Early Discussion and Resolution Guidance for Dialysis Facilities

What is Early Discussion and Resolution (EDR)?

Since July 2014, EDR has provided a constructive way forward when, despite everyone’s best intentions, things did not go as planned and the result was a patient’s serious injury or death. An open conversation between healthcare providers and patients about what happened can bring resolution to everyone.

EDR conversations are designed to...

Prevent an unfortunate situation from escalating

Proactively speaking with the patient or family following an adverse event, providing them with a timely explanation of what went wrong and why, and considering fair compensation when appropriate, may avoid litigation and result in a faster and more positive resolution.

Help maintain the provider-patient relationship

This relationship is the keystone of care. When the outcome of care is a patient’s serious injury or death, the relationship can be strained or fractured, even if the provider was not at fault.

An open conversation about what happened and direct steps towards resolution can maintain the provider-patient relationship. By offering information, acknowledging the patient or family’s suffering, and apologizing if care was unreasonable, providers can help patients and families heal. Open conversations rebuild trust, allowing both patients and providers to move forward.

Improve patient safety

An open conversation allows you to hear about the event from the patient’s perspective. This information, along with your event analysis, may reveal system issues that can be swiftly addressed to improve care for future patients.

How is EDR different from my organization’s current process for responding to an adverse event?

Many healthcare organizations have processes in place to respond to concerns raised by the patient or family following an adverse event. Some even have processes for proactively initiating contact with a patient or family. EDR is designed to complement your organization-specific processes.

Integrating EDR offers three major benefits:

1. Confidentiality. EDR communications are protected under state law, while other communications are not. This protection encourages open conversations and can ultimately prevent an unfortunate situation from escalating, restore the provider-patient relationship, and bring greater peace of mind to everyone.

2. Resources to support conversation. Oregon Patient Safety Commission (OPSC) staff connect patients or families to healthcare professionals when either requests a conversation. Staff also provide support for constructive conversation through telephone consultations and written materials. Staff are not present at conversations.

3. Shared learning. OPSC collects de-identified data through a voluntary survey after EDR conversations have concluded. Over time, OPSC will be able to use this rich data set to provide guidance to providers on how to more effectively address and resolve adverse events across Oregon.
What steps can my dialysis facility take to integrate EDR into our current processes?

☐ Create a policy. Lack of planning can delay communication with a patient and contribute to unnecessary distress in an already emotionally charged situation. Establish one protocol for initiating use of EDR following a serious adverse event. Have a second protocol requiring a timely response to a patient’s request for EDR following an adverse event.

☐ Assign responsibility. Identify one or more staff who will take the lead for your dialysis facility to initiate a conversation following an adverse event and respond to a patient’s EDR request. Set each individual up now with an EDR Manager account in the secure EDR Online System, so they will be prepared to implement your protocols.

☐ Get your insurer on board. Discuss your intention to use EDR with your liability insurer(s) now, so everyone will be on the same page when an adverse event happens. If your insurer is not familiar with EDR, OPSC can provide an orientation.

☐ Review your current process. Ensure that your process incorporates these common sense safeguards required by the EDR statute:
  • Participation is voluntary and any party may withdraw from the conversation process at any time.
  • Any party may bring one or more people to the conversation for support and consultation, including an attorney.
  • Any party may request that a qualified, impartial person help facilitate the discussion and explore options for resolution. OPSC maintains a list of mediators who have expressed interest in EDR and who meet certain base qualifications; however, the parties are free to select any mediator.
  • If an offer of restitution is made, the healthcare provider must advise the patient of their right to seek legal advice before accepting the offer.

We are Here to Help
Please let us know if we can help you integrate EDR into your process.

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Get More Information
Visit us online to access resources, including a process flow chart, conversation guidance, and more information about mediation.
edr.oregonpatientsafety.org