



Coaching & Mentoring

Everyone has a role in Patient Safety

Even when you are committed to doing the right thing, it's not always clear what the right thing to do is.

Not Feeling Alone

Nobody should have to face disclosure conversations on their own.

In preparing for disclosure, there is nothing more important than coaching and mentoring.

I think it might have gone better if I had known where to get help before I spoke with my patient.

It was very helpful to have someone to call to say 'I'm not really sure what to do. Could you come with me? Could you practice with me?'

Conversations about serious events are rare so that when we face this situation we need help from someone who has been through it.

Leading By Example

As a leader it isn't enough to set the expectation that disclosure will happen. You have to learn it, practice it, and live it, taking a hand in role playing and assisting your physicians whenever they are facing these conversations.

My role as a mentor involved teaching and preparation. But more than that, it helped me realize how much I need to look after my team. I worry about them because it's unbelievably emotional.

Knowing Who To Call

It is always helpful to talk to somebody who has been through a situation and has the experience and can help anticipate what the family may feel, question, or say. For the organization, I think it should be more formal.

When things happen you need to know who you can call for help quickly because we need to initiate family contact as quickly as possible. It should be the responsibility of the organization to make this resource available.

I found three physicians who were very good at disclosure. I would get these people to mentor my colleagues. That was very helpful.



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Role of a Coach or Mentor

- Creating a culture where open disclosure is an expectation.
- Giving staff and physicians permission to be open and honest.
- Helping staff and physicians recognize and deal with their own emotions.
- Helping to anticipate the patient or family's feelings, questions, and/or needs.
- Helping with conversation styles that convey compassion and honesty, and not coming across as being defensive.
- Bringing knowledge of where to access available supports and resources for the patient and family.
- Rehearsing the conversations.
- Accompanying staff.

When we rehearsed the conversation I had to take the role of the patient. It opened my eyes to how they must have been feeling and what questions they must have.