The Power of Apology

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When Things Go Wrong:
Responding to Adverse Events

www.macoalition.org/publications.shtml

Video: www.rmf.harvard.edu
A serious preventable injury is a medical emergency

Unlike other emergencies, it has two victims: the patient and the caregiver

A sincere apology is essential for healing

1. A serious preventable injury is a medical emergency

- A preventable adverse event is a major threat to the patient’s trust, and therefore to the doctor-patient relationship
- If it is not treated appropriately, the relationship will rapidly deteriorate
- Time is of the essence
### The patient’s response to injury

- The emotional reaction to injury is a mix of fear, anxiety, depression, anger, isolation
  - “Why did this have to happen to me?”
- Patients feel humiliated, devalued, and betrayed
- Injured patients have these feelings whether or not there has been a mistake
- It is a by-product of our hype: patients have been led to expect perfect results
- Therefore, if something goes wrong, you must have done something wrong

### Following a serious injury the patient is doubly wounded

- A physical wound – the “adverse event”
- An emotional wound – the sense of betrayal and loss of trust
What is the medical treatment of this emotional wound?

- Treat it as an emergency
- The treatment is honest, open, full communication, and, when indicated, apology

How should we respond?

- Acknowledge the event
- Express regret
- Take steps to minimize further harm
- Explain what happens next
- Commit to investigate to find out why
- Provide feedback of results
<table>
<thead>
<tr>
<th>The patient has a <em>right</em> to transparency</th>
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<tr>
<td>- “Nothing about me without me”</td>
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<td>- Caregivers have no legal or moral authority to withhold information</td>
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<td>- Withholding information is arrogant and disrespectful</td>
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<td>- Not knowing causes anger, resentment and loss of trust</td>
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<th>On honesty</th>
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<td>Honesty from health professionals matters more to patients than almost everything else that they experience when ill.</td>
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from Sissela Bok, LYING
The power of silence

Pretending that nothing happened, or telling about it in incomplete ways is **lying**

- The power of silence

For the patient
- Sows fear – “It must be even worse than I suspected since no one will tell me.”
- Destroys trust – “How can I trust you when you won’t tell me what happened?”
- Confirms suspicion – “You must have done something wrong, otherwise you would tell me.”
### The power of silence

#### For the physician

- Lying destroys our integrity and inner equilibrium
- It is hard to live with a lie

### How should we respond when the injury is caused by an error or systems failure?

- Apologize: take responsibility, show remorse
- Make changes to prevent recurrence
- Provide continuing emotional support
Knowing that changes were made so that others will not suffer gives a positive meaning to the patient experience; their suffering was not in vain.

A full explanation is just as important when the investigation shows that there was no error or system breakdown.

2. A serious preventable injury has two victims: the caregiver is also wounded

- Shame, guilt and fear can be profound
- The ability to deal with patients may be impaired
- Caregivers need support from colleagues
What does the caregiver want?

- To have the patient know that it was unintentional
- I was trying hard to do the right thing
- I feel terrible, ashamed, guilty, sad
- I want to make amends
- I want you to forgive me

3. A sincere apology is essential for healing

- Apology begins to make amends
- It treats the hurt of the emotional wound
- It begins the healing process
The patient *deserves* an apology

- A matter of decency, not of rights
- Not being apologized to hurts, it is demeaning
- “You don’t care; you don’t feel my pain.”

The components of apology (Lazare)

- Acknowledge the harm
- Take responsibility for it
- Explain what happened
- Show remorse
- Make amends
### The power of apology

#### For the patient:
- Helps to restore the patient’s dignity and self-respect
- Begins to restore trust
- Provides assurance that they are not at fault
- Shows that you also suffer
- Provides reparations to demonstrate you understand the victim’s suffering and loss of trust

#### For the doctor:
- Gives expression to the normal empathic concern we have for the harmed patient
- Begins to relieve guilt and shame
- Begins to restore the emotional balance
- Makes forgiveness possible (but not inevitable)
But you have to do it right!

- Take responsibility
- Show remorse
- Make amends

How apologies fail

- Vague (Schwartzneegger)
  “I apologize for whatever I did”
- Passive (Rumsfeld)
  “Mistakes were made”
- Conditional (Trent Lott)
  “If I offended anyone, I’m sorry”
- Empathy (“Apology light”) (Bill Clinton)
  “I’m sorry you were hurt”
Why doesn’t it happen?

1. It is very difficult to apologize
   - No one likes to admit guilt and apologize
   - It’s even harder in the medical encounter

2. Medical injury is very different from the other reasons people apologize

Medical injury is very different from the other reasons people apologize

- You caused physical harm, not hurt feelings
- The injury is serious: often disability or death
  The greater the injury, the harder it is to apologize
- The injury is unintentional – makes it harder for the doctor to feel remorse
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<td>We often don’t feel responsible if we didn’t personally make the mistake.</td>
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<td>Many of us lack the skills for delivering bad news</td>
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<td>Fear of consequences: loss of patient’s trust, colleague’s respect, and risk of being sued</td>
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<td>The real reason:</td>
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<td>The sense of shame and guilt can be overpowering</td>
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<td>Bad advice from lawyers</td>
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<tr>
<td>■ Framing apology as a liability issue sabotages the needs of both the patient and the doctor for healing</td>
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<td>■ Withholding information and not apologizing for our mistakes makes a difficult situation infinitely worse</td>
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<td>■ Understandable: lawyers’ responsibility is to protect the client’s financial interests</td>
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<td>■ But withholding information is unethical; it goes against everything we want to do</td>
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<td>■ It’s also misguided: it is based on a myth</td>
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The malpractice myth

Myth:
If you tell the patient what happened or apologize they are more likely to sue, and it will be used against you in court.

Reality:
Patients are much less likely to sue if you level with them
- Plaintiff lawyer experience
- Evidence: VA, U. Mich, COPIC

University of Michigan

- Annual litigation costs
  - $3 Million
  - $1 Million
- Average time to resolution of claims and lawsuits
  - 20.7 Months
  - 9.5 Months
- No. of claims and lawsuits
  - 262
  - 114

[Graph showing data from University of Michigan]
## The power of apology

- It’s the right thing to do ethically
- It’s the right thing to do medically
  - It heals the wound
    - For the patient
    - For the caregiver

P.S. It also saves money!

## What if the lawyers are right?
How do we make it happen?

1. Set expectations: hospital policy
2. Training
   - Communication
   - Support
3. Provide support
   - Patients – emotional, financial
   - Doctors - peers
   - Communication - “Just in time” Experts