





































## Surgeon demographics at post-disclosure

Post-Disclosure Surveys (n=35 respondents)	<u>N=62</u> <u>surveys</u>	%
Male	41	67.2
Completed 1 survey post-disclosure	35	56.5
Completed 2 surveys post-disclosure	18	29.0
Completed 3 surveys post-disclosure	9	14.5
Attending	52	85.0
Fellow	2	3.3
Resident	7	11.5
<b>Q: Which best describes the type of event you experienced?</b>		
Return to operating room	16	25.8
Required additional procedure after surgery	35	56.5
Other	11	17.7

## Surgeons' Reports of Disclosure

<u>Please indicate which of the following you discussed with your patient after this event:</u>	No (%)
Why the event happened?	No: 5 (8.3) Yes: 55 (91.7)
Whether or not the event was <b>preventable</b> ?	No: 27 (45) Yes: 33 (55)
How <b>recurrences</b> of the event could be prevented?	No: 40 (67.8) Yes: 19 (32.2)
Did you <b>express regret</b> for what happened? (e.g. I'm sorry you have to go through this)	No: 8 (13.3) Yes: 52 (86.7)
Did you <b>express concern</b> for the patient's welfare?	No: 3 (5.0) Yes: 57 (95.0)
Did you <b>apologize</b> to the patient?	No: 27 (45.0) Yes: 33 (55.0)
Did you disclose the event within <b>24 hours</b> to the patient or family member?	No: 2 (3.3) Yes: 58 (96.7)
Did you discuss <b>steps taken</b> to treat any subsequent problems?	No: 1 (1.7) Yes: 59 (98.3)

## Mixed Regression Models Testing Hypotheses of Surgeons' Perceptions, Disclosure Elements and Attitudes on the Effect on Surgeons

Outcome	Predictor	Estimate $\beta$	95% CI	*FDR p-value
<b>Affected you personally</b> (1=not at all to 5=extremely)	<b>Seriousness of event</b> (1=not at all to 4=extremely)	0.60	0.31, 0.90	p=0.004
<b>Affected you personally</b> (1=not at all to 5=extremely)	<b>Experience discussing event</b> (1=very difficult to 4=not difficult at all)	-0.61	-1.00, -0.23	p=0.02
<b>Affected you personally</b> (1=not at all to 5=extremely)	<b>Whether or not event was preventable?</b> (0=no; 1=yes)	1.00	0.39, 1.61	p=0.02
<b>Affected you personally</b> (1=not at all to 5=extremely)	<b>How recurrences of the event could be prevented?</b> (0=no; 1=yes)	1.39	0.70, 2.08	p=0.005

\*False discovery rate for multiplicity of tests; CI: confidence interval

## Logistic Regression Models Testing Hypotheses of Surgeons' Perceptions, Disclosure Elements and Attitudes on the Effect on Surgeons

Outcome	Predictor	OR	95% CI	*FDR p-value
No negative effect on your life (0=no; 1=yes)	Experience discussing event (1=very difficult to 4=not difficult at all)	4.09	1.72, 9.72	p=0.01
Anxiety about future outcomes or events (0=no, 1=yes)	Negative attitudes in <u>low harm</u> (blood loss) scenario (scale range 0-6)	1.54	1.16, 2.06	p=0.03

\*False discovery rate for multiplicity of models; OR: odds ratio; CI: confidence interval

# Post-Disclosure Interviews (n=23)

## **Greater anxiety about future outcomes:**

“Cause it always kind of, you always wonder if it was me a different day, was it my skill set, if it was a different surgeon would that not have happened, and then if this happens a lot, what are other people thinking about my skill set and my ability to take care of my patients and all that kind of stuff”.

# Post-Disclosure Interviews (n=23)

## Affected you personally:

“I think as physicians our whole goal is to try to make people feel better, and when something isn't perfect and actually impacts a patient negatively like, you beat yourself up about that...it just adds a lot of angst”.

# Conclusions and Recommendations

- **Results from this study highlight:**
  - Many surgeons, without training, use 5 of 8 disclosure items
  - Preventability of adverse event difficult to discuss
  - Difficult experiences was associated with feeling more negatively affected
  - Negative attitudes associated with greater anxiety following disclosure
  
- 1. **Assess attitudes** towards disclosure to identify surgeons who may benefit from disclosure support
  
- 2. **Plan for follow-up** with surgeons after disclosures to provide support; this would help facilitate increased use of disclosure items
  
- 3. **Establish peer-support systems** for surgeons, because only other surgeons will understand this impact of disclosure

# Peer Support for MDs

- 79% of surgery, emergency med, anesthesiology residents and attendings experienced serious adverse patient event or traumatic personal event within previous year
- 88% willing to seek support from physician colleague; 48% mental health; 29% EAP
- 1:1 peer support program incorporated into hospitals' support services





## Disclosure Support Program +

Following in 4:1 stream

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### GROUP OVERVIEW



The Disclosure Technical Assistance & Support Program is available to help VA facilities, leaders and employees prepare disclosure communications for all types of adverse events. Resources include Toolkits, tracking spreadsheets, and checklists to help in disclosing to one or more patients. All guidance is based on VA policy and feedback from leaders, employees, and patients who have been through the disclosure process in the past. Please reach out to the group with any questions, concerns, or suggestions.

**Owned by:**

Ravi Eley, Elizabeth Maguire

**Tags:**

adverse events, toolkits, communications materials, disclosure

**Group Type:**

Secret

**Created:**

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### LATEST POLL

[4 Questions](#) [View poll](#)
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1. What is your biggest concern when disclosing adverse events to patients?

17% [Marked as the correct answer](#) [View poll](#)

# Thank you!

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