The Open Disclosure Meeting

Sample Language to assist in Open Disclosure Discussions

(including language to avoid when apologising)

(Based on the MPS A.S.S.I.S.T Model of

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Open Disclosure

Communicating with service users and their families following adverse events in healthcare







people caring for people



Stage of	Sample Phrases
Discussion	
Acknowledgement	"We are here to discuss the harm that you have experienced/the
	complications with your surgery/treatment"
	"I realise that this has caused you great pain/distress/anxiety/worry"
	"I can only imagine how upset you must be"
	"I appreciate that you are anxious and upset about what happened during your surgery – this must have come as a big shock for you"
	"I understand that you are angry/disappointed about what has happened"
Caving County	"I am so sorry that this has happened to you"
Saying Sorry:	Tain so sorry that this has happened to you
Expressing	"I am very sorry that the procedure was not as straightforward as
regret/Apologising	we expected and that you will have to stay in hospital for an extra
	few days for observation"
	"I truly regret that you have suffered xxx which is a recognised complication associated with the xxx procedure/treatment". "I am so sorry about the anxiety that this has caused for you"
	"A review of your care has indicated that an error occurred – I am truly sorry about this"
	"A review of this event has indicated that there were certain failings in the care provided to you. (List failings identified) I am so sorry about this and I would like to offer you my sincere apologies on
	behalf of myself and my team. We are planning the following
	actions to try to prevent this happening again in the future"

Story: Listening to the patient's/service

user's story

Establishing their Story

"How are you since we last met"

"Tell me about your understanding of your condition"

"Can you tell me what has been happening to you"

"Can you tell me your understanding of what has happened"

Demonstrating your understanding of their Story:(Summarising)

"I understand from what you have said that you are very upset and angry about this" You think that Is this correct? (I.e. summarise their story and acknowledge any emotions/concerns demonstrated.

"Am I right in saying that you ...?"

"From what you have told me you have ..., is this correct, have I missed anything"?

Relating your understanding of the story to date

"Is it ok for me to explain to you the facts known to us at this stage in relation to what has happened and hopefully address some of the concerns you have mentioned?"

"Do you mind if I tell you what we have been able to establish at this stage?"

"We have been able to determine at this stage that ..."

"We are not sure at this stage about exactly what happened but we have established that ... We will remain in contact with you as more information unfolds"

	"You may at a later stage experience xx - if this happens you should"
Inquiro	"Do you have any questions about what we just discussed?"
Inquire:	Do you have any questions about what we just discussed:
Encouraging	"We may not be able to answer all of your questions until we have
questions	completed our review of the event.
	"How do you feel about this?
	"Is there anything we talked about that is not clear to you?
	"Do you understand what has happened?"
	"Do you understand what is happening in relation to your care going forward?
	"Have we addressed all of your questions and concerns?"
	"You will likely think of other questions following this discussion.
	Please write them down and I can try to answer them for you when
	we meet next or you can give me a call - here is my office number"
Solutions:	"What do you think should happen now?"
Establishing and	"What is important to you?"
agreeing the plan of	"We are going to keep in touch with you"
care	"Do you mind if I tell you what I think we should do "
	"I have reviewed your condition and this is what I think we need to
	do next"
	"What do you think about that?"
	"These are your options now in relation to managing your condition,
	do you want to have a think about it and I will come back and see
	you later?"

	"I have discussed your condition with my colleague Dr X. We both
	think that you would benefit from xx. What do you think about
	that?"
Travel:	"It is important to us that we find out why this happened. We have
	already commenced a review of the incident to establish the facts."
Marring formularith	
Moving forward with	"We will be taking steps to learn from this event so that we can try
your patient/service	to prevent it happening again in the future"
user: Providing	to prevent it happening again in the future
reassurance and	
ongoing support	"I will be with you every step of the way as we get through this and
	this is what I think we need to do now"
	"We will keep you up to date in relation to our progress with the
	review of the incident and you will receive a report in relation to the
	findings and recommendations of the review team".
	"Would you like us to contact you to set up another meeting to
	discuss our progress with the review?
	"I will be seeing you regularly and will see you next in
	days/weeks.
	"You will see me at each appointment"
	11
	"Please do not hesitate to contact me at any time if you have any
	questions or if there are further concerns – you can contact me by
	"you can contact me by
	•••
	"If you think of any quations would those down on their all a think the
	"If you think of any questions write them down and bring them with
	you to your next appointment.
	services"
	you to your next appointment". "Here are some information leaflets regarding the support services we discussed – we can assist you if you wish to access any of these services"

Language to avoid when apologising/expressing regret to patients/service users

Some examples of wording to be avoided:

- So-called apologies that are vague, passive or conditional:
 - o 'I apologise for whatever it is that happened'
 - o 'Mistakes were made ... mistakes happen'
 - 'These things happen to the best of people..."
 - 'If I did anything wrong, I'm sorry'
 - "We are sorry ...but the mistake certainly didn't change the outcome..."
 - o "I know that this is awful for you.... but believe me, for me it is shattering"
- Any speculative statements and apportioning of blame:
 - 'I would say that the night shift staff probably neglected to write down that you were given this medication...'
 - I am sorry that this has happened I don't know what they were doing/how they could have missed this at xx Hospital
 - o "I don't really know what happened it was probably due to"
- Try to avoid the words "<u>but</u>" and "<u>however</u>" as they often negate the first part of the sentence and can come across as defensive
 - o "I am sorry that you feel that way but....."
 - o "I am sorry if you feel that X was rude to you, however......
- Avoid the use of legal terminology:
 - "It is all my fault I am liable"
 - I made a mistake I was negligent in my actions"

Negligence and liability are matters that are established in a court of law an therefore these terms should be avoided when communicating with patients/service users.