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# When Caring Hurts, Supporting the Second Victim

Name of Presenter: Tracy MacDonald

Title: Risk & Patient Safety Manager

A photograph of a white lotus flower in full bloom, floating on a pond. The flower is the central focus, with its many petals radiating outwards. The water is dark and still, creating a clear reflection of the flower and the surrounding lily pads. The lily pads are large and green, with some showing signs of age and damage. The background is a soft, out-of-focus view of the pond and more lily pads.

# Central Health's Journey.....

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*Nancy '15*



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# Rationale for the project

- Why

- Caring for the second victim is an important part of an integrated system for managing adverse events and establishing a just culture

- Who

- All employees, physicians, volunteers (directly)
- Patients and families (indirectly)

- When

- Piloted training in two high risk areas completed in 2016
- Guidance team established 2017
- Peer Support program 2018



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# The Goal of the Project or Strategy

“In the aftermath of serious clinical adverse events, patients, families, staff, organizations, and communities will all say, we were treated with respect”

*Institute for Healthcare Improvement (IHI), 2011*



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# Measures

- Pre and post survey with leadership
- # of adverse events/occurrences/events
- # Program leaders trained
- # Peer supporters trained
- # staff that avail of peer support
- # staff involved in adverse events that avail of EFAP
- Analyzing worker and patient safety results



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# Tips & Tools for Others

- What can you suggest to others?
  - Assess leadership understanding and readiness
  - Partner with staff involved in adverse events/occurrences
  - Analyze available data such as occurrence reporting data
  - Prepare and create an organizational plan
  - Secure Executive Sponsorship and Program leadership accountability
  - Partnership with Risk, Patient Safety, and Employee Wellness
- What ideas can you offer on how to incorporate the patient and family voice?
  - Assess case by case
  - Partner with patients to inform development work



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# Central Health's Guiding Principle

Human error and system conditions periodically combine and align to contribute to unanticipated adverse outcomes for patients. What is most important is the manner in which we handle these situations.

Patient and worker safety will be best served if we are honest about unanticipated adverse outcomes with our patients, open with our colleagues and ourselves, and able to handle such occurrences with sympathy and empathy for our patients and our colleagues.





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# Contact Information

Name: Tracy MacDonald

Organization: Central Health

Email: [tracy.macdonald@centralhealth.nl.ca](mailto:tracy.macdonald@centralhealth.nl.ca)

Phone Number: (709) 292-2647