

Acknowledging and dealing with adverse outcomes in dentistry

Dentists need to acknowledge that adverse outcomes are an unfortunate, yet very real, aspect of dentistry. Although dentists may do all they can to avoid these outcomes, they won't ever be completely eliminated from dentistry, or any other area of healthcare. Therefore, it's vital that all dentists have considered how they'll manage an adverse outcome should the situation arise.

What to do following an adverse outcome

One of the first steps a dentist must take when there's been an adverse outcome is to discuss this with the patient. It's acknowledged this is a very challenging thing to do, however it isn't optional. The Dental Board of Australia's Code of Conduct states that 'When adverse events occur, practitioners have a responsibility to be open and honest in communication with a patient'. It's well recognised that patients appreciate a healthcare professional being upfront and honest with them by informing them of what's occurred and what this means for their specific situation.

Many practitioners are hesitant to say sorry when informing a patient of an adverse outcome. There is often a concern that this may mean they've

admitted guilt and are then more likely to be held accountable. However, Australian legislation makes it clear that an apology is not an admission of liability. It's best to avoid statements such as "I'm sorry I've done this to you" as this may be considered an admission. An apology needs to be carefully worded and can be as simple as "I'm sorry this has occurred".

When having this conversation with patients, it's important to give them opportunities to ask questions. It needs to be a balanced two-way conversation, not just information given by the dentist. This will ensure the patient has a greater understanding of what's occurred and what the implications are for them. It also assists the patient in feeling part of the treatment process and decision making moving forward.

It's common to hear patients state that they want to know what the practitioner and practice is going to do to avoid a similar situation occurring again to either themselves or other patients. This means you need to explain to the patient what you'll do to understand why the adverse outcome occurred and what measures you'll put in place to reduce the likelihood of it happening again.

Why are these conversations difficult?

It's not uncommon for a practitioner to struggle having this open and honest conversation with a patient following an adverse outcome. This isn't surprising given many people find it challenging to initiate difficult conversations.

In many cases the patient will know there has been a poor outcome as it will be obvious to them. In these cases, there is no avoiding the conversation as the patient will probably confront the dentist. However, there will be occasions where the patient isn't aware, such as when a file has fractured during RCT. There may sometimes be a temptation for a dentist to not inform patients of these cases, possibly thinking they don't need to know. However, this is not an acceptable way to practice. Patients have a right to be informed about their health outcomes and dentists have an obligation to keep them informed.

There are a number of reasons why a dentist may find these conversations challenging, such as:

- > Dentists may be concerned that informing patients of what went wrong and why may increase the likelihood of a formal complaint and demand for compensation.
- > The outcome may be a surprise to the dentist, leaving the dentist thinking "I never thought this would happen to me". If the dentist is struggling to understand what went wrong and why, explaining it to the patient is going to be difficult
- > A dentist may be concerned they're admitting to professional incompetence.
- > A dentist may be worried the conversation will lead to professional or financial repercussions for the dentist or practice.

Benefits of a well handled adverse outcome

There are obvious benefits for both dentists and patients when a poor outcome is well managed.

When a patient has lodged a formal complaint about a health experience, it's quite common for them to state that they've done so as a means for obtaining information and or an apology regarding what occurred and why. It seems that when a situation is not well explained to the patient, they may feel the need to take the matter further, such as a formal complaint, to get the information they need. It also seems that a patient may lodge a complaint when they feel their concerns have been dismissed and they haven't received an appropriate acknowledgement or apology.

This is evidence of two things:

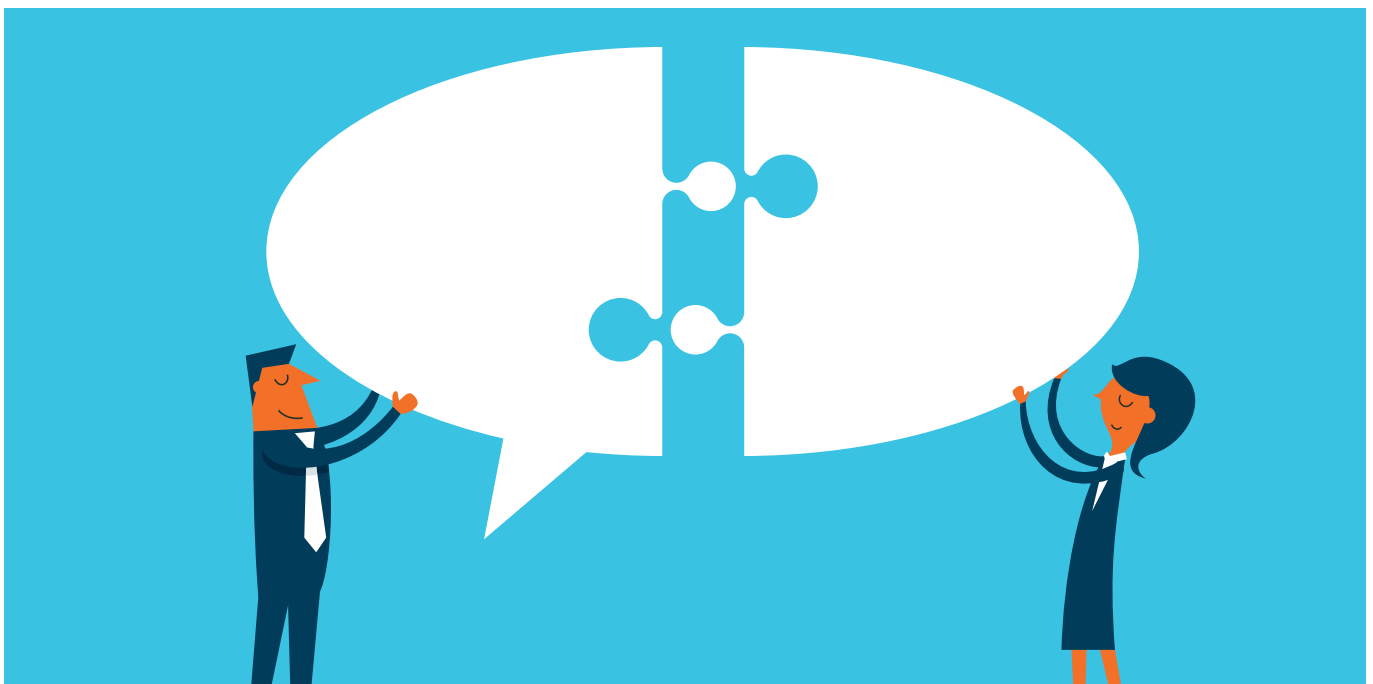
1. Patients don't necessarily complain for financial or malicious means. It's easy to assume that patients complain because they want to receive financial compensation or because they want there to be repercussions for the practitioner who has harmed them. Whilst these may be influential factors in some cases, they aren't in all situations. There are situations where a patient complains simply to receive further information.

2. An open and honest conversation may prevent some complaints from occurring. If the patient feels the dentist has been up front with what's occurred, has provided a commitment to rectify the situation and has provided information about how the situation will be prevented in future, many patients may not feel a need to formally complain. They may also be more likely to continue treatment with that dentist as the relationship and trust still exists.

In summary...

Dentists need to remember that they have an obligation as a registered health professional to provide their patients with honest information following an adverse outcome. However, being obliged to do this shouldn't be the only reason it's done.

It's well recognised that patients expect and appreciate this honest conversation. And having this conversation can go a long way towards the patient deciding whether or not to lodge a formal complaint and whether to continue being treated by that dentist.



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