



NATIONAL
OPEN DISCLOSURE
PROGRAMME

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“ASSIST ME”

A Model of Staff Support following Patient Safety
Incidents in Healthcare



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Building a
Better Health
Service

National Quality Improvement Team

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DOCUMENT TITLE	“ASSIST ME” - A Model of Staff Support following Patient Safety Incidents in Healthcare
DIRECTORATE	National Quality Improvement Team
DOCUMENT TYPE	Guideline
REFERENCE NUMBER	NATOD-GDL-004-02
VERSION NUMBER	2
PUBLICATION DATE	11th January 2021
DATE FOR REVISION	11th January 2023
ELECTRONIC LOCATION	Open Disclosure Website
AUTHOR	National Open Disclosure Team, National Quality Improvement Team

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INTRODUCTION:

Have you been involved in a patient safety incident where, despite your best efforts, a patient was harmed as a result of their care/treatment?

As staff working in health and social care services we are not infallible. Our desired outcome for patients, service users and their families is not always the final outcome. There are many variables in our work and sometimes, despite our best plans and efforts, things can go wrong.

A significant proportion of health and social care workers will experience varying degrees of stress as a result of exposure to a patient safety incident.

This booklet has been developed to provide practical information and guidance for health and social care managers and staff in relation to:

- (a) Understanding the potential impact of patient safety incidents on staff
- (b) Recognising and managing the associated signs and symptoms
- (c) Supporting staff following patient safety incidents
- (d) Providing information on the support services available to staff

THE RECOGNISED STAFF RESPONSE TO A PATIENT SAFETY INCIDENT

Individual staff responses range from common uncomplicated stress-related reactions to the more complex post-traumatic stress and will often depend on the severity of the incident. It is important to be aware, however, that staff can suffer from traumatic stress which is associated with minor incidents and near misses as well as major and catastrophic incidents where a patient has died or has been left with a major disability.

The following are examples of some of the symptoms which staff may experience in the aftermath of an incident.

- Feelings of incompetence and isolation.
- Denial of responsibility – discounting of the importance of the event.
- Emotional distancing.
- Overwhelming guilt.
- Symptoms of post-traumatic stress
- An experience that is highly intense has the capacity to imbalance an individual at an emotional, cognitive and/or physical level.

Table 1: The six recognised stages associated with staff reaction in the aftermath of an adverse event

Stage	Name	Features of this stage
1	Chaos	<ul style="list-style-type: none"> • Error realised and recognised. • Questioning how and why did it happen? • Care for the patient.
2	Intrusive reflections	<ul style="list-style-type: none"> • Re-evaluation of the event. • Haunted re-enactments of the event. • Self isolation.
3	Restoring personal integrity	<ul style="list-style-type: none"> • Managing gossip. • Questioning trust. • Fear.
4	Enduring the inquisition	<ul style="list-style-type: none"> • Realisation of seriousness. • Wonder about repercussions. • Who can I talk to?
5	Obtaining emotional first aid	<ul style="list-style-type: none"> • Seeking personal and professional support. • Where can I turn to for help?
6	Moving on:	
(a)	Dropping out	<ul style="list-style-type: none"> • Changing professional role. • Leaving profession, or • Going to a new practice location.
(b)	Surviving	<ul style="list-style-type: none"> • Coping. • Continue to be plagued by the event but performing at the expected level.
(c)	Thriving	<ul style="list-style-type: none"> • Gains insight and perspective into error. • Learns from the event • Not focused solely on the error.

Scott SD et al (2009)

THE “ASSIST ME” MODEL OF STAFF SUPPORT

The importance of support for staff from line managers, colleagues and peers in the aftermath of a patient safety incident should not be underestimated. Being available for staff and hearing/acknowledging their story surrounding the event is crucial. Staff require a safe and confidential space in which to discuss the incident and can find this therapeutic. The intention is not to be investigative at this stage.

The “Assist Me” model of staff support has been developed to assist managers and staff during this process. This has been adapted from the Medical Protection Society’s A.S.S.I.S.T model of communicating with service users following adverse events in healthcare.

Table 2: The “Assist Me” model of staff support

Action	Example
<p>A Acknowledge with empathy the incident that has occurred and the impact on the member of staff.</p> <p>Assess the impact of the incident on the member of staff and on their ability to continue normal work .</p>	<p><i>“I came to see you as soon as I heard what happened. This must be very difficult for you”</i></p> <p><i>“How are you doing?”</i></p> <p><i>“How are you coping?”</i></p> <p><i>“How are you feeling right now”</i></p> <p><i>“Are you ok to be here?”</i></p>
<p>S Sorry - express regret for their experience</p>	<p><i>“I am so sorry that this has happened. Sometimes despite our best efforts things can go wrong”.</i></p> <p><i>“I am so sorry that you have had this experience and for the distress this is causing you”.</i></p>
<p>S Story – allow time and space for the member of staff to talk about what happened and how they are feeling - using active listening skills.</p> <p>Demonstrate your understanding of their story through the feedback process</p> <p>Share personal experience, as appropriate</p>	<p><i>“You may find it helpful to talk about how you are feeling right now”</i></p> <p><i>“Would you like go for a cup of coffee and we can have a chat about what happened?”</i></p> <p><i>“What I’m hearing from you is.... Is that correct? Is there anything else you want to tell me or talk about?”</i></p> <p><i>“Can I tell you about an experience of my own, how I felt and what I found helped me at that time?”</i></p>
<p>I Inquire – encourage questions Information – provide answers/information</p>	<p><i>“What questions do you have that I can perhaps help you with?”</i></p> <p><i>“Is there anything I can help you with at this time?”</i></p> <p><i>“Would it help if I told you what happens next and what you can expect in relation to the management of this incident?”</i></p>

<p>S Supports Solutions</p>	<p>(a) Informal emotional support:</p> <p><i>“My door is open for you. I will be checking in with you regularly to see how you are doing if that is okay with you. In the meantime if you do wish to talk about this or discuss anything with me please come and see me or give me a call. Can I arrange for someone to collect you from work?”</i></p> <p>(b) Formal emotional support:</p> <ul style="list-style-type: none"> Assess any immediate needs, discuss with the member of staff and arrange, with their knowledge and consent, a referral to the relevant support services, as required. Provide information on the supports provided by the HSE Employee Assistance Programme (EAP) which can be accessed by managers and staff e.g. counselling, crisis intervention and Critical Incident Stress Management (CISM) response. Discuss the benefits of CISM and organise, with the consent of the staff member, one to one or team CISM response as soon as is practical. Click here to access further information on CISM. Consider referral to the HSE Occupational Health Department for additional support, as required. Provide staff support information leaflets/ brochures, and signpost to the HSE Workplace Health and Wellbeing Unit website here. Contact the EAP national phone number on 0818 327 327 to speak to someone who can help. This service includes access to internal EAP services and external 24/7 counselling support.
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		<p>(c) Practical Support:</p> <ul style="list-style-type: none"> • Provide an opportunity for the member of staff to take time out from their normal work, if required. Staff should be involved in and have input to any decision made regarding the same. Many staff find it more helpful to remain at work. Allocation to different duties may benefit initially if it is practical to do so. • Provide practical support and information in relation to the incident review process and how the staff member might assist/ contribute to this process. e.g. encourage the member of staff to write up their recollection of the incident as soon as possible for their own record. Ensure that they are kept updated and involved in the incident review/open disclosure process. • Provide information and support in relation to communicating with the patient/service user following the incident and preparing for open disclosure discussions. • Ensure that they are encouraged to provide their insight into the steps being taken to try to reduce the risk of a recurrence of the incident. • Establish the learning from the incident, at individual and organisational level and provide on-going support.
<p>T</p>	<p>Travel – providing continued support and reassurance going forward and throughout the incident review/open disclosure process.</p>	<p><i>“I am here to support you.”</i></p> <p><i>“I will assist you in any way I can”.</i></p>

<p>M</p>	<p>Maintain contact</p> <p>Monitor progress</p> <p>Moving forward</p>	<p>Ensure that there is continued contact with the staff member to prevent feelings of isolation.</p> <p>Continually monitor and assess the staff member’s response to the incident and their response to any interventions.</p> <p>Provide guidance and support on their return to normal work.</p>
<p>E</p>	<p>End – reaching a stage of closure from the event.</p> <p>Evaluate</p>	<p>Establish when the staff member has reached a stage of closure from the incident as it is important at this stage not to keep re-opening the incident with them.</p> <p>Leave your door open to them if they should require any further assistance.</p> <p>Review the support provided with the staff member involved.</p> <p>Consider feedback and establish any learning which may benefit other staff.</p>

COPING WITH THE IMPACT OF A PATIENT SAFETY INCIDENT: PRACTICAL GUIDANCE

Table 3: The following table outlines some practical things which staff can do to assist their response to a patient safety incident.

Do	Why?
1. Talk to a friend/colleague/line manager about your experience and your feelings.	Talking to someone may help to reduce feelings of isolation and stress. Talk is the most healing mechanism.
2. Participate in Critical Incident Stress Management (CISM) Response - available via EAP	Whereas the CISM response should not be deemed as mandatory for staff it is recognised as a valuable tool for health care organisations to have at their disposal in relation to supporting staff in the aftermath of a patient safety incident. The focus of the CISM* response is the relief of stress in emotionally healthy people who have been involved in or affected by critical/traumatic patient safety incidents. *See page 15 for further information on CISM
3. Ensure that you are involved in and kept informed in relation to the incident review/open disclosure process	Disclosure and apology can help staff to heal and recover from the incident and it also helps to preserve the relationship between staff and their patients. It is important that staff involved in the patient safety incident can participate in the review of the incident, as appropriate, and that they are also involved in helping to bring the incident to closure/resolution.
4. Take time to relax.	Relaxation techniques can be helpful as stress is completely normal at a time like this. Learn some stress management strategies and use them frequently. Give yourself time to recover from the crisis.

5. Get enough sleep.	Sleep is always important but especially now. Make sure you allow enough time for a full nights sleep. If you have difficulty sleeping for more than a week you should consult with your GP.
6. Get some exercise.	A brisk walk is good for the body and has a calming effect on the mind as well. Mild exercises can help to combat stress. Don't over do it or push yourself beyond your limits!
7. Maintain a good diet.	Foods can help tame stress in several ways. Comfort foods, like a bowl of warm oatmeal, boost levels of serotonin, a calming brain chemical. Other foods can cut levels of cortisol and adrenaline which are stress hormones that take a toll on the body over time. A healthy diet can counter the impact of stress by shoring up the immune system and lowering blood pressure.
8. Follow a structured schedule.	Learn to accept that you are not capable of doing all things all the time. Allow some flexibility in case you are unable to follow through on everything. Remember that you are healing. Keep your life as normal as possible. Prioritise your time – write down the things you have to do in the order that they have to be done.
9. Spend time with family and friends.	Don't isolate yourself. It is important to have people around you or available to you at this time.
10. Take time for leisure activities.	Do not withdraw from others or from normal leisure/social activities. Do something you find enjoyable.
11. Recognise that healthcare is complex and mistakes/incidents happen.	As staff working in health and social care services we are not infallible. Despite our best plans and efforts things can go wrong.
12. Expect the incident to bother you.	Remember that your response is a temporary and normal reaction to an abnormal situation. You are having a normal response to an abnormal experience. Making a conscious effort to work through it will ultimately help you to overcome the stress and pain you may be experiencing.

13. Realise that others around you may be under stress also.	If others are involved help them as much as possible by sharing your feelings and checking out how they are doing.
14. Learn about post traumatic stress	This will assist you in recognising the symptoms and feelings you are experiencing which are a normal reaction to the incident and to also recognise those feelings and symptoms which may be worrying in nature and which may require additional intervention from your GP, Employee Assistance Programme (EAP) and/or Occupational Health Department (OH).
15. Contact your GP/EAP/OH department if you are concerned that your response to the event is too intense or lasting too long.	Talk to your line manager who can assist you in this matter and who can organise a referral to EAP/OH for you. Remember that you can self refer to EAP/OH if you prefer. It is also important to talk to your GP about how you are feeling.

Table 4: Things to Avoid

1. Do not drink alcohol excessively
2. Do not stay away from work unnecessarily
3. Do not withdraw from significant others
4. Do not use legal or illegal substances to numb consequences
5. Do not have unrealistic expectations for recovery
6. Do not reduce the amount of leisure activities
7. Do not look for easy answers
8. Do not be hard on yourself or others
9. Do not make any major life changes or decisions at this time

CRITICAL INCIDENT STRESS MANAGEMENT (CISM) RESPONSE

Remember: You are normal and your reactions are the normal reactions of one who has experienced an abnormal event.

CISM response is a comprehensive, integrated, systematic, and multi-component approach to crisis intervention which includes:

- Assessment of the impact of the incident
- Identifying the appropriate response
- Delivery of response
- Follow-up support as required

The focus of CISM support is the relief of stress in emotionally healthy people who have been involved in or affected by critical/traumatic patient safety incidents.

The goals of the CISM response are to:

1. Reduce the impact of the traumatic event
2. To facilitate and accelerate the recovery process and return to normal functioning.
3. To build team cohesion
4. Identify staff needing further support and provide follow-up

CISM is not counselling or psychotherapy; it is a specialised acute emergency support intervention (sometimes called Psychological First Aid) which requires specialised training.

SEEKING MEDICAL ASSISTANCE:

You should seek medical advice and assistance if:

- (a) you are experiencing difficulty with sleeping for more than 1 week.
- (b) your response to the event is too intense or lasting too long.
- (c) you are experiencing intense physical reactions to reminders of the event e.g. pounding heart, rapid breathing, nausea, muscle tension, sweating.
- (d) you are experiencing suicidal feelings or symptoms associated with depression/despair.
- (e) you feel unable to return to work because of the event.
- (f) your response to the event is impacting on your private life outside work and your ability to cope generally with normal day to day activities.

RESOURCES FOR STAFF:

- Support is available from:
 - your line manager
 - senior management staff
 - Employee Assistance Programme or Occupational Health Department
 - Mental Health Services and Psychology Services.
- Do not underestimate the importance of discussing your feelings/symptoms with your line manager and work colleagues and also with your GP.
- See table 5 below for list of support services and resources available for staff

Table 5: List of Support Services and Resources

Employee Assistance Programme, National Phone Line	0818 327 327
Healthcare worker COVID-19 helpline	1850 420 420 Opening hours: Monday to Friday: 8am - 8pm, Saturday and Sunday: 9am - 5pm
Health & Safety Helpdesk Team	1850 420 420 Click here for information
Workplace Health & Wellbeing Unit	Click here for information
Online Mental Health Supports	<ul style="list-style-type: none"> • Staff Minding your Mental Health Page: Click here • SilverCloud Health is a self-help resource which can help people to manage their mental health needs and stay well. The programmes are free to HSE staff and cover topics on: Dealing with Stress; Building Resilience; Improving your Sleep; and Space from COVID-19. Click here to access the SilverCloud programme online. Once on the SilverCloud website, complete the sign-up process and enter the access code HSE2020 when prompted to do so.
The HSE Policy for Preventing and Managing Critical Incident Stress 2012	Click here to access the policy
The HSE Policy for Prevention and Management of Stress in the Workplace 2018	Click here to access the policy
HSE Coronavirus Website	Click here for information
The HSE Open Disclosure Policy 2019	Click here to access the policy
The HSE Incident Management Framework and Guidance 2020	Click here to access framework and guidance
Video: 'Tips for healthcare workers to manage our emotional response to unprecedented circumstances'	Click here to access video link

BIBLIOGRAPHY:

APS Healthcare ,2010: Managing the Impact of a Critical Incident: A Guide for Managers and Supervisors at the University of Washington.

Canadian disclosure guidelines: Being Open with patients and Families, Canadian Patient Safety Institute, 2011

HSE Policy for the Prevention and Management of Stress in the Workplace 2012.

HSE and State Claims Agency 2013, Open Disclosure: Communicating with Patients and their families following Adverse Events in Healthcare, National Guidelines.

HSE Open Disclosure Policy 2019

HSE Policy for Prevention and Management of Stress in the Workplace 2018

HSE 2020 Incident Management Framework and Guidance

Kentucky Community Crisis Response, Community Response Team. Normal Reactions to an Abnormal Event, Staff Information Leaflet,

Perry, Giles and Firkins, Gary, 2010, "South Staffordshire and Shropshire Healthcare NHS Foundation Trust, Critical Incident Debriefing Policy," Document Reference: R/GRE/hs/04

Scott SD, Hirschinger LE, Cox KR, McCoig M, Brandt J, Hall LW. The natural history of recovery for the healthcare provider "second victim" after adverse patients. Qual Saf Health Care. 2009; 18(5):325-330.

Wu, Dr Albert, John Hopkins University, Adverse Events and the Second Victim, On-line Power Point Presentation.

Van Pelf, F., 2008, Quality and Safety in Health Care, Peer Support: healthcare professionals supporting each other after adverse medical events.

ACKNOWLEDGEMENTS

The National Open Disclosure Office wishes to acknowledge the input from the HSE EAP Programme and the Health and Wellbeing Unit in the development of this document.

EAP and ME

Employee Assistance Programme

Many of us experience stresses and strains in our work and personal lives and might be wondering if there is anyone there to help.



EAP is a free, confidential counselling service, here to help you. EAP also offers support following a critical incident affecting you or your team.

Call **0818 327 327**

to speak to someone who can help.

 #EAPandME

Go to www.hse.ie/EAPandME to access our online hub of helpful resources

