How to disclose a medication incident to your patient

By Grant Fuller and Certina Ho

Every patient has the right to be informed when an incident associated with medication therapy has occurred. Healthcare practitioners need to understand when disclosure is appropriate or necessary and how to properly disclose medication incidents.

In this article, we will suggest a framework for the disclosure of medication incidents. This framework is adapted from the Canadian Patient Safety Institute (CPSI) “Canadian Disclosure Guidelines” and a previously published continuing education lesson on “How to Handle a Medication Error.” We also emphasized the Canadian Medical Protection Association (CMPA) article, “Disclosing harm from healthcare delivery: Open and honest communication with patients.” We would like to provide readers these original resources for further information.

A SUGGESTED APPROACH TO DISCLOSE MEDICATION INCIDENT GUIDELINES

Immediate Actions

1. After a medication incident is discovered, there are immediate actions that must be taken before the disclosure to the patient and family:
   - Attend to the affected patient(s); ensure that their care needs are met.
   - Take immediate measures to prevent similar safety risks from harming other patients or staff.

Is Disclosure of the Medication Incident Needed?

1. After the immediate actions are taken, the care team is addressed, practitioners must decide whether disclosing the medication incident to the patient is appropriate or necessary (Figure 1).
   - Consider the degree of harm the patient experienced or could have experienced. An outcome is considered as a result of this harm. If the harm is severe, consider whether the patient would reasonably want to know about the incident (temporarily or permanently impaired (including mental, physical, sensory functions and body) function(s) or structure(s).
   - "No Harm" refers to the patient not reached but resulted in no injury; "Near Miss" refers to events that could have resulted in patient harm but did not reach the patient; "Aloha" refers to whether the patient reached the patient and resulted in the medication incident; "Generally Disclose" refers to patients for whom the incident is private or necessary and how to properly disclose medication incidents.

APOLOGIES ARE CRUCIAL TO THE DISCLOSURE PROCESS; THEY MAKE PATIENTS FEEL VALIDATED AND RESPECTED.

1. Apologies are crucial to the disclosure process; they make patients feel validated and respected. (Figure 1)
   - Use appropriate non-verbal gestures (e.g., body language, tone of voice, facial expressions).
   - Ensure that harm did not result from anything the patient or family did or did not do.

Preparing the disclosure

1. When a disclosure is necessary, prepare for the initial meeting. Schedule an in-person meeting at the earliest possible practical opportunity. Select a time that is convenient for the patient and family and a place that is private and free of interruptions. Allow adequate time for discussion of the incident.
   - The most experienced healthcare provider who is involved should initiate the disclosure. All other who played a role in the incident should be prepared to discuss relevant events with the patient and family.
   - Anticipate emotions; both the patient and practitioners should have supports available during the disclosure if needed.
   - Assign a staff member as the primary contact for the patient and family throughout the disclosure process.

Disclosure

1. The initial disclosure provides an opportunity for the patient and family to understand what the medication incident was, why and how it might have happened.
   - Focus on the events that led to the incident; use non-judgmental and understandable terminology. Avoid speculation and assigning blame.
   - Encourage the patient and family to discuss the incident from their point of view.
   - Communicate genuine sincerity about the medication incident.
   - Use a personal tone, including terms, which patients feel comfortable.

Figure 1 – Circumstances When Disclosure is Appropriate or Necessary Reference: Canadian Patient Safety Institute Canadian disclosure guidelines: being open and honest with patients and families; November 2011.

Figure 2 – Suggested framework for the disclosure of medication incidents. This framework is adapted from the Canadian Patient Safety Institute (CPSI) “Canadian Disclosure Guidelines” and a previously published continuing education lesson on “How to Handle a Medication Error.” We also emphasized the Canadian Medical Protection Association (CMPA) article, “Disclosing harm from healthcare delivery: Open and honest communication with patients.” We would like to provide readers these original resources for further information.

How to disclose a medication incident to your patient

By Grant Fuller and Certina Ho

Every patient has the right to be informed when an incident associated with medication therapy has occurred. Healthcare practitioners need to understand when disclosure is appropriate or necessary and how to properly disclose medication incidents.

In this article, we will suggest a framework for the disclosure of medication incidents. This framework is adapted from the Canadian Patient Safety Institute (CPSI) “Canadian Disclosure Guidelines” and a previously published continuing education lesson on “How to Handle a Medication Error.” We also emphasized the Canadian Medical Protection Association (CMPA) article, “Disclosing harm from healthcare delivery: Open and honest communication with patients.” We would like to provide readers these original resources for further information.

A SUGGESTED APPROACH TO DISCLOSE MEDICATION INCIDENT GUIDELINES

Immediate Actions

1. After a medication incident is discovered, there are immediate actions that must be taken before the disclosure to the patient and family:
   - Attend to the affected patient(s); ensure that their care needs are met.
   - Take immediate measures to prevent similar safety risks from harming other patients or staff.

Is Disclosure of the Medication Incident Needed?

1. After the immediate actions are taken, the care team is addressed, practitioners must decide whether disclosing the medication incident to the patient is appropriate or necessary (Figure 1).
   - Consider the degree of harm the patient experienced or could have experienced. An outcome is considered as a result of this harm. If the harm is severe, consider whether the patient would reasonably want to know about the incident (temporarily or permanently impaired (including mental, physical, sensory functions and body) function(s) or structure(s).
   - "No Harm" refers to the patient not reached but resulted in no injury; "Near Miss" refers to events that could have resulted in patient harm but did not reach the patient; "Aloha" refers to whether the patient reached the patient and resulted in the medication incident; "Generally Disclose" refers to patients for whom the incident is private or necessary and how to properly disclose medication incidents.

APOLOGIES ARE CRUCIAL TO THE DISCLOSURE PROCESS; THEY MAKE PATIENTS FEEL VALIDATED AND RESPECTED.

1. Apologies are crucial to the disclosure process; they make patients feel validated and respected. (Figure 1)
   - Use appropriate non-verbal gestures (e.g., body language, tone of voice, facial expressions).
   - Ensure that harm did not result from anything the patient or family did or did not do.

Preparing the disclosure

1. When a disclosure is necessary, prepare for the initial meeting. Schedule an in-person meeting at the earliest possible practical opportunity. Select a time that is convenient for the patient and family and a place that is private and free of interruptions. Allow adequate time for discussion of the incident.
   - The most experienced healthcare provider who is involved should initiate the disclosure. All other who played a role in the incident should be prepared to discuss relevant events with the patient and family.
   - Anticipate emotions; both the patient and practitioners should have supports available during the disclosure if needed.
   - Assign a staff member as the primary contact for the patient and family throughout the disclosure process.

Disclosure

1. The initial disclosure provides an opportunity for the patient and family to understand what the medication incident was, why and how it might have happened.
   - Focus on the events that led to the incident; use non-judgmental and understandable terminology. Avoid speculation and assigning blame.
   - Encourage the patient and family to discuss the incident from their point of view.
   - Communicate genuine sincerity about the medication incident.
   - Use a personal tone, including terms, which patients feel comfortable.

Figure 1 – Circumstances When Disclosure is Appropriate or Necessary Reference: Canadian Patient Safety Institute Canadian disclosure guidelines: being open and honest with patients and families; November 2011.