Dialogue + Collaborative Law + CL/Disclosure Training and Consultation = Improved Patient Safety

Collaborative Processes
Transforming Cultures of Law and Medicine
Promoting Patient Safety

Preventing Medical Error:
Breaking Down Barriers to Patient Safety Through Dialogue Process

What Is Dialogue?
Starting point in developing collaborative relationships necessary to maximize patient safety.
“Dialogue is a communication involving the effort of two or more people to “make something in common, i.e. [create] something new together.” - David Bohm, creator of Bohmian dialogue.
“Everyone came to the dialogue from the fringes, from different perspectives, having had different experiences; now, as we end this session, everyone is moving toward the center.” - Irwin Kash, M.D., participant in dialogue.

How Does It Work?
• Dialogue encourages people to participate in development of shared meaning leading to aligned action.
• Uses shared wisdom of stakeholders to maximize patient safety.
• It is facilitated exchange in which all stakeholders tell their own experiences and listen to the experiences of other stakeholders, looking toward building something entirely new together based on trust, teamwork, community and common goals.

Who Are the Stakeholders?
Health Care Providers (physicians, nurses), attorneys, insurers, patients, risk managers.

Collaborative Law (CL)

What is it?
• Voluntary process where parties and collaborative counsel work together to resolve disputes respectfully -- without going to court
• Core elements of Process:
  • Focus on solutions, not fault
  • Maintain open communication, information and expert sharing
  • Create shared solutions acknowledging the highest priorities of all

Benefits
• Opportunity for healing for ALL the parties through respectful listening, answering questions, supporting each other, offering apology, and compensation where appropriate
• Opportunities for learning and growth, in part by allowing patients/families to influence future patient safety procedures
• Provides physicians/health care providers: confidentiality, active participation in the resolution process, an active role in disclosure and decision making; opportunity to offer an apology, when appropriate, and the opportunity to begin healing

Results
Non-adversarial collaborative processes already demonstrating financial savings and improved patient safety
• Department of Veterans Affairs
• University of Michigan Health System
• University of Illinois Medical Center
• Childrens Hospitals of Atlanta

Patient Safety
How do collaborative practices maximize patient safety?
Support and strengthen existing physician/patient relationships.
Build on existing relationships across professions, relationships developed through dialogue and collaborative law processes.
Provide a non-adversarial, non-punitive forum to address medical errors and their consequences.
Provide opportunity for all parties to address patient safety issues expeditiously when events are fresh in mind of all.
Provide patient/family opportunity to communicate what they observed, make suggestions, and ask questions.
Open channels of communication traditionally closed after medical error, such as those between patient/physician and physician/attorney.
Create a framework in which all parties can work together to create patient safety improvements.

Childrens Hospitals of Atlanta
University of Illinois Medical Center
University of Michigan Health System
Department of Veterans Affairs
St. Francis Medical Center
University of Michigan Health System
Cedars-Sinai Medical Center
University of Illinois Medical Center
University of California at San Francisco
University of Colorado Health Sciences Center
Washington University School of Medicine

Abstract
Description of topic: collaborative law is a non-adversarial, non-punitive forum to address medical errors and their consequences. This open process permits participation of all stakeholders in the response to medical error. This process combines the input of the patients/families, and addresses patient safety concerns immediately, drawing on the expertise available in the institution. The topic area is important because the process begins immediately after medical error has been discovered, rather than waiting until a lawsuit is filed. This collaborative process provides an opportunity for all stakeholders to participate in the resolution process, to address patient safety concerns, and to prevent future errors.

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