#### **Dedicated Family Contact**

Information for staff

NSW Health is committed to supporting everyone impacted by a serious incident involving major patient harm or death.

A dedicated family contact is a staff member assigned to a patient, carer or family following a clinical Harm Score 1 incident.

The dedicated family contact:

- is a consistent point of contact for families during the review process
- establishes rapport and trust with the family
- coordinates communication with the health service during the incident review.

### When do we need a dedicated family contact?

Health Services must undertake a preliminary risk assessment (PRA) for all clinical Harm Score 1 incidents. During the PRA, a dedicated family contact is assigned.

A serious adverse event review (SAER) then takes place. The dedicated family contact provides continuity to the family throughout the SAER.

### What does a dedicated family contact do?

- Identifies any immediate support needs e.g. engage interpreters or social work, arrange accommodation
- Manages communication according to the family's preferences

- Considers any family dynamics and cultural sensitivities
- Respectfully manages expectations about the review including:
  - steps involved
  - o timeframes
  - focus on system issues, not individuals
- Invites and supports the family to provide information to the SAER team leader
- Liaises with the review team and open disclosure team

# When does dedicated family contact touch base with the family?

When first assigned, the dedicated family contact meets and establishes a relationship with the family. They then touch base

- 1. After the preliminary risk assessment
- 2. After the SAER findings
- 3. After the SAER recommendations.

They also contact with the family at other points, as per the family's wishes. This may extend beyond the incident review process.

## Can the dedicated family contact be part of the open disclosure or review team?

The dedicated family contact is not part of the review team or open disclosure team. The dedicated family contact remains separate to avoid confusion.





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The attendance of the dedicated family at open disclosure sessions is determined by the Local Health District.

Staff assigned to the role of dedicated family contact should discuss the appropriateness of attending open disclosure with the dedicated family contact lead.

The dedicated family contact does not:

- explain preliminary risk assessment findings or review findings or recommendations
- · act as an advocate

How does a dedicated family contact interact with the open disclosure team or review team?

The dedicated family contact can set up meetings, raise questions or relay information to or from the family.

## What if the dedicated family contact knows the family?

Wherever possible, it is important that the dedicated family contact is not personally connected to the family. This may not always be possible in rural or remote areas.

# What happens if the family are unhappy with their dedicated family contact?

If difficulties arise that cannot be resolved, the family can raise this with the Director Clinical Governance or another senior healthcare leader

For further information contact your Clinical Governance team or visit www.cec.health.nsw.gov.au



