 the CENTER for  
PROFESSIONALISM  
and PEER SUPPORT

## Peer Support: Mitigating the Emotional Toll of Medical Errors

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BRIGHAM HEALTH  
BRIGHAM AND  
WOMEN'S HOSPITAL HARVARD MEDICAL SCHOOL  
TEACHING HOSPITAL

## Team Sport



Senior Leadership    Quality and Safety  
Risk Management    Psychiatry  
MSCC and MSEC    EAP  
Human Resources  
Office of General Counsel    Patient Family Relations  
CRICO/RMF

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## Institutions are...

“where the human heart either gets welcomed or thwarted or broken.”

Parker Palmer. Quoted in Living the Questions.  
Jossey-Bass, San Francisco, CA, 2005.

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 the CENTER for  
PROFESSIONALISM  
and PEER SUPPORT

*The Center's mission is to encourage a culture that values and promotes mutual respect, trust and teamwork.*

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## Reflection



*Think of a time when you were involved in a medical error that caused patient harm.*

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*What were some of your feelings?*



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### Emotional impact of errors on clinicians

- *Sadness*
- *Shame*  
– *Self-doubt*
- Fear
- Anger
- Isolation



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### Helmreich's observations: Similarity between medicine and aviation



“...[both stress] the need for perfection and a deep perception of personal invulnerability...”

Helmreich, Davies.  
Culture, Threat and Error: Lessons From Aviation.  
Can J Anesth 2004; 51:6

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### Emotional impact of errors on clinicians

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### More fantasy

No shame and blame  
Shared responsibility

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## Vs. the Reality

Patient anger  
Family anger  
Litigation  
Lack of support



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## Emotional impact of errors on clinicians

- Sadness
- Shame
- Fear
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- *Isolation*



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## Many people may be significantly impacted

- Patient
- Family
- Physician
- Team
- Institution

*Everyone should have access to support*



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## Normal reactions to abnormal events



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## Many times reactions are transient

But sometimes recovery is thwarted...

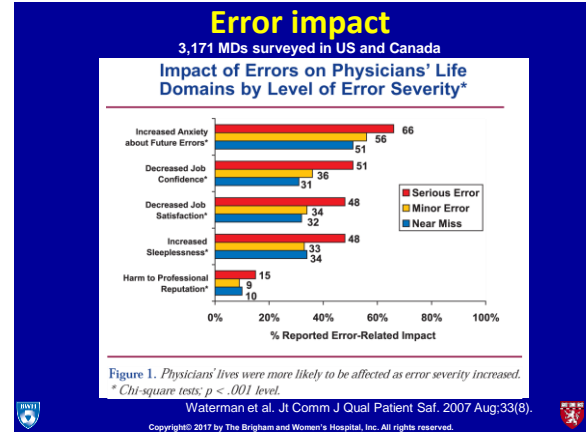


... causing harm to clinicians and their patients



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### Error impact

Following medical error

~30%

Experienced some negative impact on

Work performance or personal life

Colleague relationships

Harrison R, Lawton R, Perlo J, Gardner P, Armitage G, Shapiro J. J Patient Saf. 2015 Mar;11(1):28-35.

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### Factors associated with perceived medical errors

TABLE 5. Factors Independently Associated With Perceived Medical Errors on Multivariate Analysis

Characteristic and Associated Factors	Odds Ratio*	P
Positive depression screen	2.217	<0.0001
Burnout	2.016	<0.0001

Shanafelt et al, Annals of Surgery, 2010

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### Burnout

Burnout is a syndrome of depersonalization, emotional exhaustion and a sense of low personal accomplishment that leads to decreased effectiveness at work.

Shanafelt, TD, Bradley, KA et al. Annals. of Internal Medicine, Vol. 136, no 5. 2002.

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### Burnout and medical error

1% increase in

- Depersonalization → 11% ↑ likelihood of reporting having made an error
- Emotional exhaustion → 5% ↑

Burnout and depression = independent predictors of reporting a recent major medical error

Shanafelt TD, Balch CM, et al. Ann Surg 2010; 251(6)

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## Physician Suicide

40%↑



130%↑

The suicide rate among male doctors than among men in general

The suicide rate among female doctors than among women in general

Schernhammer E. NEJM 2005



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Can't expect people who are feeling unsupported and isolated to deliver high quality patient care or to sustain their joy in work



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So, how do we facilitate coping and *resilience* after adverse events?

Group peer support



Sometimes an entire team is affected



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But physicians and clinicians at the sharp end of the error may have different needs...



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Attitudes and needs of physicians for emotional support:  
The case for peer support



Hu J, Fix M, Hevelone N, Lipsitz S, Greenberg C, Weissman J, Shapiro J. *Arch Surg* 2012



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Barriers to seeking support

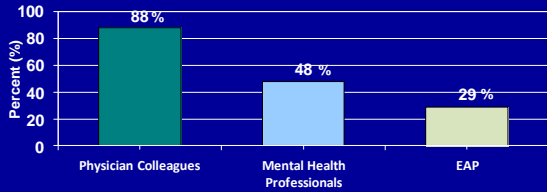
- Lack of time (89%)
- Stigma (77%)
- Lack of confidentiality (79%)
- Access (67%)



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## Sources of support



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## Factors associated with resilience after adverse events

## Factors associated with resilience after adverse events

Talking about it with colleagues

Dealing with imperfection

Disclosure and apology

Learning from the error/ understanding how to prevent recurrences

Forgiveness

Sharing that learning with colleagues and trainees

Plews-Ogan M, May N, Owens J, Ardelt M, Shapiro J, Bell SK. Wisdom in medicine: What helps physicians after a medical error. Acad Med. 2015 Sep 4.

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## We also offer 1:1 peer support

### Group peer support



### 1:1 peer support



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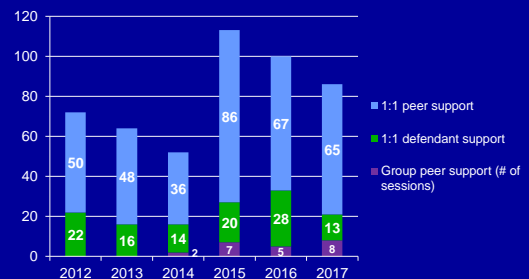
## 1:1 peer support fundamentals

- Listening: empathic, non-judgmental
- Sharing experiences
- Reinforce coping skills
- Encourage teaching and involvement in systems safety
- Resource information and referral

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## Peer and defendant support at BWH

2012 - 2017 (n = 487)



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## Discoverability



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## Safety culture: Learning and growth mindset

- All feel safe talking about error
- Do not punish for human error (or for choices made in the face of legitimate competing priorities)
- Find and fix vulnerabilities in our systems and behaviors



Leonard MW, Frankel A. Patient Education and Counseling 60 (2010) 208-202



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## When else do we offer peer support?

- Adverse events
- Disclosure and apology conversations
- Board of Registration complaints
- Lawsuits
- Chronic stress
- Patient aggression
- Care of trauma victims
- Global crisis relief work



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## Peer support: A powerful culture change tool

Shame and blame	⇒	Promotes Just Culture
Personal invulnerability	⇒	Human factors
Expectation of emotional denial	⇒	Normalizes reactions
Isolation	⇒	Community/solidarity
Self care is selfish	⇒	Gets you back to what you do well

Helps us show up with compassion  
for our patients



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## Disclosure Coaching

Support clinicians in having transparent and empathic conversations with pts after errors



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## Communication & Resolution Programs (CRPs)

- Transparent with patients regarding adverse events
  - What happened/why
  - Was event preventable
  - How recurrences will be prevented
- Proactive and prompt offer of financial and non-financial resolution if unreasonable care



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The Boston Globe **Metro**  
**Many Brigham workers sought help from peer counseling**



People gathered at Brigham and Women's Hospital Jan. 21 to remember Dr. Michael Davidson, who was fatally shot.

## Not victims

“we are not victims of that world, we are its co-creators.

...source of awesome responsibility...and profound hope for change.”

Palmer, P. [Let Your Life Speak](#), Jossey-Bass, San Francisco, CA, 2001.



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***Thank you for your engagement and  
commitment***



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