

Patient Safety: Informing the Public

Halifax-5 Patient Safety
Conference

Calgary, Alberta
October 21-22, 2005

Informing the Public: Overview

1. Why
2. Guiding principles
3. Why not ?

Hold your Horses

Informing the public is all well and good....

Have we forgotten anybody else?

Forgotten partners

Health disciplines students
Recent health disciplines graduates
Healthcare providers (all of them)
Health educators
Planners/managers
Government agencies

Guiding Principles

1. Tell the truth

- Duh?
- Promote trust
- Build therapeutic relationships
- They will find out anyway...

- Truth telling is a process.... More than one session might be necessary (very scary)

Guiding Principles

2. Speak plainly

- Remember why we have two ears and one mouth
- Never use 37 words when you can get away with 10
- Can you listen and think at the same time?

- Robson's Law: *amount of hair-splitting and obfuscation is inversely proportional to the amount of useful improvement work done in any given case*

Guiding Principles

3. Promote consistency

- Make sure everybody is in the same movie
- Same story inside and out
- Timeliness (this includes proactivity)
- Accessibility (first day of the Olympics...)

- Sounds a lot like standardization and simplification

Guiding Principles

4. Set a large table

- Assumptions are very dangerous
- It is easy to exclude
- It is hard to be inclusive when discussing painful issues

- Defining legitimate sources of information is risky

Guiding Principles

5. Listen and tell stories

- Two ears, one mouth

- Stories are powerful sources of information
- The question should be "what happened?", not "how many" (Berwick)
- Are "observations" a form of evidence?

Informing the public: Why not?

Are there situations where we should be cautious?

Risk assessment tools may help

Establish national consensus

Questions or Comments?

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