No second thoughts about second victims: the development of a procedure to support victims following a clinical incident in a Belgian hospital

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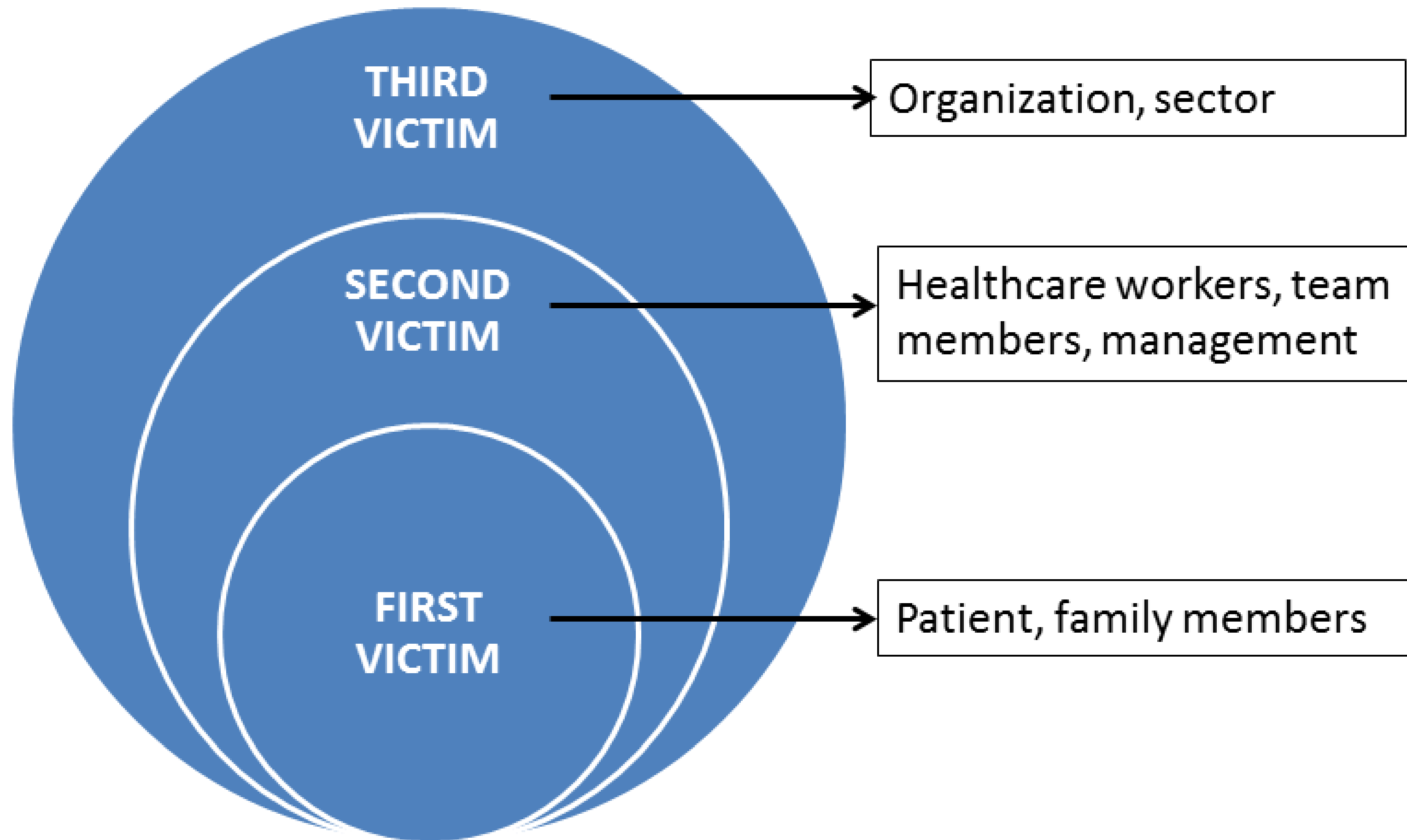
THIRD
VICTIM
SECOND
VICTIM
FIRST
VICTIM
Organization, sector
Healthcare workers, team members, management
Patient, family members

Methods

- A **workgroup 'second victim'** was founded in a **Belgian hospital** in **2015**
- Workers of **different disciplines** from both the hospital and Mensura occupational health services were included
- A **procedure** was developed in the workgroup **based on:**

  1. An **existing directive** (dealing with serious clinical incidents)
  2. **Roadmap** for the **development** of a **crisis management plan** (described in the White Paper 'Respectful management of serious clinical adverse events')

- A **checklist** was developed to **evaluate** the crisis management plan

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Results

Procedure (1)

First priority = first victim care

- **<48 hours,** e.g.:
  - Provide immediate psychological support
  - Designate a contact person (24/7 availability)

- **≥48 hours**, e.g.:
  - Invite patient and relatives (cause analysis)
  - Refer to external psychotherapeutic counsellors (if necessary)

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Results

Procedure (2)

Second priority = second victim care

- **<48 hours**, e.g.:
  - Offer and ensure ongoing support, empathy and visibility
  - Establish a Crisis Management Team (if necessary)
- **≥48 hours**, e.g.:
  - Contact the worker on a daily base
  - Evaluate the emotional needs
  - Invite second victims for the cause analysis

Results

Procedure (3)

Third priority = Third victim care

- **<48 hours**, e.g.:
  - Make sure the appropriate persons in the organization have been informed about the incident
- **≥48 hours**, e.g.:
  - Determine measures to control identified causes of the incident

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Results

Checklist to evaluate the crisis management plan

- **Checklist** = tool to verify if all the requirements of a good policy were met
  - The crisis management plan contains all the necessary elements
  - A contact person for all steps was designated
  - All tasks are performed within the designated period of time
  - The elements communication, support, and evaluation are constantly monitored

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Conclusion

- **This study illustrated the development of a hospital-specific procedure to support victims after a clinical incident by combining:**
  - Theoretical guidance
  - Healthcare workers' personal experiences
  - Organizational features
- **Importance of:**
  - Making clear agreements about the roles and tasks of the contact persons
  - Creating an open culture that enables the discussion about patient safety incidents so they can be learnt from

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Conclusion

- **Need for continuous evaluation to retain workability of the procedure based on e.g. insights gained from analysis of new incidents and changes in law**

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Questions? Remarks?

Just contact …

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