

1 Purpose

This policy outlines the principles for open disclosure after an incident that results in unintended harm, or had the potential to cause unintended harm, loss or damage, to a person we support.

2 Scope

This policy applies to the following Newcastle Anglican agencies:

Newcastle Anglican Churches (Ministry)	Samaritans	Anglican Care	Newcastle Anglican Schools	Newcastle Anglican Corporate
✓	✓	✓	✓	✓

3 What is Open Disclosure?

Open disclosure is defined in the *Australian Open Disclosure Framework* as an open discussion with a person we support (and/or their support people) about a safety incident which could have resulted, or did result in, harm, loss or damage to a person we support while they were receiving care. Essential elements of open disclosure are:

- an apology or expression of regret (including the word “sorry”);
- a factual explanation of what happened;
- an opportunity for the person we support to relate their experience;
- a discussion of the potential consequences; and
- an explanation of the steps being taken to manage the event and prevent recurrence.

The open disclosure process is a discussion between two parties and may include a series of discussions and exchanges of information that take place over several meetings.

4 Definitions

Adverse event or harmful incident is an incident in which harm resulted, or could have resulted in unintended or unnecessary harm, loss or damage to a person we support.

Adverse outcome is an outcome of an illness or its treatment that has not met the clinician’s or person we support’s expectation for improvement or cure.

Apology is an expression of sorrow, sympathy and (where applicable) remorse by an individual, group or institution for a harm or grievance. It should include the words ‘I am sorry’ or ‘we are sorry’. Apology may also include an acknowledgment of responsibility, which is not an admission of liability.

Harm is an impairment of structure or function of the body and/or any harmful effect arising from an incident, including disease, injury, suffering, disability and death. Harm may be physical, social or psychological.

Higher-level response is a comprehensive open disclosure process usually in response to an incident resulting in death or major permanent loss of function, permanent or considerable lessening of function, significant escalation of care or major change in clinical management, and major psychological or emotional distress. The criteria should be determined in consultation with the person who has experienced harm, and/or their support people. A high-level response may also be instigated at the request of the person who has experienced harm, even if the outcome of the adverse event is not as severe. See also lower-level response.

Incident - refer to adverse event.

Just culture is a culture where people feel supported and are encouraged to identify and report adverse events so that opportunities for systems improvement can be identified and acted on.

Lower-level response is a briefer open disclosure process usually in response to incidents resulting in no permanent injury, requiring no increased level of care, and resulting in no, or minor, psychological or emotional distress (for example, near misses and no-harm incidents). The criteria should be determined in consultation with the person who has experienced harm, and/or their support people. See also higher-level response.

Person/people we support include/s residents, clients, parishes and consumers.

Person-centred is an approach that involves seeking out, and understanding what is important to the person, fostering trust, establishing mutual respect and working together to share decisions and plan care.

Risk is the combination of the likelihood of occurrence of harm and the severity of that harm.

Support people can include family members, carers, partners, friends, guardians, substitute decision makers, social workers, and trained advocates, where available. Open disclosure may involve support people when the people we support would like them to be involved.

Trauma informed is an approach that recognises the symptoms and impacts of trauma and integrates this knowledge into an approach taken which actively avoids re-traumatisation.

Workers refers to all Newcastle Anglican workers, including Anglican Care, Samaritans and Newcastle Anglican Schools, Corporate and Ministry whether workers are full-time, part-time, permanent, temporary, casual or honorary; contractors; consultants; and volunteers.

5 Principles

Newcastle Anglican is committed to the following principles of open disclosure as defined by the Australian Commission on Safety and Quality in Health Care's Australian Open Disclosure Framework and the Aged Care Quality and Safety Commission's Open Disclosure Framework and Guidance.

5.1 Transparent, open and timely communication

Newcastle Anglican fosters transparent and effective communication and a safe and just culture that supports open disclosure practice. This enhances public trust in our aged care, children and family, mental health and disability services.

If things go wrong, the people we support, and their support people should be provided with information about what happened. This should be done in an open, honest and timely manner. The open disclosure process is fluid and will often involve the provision of ongoing information.

5.2 Acknowledging adverse events

All adverse events that have an impact on the people we support, will be acknowledged to have occurred to the people we support so that they can understand how it affects them and have a say in addressing the issue such as making changes to their care.

Newcastle Anglican will acknowledge when an adverse event has occurred and initiate open disclosure as soon as practicable.

5.3 Apology or expression of regret

As early as possible, the people we support will receive an apology or expression of regret for any harm that resulted from an adverse event. An apology or expression of regret should include the words "I am sorry" or "we are sorry". An apology is not an admission of liability.

5.4 Supporting and meeting the needs and expectations of the people we support and their support people

In order to exercise control, make informed choices and get the most from their care and services, the people we support, and their support people, can expect to be:

- a) fully informed of the facts surrounding an adverse event and its consequences;
- b) treated with empathy, consideration, dignity and respect;
- c) listened to, understood and supported in a manner appropriate to meeting individual needs, expectations and preferences including:
 - acknowledging the diverse backgrounds of the people we support by communicating in a culturally safe way;
 - being supported with a person-centred, trauma informed approach to minimise any further trauma being experienced; and
 - ensuring appropriate representation, for example, by an aged care advocate of choice.

5.5 Supporting and meeting the needs and expectations of workers

Newcastle Anglican creates an environment in which all workers are:

- a) encouraged and able to recognise and report adverse incidents and events;
- b) prepared through training and education to participate in open disclosure; and
- c) supported through the open disclosure process.

5.6 Integrated risk management and continuous quality improvement

Thorough service review and investigation of adverse incidents and adverse outcomes will be conducted through processes that focus on the management of risk and continuous quality improvement.

Findings of these reviews will focus on improving systems of care and will be reviewed for their effectiveness. The information obtained about adverse events from the open disclosure process is seen as

an opportunity to identify where things have gone wrong, to understand why and to understand any systemic causes.

Key learnings are applied in a consistent manner across Newcastle Anglican services and are incorporated into quality improvement activity.

5.7 Good governance

Open disclosure is a function of sound governance and is an element of the Newcastle Anglican Clinical Governance, Quality Governance and Risk Management Frameworks. Through our governance processes, adverse events are investigated and analysed to prevent them recurring.

Good governance also involves a system of internal performance accountability, monitoring, analysing and reporting on the quality and safety of care and services through Newcastle Anglican's Executive Leadership Team, Board Committees including the Care Governance Committee, the Board and the Diocesan Council. This ensures that appropriate changes are implemented, and their effectiveness is reviewed.

In Newcastle Anglican, open disclosure is led by the Bishop, the Diocesan Chief Executive, the relevant Executive Director or their delegate/s, based on the level of open disclosure required, for example, a higher-level response or a lower-level response.

5.8 Confidentiality and privacy

The application of open disclosure is to be undertaken with full consideration of the people we support and worker confidentiality and privacy.

Confidentiality and privacy must be maintained consistent with the wishes of the people we support and in compliance with all relevant Commonwealth and State privacy and health records legislation.

Confidentiality and privacy must also be considered in the context of open and timely communication.

6 Information and Assistance

The Director of Assurance, Quality and Risk team, will provide further information and assistance on this policy.

7 Legal and Policy Framework

7.1 Legislation

[NSW Civil Liability Act 2002](#)

7.2 Frameworks

[Aged Care Quality and Safety Commission Open Disclosure Framework and Guidance](#)

[Australian Commission on Safety and Quality in Health Care The Australian Open Disclosure Framework](#)

7.3 Policies

Newcastle Anglican Clinical Governance Framework

Newcastle Anglican Open Disclosure Procedure

Newcastle Anglican Quality Governance Framework

Newcastle Anglican Risk Management Framework

8 Policy Governance

Tier	1
Process Owner	Executive Director Education; ED Families, Community & Services; ED RAC, ED NDIS & Community
Policy Owner	Executive Director Quality Risk and Safety
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