"She's Not Dead Yet, Jim":

Vulnerability and Retrospectives in Emergency Medicine



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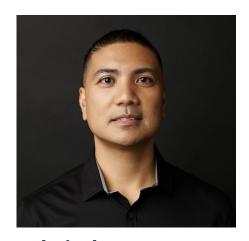
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Retrospectives in Emergency Medicine: Debriefs & Case Reviews



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How to reduce the emotional trauma of post-incident reviews?

Preface the Debriefs

Shared goal. No finger pointing.

Lead with Vulnerability

Start with a mistake that you've made

Inspiring Ownership

"If you can change 1% to better the outcome, what would that be?"

Level up Your Team

Getting a team member to lead the discussion

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How to Make Post Incident Debriefs Effective?

Debrief Immediately

To create a shared mental model

Multiple Touchpoints

Giving people time to collect their thoughts and not feel defensive

How to coach the team to deal with self blame?

Sit with that Discomfort

"This is what it feels like to feel like you didn't do a good job"

Shared Common Humanity

"You will make many mistakes, just like me."

Putting Mistakes in Perspective

Keeping the time horizon, positive aspects, and individual limits in balance.

Elevate the team from feeling like victims to taking ownership of making improvements.

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Are mistakes a reflection of lack of competence or skill?

Mistakes are more common than you think

Competent people make mistakes when confronted with interruptions and context switches,

Leadership can adapt accordingly

The Checklist Manifesto: Even for well trained, extremely expert people. Having procedural standards that people can follow can reduce mistakes.

Designing a Learning Organization





How to adapt your language to build a learning organization?

- Peer Review → Case Review
- Compassion → Resilience? Blameless? Learning organization?
- "Why did this happen?" → "Help me understand what happened"
- "I should've" → "I saw, I did"
- Postmortem → Retrospective

What rituals and programs can encourage learning and adaptability?

- Morbidity & Mortality, Saves of the Month, and Amazing and Awesome
- Case Reviews: Feedback loops for categorized data tracked over time
- Interviewing individuals before hand
- Separate action items from the group meeting itself

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Role Creation & Metrics

- Chief Wellness Officer; Director of Wellbeing
- Retention
- Dollar lost from burnt out physician

Summary

Post Incident Reviews in the ER

- Making reviews effective and reducing emotional toil
- Dealing with self blame
- Interpreting mistakes: perspective & competence

Designing a Learning Organization

- Language
- Rituals & programs
- Role Creation & metrics



How you can help?

Crowdsourcing Better Retrospective Practices @blamelesshq

What specific practices have you found helpful with socializing learnings
from a retrospective amongst a wider audience beyond those
immediately involved?

Healthcare Workers' Well-being

- Support initiatives that protect mental health of physicians
- E.g. Dr. Lorna Breen Health Care Provider Protection Act
- Vaccination helps protect doctors and other healthcare workers



Concluding Reflection



Resources

Compassionate Workplace

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Post Incident Reviews In the Emergency Room

Outline

Post Incident Reviews in the ER

Designing a Learning Organization

