

Managing Stress After an Adverse Patient Outcome

Question

Healthcare providers may experience significant stress following an adverse patient outcome, which can affect both their personal and professional lives. How can providers manage this stress?

Answer

A survey of more than 3,000 physicians in the United States and Canada showed that 92 percent had been involved in incidents ranging from near misses to serious errors. Most of the respondents reported feeling some degree of stress related to these events. Further, estimates suggest that as many as half of all clinicians will be involved in serious adverse events during their careers.¹

Following an adverse patient outcome, providers who were involved might experience feelings of blame, shock, guilt, shame, anger, failure, depression, inadequacy, and a loss of confidence and reputation. They may struggle with these feelings and need to seek assistance in managing them. Ineffective coping mechanisms might worsen and exacerbate these feelings, which can further affect provider well-being and potentially lead to subsequent errors.

By acknowledging and proactively addressing the adverse patient outcome—stress—error cycle, healthcare providers can work toward effectively managing the situation. The following eight steps provide recommendations for dealing with the stress associated with an adverse patient outcome.

1. Speak with the patient and/or family.

Healthcare providers recognize their ethical responsibility to disclose unanticipated patient outcomes resulting from treatment. However, providers often feel uncomfortable and anxious discussing adverse outcomes with patients and/or families.

Their reluctance is justifiable based on uncertainty about appropriate approaches to such discussions and fears of litigation. Yet, when done properly, disclosure can reduce the negative impact of adverse outcomes and support a culture of transparency and safety.

To learn more, see MedPro's *Disclosure of Unanticipated Outcomes* guideline. For assistance with a specific disclosure issue, contact your MedPro Group patient safety and risk consultant or claims representative, or discuss the situation with your hospital/group practice risk manager or patient safety officer.

2. Participate in peer review and/or root cause analysis.

An adverse patient outcome can be an opportunity to analyze the system in which you practice – and your personal performance – to determine whether changes can be made to prevent a recurrence. Identifying underlying factors (system or human) that may have contributed to the outcome is critical for implementing changes in the care delivery system (institutional or personal) to prevent similar circumstances from occurring.

3. Keep reasonable hours.

Healthcare providers who are involved in an adverse outcome often resolve in their minds that “this will never happen again,” and they pursue self-improvement to ensure that it never will. However, it can be problematic when, in an effort to perform better, you demand even more of yourself (particularly working more hours). This personal pressure can result in fatigue, which may backfire and increase the likelihood of another adverse outcome.

4. Emphasize people skills.

If you feel anxious, fearful, or dissatisfied, you might have trouble relating well to patients. These feelings can impair the provider-patient relationship and might damage the environment of mutual trust that is critical to effective communication and good outcomes. Acknowledging these emotions and working to connect and engage with patients can help relieve stress.

5. Identify your support systems.

Your personal relationships also may suffer as a result of emotional distress. To address this, identify your support systems – that is, those with whom you can share your feelings and concerns without sharing specific information about the adverse patient outcome. Consciously focus on staying “connected” to those close to you; they also can be a valuable source of support as you navigate through the process of coming to terms with an adverse patient outcome.

Discussing the facts and specific details related to the patient, patient care, and outcomes in any case should be limited to contexts and situations that are protected from legal discovery (e.g., discussions with your defense counsel or professional liability claims manager). However, expressing your personal feelings and concerns to one of your support systems – such as your spouse, a trusted friend, or a colleague – can help reestablish your emotional equilibrium.

6. Maintain balance in your personal and professional life.

Most people realize the benefits of maintaining work–life balance. However, maintaining a “balanced” lifestyle is even more critical in this situation. At the very least, try to take care of your physical health. Consider how your eating habits, physical activity, sleep schedule, and other habits might negatively or positively affect a balanced lifestyle.

7. Monitor consumption of controlled and uncontrolled substances.

Be cognizant that during times of emotional stress, some individuals have a tendency to improperly self-medicate or abuse alcohol. You may find it prudent to consult a physician if the emotions resulting from an adverse patient outcome are significantly affecting your sense of well-being.

8. Seek counseling.

Managing stress alone is not always possible. You may need to seek professional help if you find you are struggling. Some options include:

- Accessing The Sara Charles MD Physician Litigation Stress Resource Center, which provides medical malpractice support resources, online sources of support, government resources, assistance with traversing the legal process, and a bibliography of recommended articles and books.

- Contacting medical/professional licensing bodies, medical/specialty societies, and professional organizations to obtain resources and assistance.
- Obtaining personal therapy. A therapist can help you recognize negative emotions and identify ways to manage stress.

Resources

- Clinician and Staff Peer Support Program (Betsy Lehman Center for Patient Safety)
- Clinician Support Toolkit for Healthcare (Medically Induced Trauma Support Services)
- Coping with Adverse Patient Outcomes (Stanford Medicine)
- Disclosure of Unanticipated Outcomes (MedPro Group)
- Healthcare's Second Victims: A Problem That Should Not Be Ignored (MedPro Group)
- Litigation Support: Maintaining Your Balance (MedPro Group)
- The Sara Charles MD Physician Litigation Stress Resource Center

¹ Agency for Healthcare Research and Quality. (2019, September). *Second Victims: Support for Clinicians Involved in Errors and Adverse Events*. Patient Safety Network. Retrieved from <https://psnet.ahrq.gov/primer/second-victims-support-clinicians-involved-errors-and-adverse-events>

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