Second Victim
A Background

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“The longer we dwell on our misfortunes, the greater their power to harm us.”
Voltaire

Learning Objectives

At the conclusion of this presentation, the participant will be able to:
1. Recognizing situations that create Second Victims
2. Understand the scope of the Second Victim problem and how it affects healthcare workers
3. Recognized that strategies exist to help all victims of an adverse event

Kim Hiatt’s Story

- Primary Victim was the infant
- Second Victim was Kim
- Other Victims?

Second Victim:

“Healthcare providers who are involved in an unanticipated adverse patient event, medical error and/or patient related injury and become victimized in the sense that the provider is traumatized by the event.”

- 85% of these events DO NOT involve a medical error

Associated trauma and Victims of an Adverse Event

- Surviving patients
- Family members and loved ones
- The organization where the event occurred

Effects of Adverse Events On

- Healthcare workers?
- Patients who survive?
- Families and loved ones?
- Who supports any of these individuals?
- Early disclosure to families of patients a good or bad thing?”
Josie King Story

“THE DOCTORS OR NURSES OR PHARMACISTS WHO HAVE BEEN INVOLVED IN A MISTAKE ARE THE ONES WHO DESIGN THE SOLUTIONS.”

Peter Pronovost

Johns Hopkins Response

- CUSP: Comprehensive Unit-based Safety Program
- RISE: Resilience In Stressful Events
Tony's Story
- The University of Missouri Experience
- The forYOU team

"THE MOST BASIS OF ALL HUMAN NEEDS IS THE NEED TO UNDERSTAND AND BE UNDERSTOOD. THE BEST WAY TO UNDERSTAND PEOPLE IS TO LISTEN TO THEM."
Ralph Nichols

Linda Kenney Story
- Helpless feeling and lack of support
- Dr. Rick van Pelt's support
- The MITSS (Medically Induced Trauma Support Services) program
- Support for clinicians, patients and families

Scope of Second Victim Issue
- 7,000,000+ Healthcare workers in US
- UM study suggests 1 in 7 healthcare workers are involved in an adverse event each year
- Up to 1,000,000 Second Victim healthcare workers each year in the US

Second Victim Response
- Isolation
- Extreme isolation
- Sleep disturbance
- Physiological stress response
- Loss of Self confidence
- Grief, remorse, feelings of shame, feelings of inadequacy, anxiety

In 4 years UM volunteers identified 1360 Second Victims
- UM has about 6,000 healthcare workers
- About 400,000 Second Victims may be recognized and need support each year
Anxiety and Concerns
- How is the patient doing?
- Will I lose my license?
  Will I lose my job?
- What will colleagues think?
- What happens next?

Phases of Response
- Impact realization
- Enduring the inquisition
- Obtaining interventional support
- Trajectories in moving on

Second Victim Coping
- Dropping out: Transfer to another department, leave profession, suicide
- Surviving: Persistent negative feelings, intrusive thoughts and anxiety
- Thriving: Insight and perspective on the event, improving professional practice, life and work balance

Resilience: Organizational Support
- Resilience – ability to recover from misfortune or change
- Resilience is a characteristic of a highly reliable organization (HRO)
- HRO must be able to recover and learn from an adverse event; support victims

Promoting Resilience
- Organization gives 24/7 immediate support
- Process for response is hardwired
- Ongoing support post-immediate period
- PSO manages addressing the clinical details a discoverability

Organization Response
- Support all victims of an adverse event
- Identify and correct systems failures – over 90% of medical error’s root cause
- Create a culture of transparency and systems thinking that doesn’t stigmatize individuals – Just Culture
Review and Conclusion

- The Second Victim problems is much larger than generally realized.
- Most Victims go unrecognized and unsupported.
- The natural course of a Victim exposed to an adverse event is to 1) Cope and move on 2) Partially deal with it and return to the workplace somewhat handicapped 3) Move to another work area or leave healthcare altogether.

Final Observation

- Second victims who go unrecognized and unsupported will in the many of cases go on to develop a syndrome that is a form of PTSD – Post Traumatic Stress Disorder.
- Early recognition and support are the best way to resolve the situation and allow the healthcare worker to effectively return to the workplace.

Support Models & Tools

- forYou team - University of Missouri Health, Columbia Missouri
- RISE program - Johns Hopkins Hospital, Baltimore
- MITSS - (Medically Induced Trauma support Services) www.mitts.org
- MACRMI - http://www.macrmi.info#sthash.eq1CwXsE.dpbe
- Just Culture - https://www.justculture.org/

Questions?