

# Responding to adverse events

Dear Editor,

Berend's article describes the tragic story of the prosecution of a small dialysis centre's medical director.<sup>1</sup> The suggested actions may help those who are being prosecuted. Some important issues like the reaction towards the patients and reactions that prevent prosecution are missing.<sup>2</sup> So his suggestions should be preceded by the following:

- Say 'sorry' to the patient and his relatives and prevent further harm. Offer psychosocial support to prevent a posttraumatic stress disorder or depression.<sup>3</sup> Be supportive, even when patients or relatives act hostile. They have – unintentionally – been harmed by those they trusted. Stay in contact to assist in the recovery. The extra costs (visits, treatment) should be compensated. If permanent disability results, a compensation should be paid apart from the question whether a mistake has been made.<sup>4</sup>
- Organise an in-depth investigation of the causes of the incident that will periodically be communicated. The investigation team should be trained in incident analysis techniques<sup>5</sup> and comes into action if a catastrophe evolves. Immediate action preserves evidence and prevents hindsight bias from those involved. A well-respected physician should lead the team, which can – depending on the issue – be extended with experts. At least one external authority should advise on, and finally approve of, the conclusions to guarantee independency.
- The team also supports the staff involved and judges whether they are emotionally stable enough to continue patient care or should be given time (and support) to recover.<sup>6</sup>
- Open disclosure of the findings by the leading physician to the patient, his relatives or the press is important. The key message is 'which lessons have been learned, and which actions are being taken to prevent relapse'.<sup>4</sup> Patients are strong about the view that they want to be informed about harmful errors and what is done to prevent recurrence.<sup>7</sup>

These actions should be described in a protocol presented on the website of the hospital to inform all parties.

Although open disclosure may cause complaints by patients and legal bodies and assaults by the media, these problems are less than those that arise from defensiveness.<sup>8</sup> Some healthcare organisations (<http://www.safetyandquality.org>) have moved open disclosure into an organisational policy to prevent criminal prosecution and protect health care providers and patients from future incidents and psychosocial damage. It also serves safe and patient oriented care as a moral duty.

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