

Open disclosure

When and how to do it

Open disclosure principles such as respect, transparency, and empathy are applied daily through good clinical communication - helping to build trust, support patient understanding, and foster a culture of safety and accountability.

This factsheet provides a quick reference guide for Australian health service organisations and staff across all settings and sectors on when and how to perform open disclosure, based on the [Australian Open Disclosure Framework](#) (revised 2026).

What is open disclosure?

Things can go wrong during health care for many reasons, including human error or system failures. Open disclosure is a principles-based approach to honest, empathetic and timely discussions that involves:

- Acknowledging what happened
- Apologising or expressing regret
- Listening to the patient's experience
- Providing clear information about what happened, next steps and follow-up
- Learning to improve care

When should open disclosure be used?

It is important to listen and acknowledge the patient's experience. Open disclosure is expected when:

- Harm has occurred (physical, psychological, or social).

Open disclosure may be considered when:

- The patient raises concerns
- An incident is reported via complaints, feedback, incident management reporting system or surveillance programs
- The patient has not suffered harm; open disclosure may still be appropriate.

Principles of person-centred open disclosure

- Respectful and responsive communication
- Compassionate acknowledgement and apology
- A restorative process
- Cultural safety for Aboriginal and Torres Strait Islander peoples

Using the words 'I am sorry' or 'we are sorry' is essential

How to perform open disclosure

1. Initial disclosure

Occurs as soon as possible after recognising harm or potential harm. Key steps:

- Acknowledge that care didn't go as expected
- Share known facts (avoid speculation and blame)
- Say "I am sorry" or "we are sorry"
- Listen to the patient's experience
- Explain next steps and support options
- Provide nominated contact position details for follow-up

2. Formal open disclosure

Used for serious harm, unexpected death, or when requested by the patient. Planning includes:

- Selecting a designated open disclosure lead and support team
- Identifying patient's needs (e.g. interpreters, cultural safety)
- Scheduling meetings based on patient preferences
- Offering independent facilitator (if needed)
- Documenting all discussions and outcomes

Support and follow-up

- Offer access to counselling, advocacy, and support services for patients and healthcare professionals involved
- Discuss ongoing care needs and costs
- Provide updates on investigation into the incident and planned system improvements
- Ensure continuity through a nominated contact person

Legal protection

All Australian jurisdictions have their own apology laws that protect sincere apologies from being used against clinicians in legal proceedings. The information provided in this resource is a guide only.

Consumer resources

The Commission has developed a range of [open disclosure resources for consumers](#).

For more information

Please visit: <https://www.safetyandquality.gov.au/clinical-topics/open-disclosure>

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