



Caring for Yourself & Others During the COVID-19 Pandemic: Managing Healthcare Workers' Stress



Compassion in Action Webinar Series
March 24, 2020

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Your Moderator

Stephanie Adler Yuan, MS
Director, Education & Training
The Schwartz Center for Compassionate Healthcare



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The Schwartz Center for Compassionate Healthcare

**Putting compassion at the heart of healthcare
through programs, education and advocacy**

*Through national and international partnerships, the Schwartz Center's coalition of caregivers, patients, families and other leaders work together to make **compassion a vital element** in every aspect of healthcare.*



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Please Note

- This webinar is funded in part by a donation in memory of Julian and Eunice Cohen, whose generosity inspired others to give and to learn.
- You may submit your questions via the “Questions” pane to the right of your screen at any time.
- We appreciate your feedback! Please take a moment to complete our very brief survey following the webinar.





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<h2>Today's Host</h2> <p>Beth Lown, MD Chief Medical Officer The Schwartz Center for Compassionate Healthcare</p>  <p>the schwartz center FOR COMPASSIONATE HEALTHCARE</p>	
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<h2>Today's Speaker</h2> <p>Patricia Watson, PhD National Center for PTSD</p>  <p>the schwartz center FOR COMPASSIONATE HEALTHCARE</p>	
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Well-Being in the Chaotic Context of Disasters

- Both a learning and leadership challenge.
- Requires us to make sense of and respond to **ever-changing** contexts.
- It is a call to adaptively navigate.
- It builds our capacity to stay present, centered and grounded in fluid conditions.
- It demands our willingness to experiment and remain creative.

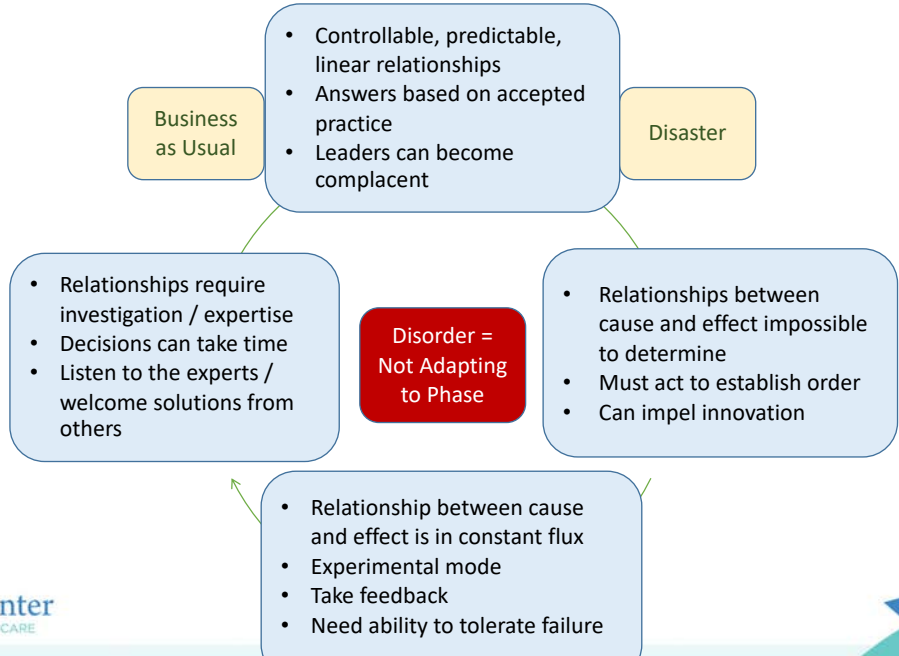


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Complexity Science: Cynefin Framework



- Controllable, predictable, linear relationships
- Answers based on accepted practice
- Leaders can become complacent

Business as Usual


Disaster

- Relationships require investigation / expertise
- Decisions can take time
- Listen to the experts / welcome solutions from others

Disorder = Not Adapting to Phase

- Relationships between cause and effect impossible to determine
- Must act to establish order
- Can impel innovation

- Relationship between cause and effect is in constant flux
- Experimental mode
- Take feedback
- Need ability to tolerate failure



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Potential Covid-19 Stress Reaction Examples

Anxiety about:

- One's health or wellbeing
- Others' health or wellbeing

Grief/Depression about lost:

- Lives
- Health
- Time
- Income / resources
- Abilities / beliefs / attitudes / values
- Connection Affection
- Plans

Confidence level drops about:

- Being able to function
- The systems one is in / affected by

Helplessness:

- Feeling loss of control
- Being exhausted / not as able to function

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Potential Covid-19 Stress Reaction Examples

Anger about:

- Perceiving that others' actions put self or others in harm's way

Guilt about:

- Fears of illness, loss of resources, or death for themselves or family/friends
- Not *being able* to do as much as one wants to
- Not *wanting* to work/care for others because of fears
- Not doing enough because of *not feeling* empathy
- Not coping as well as one wants to / feels one should

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Peer Support: Why is it Important?

- Most people injured by trauma, loss, moral, or fatigue injuries will cope, but some will become ill
- Those that do are unlikely to seek help
- There is evidence to suggest that early management of reactions is effective



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Why is it Hard to Implement Solutions?



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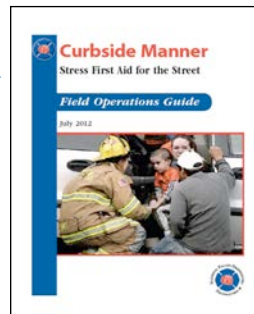
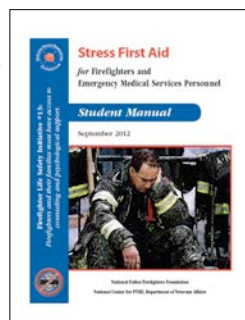
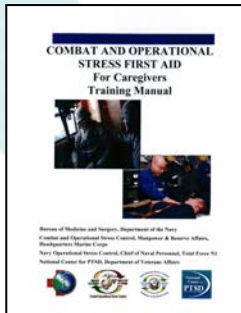
Stress First Aid (SFA) Model

- The Stress First Aid (SFA) model is a self-care and peer support model developed for those in high-risk occupations like military, fire and rescue, and healthcare.
- It includes seven actions that will help you to identify and address early signs of stress reactions in yourself and others in an ongoing way (not just after “critical incidents”).

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Stress First Aid Versions



Stress First Aid has since been adapted for:

- Rail workers
- Hospital
- Wildland
- Law Enforcement
- Probation

Stress First Aid and Curbside Manner were adapted from the Stress and Combat Operational Stress First Aid model for Marines Corps and Navy personnel

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Double Edged Sword of Values and Ideals

Strength	Guiding Ideal	Vulnerability
Placing the welfare of others above one's own welfare	Selflessness	Not seeking help for health problems because personal health is not a priority
Commitment to accomplishing missions and protecting others	Loyalty	Guilt and complicated bereavement after loss of others
Toughness and ability to endure hardships without complaint	Stoicism	Not aware of / acknowledging significant symptoms /suffering
Following an internal moral compass to choose "right" over "wrong"	Moral Code	Feeling frustrated and betrayed when others fail to follow a moral code
Becoming the best and most effective professional possible	Excellence	Feeling ashamed / denial or minimization of imperfections

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Self-Care Obstacles: Attitudinal

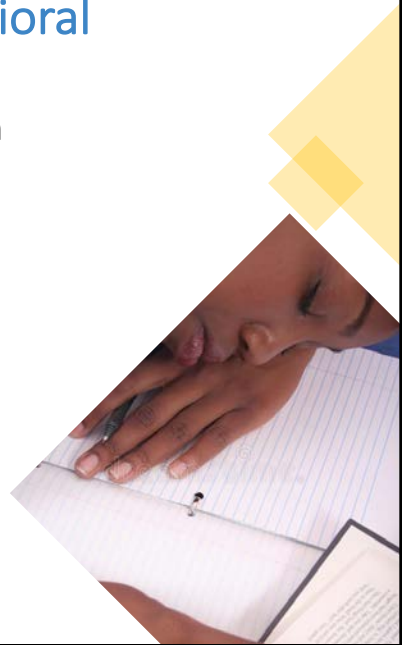
- “It would be selfish to take a break from this work.”
- “Others are working hard, so should I.”
- “I’m okay, I’m fine, I’m not even tired.”
- “The needs of those I’m supporting are more important than my own needs.”
- “I’m not doing enough.”
- “I can contribute the most by working all the time.”
- “I don’t want anyone to know how affected I am.”
- “Only I can do x, y, and z.”



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Self-Care Obstacles: Behavioral

- Working too long by yourself without checking in
- Keeping stress to oneself
- Inflexibly concentrating *only* on what to do next
- Relying *only* on alcohol / substances to relax for extended periods of time



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Be a Force Multiplier



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- Force Multiplication:
 - The effect produced by a capability that, when added to and employed by a combat force, significantly increases the combat potential of that force and thus enhances the probability of successful mission accomplishment.
- If you want to multiply your impact, focus on:
 - What you can *affect* (influence)
 - What you can *effect* (change or control)
- *True* teams work because their collective effort multiplies results.
- In times of team stress, being a force multiplier is especially important to balance out what is happening.
- The overall effectiveness of your group is increased by your presence and your actions:
 - Respect individuality
 - Give recognition
 - Seek out opportunities to reframe/raise others up

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Four Causes of Stress Injury


Life Threat	Loss	Inner Conflict	Wear and Tear
<p>A traumatic injury</p> <p>Due to the experience of or exposure to intense injury, horrific or gruesome experiences, or death.</p>	<p>A grief injury</p> <p>Due to the loss of people, things or parts of oneself.</p>	<p>A moral injury</p> <p>Due to behaviors or the witnessing of behaviors that violate moral values.</p>	<p>A fatigue injury</p> <p>Due to the accumulation of stress from all sources over time without sufficient rest and recovery.</p>


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Stress Continuum Model

READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
<p>DEFINITION</p> <ul style="list-style-type: none"> ▪ Optimal functioning ▪ Adaptive growth ▪ Wellness <p>FEATURES</p> <ul style="list-style-type: none"> ▪ At one's best ▪ Well-trained and prepared ▪ In control ▪ Physically, mentally and spiritually fit ▪ Mission-focused ▪ Motivated ▪ Calm and steady ▪ Having fun ▪ Behaving ethically 	<p>DEFINITION</p> <ul style="list-style-type: none"> ▪ Mild and transient distress or impairment ▪ Always goes away ▪ Low risk <p>CAUSES</p> <ul style="list-style-type: none"> ▪ Any stressor <p>FEATURES</p> <ul style="list-style-type: none"> ▪ Feeling irritable, anxious or down ▪ Loss of motivation ▪ Loss of focus ▪ Difficulty sleeping ▪ Muscle tension or other physical changes ▪ Not having fun 	<p>DEFINITION</p> <ul style="list-style-type: none"> ▪ More severe and persistent distress or impairment ▪ Leaves a scar ▪ Higher risk <p>CAUSES</p> <ul style="list-style-type: none"> ▪ Life threat ▪ Loss ▪ Moral injury ▪ Wear and tear <p>FEATURES</p> <ul style="list-style-type: none"> ▪ Loss of control ▪ Panic, rage or depression ▪ No longer feeling like normal self ▪ Excessive guilt, shame or blame ▪ Misconduct 	<p>DEFINITION</p> <ul style="list-style-type: none"> ▪ Clinical mental disorder ▪ Unhealed stress injury causing life impairment <p>TYPES</p> <ul style="list-style-type: none"> ▪ PTSD ▪ Depression ▪ Anxiety ▪ Substance abuse <p>FEATURES</p> <ul style="list-style-type: none"> ▪ Symptoms persist and worsen over time ▪ Severe distress or social or occupational impairment



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Moral Injury: Potential Pandemic Causes

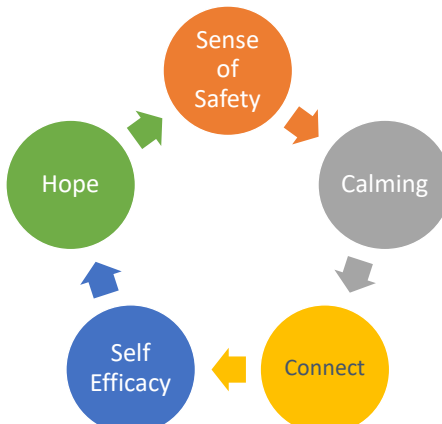

- Life and death triage or resource decisions
- Knowing that under different circumstances, a person's life could/may have been saved
- Not wanting to show up for work or volunteer for dangerous rotations / assignments
- Work duties affecting one's family
- Witnessing perceived unjustifiable acts that one feels powerless to confront
- NOT feeling as much empathy or compassion as one usually feels
- Surviving when others are dying
- Not being able to save a *particular* patient




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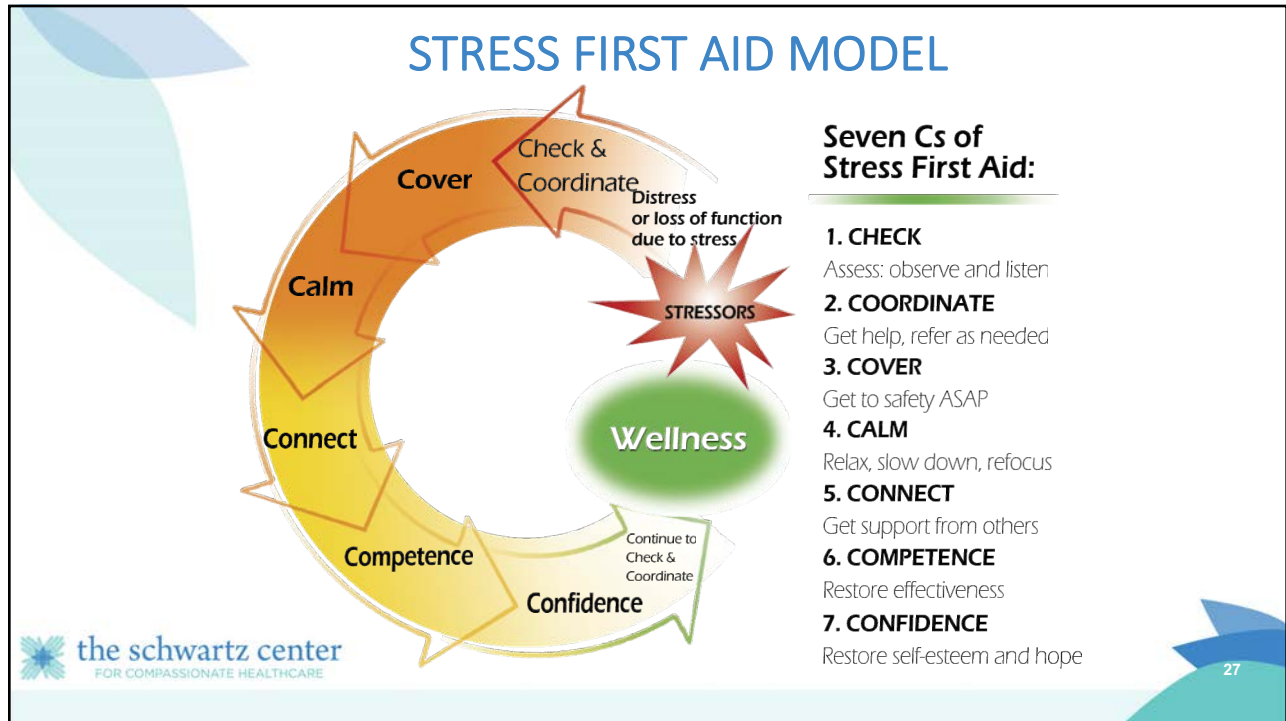
Factors in Recovery From Adversity and Stress



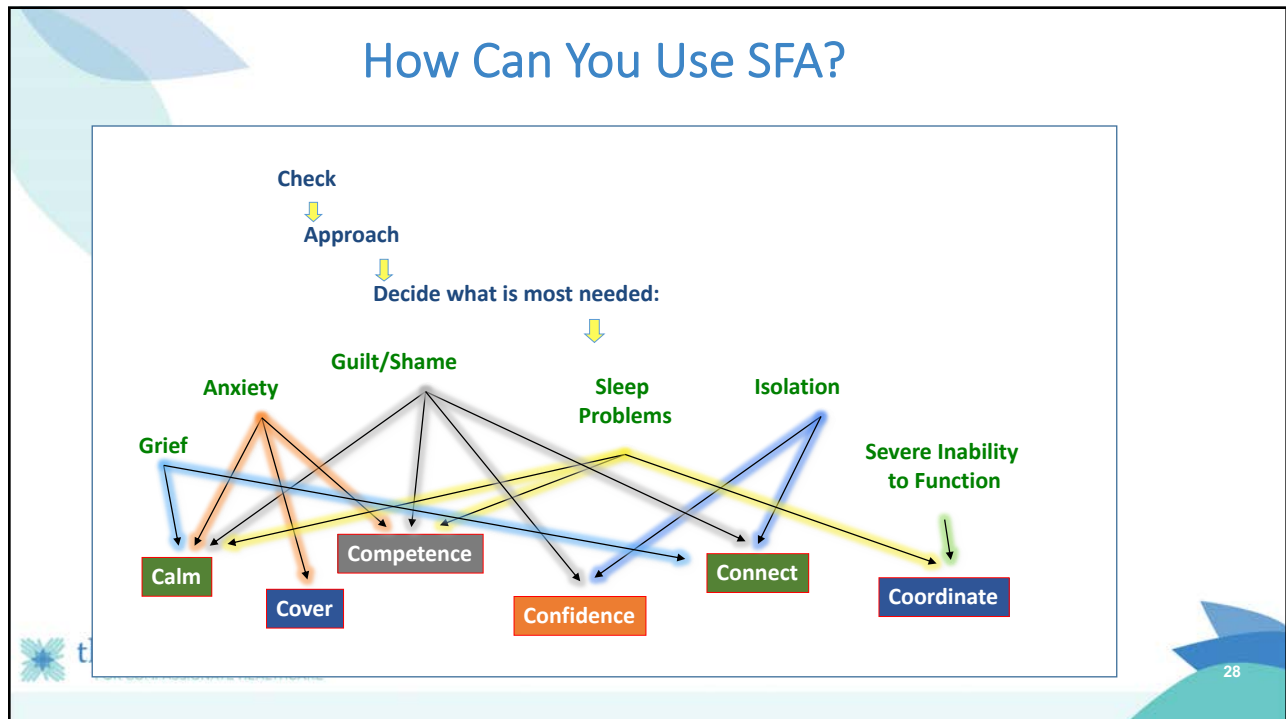
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Characteristics of Stress First Aid



- Flexibility and “tiny steps” are emphasized
- Timing and context are important
- Mentoring and problem solving are highlighted
- SFA is not meant to address all ranges of issues
- Bridging to higher care is recommended when indicated


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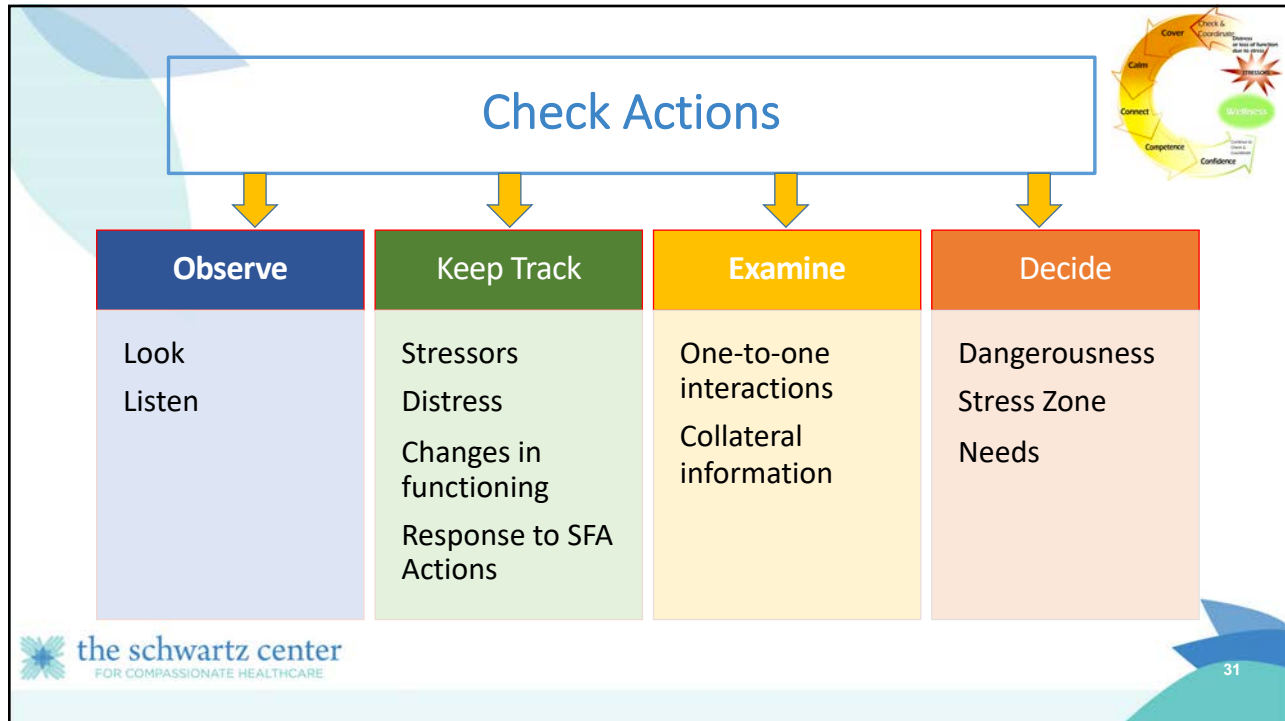
Essential SFA Skills

Recognize	Act	Know
Recognize when a peer has a stress injury	If you see something, say something <ul style="list-style-type: none">• To the distressed person• To a trusted support of the distressed person	Know at least 2 trusted resources you would offer to a peer in distress

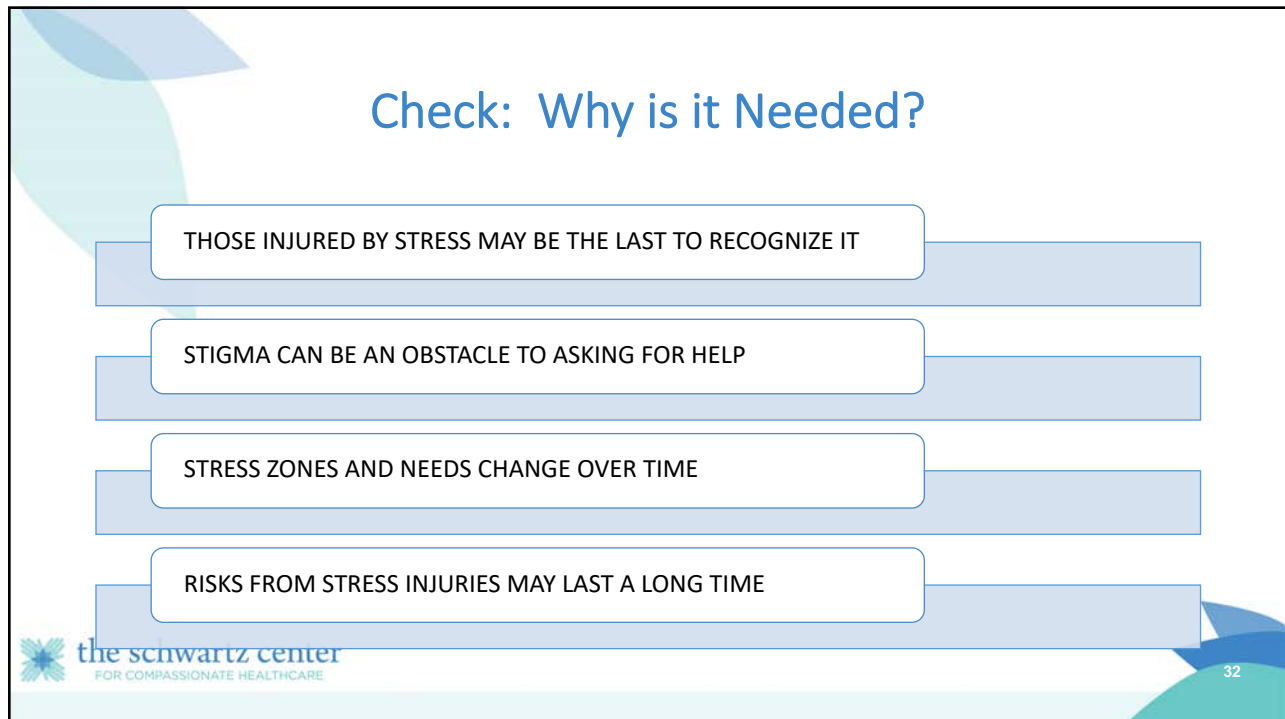
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Check Skill: OSCAR

Observe	State	Clarify	Ask	Respond
Observe: Actively observe behaviors; look for patterns	State observations: State your observations of the behaviors; just the facts without interpretations or judgments	Clarify Role: State why you are concerned about the behavior to validate why you are addressing the issue	Ask why: Seek clarification; try to understand the other person's perception of the behaviors	Respond: Provide Guided Options. Clarify concern if indicated; discuss desired behaviors and state options in behavioral terms

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SFA Group Questions

1 What are / have been your greatest challenges, hassles, or frustrations?	2 What are / have been your greatest rewards or successes?	3 What does it mean to be a in this unit?
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SFA Group Questions

Cover	Calm	Connect	Competence	Confidence
<ul style="list-style-type: none"> • How has this affected your sense of safety? 	<ul style="list-style-type: none"> • What changes have occurred regarding sleep or ability to keep calm? 	<ul style="list-style-type: none"> • Has there been an impact on how you connect with others? 	<ul style="list-style-type: none"> • Do you have any concerns about being able to handle anything? 	<ul style="list-style-type: none"> • Have you noticed any change in your confidence in: <ul style="list-style-type: none"> • yourself • leadership • equipment

What do you need ?
What can I/We do to help?


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Check: Indicators of Orange Zone Stress Reactions

- **Not feeling in control**
- **Loss of cognitive abilities**
- **Intense feelings**
- **Feeling numb**
- **Inability to engage**
- **Sleep changes**
- **Avoidance**


Significant and/or persistent negative changes in behavior / habits

Uncharacteristic behavior

Making more mistakes

Becoming more isolated from others

Compulsive behavior



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Potential Check Strategies: Others

- Offer basic resources like food, water, etc.
- Begin with a casual two-way communication to get someone talking.
- Find the right way to check on someone without annoying them (i.e., email/texting versus calling).
- Check in more than once.
- Be approachable and authentic.
- Monitor / check on staff needs regularly.
- Set ground rules.

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Coordinate Actions

Collaborate

Inform

Refer

To promote recovery To ensure safety To get more information	Chain of command Family Peers	Recommend resources Consultation Direct hand-off
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Potential Cover Self-Care Actions

- Actively seek information
- Get an accurate understanding of risks in order to better plan
- Educate loved ones about activities / risks
- Get help with personal responsibilities
- Self-monitor for stress reactions
- Plan for regular check-ins with coworkers

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Potential Cover Actions: Others

- Reduce anything that make the person feel unsafe.
- Remind them about how they are safe here and now.
- Educate about stress reactions, what to expect, how to feel safer.
- Brainstorm and problem solve solutions with them.
- Communicate with administrative leaders.
- Brief staff about changes in practice / strategies / resources / events.
- Provide an authoritative, accurate voice to limit perceived threat.

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Moral Injury Leader Cover Examples


Prepare

Communicate

Normalize

Discuss


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Calm Actions

Quiet	Compose	Foster Rest	Soothe
Stop physical exertion Reduce hyper-alertness Slow down heart rate Relax	Draw attention outwards Distract Re-focus	Recuperate Sleep Time out	Listen empathically Reduce emotional intensity




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Potential Calm Self-Care Actions

Things will never be the same again.

Even though things will never be the same, I can grow from what is happening and continue to live in the new life.

Prioritize simple strategies to calm down:

Breathing

Exercise

Yoga

Social support

Reflection/meditation/yoga/prayer

Focus on:

Whatever helps you to keep focused on the present moment

Being realistic - “sometimes / lately” vs. “never / always”


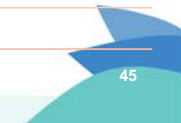
Reality – plan for stress reactions

Acceptance

Worst-case scenarios – what you’re grateful for

Changing beliefs that don’t serve you

When/how pain temporarily eases

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Potential Calm Actions: Others

- Reassure by authority and presence.
- Show understanding.
- Validate concerns.
- Provide information about reactions and coping.
- Encourage staff to take brief breaks.
- Praise and give positive feedback.

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Moral Injury Calm Examples

What we do and say is not as important as what the other person says.

What they really want from us is to know that we can tolerate being in their presence as they try to figure out what they are grappling with.

Be a witness and stand in non-judgment, and just be with them.

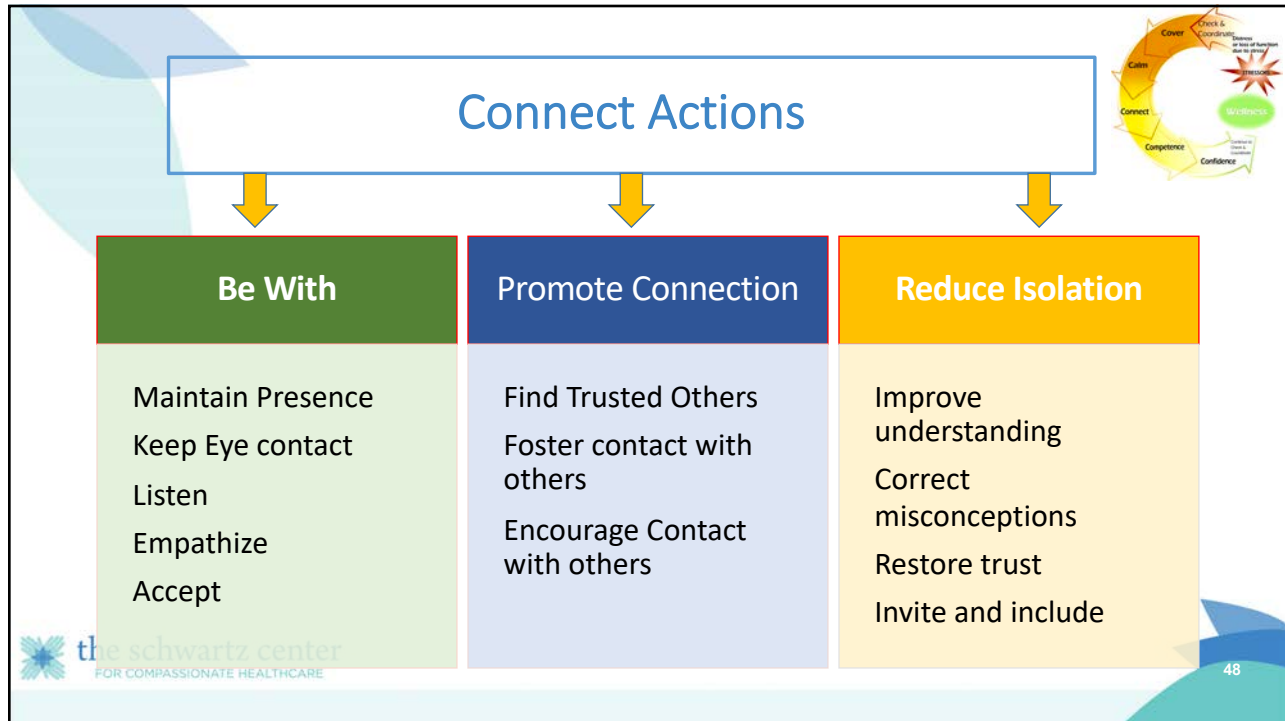
If you don't know how to respond, say something like: "That must have been incredibly hard. I can't imagine how I would feel in that situation."

If you want more information, say something like: "It sounds like you've experienced some things that nobody should have experienced – can you help me understand how that's impacting you now?"

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Potential Connect Self-Care Strategies

Be clear and authentic in all interactions.

Prioritize social connections.

Give and receive support.


Reach out to others.

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Potential Connect Strategies: Others



- Provide support yourself.
- Ask about social support.
- Act to remove obstacles to social support.
- Offer different types of social support (practical, inclusion, emotional).
- Help link with supportive others.
- Address potential negative social influences.

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Moral Injury Connect Examples

Help facilitate a connection between people if they have felt distanced or ostracized – either by their own internal guilt or by the judgment of others.

Get the person connected to others who have experienced similar types of morally injurious events.

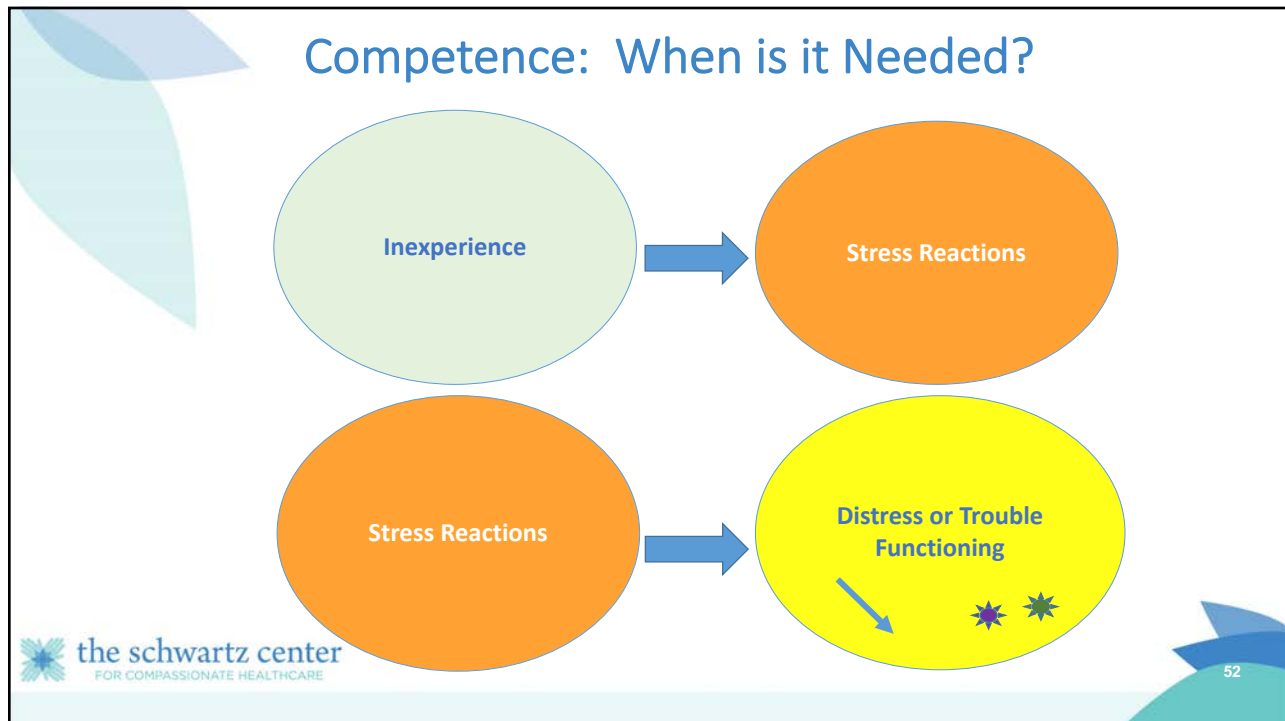
Make an effort to include the person into different types of social events.

Respect preferences and give the person time to talk about what is bothering them.

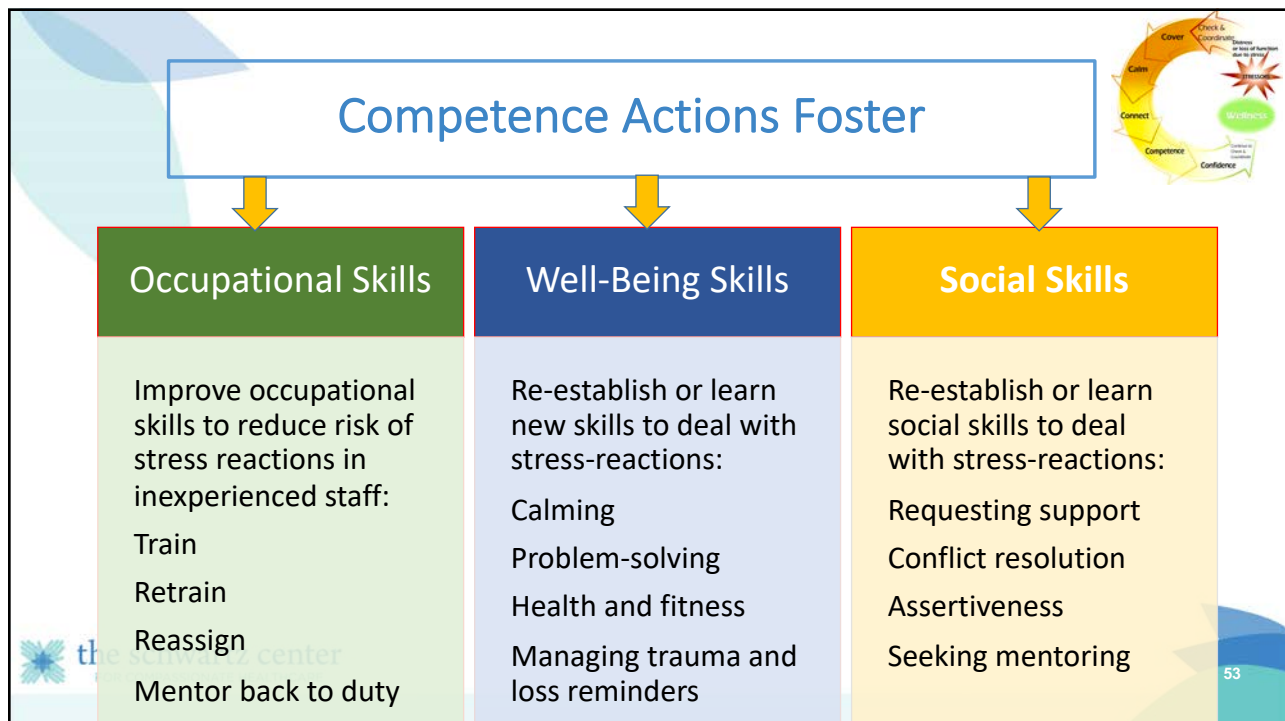
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Potential Competence Self-Care Strategies

Make a commitment to *endure*, using whatever coping skills work best for you, as well as these evidence-informed strategies:


Divert attention (reframing, humor, acceptance).

Have apprehensions circumscribed to actual threat rather than generalizing to similar situations.


Shift expectations about what to expect from day to day and about what is considered a “good day.”

Shift and focus on priorities.

Create routines of living and do not worry beyond .




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Potential Competence Strategies: Others



- *Remind* of strategies and skills that have worked before
- *Encourage* active coping
- Help *problem-solve* and set achievable goals
- Give *extra training* / mentoring
- Help “*recalibrate*” expectations/goals
- Connect to community *resources*




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Moral Injury Competence Examples

For someone who feels “I’ve never been through something like this before,” be prepared to have a conversation about it, with a focus on what they need to do to and what resources they need to get through it.

For the person who may feel like they don’t know how to talk with their family about what they are experiencing, help them to brainstorm about:

- What they want the family to know
- How work has affected them
- How to give and receive support

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Confidence Actions Rebuild

Trust

Hope

Self-Worth

Meaning


Trust in:
 Peers
 Equipment
 Leaders
 Mission

Forgiveness of self
 Forgiveness of others
 Imagining the future


Belief in self
 Accurate self-concept
 Self-respect

Making sense
 Purpose
 Faith






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Potential Confidence Strategies: Others

- Normalize reactions and concentrate on strengths.
- Be authentic and nonjudgmental.
- Honor and make meaning of losses.
- Reframe guilt and self-defeating statements.
- Be willing to talk with them as many times as they need.
- Connect them to treatment or to people who have dealt with similar things.
- Clarify rumors, misunderstandings, distortions.

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Moral Injury Confidence Examples

Moral injury is often caused by a commitment to core values. Talk about their strengths and about their core values.

If the person speaks of guilt because of acts of **omission**, say something like: “It sounds like you’re sad about something you didn’t do?” to facilitate further discussion.

If the person speaks about guilt because of acts of **commission**, say something like: “It sounds like you’re really burdened by things you did, or that you understood that you did” to facilitate further discussion.

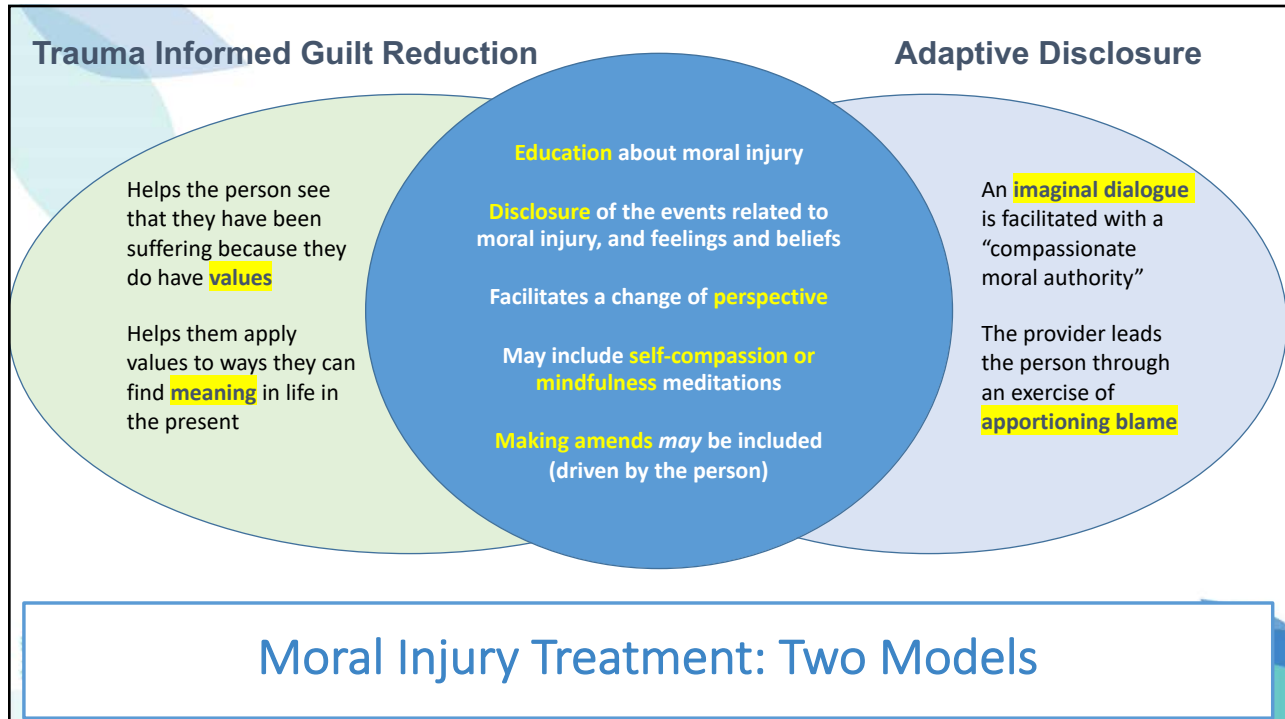
You can suggest they talk to a Chaplain or clergy, but if they are angry at God, it can become a lightning rod for that anger. Then, you may have to just bear witness as a neutral person who is going through a similar situation. If so, make every attempt to put your values in neutral.

If you can’t tolerate bearing witness, be honest. Say something like: “I don’t know if I can hear this story, but I know someone who can. I can connect you them.”

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Curbside Manner: SFA for Patients



- Make a connection in a helpful/respectful way
- Restore/support a sense of safety
- Calm and orient distressed individuals
- Connect individuals to their sources of support
- Improve the ability of those affected to address their most critical needs
- Foster a sense of hope / limit self-doubt and guilt

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Questions & Answers



**Patricia Watson,
Ph.D.**

**Beth Lown,
MD**

Please type your questions in the “Questions” pane on your screen.

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“Stress First Aid for Healthcare Leaders” Save the Date: April 7, 2020

Our next Compassion in Action webinar
with Dr. Richard Westphal and Dr. Patricia Watson

Register at www.theschwartzcenter.org

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