

Health Professionals' Perceptions and Experiences of Open Disclosure: A Systematic Review of Qualitative Evidence.

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Abstract

Background: In 1999 the Institute of Medicine released its seminal report ‘To Err is Human; Building a Safer Health System’, drawing worldwide attention to the issue of patient safety in healthcare. Internationally there is a move towards open disclosure as a standard for professional health care practice. It has been suggested that open disclosure plays a pivotal role in achieving a high level of quality of health care and patient safety, as transparency and discussion about errors builds trust between the patient and the health professional and health system. However, studies suggest that there is a significant gap between the level of endorsement of open disclosure of medical errors to patients by health professionals in theory and the actual level experienced by patients in reality.

Objective: To synthesise the best available research evidence exploring health professionals’ perceptions and experiences of the barriers and facilitators of open disclosure of medical errors to patients.

Design: A systematic review of the qualitative evidence using The Joanna Briggs Institute meta-aggregative approach to qualitative evidence synthesis.

Results: Full text review of 41 papers, with the inclusion of nine (9) papers following critical appraisal by two (2) reviewers. A total of 131 findings were extracted and aggregated into 33 categories. Final meta-synthesis generated two (2) key findings; the barriers to open disclosure included personal fears, professional factors, error factors, patient factors, cultural factors, system related and uncertainties; facilitators to open disclosure include professional factors, error factors, system factors, cultural factors and personal needs.

Conclusion: The factors impacting on open disclosure by health professionals are varied and complex. Evidence shows a structured approach to the disclosure of errors to patients can assist in removing barriers and enhancing facilitators. Further research

is required to investigate the patients' perspective to ensure the process of disclosing errors is appropriate and patient centered.

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Declaration

I, Jacinta Byrth, certify that this work contains no material that has been accepted for the award of any other degree or diploma in any university or any other tertiary institution, and, to the best of my knowledge and belief, contains no material previously published or written by any other person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide and where applicable, any partner institution responsible for the joint-award of this degree.

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30th September

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