Open communication and engagement policy

This policy and associated documents provide direction and support to ensure open communication and engagement with kiritaki/consumer, whānau and staff following a near miss event, event or complaint.

Who is this policy for?

This policy is for all Southern Cross Healthcare (SCH) staff. While everyone is responsible for identifying and reporting events, open communication should be facilitated by the most senior health care team member (including Medical Specialist / Anaesthetist) who is responsible for the care of the kiritaki/consumer.

Why is this information important?

Open communication is the timely and transparent approach to communicating with kiritaki/consumer and whānau when harm or the potential for harm has occurred (Guidance on open disclosure policies – Health & Disability Commissioner). Following an event or complaint, health care providers should openly and honestly discuss events with them and/or their whānau, thus promoting a relational response, increasing understanding, and helping to facilitate healing, learning and improvement in a way that maintains or restores the tapu and dignity of all people involved.

SCH is committed to the principles of Te Tiriti o Waitangi and will ensure that kiritaki/consumers and their whānau are supported through open communication and restorative processes to meet their individual cultural needs and beliefs to achieve resolution and restore mana.

Our policy upholds the application and obligations of Code of Health and Disability Services Consumers' Rights. Kiritaki – Consumer Rights is reflective of SCH's commitment to learn from adverse events and complaints.

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Definitions

Term	Definition
Adverse event	An event in which a person receiving health care experienced harm.
Always report and review (ARR) events	The 'ARR' list is a subset of events that should be reviewed and reported, regardless of whether a kiritaki/consumers experienced harm. Events will be placed on the list to identify areas of particular interest within the healthcare system, and the list will be reviewed annually by HQSC. ARR reporting will be used to identify areas of concern and provide insights into how fundamental system safety processes can be improved.
Complaint assessment tool (CAT)	A framework that helps the feedback owner managing a complaint assess its seriousness, likelihood of recurrence, and severity. The severity rating helps determine the appropriate actions to take in response to the complaint. See: Complaints assessment tool (CAT).
Complaint	An expression of dissatisfaction received from a consumer regarding an event that has occurred, a system or process, or a named staff member. The complainant requests that the matter be handled through the formal complaint management process.
Event	Any event that occurred resulting in harm, loss or damage to a person or organisation.
Harm	Negative consequences for kiritaki/consumer and whānau directly arising from or associated with plans made, actions taken or omissions during the provision of health care rather than an underlying disease or injury. Harm may be:

Term	Definition
	o **Tinana/Physical** – harm that leads to bodily injury or impairment or disease. This includes limitations in cognitive functioning and skills, including communication, social and self-care skills. o **Hinengaro/Psychosocial** – harm that causes mental or emotional trauma or that causes behavioural change or physical symptoms. o **Cultural** – the marginalisation of a kiritaki/consumer's belief and value systems. o **Wairua/Spiritual** (also known as spiritual distress) – a state of suffering, related to the impaired ability to experience meaning in life through connectedness with self, others, world, or a superior being.
HQSC	Health Quality and Safety Commission
Kawa	Protocols.
Kiritaki	Consumer.
Learning review	A process designed to explore the system contribution to events and to relate the resulting learning products to normal work operations. The process is designed to review negative outcome events and has also been used to understand the pressures and conditions that constitute normal work.
Mātauranga	Māori knowledge.
Near miss	An event that, under different circumstances, could have caused harm but did not and that is indistinguishable from an adverse event in all but outcome. These events provide an opportunity to learn about and improve the system before harm occurs.
Ōritetanga	Equity, equality, equal opportunity.
Privacy	Consumers' privacy will be always maintained. Refer to Privacy Act Policy.
Restorative practice	A voluntary, relational process, where all those affected by an adverse event or complaint come together in a safe and supportive environment, to speak openly about what happened, to understand the human impacts and to clarify responsibility for the actions required for healing and learning.
SafeHub	It is our system for reporting and reviewing adverse events and kiritaki/consumer feedback. Refer to Event workflow process.
Severity assessment code (SAC)	It is a numerical rating assessment tool which defines the severity of harm from events and the required level of reporting and review to be undertaken. Refer Process for management of adverse events.
System	A set of elements or parts that are coherently organised and interconnected in a pattern or structure that produces a characteristic set of behaviours, often classified as its function or purpose. A system must consist of elements, interconnections and function or purpose.
Te Ao Māori	The Māori world encompassing language, protocols, customs and working inclusively with kiritaki and whānau.
Te Tiriti o Waitangi	Māori text of the Treaty of Waitangi.
Tikanga	Māori system of customs and traditions.
Whānau	The family, extended family or group of people who are important to a person receiving a service. Whānau includes a person's extended family, their partners, friends, guardians, or other representatives chosen by the person.
Whanaungatanga	Binding of relationships.

Policy principles

Open communication concepts when an adverse event occurs or a complaint is received, includes the following elements:

Element	Definition
Timing is appropriate and considerate and meaningful of the needs of the individuals involved	Ensuring the kōrero/conversation occurs in an open, timely and sensitive manner in accordance with the Code of Rights. Consideration of the kiritaki/consumer competence to receive and be part of the conversation (e.g. after an anaesthetic or sedative medication) and that they include whānau or a support person if they want to.
Individualised approach depending on requirements of each kiritaki/consumer	Engagement and involvement should be flexible and adapt to individual and changing needs. This includes tinana (physical) and wairua (spiritual) needs and ensures the kiritaki/consumer individual and cultural beliefs, values and needs are respected throughout the communication process.

Element	Definition
Dignity, respect, and compassion	Dignity is concerned with how people feel, think, and behave in relation to the worth or value of themselves and others. Everyone involved should be treated respectfully. Allowing adequate time to consider the relational elements is important to ensuring trust is supported. All interactions and practices should be culturally appropriate with consideration of hui, karakia, whakawhanaungatanga and cultural advocacy as indicated.
Approach is collaborative and open	The review process incorporates the opportunity for kiritaki/consumer, whānau and staff to be involved ensures all questions are adequately addressed and that all participants are heard. Equally, those involved may choose not to be actively involved but may want to receive a summary of the learnings and actions taken as a result.
Clear communication with guidance to individuals involved	Kiritaki/consumer, whānau and staff can find the processes that follow an adverse event confusing. All communications and materials need to clearly describe the process, its purpose and not make assumptions to the participant's understanding.
Equitable	People's roles, experience and interactions mean that the response and impact felt because of an event will differ. The opportunity to learn should be considered alongside the needs of those affected. Seeking information and responding appropriately for those affected.
Restorative approach	Restorative approaches encourage active participation and allow multiple voices and perspectives to be considered. Collaboration and problem-solving look for consensus-based decision making, which reinforces organisational values and helps to build and solidify trusting relationships. By using acknowledging and empowering processes, feelings of anger, alienation and divisiveness can be reduced enabling meaningful systemic and structural causes of harm (if any) to be identified and addressed.

What is open communication?

Open communication (disclosure) is a process of ongoing communication, not a one-off communication. Open communication is completed after an adverse event or near miss occurs.

It must be appropriate to:

- The nature of the event.
- The kiritaki/consumer and their family's individual needs at different times.
- Provide updates as new information becomes available.
- The kiritaki (and whānau) must be fully informed of events and risks associated with events in a way that promotes their individual values, cultural beliefs and works to restore mana. The process must consider appropriate support for the kiritaki and be guided by them. Support may include: the next of kin or nominated support person, whānau, an advocate or consumer representative, a nurse or other SCH representative. Details of who is in attendance are documented as part of the clinical records.

Roles and responsibilities

Refer to appropriate Event reporting and management policy and Consumer complaints and feedback management policy for further detail to responsibilities held by staff.

Role	Responsibility
Medical Specialist / General Manager /Senior Leaders	Ensures the process occurs in an open, timely and sensitive manner and in accordance with the Kiritaki – Consumer Rights , Event reporting and management policy and Consumer complaints and feedback management policy.
	Ensures notification and escalation occur in line with reporting expectations see also Insurer Notification Guidelines and adverse event or consumer complaints management policies (as noted above).
National Clinical Governance Team/Chief Medical Officer (CMO)	Ensures escalation is completed in line with reporting expectations and coordinates notifications to external regulators as indicated.
	Supports clinical teams to ensure reviews are completed in line with guiding policies.

Role	Responsibility
Staff: Service/Department managers, Team leaders (CNL/CDM/TL), Quality (SQRM/QM), Infection Prevention and Control (IPC), Clinical Staff	Are aware of and follow SCH policies and procedures relating to adverse events and consumer complaints (as noted above). Commences and/or supports reviews.
	Ensures reporting in SafeHub is completed and maintains documentation in the patient care records
	Ensures Medical Specialist is kept up-to-date.

SAC 1, SAC 2, and Serious adverse events

Where an event is classified as SAC 1 or SAC 2, the kiritaki/whānau will be:

- Told that an event report has been completed and why, and that it has been recorded in their clinical record where appropriate.
- Advised if a review into the event is happening, when this will be completed, and offered an opportunity to be involved in a review (see HQSC Learning from harm).
- Provided with an opportunity to attend a hui or receive a report of the completed review, findings and learnings.

Associated documents

- ACC Treatment Injury notification and reporting feedback guideline
- Adverse event external agency notification requirements
- Event reporting and management policy
- Complaints assessment tool (CAT)
- Consumer complaints and feedback management policy
- Credentialing and Scope of Practice Guide
- Group media and government relations policy
- Insurer Notification Guidelines
- Consumer/Kiritaki Rights Policy
- Open Communication and Engagement procedure
- Privacy Act Policy
- SafeHub
- Guidelines for second victim care after an adverse event
- Tikanga best practice guidelines

References

- Guidance on open disclosure policies – Health & Disability Commissioner (hdc.org.nz)
- Code of Health and Disability Services Consumers' Rights – Health & Disability Commissioner (hdc.org.nz)
- NHS _ Patient Safety Incident Response Framework supporting guidance: Engaging and involving patients, families and staff following a patient safety incident Version 1 (england.nhs.uk)
- HQSC Learning from harm
- Nga Taero a Kupe (hqsc.govt.nz)
- How to engage with consumers and whānau following an adverse event | Te Tāhū Hauora Health Quality & Safety Commission (hqsc.govt.nz)

CONTENT CONTROL

Published Date: **14 Oct 2024**
Version: **43**
Site: **Network**

Content Owner: **Julia Abbott**
Authorised By: **Chief Medical Officer**