

Second Victim Syndrome (SVS): Support Guide for Supervisors and Employees

Health care professionals often face emotionally challenging situations. When a provider is involved in an adverse patient event — such as a near-miss, medical error, or patient death — they may experience significant psychological distress. This phenomenon is known as **Second Victim Syndrome (SVS)**.

This guide is designed to help supervisors, managers, and staff understand SVS and respond effectively. It includes practical steps, support resources, and a task checklist to ensure compassionate and structured support for affected employees.

What is Second Victim Syndrome?

Second Victim Syndrome occurs when a health care provider is traumatized by an adverse patient care event. This can include:

- Near-misses
- Deaths
- Medical errors
- Any event causing emotional or psychological distress¹

Common symptoms may include:

- Disturbing memories
- Anxiety
- Anger towards self
- Regret or remorse
- Physical or psychological distress
- Fear of future errors
- Difficulty sleeping
- Intrusive thoughts²

How can we support staff experiencing SVS?

A three-tiered support model is recommended^{3,4}:

1. Immediate emotional support from a trusted colleague or mentor
2. Peer support from trained responders (e.g., Support U)
3. Professional mental health care through programs like ASAP

Supervisor's role: Immediate response

Right after an event^{5,6}

- **Ensure privacy:** Move the team member to a quiet, private space away from the clinical area.

- **Use supportive language:**

- “How are you feeling?”
- “I’m here for you — share whatever you’re comfortable with.”
- “That must’ve been difficult. What do you need right now?”

- **Avoid minimizing or pressuring:**

- Don’t say: “Everything will be fine,” “Tell me exactly what happened,” or “Don’t worry about it.”

- **Be present and listen:** Let the team member guide the conversation. Silence is okay.

- **Offer time and space:** If possible, allow the team member to step away or leave the worksite if needed. Help arrange coverage if possible.

- **Follow up:** Ask if you can check in later that day or the next.

- **Offer connections:**

- [Support U Peer Responder](#) can follow up in the days/weeks following the incident to provide support and referral for further support as needed.
- [ASAP mental health services](#) offers non-emergent confidential, cost-free assessment, intervention, consultation, and referral services to all UC Davis and UC Davis Health retirees, faculty, staff, and their immediate family members (age 18 and over).

Mental health referrals

For UC Davis Health insurance holders

- Encourage a visit to their **Primary Care Provider (PCP)** for evaluation.
- PCPs can manage common conditions (e.g., anxiety, depression) and complete FMLA paperwork.
- For complex cases (e.g., PTSD), refer to **Psychiatry**, with a plan to transition back to PCP care.

For Non-UC Davis insurance

- Refer to Psychiatry if available.
- For **Kaiser members**, contact [Disability Management Services \(dmshelp@ucdavis.edu\)](mailto:dmshelp@ucdavis.edu) for assistance with in-network referrals and FMLA paperwork.

Task checklist

Supervisor tasks

- Connect the team member with [Support U](#) and [ASAP](#)
- Encourage completion of an **Incident Report (IR)** if applicable
- Provide:
 - **Workers' compensation forms**
 - **Injury and FMLA paperwork**
- Assist with **AggieService portal** submissions
- Schedule **regular follow-ups**

Employee tasks

- Notify your supervisor as soon as possible
- Schedule a visit with your **PCP**
- Complete and submit **FMLA paperwork** (with supervisor support to submit paperwork for Leave of Absence services)
- Speak with a **Support U Peer Responder**
- Connect with an **ASAP therapist**

Support resources

- [ASAP](#)
Academic and Staff Assistance Program
- [Support U](#)
Peer support program
- [Disability Management Services](#)
Help with insurance and FMLA coordination
- [CARE](#)
Center for Advocacy, Resources, and Education
- [HDAPP](#)
Harassment and Discrimination Assistance and Prevention Program
- [Mental Health First Aid](#)
Online training via Workplace Violence Prevention Program

References

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4. Edrees H, et al. *RISE Program Implementation*. BMJ Open. 2016.
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