Cognitive Reframing

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One of the most effective ways that we can help support colleagues who are struggling with an adverse event is to help them reframe how they are feeling and thinking.   (It is also important that we practice this skill with OUR OWN thinking too! PIA SAFE champions are here to support our teams but also encourage and care for *OURSELVES!)*

Cognitive reframing involves changing the way we interpret or perceive a situation to alter its emotional impact. Here are some examples of how to cognitively reframe a conversation about an adverse clinical event:

1**. Reframing Blame to Growth and Learning**
• Initial Thought: "I made a mistake, and now everything is ruined."
• Reframed Thought: "This situation presents an opportunity to learn and improve. Mistakes are part of the learning process, and I can use this experience to make better decisions in the future."
• Context: When discussing a clinical error or adverse event, instead of focusing on personal failure, you can focus on the learning aspect, which can help to build resilience and motivation for improvement.

2. **Reframing Fear of Judgment to Opportunity for Support**
• Initial Thought: "Everyone is going to judge me for this mistake."
• Reframed Thought: "I am not alone in this. My peers and colleagues can offer support and perspective, and together we can find solutions to prevent similar incidents."
• Context: After an adverse event, it's natural to fear judgment, but reframing it as an opportunity to receive support from colleagues can reduce feelings of isolation and promote teamwork.

3. **Reframing Guilt to Responsibility for Improvement**
• Initial Thought: "I let the patient down. I should have done more."
• Reframed Thought: "I did my best with the information I had at the time. Now, I have a responsibility to reflect on what happened, take corrective actions, and contribute to improving the system to ensure it doesn't happen again."
• Context: Guilt can be overwhelming, but focusing on how to use the event as a springboard for action and systemic improvement helps shift from self-blame to a constructive mindset.

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4. Reframing the Impact of the Event to Collective Responsibility

• Initial Thought: "I caused this situation by not acting quickly enough."

• Reframed Thought: "This was a complex situation with many contributing factors, and I will work with the team to understand how we can improve our processes to prevent it in the future."

• Context: In healthcare, adverse events often result from systemic issues rather than individual failures. Reframing this as a team or system issue can reduce personal guilt and foster collaborative solutions.

5. Reframing the Emotional Reaction to the Event

• Initial Thought: "This is so overwhelming, I can't handle it."

• Reframed Thought: "This is a challenging situation, but I've faced difficult moments before and come through. I can take this one step at a time and lean on my support system when needed."

• Context: When emotions run high, reframing feelings of being overwhelmed into a manageable approach helps reduce stress and increases emotional control during tough times.

6. Reframing the Perception of Loss to a Focus on Resilience

• Initial Thought: "We failed the patient. This is a major setback."

• Reframed Thought: "While we didn't achieve the desired outcome, we can focus on how we can learn from this and build stronger systems, better training, and more effective communication to help prevent future issues."

• Context: Framing the event as a setback rather than an absolute failure enables individuals and teams to bounce back with a growth mindset, focusing on improvement rather than defeat.

Cognitive reframing in these situations helps reduce negative emotional responses, encourages reflection and growth, and fosters a sense of collective responsibility and future action.
When you hear a colleague say some of these initial thoughts, help guide them to reframe their thoughts and emotions in a constructive manner!

References:

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