TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER™

School *of* Nursing

Help for the Healer
Practical Skills for Promoting Resilience

Susan Calloway, PhD, FNP-BC, PMHNP-BC, FAANP

March 5, 2021

Disclosures

I have no disclosures to report.

Objectives

1. Examine the impact of public health emergencies on the mental health of health care providers

2. Analyze personal coping skills and individual burnout scores

3. Incorporate daily skills for fostering resilience

Impact of Quarantines on Mental Health

During a Pandemic

Duration of quarantine

Fears of infection

Frustration and boredom

Inadequate supplies

Inadequate information

Post-Pandemic

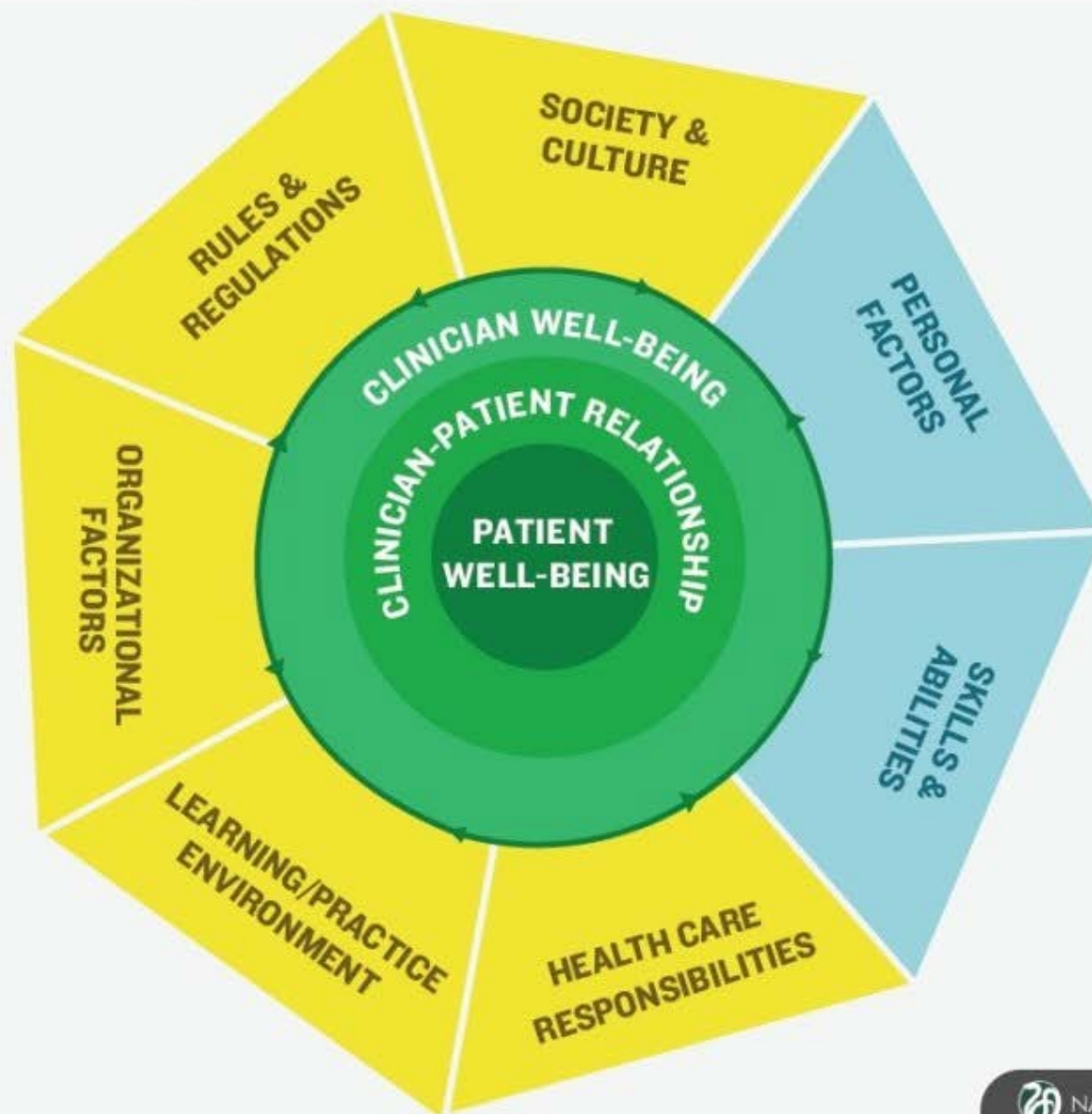Financial Strains

Stigma

Stress Mitigation

- Keep quarantine as short as possible

- Give people as much information as possible

- Provide adequate supplies

- Reduce boredom and improve communication

- Voluntarily quarantine as opposed to mandated quarantine

(Brooks, et al. 2020)

FACTORS AFFECTING CLINICIAN WELL-BEING AND RESILIENCE

This conceptual model depicts the factors associated with clinician well-being and resilience; applies these factors across all health care professions, specialties, settings, and career stages; and emphasizes the link between clinician well-being and outcomes for clinicians, patients, and the health system. The model should be used to understand well-being, rather than as a diagnostic or assessment tool. In electronic form, the external and individual factors of the conceptual model are hyperlinked to corresponding landing pages on the Clinician Well-Being Knowledge Hub. The Clinician Well-Being Knowledge Hub provides additional information and resources. The conceptual model will be revised as the field develops and more information becomes available.

SOCIETY & CULTURE

RULES & REGULATIONS

PERSONAL FACTORS

ORGANIZATIONAL FACTORS

CLINICIAN WELL-BEING

CLINICIAN-PATIENT RELATIONSHIP

PATIENT WELL-BEING

SKILLS & ABILITIES

LEARNING/PRACTICE ENVIRONMENT

HEALTH CARE RESPONSIBILITIES

NATIONAL ACADEMY OF MEDICINE

Protective Factors

- Clear communication and support from organization

- Social support & personal sense of control

<div align="right">(DeBrier, et al, 2020)</div>

- Time to rest & talk about experience

- Work in teams   (Roycroft, et al., 2020)

Together
Everyone
Achieves
More

Essential Needs for Joy in the Workplace IHI

- Physical and psychological safety

- Meaning and purpose

- Autonomy and control

Your Psychological PPE

to Promote Mental Health and Well-Being

Institute *for* Healthcare Improvement

These recommendations are based on a review of published literature and the experience of health systems. For more information visit ihi.org.

Individual

- Take a day off and create space between work and home life

- Avoid publicity and media coverage about COVID-19

- Receive mental health support during and after the crisis

- Facilitate opportunities to show gratitude

- Reframe negative experiences as positive and reclaim agency

Team Leader

- Limit staff time on site/shift

- Design clear roles and leadership

- Train managers to be aware of key risk factors and monitor for any signs of distress

- Make peer support services available to staff

- Pair workers together to serve as peer support in a "buddy system"

COVID Impact on Health Care Providers

- 73% of individuals suffer post-traumatic stress symptoms.

- 50.7% depressive symptoms

- 45% severe anxiety

- 36% Insomnia   (Preti, et al, 2020)

- Increase in relapse rates & alcohol consumption

- The longer the quarantine the poorer mental health, particular PTS symptoms, avoidance behaviors & anger

(Brooks, et al 2020)

Table. Requests From Health Care Professionals to Their Organization During the Coronavirus Disease 2019 Pandemic

Request	Principal desire	Concerns	Key components of response
Hear me	Listen to and act on health care professionals' expert perspective and frontline experience and understand and address their concerns to the extent that organizations and leaders are able	Uncertainty whether leaders recognize the most pressing concerns of frontline health care professionals and whether local physician expertise regarding infection control, critical care, emergency medicine, and mental health is being appropriately harnessed to develop organization-specific responses	Create an array of input and feedback channels (listening groups, email suggestion box, town halls, leaders visiting hospital units) and make certain that the voice of health care professionals is part of the decision-making process
Protect me	Reduce the risk of health care professionals acquiring the infection and/or being a portal of transmission to family members	Concern about access to appropriate personal protective equipment, taking home infection to family members, and not having rapid access to testing through occupational health if needed	Provide adequate personal protective equipment, rapid access to occupational health with efficient evaluation and testing if symptoms warrant, information and resources to avoid taking the infection home to family members, and accommodation to health care professionals at high risk because of age or health conditions
Prepare me	Provide the training and support that allows provision of high-quality care to patients	Concern about not being able to provide competent nursing/medical care if deployed to new area (eg, all nurses will have to be intensive care unit nurses) and about rapidly changing information/communication challenges	Provide rapid training to support a basic, critical knowledge base and appropriate backup and access to experts Clear and unambiguous communication must acknowledge that everyone is experiencing novel challenges and decisions, everyone needs to rely on each other in this time, individuals should ask for help when they need it, no one needs to make difficult decisions alone, and we are all in this together
Support me	Provide support that acknowledges human limitations in a time of extreme work hours, uncertainty, and intense exposure to critically ill patients	Need for support for personal and family needs as work hours and demands increase and schools and daycare closures occur	Provide support for physical needs, including access to healthy meals and hydration while working, lodging for individuals on rapid-cycle shifts who do not live in close proximity to the hospital, transportation assistance for sleep-deprived workers, and assistance with other tasks, and provide support for childcare needs Provide support for emotional and psychologic needs for all, including psychologic first aid deployed via webinars and delivered directly to each unit (topics may include dealing with anxiety and insomnia, practicing self-care, supporting each other, and support for moral distress), and provide individual support for those with greater distress
Care for me	Provide holistic support for the individual and their family should they need to be quarantined	Uncertainty that the organization will support/take care of personal or family needs if the health care professional develops infection	Provide lodging support for individuals living apart from their families, support for tangible needs (eg, food, childcare), check-ins and emotional support, and paid time off if quarantine is necessary

(Shanafelt, et al 2020)

So How Are <u>YOU</u> Doing?
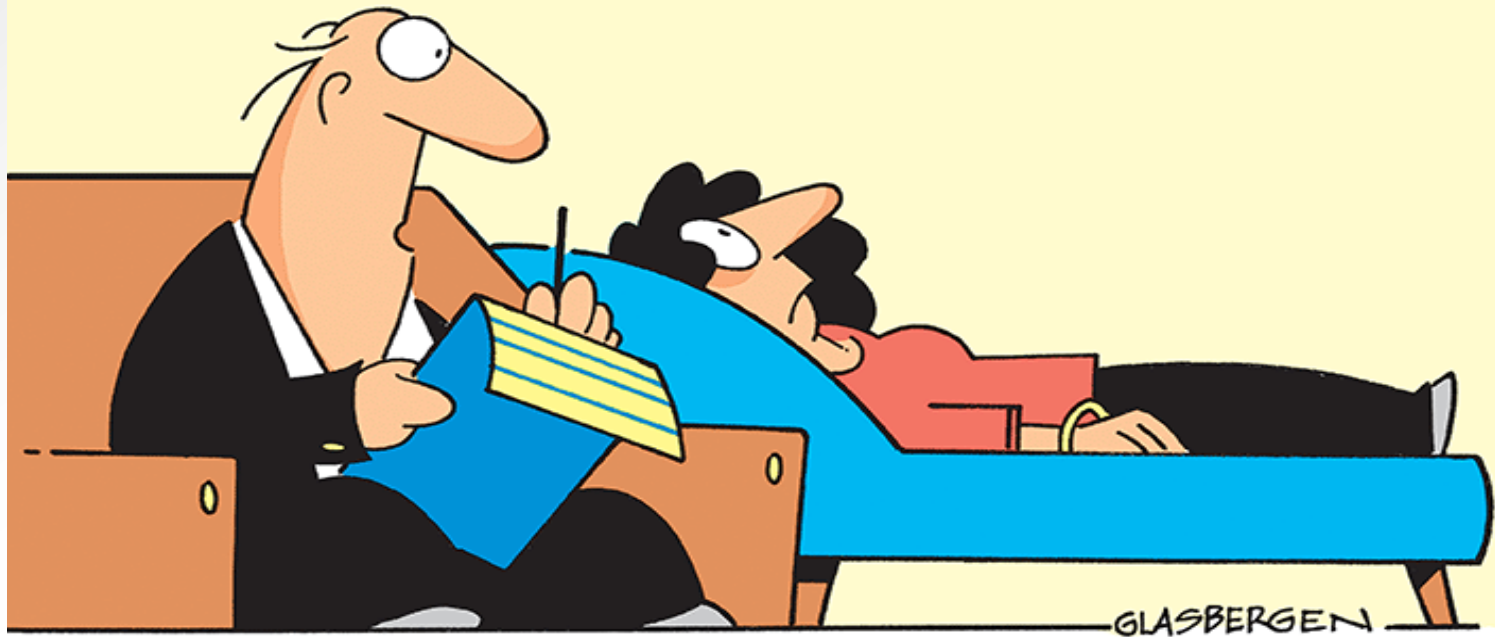
"You devote 50% of your energy to your career, 50% to your children and 50% to your marriage. I think I see the problem…"

What is Burnout?

ICD-11 World Health Assembly : burnout syndrome is conceptualized as resulting from chronic workplace stress that has not been successfully managed

National Academy of Medicine: categories of burnout

- Emotional exhaustion

- Depersonalization

- Low personal accomplishment

Key Causes of Burnout

- Regulations

- Organizational policy & culture

- Payment incentives

- Social pressures & stigma to not seek help

COMPASSION SATISFACTION AND COMPASSION FATIGUE
(PROQOL) VERSION 5 (2009)

When you *[help]* people you have direct contact with their lives. As you may have found, your compassion for those you *[help]* can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a *[helper]*. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the *last 30 days*.

1=Never	2=Rarely	3=Sometimes	4=Often	5=Very Often

1. I am happy.
2. I am preoccupied with more than one person I *[help]*.
3. I get satisfaction from being able to *[help]* people.
4. I feel connected to others.
5. I jump or am startled by unexpected sounds.
6. I feel invigorated after working with those I *[help]*.
7. I find it difficult to separate my personal life from my life as a *[helper]*.
8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I *[help]*.
9. I think that I might have been affected by the traumatic stress of those I *[help]*.
10. I feel trapped by my job as a *[helper]*.
11. Because of my *[helping]*, I have felt "on edge" about various things.
12. I like my work as a *[helper]*.
13. I feel depressed because of the traumatic experiences of the people I *[help]*.
14. I feel as though I am experiencing the trauma of someone I have *[helped]*.
15. I have beliefs that sustain me.
16. I am pleased with how I am able to keep up with *[helping]* techniques and protocols.
17. I am the person I always wanted to be.
18. My work makes me feel satisfied.
19. I feel worn out because of my work as a *[helper]*.
20. I have happy thoughts and feelings about those I *[help]* and how I could help them.
21. I feel overwhelmed because my case [work] load seems endless.
22. I believe I can make a difference through my work.
23. I avoid certain activities or situations because they remind me of frightening experiences of the people I *[help]*.
24. I am proud of what I can do to *[help]*.
25. As a result of my *[helping]*, I have intrusive, frightening thoughts.
26. I feel "bogged down" by the system.
27. I have thoughts that I am a "success" as a *[helper]*.
28. I can't recall important parts of my work with trauma victims.
29. I am a very caring person.
30. I am happy that I chose to do this work.

Compassion Satisfaction

Total the score for the following questions:

3, 6, 12, 16, 18, 20, 22, 24, 27 & 30.

Total:_____

Sum of Compassion Satisfaction	My Score Equals	My Level of Compassion
22 or <	43 or <	Low
23-41	Around 50	Average
42 or >	57 or more	High

Burnout Scale

Burnout Scale

On the burnout scale you will need to take an extra step. Starred items are "reverse scored." If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1. "I am happy" tells us more about the effects of helping when you are *not* happy so you reverse the score

You Wrote	Change to
	5
2	4
3	3
4	2
5	1

*1. ____ = ____
*4. ____ = ____
8. ____
10. ____
*15. ____ = ____
*17. ____ = ____
19. ____
21. ____
26. ____
*29. ____ = ____

Total: ____

The sum of my Burnout Questions is	So my score equals	And my Burnout level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

Secondary Trauma Scale

Total your score for each of the following questions:

2, 5, 7, 9, 11,13

14, 23, 25, 28

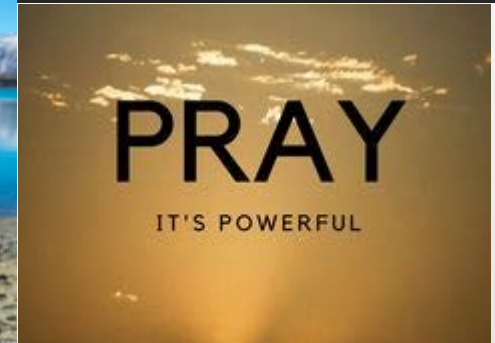| Sum of Secondary Traumatic Stress Questions	My Score Equals	My Level of Secondary Traumatic Stress
22 or <	43 or less	Low
23-41	Around 50	Average
42 or >	57 or more	High

How Is Your QOL ?

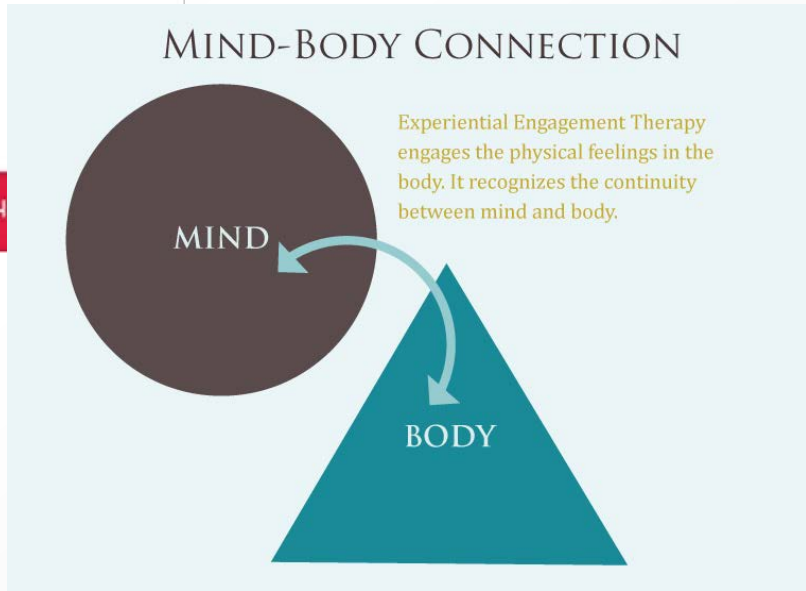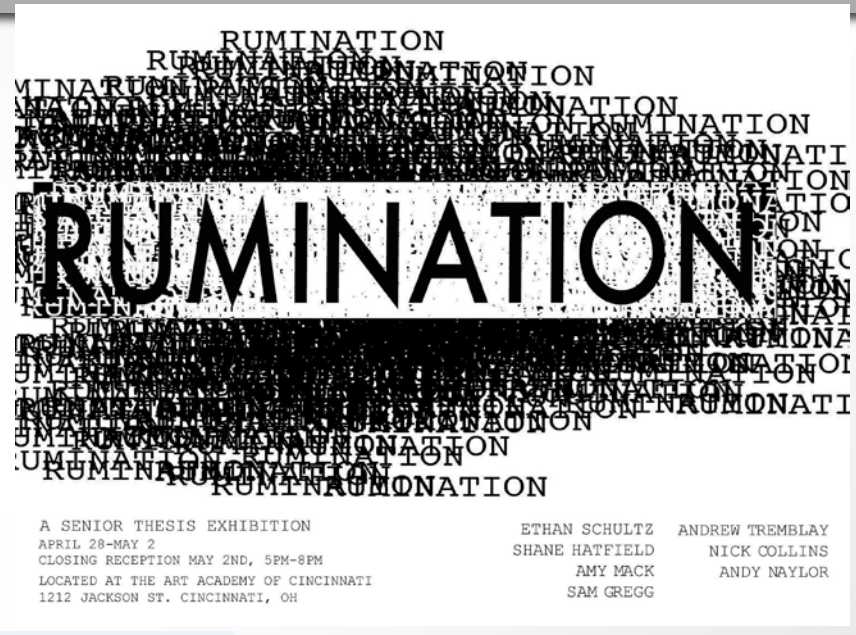# How Do You Cope?

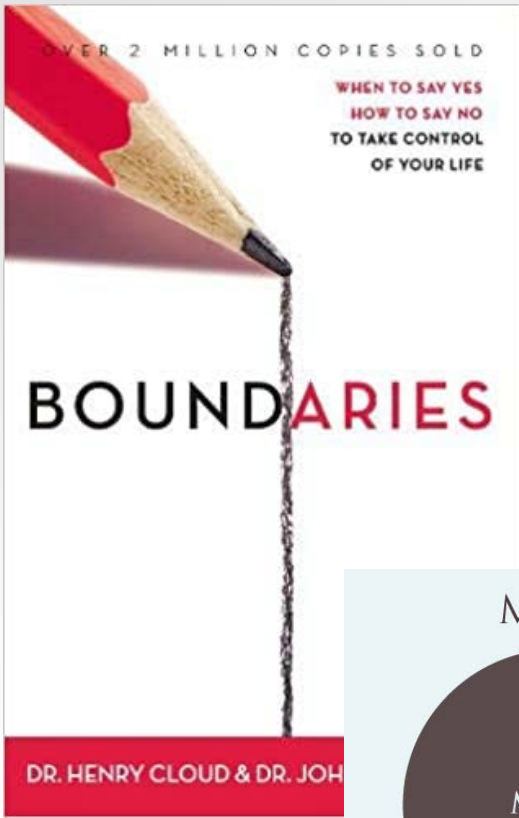# Create a List of Your Coping Strategies

Qualities of Resilient People

- Optimism or faith

- Integrity

- Social Support

- Decisiveness – identifying what you can and cannot control & responsibility

- Perseverance & tenacity

- Self-control

Three Key Strategies for Resilience

Strategy 1: Boundary Setting

- Reflect on your values and your current boundaries. Are they in alignment?

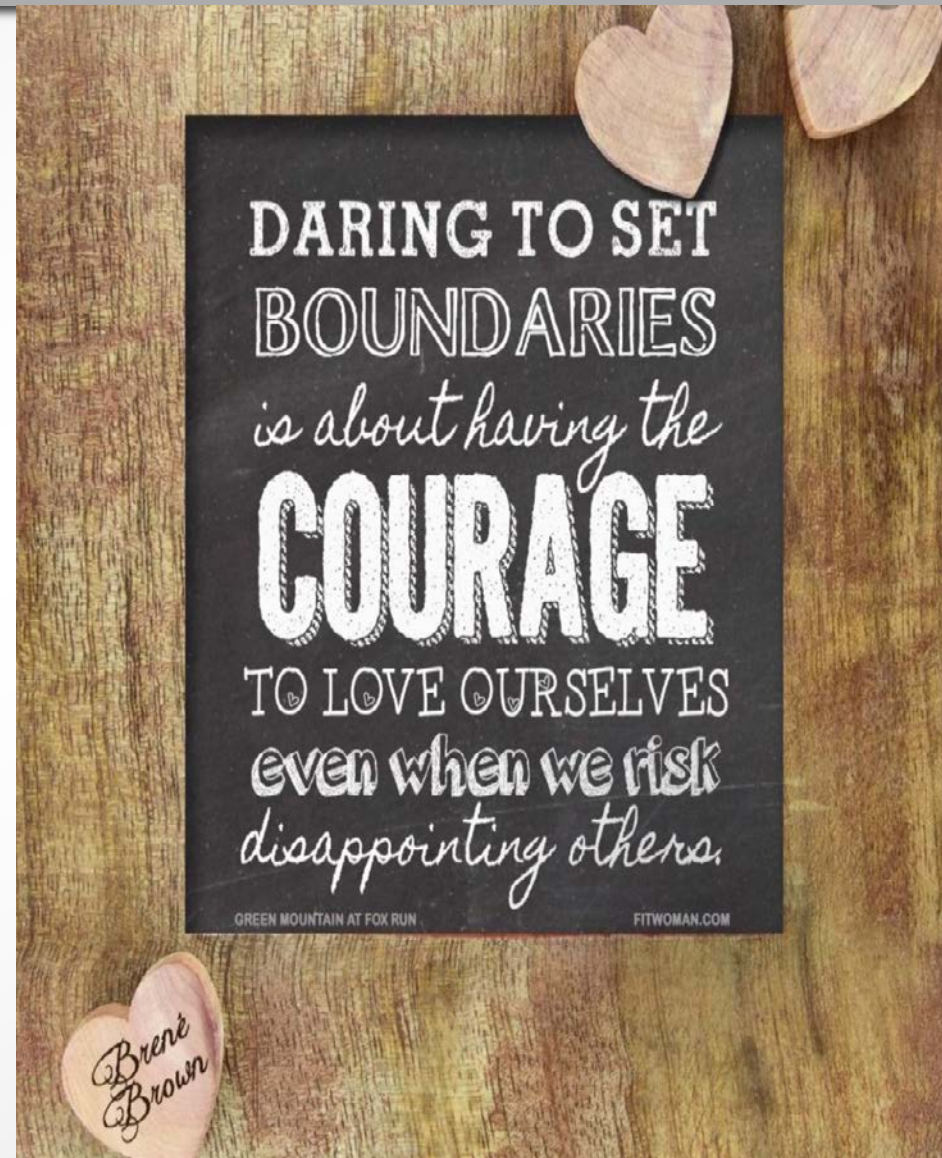- Do you avoid confrontation rather than addressing boundary issues?

Cara Young, PhD, FNP-BC, FAANP
Setting Boundaries as Self-Care

https://www.linkedin.com/pulse/setting-boundaries-self-care-cara-young/

Analyzing Boundary Setting

- Do you check and send e-mails day and night including weekends?

- Do you have a priority list with multiple items?

- Do you take time for lunch, for exercise?

- Do you work during holidays?

- Do you take on unnecessary commitments (Nelson, 2016)

DARING TO SET BOUNDARIES is about having the COURAGE TO LOVE OURSELVES even when we risk disappointing others.

GREEN MOUNTAIN AT FOX RUN   FITWOMAN.COM

Brené Brown

Communicating Boundaries

1. Rehearse what you will say prior to the meeting

2. Define your need and the current problem

3. Listen to the concerns of the other person

4. Identify where there is agreement

5. Problem solve together

(Nelson, 2016)

Homework Assignment #1

1. Identify your values

2. Analyze where in your life you need to set boundaries. Is this with a family member, co-worker, organization?

3. Develop a plan for setting boundaries where needed.

Strategy 2: Stop Rumination

Breaking the Habit of Rumination

- Recognize when you are ruminating. If you have thought of a distressing situation over 5 minutes and do not have a solution, this is ruminating.

- Identify if there is a solution to this situation and make a plan. Having a plan allows you to release rumination.

- Accept and let it go

GOD GRANT ME THE
SERENITY
TO ACCEPT THE THINGS
I CANNOT CHANGE
COURAGE
TO CHANGE THE
THINGS I CAN AND
WISDOM
TO KNOW THE DIFFERENCE

Tips for Avoiding Rumination

- If there is not a way to correct the situation use thought stopping- "This is not helpful" and change your mental focus

- Call a friend or family member

- Watch a movie or read a book

- Plan to take action if it is possible to take action and take one small step

- Question your perception of the situation
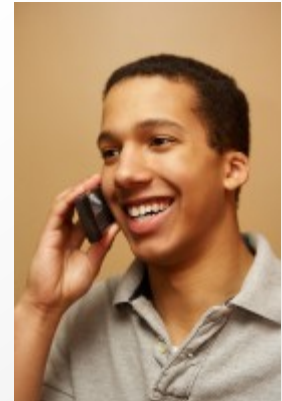
Tips for Avoiding Rumination

- Identify your triggers and the situations that cause rumination.

- Develop a plan to avoid or manage triggers

- Talk with a trusted friend who will give you an honest opinion about the situation

- If these suggestions have not worked see a therapist

MY ANXIETIES HAVE ANXIETIES.
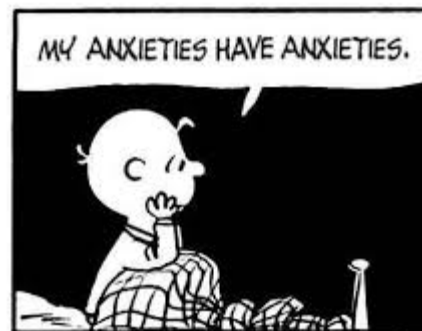
Homework Assignment #2

Be mindful of your thoughts and when dwelling on a thought or event > 5 minutes, employ thought stopping and select from the tips for avoiding rumination

Strategy #3   Experiential Engagement

- You have lost four of your patients to COVID and some leave young families

- A young mother of 2 children has cancer in her liver, spine and lungs. You have her come to your office for this unexpected news. She is about to leave for her dream vacation to celebrate her 40th birthday.

- A 38 y.o. farmer in a long-leg cast due to a farming accident. He is the caretaker for his elderly father. You drive to his home to tell him that the EGD he had done before his accident reveals esophageal cancer & he needs immediate surgery.

Secondary Traumatic Stress

- By the nature of our work we are exposed to traumatic situations which can lead to compassion fatigue and burnout.

- Most prevalent in professions and work where there is frequent exposure to traumatic situations

- Individuals that employ avoidance strategies are most at risk for signs of traumatic stress

- High levels of secondary traumatic stress in disasters and pandemics

Experiential Engagement

- The willingness and ability to engage and not avoid or suppress emotion. The opposite of avoidance

- People who are more emotionally willing to experience negative emotional experiences enjoy better mental health and do better at work over time.

Thoughts

Cognitive Triangle

Behaviors

Feelings

HUDSON *therapy*
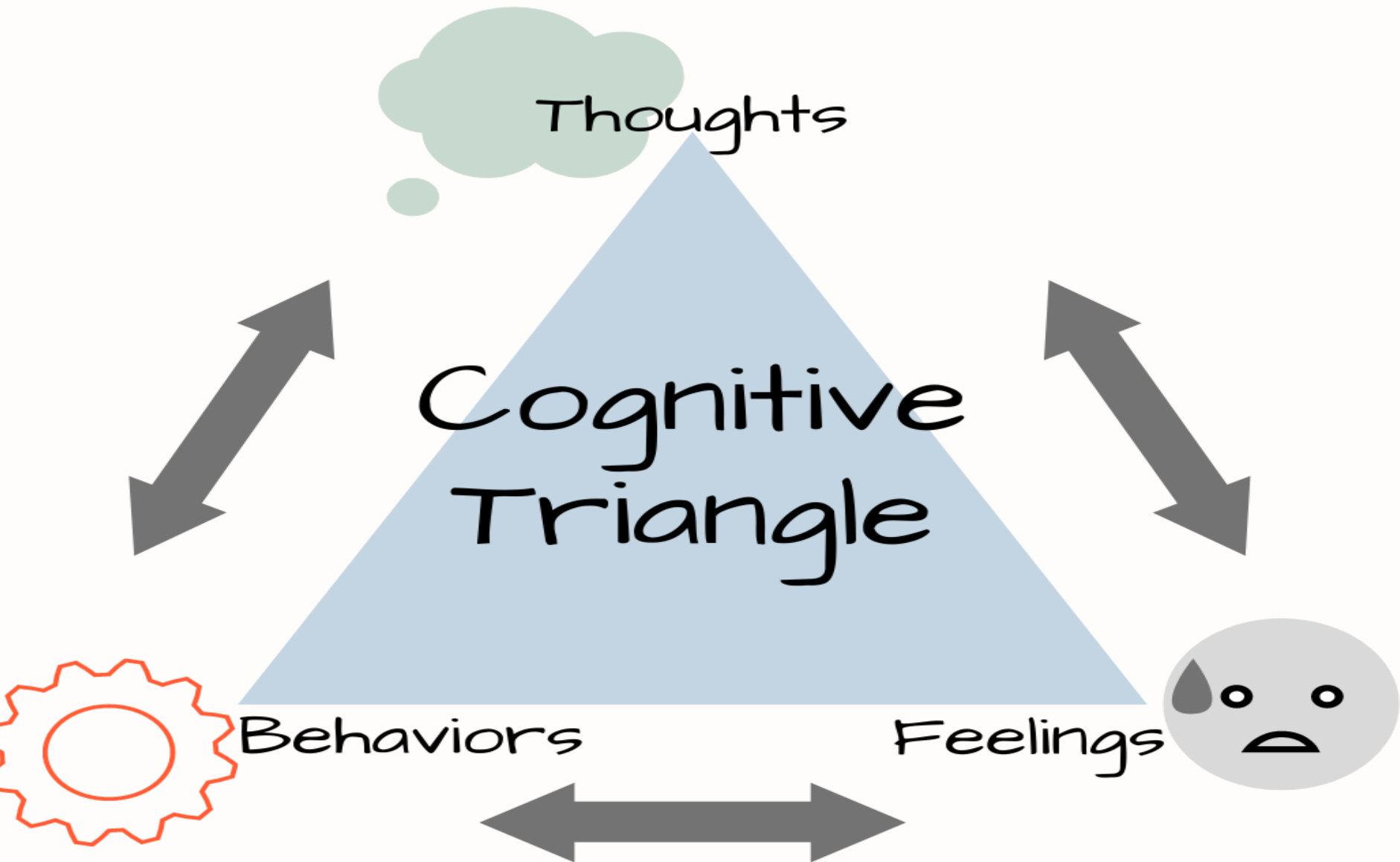
Three Skills for Experiential Engagement

Skills 1 : Intentionality

Skills 2: Conscious acknowledgement of the experience and feelings

Skill 3: Non-reactivity-what are you doing with the emotions that come with your work?

Obstacles to Experiential Engagement

➤ Failing to identify the source of your psychological distress

   Reflect on what caused the distress- often identifying the source of distress then makes it more manageable

➤ Not allowing yourself to acknowledge & experience the distressing event and process, ie. *metabolize*

Triggers Versus Trigger Reaction

Be aware of what triggers a negative reaction

Be proactive and be prepared for or avoid triggers if possible

The goal is that your brain can tell the difference between a <u>true threat</u> and a <u>perception</u> of a threat.

The greatest weapon against stress is our ability to choose one thought over another.

∾ William James

Using the SOS Method

Slow Down- Step back and clear your mind

Orient- Focus on ONE thought that helps you remember who you are and what you value, what is the most important thing to you right now?

Self-Check – On a scale of 1-10 what is my stress level and what is my personal control? This has to be practiced like any muscle

Choosing How You React

Remember that you have a choice in how you react to a situation….

No one can "make you mad"

Becoming angry leads to a feeling of lack of control leading to stress
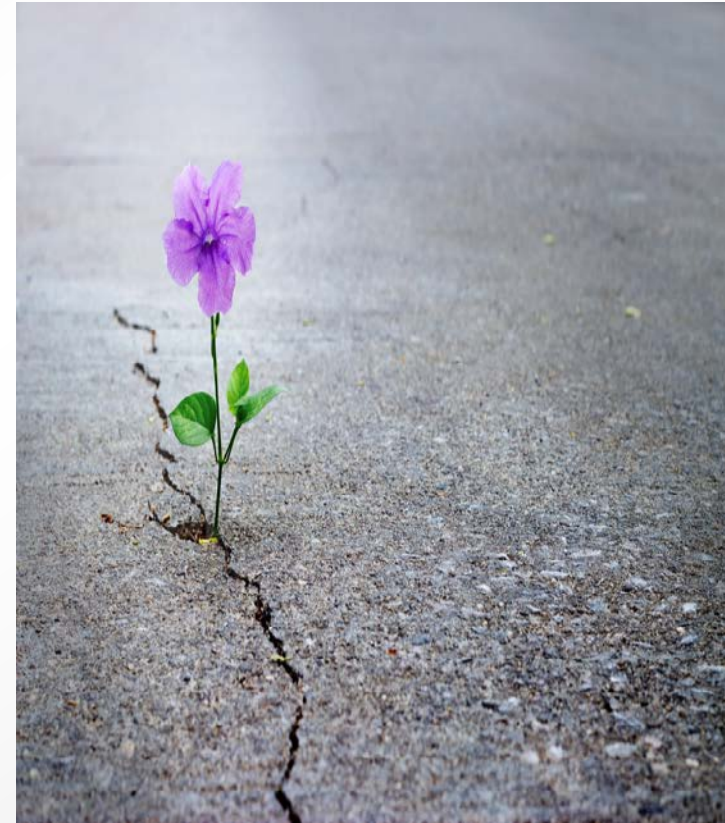
When you control your emotions you control the situation

Homework Assignment #3

Practice Experiential Engagement Skills

- Intentionality

• Conscious acknowledgement of the experience and feelings

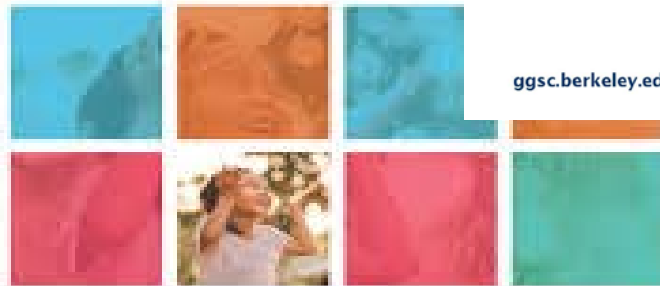• Non-reactivity using the SOS method

•Identify triggers & develop plan

Resources for Promoting Well-being

Gratitude as Medicine:
A Survival Kit
for Health Care Organizations

THE GREATER GOOD SCIENCE CENTER AT UC BERKELEY

ggsc.berkeley.edu

GGSC Greater Good Science Center

Nurturing Gratitude From the Inside Out

30 Activities for Grades K–8

Greater Good Science Center

6 HABITS OF HAPPINESS
(Greater Good Science Center, U.C. Berkley)

Pay attention
Studies show that mindful people have stronger immune systems and are less likely to be hostile or anxious.

Get moving
Regular exercise increases self-esteem, reduces anxiety and stress, and may well be the most effective instant happiness booster of all.

Practice kindness
Being kind to others makes us feel good. Altruistic acts light up the same pleasure centers in the brain as food and sex.

Drop grudges
When we forgive those who have wronged us, we feel better about ourselves, experience more positive emotions, and feel closer to others.

Keep friends close
Social connections are key to happiness. Research indicates it's quality more than quantity. Make time for those closest to you.

Give thanks
Research reveals the enormous power of simply counting our blessings. Regular expressions of gratitude promote optimism, better health, and greater satisfaction with life.

Experience Awe Daily

Practice Altruism

MORE AND MORE, RESEARCH SUGGESTS THAT PRACTICING ALTRUISM ENHANCES OUR PERSONAL WELL-BEING

Altruism makes us happy

Giving to others makes people feel happier than spending money on themselves.

Altruism is good for our health

People who volunteer tend to experience fewer aches and pains, and less depression.

Altruism is good for our love lives

Kindness is the single universal requirement for a mate across all cultures. Altruists also have more sex.

Altruism fights addiction

Addicts who help others, even in small ways, can improve their chances of staying sober and avoiding relapse.

Altruism promotes social connections

When we give to others, they feel closer to us, and we also feel closer to them.

Altruism is contagious

When we give, we also spur a ripple effect of generosity through our community.

Allen, S. (2018)

Source: Greater Good Magazine, Berkeley University

References

Allen, S. (2018). The science of generosity, *The Greater Good Science Center.* GGSC-JTF_White_Paper-Generosity-FINAL.pdf

Balik, B., Hilton, K., White, K. (2020). Conversation and action guide to support staff well-being and joy in work during and after the COVID-19 Pandemic. *Joy in Work*. Institute for Healthcare Improvement. file:///C:/Users/sucallow/Downloads/IHITool_Conversation-Guide-to-Support-Staff-Wellbeing-Joy-in-Work-COVID-19.pdf

Brooks, S., Webster, R., Smith, L, Woodland, L., Wessely, S & Greenberg, N. et al(2020). The psychological impact of quanratine and how to reduce it: rapid review of the evidence. The Lance, 395(10227), 912-920Doi:https://doi.org/10.1016/S0140-6736(2) 30460-8.

De Brier N, Stroobants S, Vandekerckhove P, De Buck E. (2020). Factors affecting mental health of health care workers during coronavirus disease outbreaks (SARS, MERS & COVID-19): A rapid systematic review. *PLoS One*, *15*(12):e0244052. doi: 10.1371/journal.pone.0244052. PMID: 33320910; PMCID: PMC7737991.

YOUR LIFE *our purpose*

References

Kunzler, Angela M, Helmreich, Isabella, Chmitorz, Andrea, Konig, Jochem, Binder, Harald, Wessa, Michele, et al. (2020). Psychological interventions to foster resilience in healthcare professionals. *Cochrane Database of Systematic Reviews,* 7:CD012527. doi: 10.1002/14651858.CD012527.pub2. PMID: 32627860.

Magi, E., Siegel, Z. & Pike, M. (2020). The mental health of frontline health care providers during pandemics: a rapid review of the literature. *Psychiatric Services*, *71*(12); 1260-1269. doi: 10.1176/appi.ps.202000274. Epub

National Academy of Medicine (2017). Strategies to support the health and well-being of clinicians during the COVID-19 Outbreak. *Action Collaborative on Clinician Well-Being and Resilience.* https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-strategies-during-covid-19/

Nelson, D. (2016). *Self-Care 101: Setting healthy boundaries.* Retrieved from http://www.dananelsoncounseling.com/blog/self-care-setting-healthy-boundaries/

YOUR LIFE *our purpose*

References

Pfefferbaum, B. & North, C.S. (2020). Mental health and the COVID-19 pandemic, *NEJM* 383, 510-512. DOI: 10.1056/NEJMp2008017

Pollock A, Campbell P, Cheyne J, et al. (2020). Interventions to support the resilience and mental health of frontline health and social care professionals during and after a disease outbreak, epidemic or pandemic: a mixed methods systematic review. *Cochrane Database Syst Rev*. 2020;11:CD013779, doi:10.1002/14651858.CD013779

Preti E, Di Mattei V, Perego G, Ferrari F, Mazzetti M, Taranto P, Di Pierro R, Madeddu F, Calati R. (2020). The psychological impact of epidemic and pandemic outbreaks on healthcare workers: rapid review of the evidence. *Curr Psychiatry Rep*, 22(8), 43. doi: 10.1007/s11920-020-01166-z. PMID: 32651717; PMCID: PMC7350408.

Piff, P., Dietze, P., Feinberg,M., Stancato, D. & Keltner, D. (2015). Awe, the small self & prosocial behavior. *Journal of Personality and Social Psychology*, *108*(6), 883-899.

References

Roycroft M, Wilkes D, Fleming S, Pattani S, Olsson-Brown A. (2020). Preventing psychological injury during the covid-19 pandemic. *BMJ,* m1702. doi: 10.1136/bmj.m1702. PMID: 32366504.

Shanafelt T, Ripp J, Trockel M. Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the COVID-19 Pandemic. *JAMA*. 2020;323(21):2133–2134. doi:10.1001/jama.2020.5893

Stamm, H.E. & Stamm, B.H. (2012*). The Professional Quality of Life Measure.* https://proqol.org/Home_Page.php

Rudd, M., Vohs, K. & Aaker, J. (2012). Awe Expands People's Perception of Time, Alters Decision Making and enhances well-being. Retrieved from http://faculty-gsb.stanford.edu/aaker/pages/documents/TimeandAwe2012_workingpaper.pdf