

HACKETTSTOWN REGIONAL MEDICAL CENTER
Administrative Policy and Procedure

SECTION: ADMINISTRATION

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TITLE: DISCLOSURE POLICY

PURPOSE:

To provide a process for communication of adverse events or unanticipated outcomes to patients and /or families.

DEFINITIONS:

For the purposes of this policy, pertinent terms are defined as follows.

Adverse Event: An event that is the negative consequence of care that results in unintended injury or illness, which may or may not have been preventable

Disclosure: Communication of information regarding the results of a diagnostic test, medical treatment or surgical intervention.

Unanticipated Outcome: A result that differs significantly from what was anticipated to be the result of a treatment or procedure.

POLICY:

1. HRMC shall ensure that a patient, in the case of a minor or an incompetent adult, the patient's personal representative, guardian, parent or other family member, as appropriate, is informed of the following:
 - a. Any serious preventable adverse event that affected the patient.
 - b. Any allergic reaction that was not previously documented in the patient's medical history. In addition, HRMC will advise the patient of other circumstances, if known, in which the same allergic reaction might occur, and of known preventive measures, if any, and advise the patient to inform any health care professionals providing future care of the allergic reaction.
2. The patient's attending physician or another health care professional shall make the disclosure required within 24 hours of the time the facility discovers the event.
3. HRMC shall ensure that a patient, or in the case of a minor or incompetent adult, the patient's personal representative, guardian, parent or other family member, as appropriate, is informed of the event or allergic reaction in the following manner:
 - a. In person, if the patient is still in the facility;

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- b. By telephone, if the patient has left the facility and the facility is unable to arrange a face-to-face meeting
 - c. By certified mail, if the facility is unable to contact the patient by telephone.
4. The attending physician will document in the patient's medical record the basis of the determination that disclosure of the adverse event to the patient would seriously and adversely affect the patient's health.
5. The hospital shall ensure that information concerning the serious preventable adverse event or allergic reaction is not disclosed to a family member who is not the guardian or who does not have a medical power of attorney, if the patient has prohibited disclosure of his or her protected health information.
6. If the patient's attending physician determines that informing the patient of the event would seriously and adversely affect their health, then the hospital shall ensure that the attending physician or another health care professional informs a family member of the event, if a family member is available and can be so informed without violating any applicable confidentiality or privacy law.
 - a. In selecting a family member to whom to make the disclosure required first preference is to a spouse, a partner in a civil union, or a domestic partner, adult children or parents, and then, siblings
 - b. The attending physician will document in the patient's medical record the basis for determination that disclosure of the adverse event to the patient would seriously and adversely affect the patient health
7. Report of Unanticipated Outcomes
 - All unanticipated outcomes should be reported on via H.E.R.C.U.L.E.S as outlined in Incident Report Policy AD64. Immediate Notification of the Risk Manager should occur as per the criteria outlined in the policy.
8. Sentinel Event
 - Any event meeting the criteria of a "Sentinel Event" will be reviewed and considered for root cause analysis as per the Sentinel Event Policy AD96C.
 - The Peer Review Process should be considered for all events involving the care and/or treatment by a physician.
9. Patient Complaint
 - The patient and/or family should be referred to the Patient Representative to file a grievance, if necessary.
10. Education
 - Training is available for caregivers uncomfortable with disclosure of unanticipated outcome information.

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Procedure:

1. Conversation Outlines

- a. State what happened [objective statement of the event/outcome] as soon as all relevant facts are known.
- b. Give a clear conveyance of regret.
- c. Identify what steps have already been taken to prevent reoccurrence. If not all facts are known, state what is known and what is being done [investigation, fact gathering, etc] and who will speak to them once the facts are known.
- d. Discuss any change in the patient's care plan and address any areas of concern to the patient or designated decision-maker.
- e. Identify who the patient, family or designated decision-maker will hear from next in the organization and what, if any, steps they will need to take.
- f. Offer support services to the patient and applicable family members (e.g. pastoral care, social services, interpreters, patient representative, etc.).

2. Documentation of Conversation

Documentation should include the following:

- Time, date and place of the discussion.
- Contents of the conversation.
- Any treatment plans discussed.
- All participants in attendance, including support services personnel as outlined above.
- Level of understanding exhibited by the patient, family or designated decision-maker.
- Next steps to be taken by patient and any providers or the staff.

REFERENCE:

NJSA 26:24-12.23 – 12.25