes. Any changes made to open disclosure processes will be monitored for their effectiveness.

Worker support and training

Workers may be affected by being involved in an incident, and may require emotional support and guidance in the aftermath of the incident.

To support staff, Connect will implement the following measures:

- Providing advice and training on the management of incidents, communication skills, and the need for practical and psychological support;
- Informing workers on adverse events and relevant advice, through means such as:
 - Electronic messages to all staff
 - Verbal reporting and discussions at staff meetings and shift handovers
 - Clinical risk handbooks
 - o Newsletters
 - o Noticeboards;
- Promote an environment that encourages peer support and discourages the attribution of blame;
- Have formal support processes and provide facilities for debriefing for those involved in an incident;
- Provide staff with training on how to document and record information when investigating and analysing an incident; and
- Encourage timely consultation with support systems.]

Procedures for review of this policy

This policy will be reviewed and updated if necessary tri-annually, by the General Manager and any changes made will be approved by the Board.

End of document