

### Safety-netting advice

- a way to avoid harm from diagnostic errors

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44%





"Medicine is a science of uncertainty, and an art of probability"

William Osler



"Doubt is not a pleasant condition, but certainty is an absurd one"

*Voltaire* 



# Safety-netting



## Safety-netting

Be open about that the diagnosis is not 100% certain

Tell the patient what to expect if the diagnosis is correct,

what look out for if it is not,

and when and where to re-consult



#### **Objective**

 To explore clinicians' and patients' experiences of diagnostic uncertainty and their views on how safety-netting can be successfully applied in primary and emergency care settings



#### **Method**

- Performed in a Swedish setting.
- An exploratory research design was used, based on six interviews and two focus group discussions, involving a total of nine clinicians working in primary and emergency care, as well as seven patients and one family caregiver with experiences of diagnostic uncertainty.
- Data were analyzed inductively, using the framework method.
  The COREQ guidelines for reporting qualitative research were used.



#### Results – To manage diagnostic uncertainty

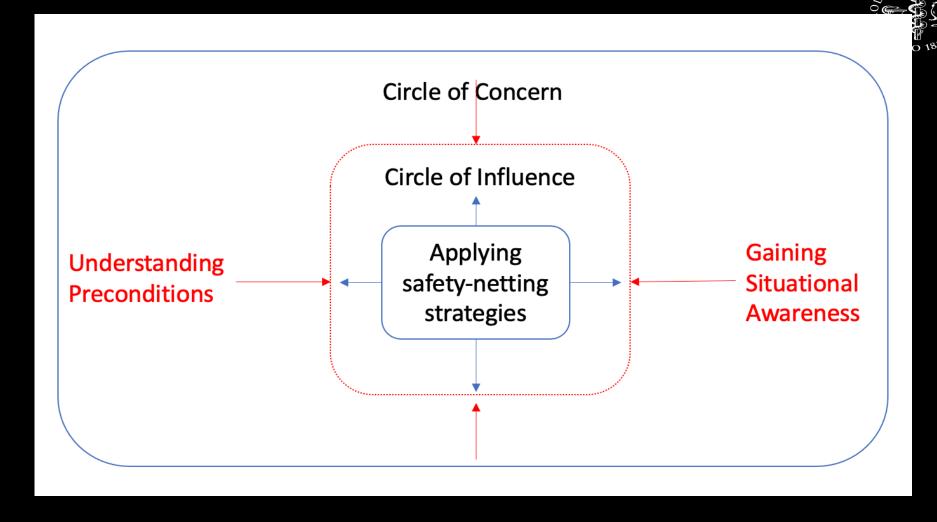
The need to understand preconditions for the consultation (i.e., the patient's capacity and their social context; aspects influencing the patient-clinician collaboration; the healthcare context) and gain shared situational awareness regarding the patient's perspective and experiences, as well as the need for safety-netting.



#### Results – six strategies for successfully applying safetynetting:

- 1) openness about uncertainties;
- 2) communicating expected course of events;
- 3) tailoring information;
- 4) using multiple modalities;
- 5) teach-back;
- 6) facilitate re-consultation.





Understanding preconditions and gaining situational awareness helps to delineate a circle of influence. Safety-netting strategies are applied within the circle of influence.



#### Conclusion

The understanding of preconditions for the clinical encounter and the establishment of shared situational awareness between the clinician and the patient were identified as vital aspects for the successful selection, tailoring, and application of safetynetting strategies.

