

Critical Incidents – Interviews

OVERVIEW OF ISSUE

An incident can only be effectively analyzed once interviews have taken place with those involved. There are different approaches for obtaining input from staff: everyone together, small groups, and one at a time. Sometimes a decision on how staff are interviewed depends on logistics (e.g. geography) and personal issues (e.g. availability). Individual interviews are recommended wherever possible, particularly for the most serious incidents, to ensure that each perspective about the incident is well understood, and to guard against issues related to interpersonal team dynamics and reluctance to speak up in front of others.

KEY POINTS

- Regardless of the approach used, interviews with staff involved in critical incidents are pivotal to providing insight into factors that led to the critical incident.

THINGS TO CONSIDER

General Principles for Interviewers

- Convey compassion, empathy, and respect.
- Appreciate that supportive discussion can help staff come to terms with what has happened – conversely, confrontational and judgmental comments may lead to demoralization and defensiveness.
- Recognize the biases the interviewer may bring to the interview (e.g. confirmation bias, affective heuristics, anchoring and intuition); adopt strategies to reduce biases, such as allowing enough time to conduct the interview and adopting a structure set of criteria and process for interviews.
- Keep an open mind – there is a natural tendency to accept the first account as accurate and to weigh subsequent versions accordingly.
- Recognize that due to stress, participants may have a poor concept of the passage of time and may confuse the sequence of events.
- Use reflective listening skills (e.g. head nodding, remaining silent if the interviewee stops speaking, etc.).
- Be mindful of conflict of interest (e.g. member of the review team also involved in the credentialing and performance management of staff).
- Recognize there may be a known history of intra/interprofessional conflict between members of the review team and the involved staff.

Pre-Interview

- Plan to:
 - Conduct interviews as soon as possible while memories are fresh and before discussions with others distorts recollections;
 - Have all members of the review team present for all interviews, if possible;
 - Interview each individual or in small groups (e.g. two-three staff working the same shift);
 - Conduct interviews in person, if possible.
- Provide a verbal (e.g. via manager) or written invitation including:
 - The purpose of the interview;
 - What to expect;
 - How the information shared will be used;
 - What preparation they need to do (if any), reiterating the caution against personal notes;
 - The time, place and estimated length of the interview (e.g. one hour);
 - Name and role of interviewer(s);
 - What documents, including the health record, will be available to them during the interview;
 - The fact that they can bring a friend/colleague/union representative for support;
 - Whether the interview will be recorded.
- Work with the applicable manager to schedule during work time, if possible.
- Consider development/use of an information sheet for staff outlining key elements of critical incident management, including the interview process.

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Setting

- Ensure the location for the interview is quiet, free from distraction, private and away from the normal work area.
- Provide a copy of the health record.
- Provide a tentative timeline of events.
- Provide refreshments, tissues, etc.

Interview

- Introduce yourself and members of the review team (where in attendance).
- Adopt a supportive and understanding demeanor, refrain from judgmental or confrontational comments.
- Establish early rapport to help reduce anxiety and stress.
- Provide opening statements which:
 - Clarify your role, as well as members of the team (if in attendance);
 - Reiterate the purpose of the interview and how the information shared will be used (i.e. fact finding, learning and improvement, fill in any gaps, obtain suggestions for improvement);
 - Express genuine empathy and concern (e.g. This must be very difficult for you. How are you doing?);
 - Emphasize expectations related to confidentiality.
- Start with neutral, easy questions (e.g. How long have you been at the organization? What is your role at the organization?).
- Promote free narrative/story telling (e.g. Tell us what happened? Start at the beginning? Tell us about the shift).
- Avoid interruptions as they may reduce memory recall.
- Ask open-ended questions (e.g. What happened next? How did that make sense at the time? What else was going on that impacted the teams' assessment of the situation?) rather than leading questions (e.g. Did you call the doctor then?).
- Explore goal-conflicts (e.g. Why was there a gap between what happened and what was supposed to happen?).
- Later, explore specific factors that they think might have contributed to the incident (e.g. use guiding questions).
- Explore factors they feel helped mitigate the outcome (e.g. What went well?).
- Explore the timeline and identify any discrepancies

and/or new information.

- Acknowledge that staff are a great source for improvement ideas; ask if they have any suggestions.
- Try to ask follow-up questions in the order that the event unfolded to aid information retrieval.

Closure

- Ask the staff member if they have any other comments to make or questions to ask.
- Attempt to leave the interviewee in a positive frame of mind – reiterate the purpose – fact-finding and identifying opportunities for improvement.
- Outline next steps.
- Avoid making promises about a specific timeline, final recommendations, and the ability for them to access the final report.
- Thank the interviewee for their time and cooperation.
- Provide contact information if they think of anything else they want to add at a later date.
- Have information available on staff support/ counselling as depending on the nature of the case or the interviewee's personal involvement, they may find the process of recounting events upsetting.

Note Taking

- Given the potential for subsequent legal proceedings, establish the usual practice of:
 - Limiting note taking to one person (e.g. facilitator, designated scribe or risk manager);
 - Limiting note taking to those elements that will help in preparation of the final report (e.g. new facts about the case, issues identified and suggestions for improvement);
 - Retaining the written notes only until the final report is completed, then shredding them as they were working documents;
- Note taking may make some interviewees uneasy; explain the purpose, make only essential notes and maintain as much eye contact as possible.
- Verbatim transcripts or voice recordings are neither necessary nor recommended.

Post Interviews

- Look for consistent themes.
- Follow up on any discrepancies.
- Ensure any new facts identified are recorded in the health record.

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