Discussion# 11 Lewis Blackman

[Institutional Affiliation(s)]

Author Note

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A confession in medical filed is one of the greatest profound restorative practices among persons, crowds, or states for the individuals suffering from the loss. It may reestablish damaged associations or even reinforce previously satisfactory interactions. It involves that a heartfelt apology can reduce guiltiness, disgrace, and the distress of revenge. An apology is considered as the utmost healing behavior towards a family and individuals suffering from the loss. The grudge and corrosive aggressive behavior would be reduced while communication with the victim and it would also facilitate in reconciliation and forgiveness. To communicate with the family in a regretful manner is important by the crisis management team.

It appears logical that individuals and their relatives who have been damaged by therapeutic mistakes would assume physicians and organizations to confess what occurred and apologize (Primaris, 2019). Though, this reply has conventionally been perceived inside the medicinal society as either imprudent or impractical (“Medication Safety: A Patient’s Story - YouTube,” n.d.). Establishment of the patient-worker association and relation could create a habit of development and improvement for all, not criticism in contradiction of others (Lazare, 2006). Apologizing and remorseful attitude cannot change the outcomes. However, it can help in strengthening the communication among victims and providers to hope for the future that they would be extra careful in handling and managing patients and victims.

Different researchers have proposed different theories to handle the crisis (Primaris, 2019). It comprises of five chief image renovation approaches: rejection, dodging of accountability, decreasing the offensiveness of the incident, remedial action, and embarrassment. The approaches depend on the situation when and where to be applied. In the scenario of Lewis Blackman, approaches such as embarrassment, remedial actions for the future, and accepting the responsibility and accountability for the incident are the major crisis management steps for the team.

Embarrassment is an image renovation and crisis reaction approach projected by community relations researchers William Benoit and W. Timothy Coombs. Numerous healthcare specialists evade apology in misconduct circumstances, considering the incident as a permissible problem. Though, in emerging associations and institutions, regretful sorry works (Lazare, 2006). The victims are those who need consideration and support from the ones that have been responsible for the incident. In this scenario, an apology can create hope for them in a hopeless condition. Sorry, and remorseful attitude can create a hope that these errors would be reduced in the future and the healthcare facility workers would be more alert and attentive while handling patients (Lazare, 2006).

No healthcare provider can be perfect to that extent to eliminate all kinds of medical errors. However, the apology after mistaken and incorrect medication can imply his/her positive and regretful image that he is feeling sorry for his/her conducts. Confession and remorse feelings have the strength to change the outcomes in the future even animals demonstrate remorseful behaviors.

In the given scenario, it was an interrelated phenomenon where fragmented healthcare delivery systems, power and authority issues, failure of dual-process theory all occurred in one setting. The unnecessary and terrible death of Lewis Blackman was due to the errors by medical team in the healthcare facility. It has been observed that challenging scenarios would be easy to manage if organizations create a setting where effectively mental models are operated (Lazare, 2006). Also, the settings that have a hierarchy system with a shared vision and everyone's viewpoint is considered and appreciated would be least facing this kind of scenarios. As no healthcare facility would be able to cover and reduce medical errors however, collective efforts, appropriate listening and right decisions can reduce the unnecessary events to occur. By consistent communication procedures such as check-backs to endorse that any proposals made by group members would be considered important in medical decisions. Experts have recommended that if the anesthesiologists and surgeons had authenticated that they perceived the nurses' recommendation, this would have produced a "rethink" instant where the team would realize the situational error.

**References**

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