Washington University Department of Anesthesiology

PIA SAFE QUARTERLY

Peers in Anesthesiology Supporting a Fair Environment Nov 2023





Second Victim Trauma Support System

We are working with our IT and reporting teams to develop stage 1 of our second victim trauma support program. With this program, we will receive reporting through Epic when there has been an intraop death or CPR incidence. We can then use this reporting to reach out to providers involved with the case to check in and offer emotional support.

Check-In Application continues to get great usage!



Please continue to encourage colleagues to use the PIA SAFE Check-In app to connect with the program!

QR Code signage is coming soon to all work areas and computers in the OR and ICUs!

Top usage has been assitance in reporting incidents and information regarding mental health resources





Thank you to those who joined us for our Tacos & Training in October! We had a representative from each division within the department!! Great work team!!

Good conversation, learning, and food were had by all!

Ways we can provide proactive support

Just because a colleague has not reached out to the PIA SAFE app, does not mean we cannot provide them proactive support! When you know a teammate has had a hard day, challenging case, or difficult project, there are many small proactive ways we can show them support as PIA SAFE champions!

Sometimes a text, or phone call, or finding them to check in in-person goes a long way! Don't forget, EVERYONE needs support, from the highest levels of leadership to our trainees- everyone can use encouragement and friendship.

PIA SAFE Pro Tip: Ways to proactively check-in!

- "How can I help?"- offer specific options- Can I set up for your next case while you take a break? Can I take anything off your plate this afternoon? Can I help you finish charting while you decompress? Take an extra long lunch today- I can cover your patients/case for awhile.
- "Do you want to grab a coffee or snack together? I'm open to talking about whatever you need and would love to listen."
- Ask how they are feeling. "I've been thinking about you. How are you, really?"
- "The last time we spoke, you were worried about ___. How is that going?"
- Send them a Take 2
- Validate their feelings
- Listen to them without judgment or criticism!

https://anesthesiology.wustl.edu/our-culture/piasafe/

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What is Second Victim Syndrome?

Second victims are healthcare providers who are involved in an unanticipated adverse patient event, in a medical error and/or a patient-related injury, and become victimized in the sense that the provider is traumatized by the event. Frequently, these individuals feel personally responsible for the patient outcome. Many feel as though they have failed the patient, second guessing their clinical skills and knowledge base." (1)

Unfortunately, healthcare workers are often denied the time and resources necessary to process feelings and grieve losses when an adverse patient event or mistake occurs. As a consequence, healthcare workers often suffer life-altering burdens of anxiety, depression, and shame after an adverse patient outcome.

To cope with these feelings, healthcare providers may engage in destructive behaviors such as using drugs, nicotine, and alcohol, behaviors that are consistent with post-traumatic stress disorder. Healthcare providers who experience adverse events may even contemplate switching careers because of reduced job satisfaction. (2)

If not managed, second victim effects may damage healthcare providers' psychological and physical health, further compromising patient safety.

While the focus of the patient safety field has been chiefly on improving systems of care, such systems include real people, and safety events may take an emotional toll.

Many healthcare institutions have a blaming and punitive culture where adverse events are investigated. Managing adverse events in this way may exacerbate the burden of being a second victim. (2)

To mitigate or handle the effects of stress after a traumatic event, second victims require adequate psychosocial support. Being able to discuss these events with managers and supervisors manifests as being valued and cared for, helping healthcare providers move past adverse events.

Six stages have been described the second victim recovery process: (i) chaos and accident response, (ii) intrusive reflections, (iii) restoring personal integrity, (iv) enduring the inquisition, (v) obtaining emotional first aid, and (vi) moving on (1)

Our goal with our second victim support program within PIA SAFE will allow us to provide consistent, evidence-based, and professional support to our colleagues experiencing the second victim, and set into motion procedures to provide them immediate support and allow them the time to process events, such as being relieved from a shift or given a break or change in assignment.

- 1. Scott SD, Hirschinger LE, Cox KR, McCoig M, Brandt J, Hall L. The natural history of recovery for the health care provider "second victim" after adverse patient events. Qual Saf Health Care. 2009;18:325-330
- 2. Mathebula LC, Filmalter CJ, Jordaan J, Heyns T. Second victim experiences of healthcare providers after adverse events: A cross-sectional study. Health SA. 2022 Aug 29;27:1858. doi: 10.4102/hsag.v27i0.1858. PMID: 36090235; PMCID: PMC9453125.