Protecting the psychological wellbeing of teams through COVID 19



"Protecting the psychological wellbeing of teams" E-learning Module:

This is a pdf / powerpoint of the content of the "Protecting the psychological wellbeing of teams" e -learning module available on the TURAS learn platform

The e-learning module is designed as a learning resource and as such has interactive elements and more engaging design features

If you already have an account* with Turas Learn, login and then access the Protecting the psychological wellbeing of teams module here (link when uploaded)

If you do not have an account, it is simple and free to <u>register</u> with Turas Learn.

*Note this account is the same as your Turas Appraisal account

Welcome to this module for managers and leaders about protecting the emotional wellbeing of teams through periods of crisis such as COVID 19.

The module will cover:

- 1. The importance of providing routine psychological protection to protect the wellbeing of teams exposed to psychological stress at work
- 2. Preventative strategies to protect the wellbeing of their teams through
 - Manager Wellbeing
 - Team Communication and Preparedness
 - Team Connection and Cohesion
 - Balanced work / life load
- 3. Reactive strategies to identify and respond effectively to the mental health needs of staff within a stepped care model
- 4. Some further sources of information

Introduction (voiced on e-module)

- As a manager, leader or planner of teams, you'll already be aware of the significant role that you and your staff have, as a team, in supporting each other's wellbeing at work.
- We know that both informal and formal connections to colleagues have a significant effect on team cohesion. And when your team comes under increased pressure or demand, team connectedness and cohesion is one of the key predictors of staff wellbeing.
- But attention to things like team connectedness and wellbeing tend to take a back seat when there are more important immediate issues and risks to attend to in the firefighting phase of any crisis.
- In the context of an event like the COVID 19 pandemic, there can be a prolonged period of uncertainty, unpredictable threat, firefighting, and change both at home and at work, during which the stresses and demands increase, and the attention to wellbeing and team cohesion decreases.
- In this we risk a perfect storm of increased challenge to wellbeing and risk of burnout, and decreased attention to cohesion and wellbeing.
- So the purpose of this unit is to help you as a manager, planner or leader of teams understand the evidence based factors that support the wellbeing of your workforce, and that will support you and your team's resilience under pressure
- Much of what you'll read here you probably already know and be practicing. Try to be honest and realistic about what you can do, what you might wish to do, and what, in the current circumstance, is impossible.
- Finally, you're (probably!) not a superhero. As a team leader or manager, you may be under extraordinary pressure yourself. Apply everything you know and learn about wellbeing here to yourself. If your team see you taking your own wellbeing seriously, they are more likely to take theirs seriously too.

Section 1

The importance of providing routine psychological protection to protect the wellbeing of teams exposed to psychological stress at work



Staff wellbeing – the Importance of Systemic Psychological Protection.

- As a manager or employer, when you ask a member of staff to go into an environment where they may be at risk of physical injury, it is accepted that you have responsibility to take steps to prevent injury by
 - Providing protective equipment
 - Health and safety training



- When we ask staff to go into a environments that might pose risk to psychological wellbeing it is just as important to make sure that we provide the same level of psychological protection.
- Most of the factors that predict poorer wellbeing outcomes for staff are located in the working environment, rather than in the individual and what they bring.

Staff wellbeing – the Importance of Systemic Psychological Protection.

- It is part of your role as manager to try to make sure that
 - 1. You take care of your self and your own wellbeing so that you can take care of your staff effectively
 - 2. You provide psychological protective equipment in the form of a team, environment and system that actively promotes psychological wellbeing and recognises and limits to the greatest extent any threats to it.
 - 3. You support and train staff to protect their own wellbeing

Staff should not feel that it is their responsibility alone for protecting themselves from the psychological impact of the work they do.

Thanks to Adam Burley, Consultant Clinical Psychologist, Edinburgh Access Practice for this helpful analogy

Factors that threaten the psychological wellbeing of our health and social care workforce.

Universal factors:

- Exposure to trauma
- Emotional labour
- No connections with colleagues
- Redeployment outside of normal team / relationships
- No time for rest and recuperation and lack of control over workload
- Poor communication leading to sense of unpredictable threat
- Prior mental health conditions

Pandemic related factors:

Exposure to Moral Injury

Being quarantined

Not feeling prepared in terms of training, skills or equipment:

Being poorly trained in infection control Not have access to adequate PPE

Working in isolation wards or other high risk areas

Long term ongoing crisis event with no predictable end point

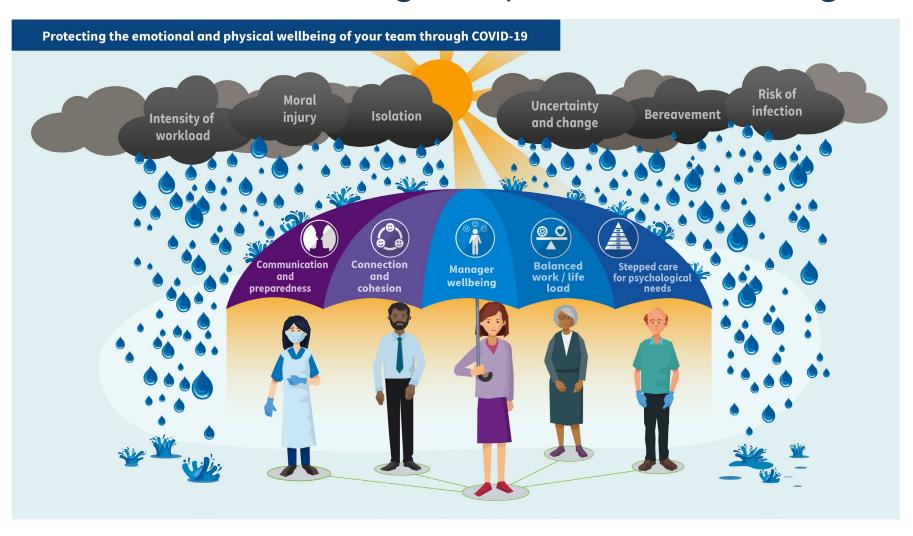
Feeling the epidemic could not be controlled Stigma

The potential impact of COVID-19 on mental health outcomes and the implications for service solutions. (National Institute for Health Research, University of Bristol. *Nobles et. al. April 2020*). <u>Paper</u>

Definitions from previous slide

- Emotional Labour: The work involved in successfully managing our own emotions whilst attending to the needs and distress of others.
- Moral Injury: the psychological distress which results from actions, or the lack of them, which violate your moral or ethical code.

Section 2: Preventative strategies to protect the wellbeing of teams

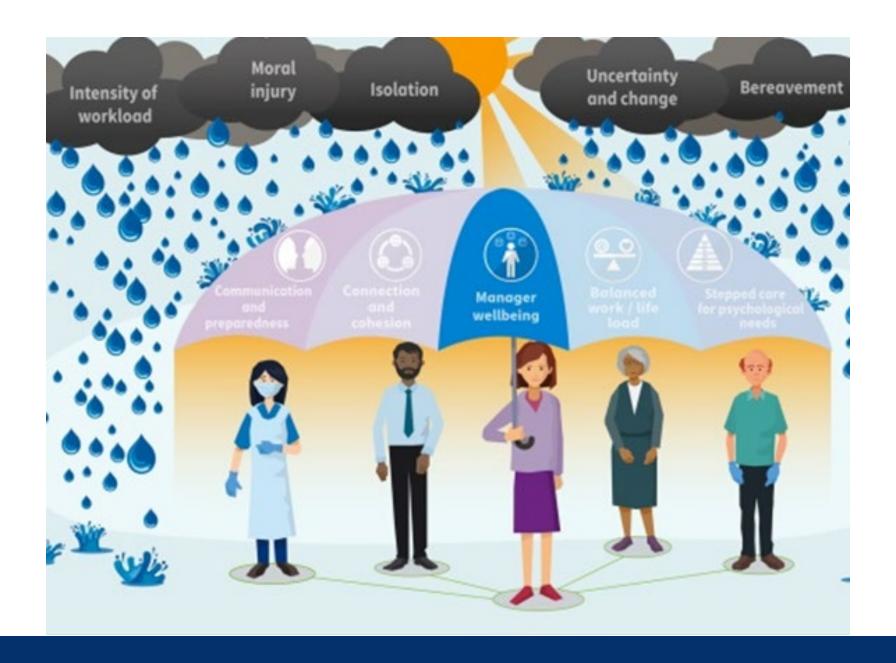


Key elements of protecting the wellbeing of teams through crisis periods:

- 1. Communication and preparedness Staff that feel as safe and prepared as possible for the job ahead.
- 2. Connection and cohesion: Mutual support through connections and communication
- 3. Manager wellbeing: A manager that tries to stay resilient by taking care of their own wellbeing
- **4. Balancing work / life load:** includes sufficient with rest and recuperation
- 5. Stepped care for individual psychological needs: identifying and responding to impact of work on staff mental health

For further information consult <u>this guide</u> to the psychological needs of heath care staff from the British Psychological Society

Protecting the emotional and physical wellbeing of your team through COVID-19 Risk of Moral Uncertainty infection Bereavement Isolation injury Intensity of and change workload Communication Connection Balanced work / life load Stepped care for psychological needs Manager and and wellbeing preparedness cohesion (??)



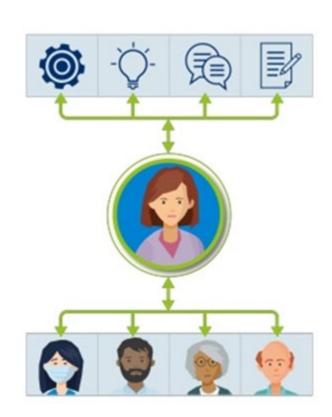
Taking care of your own wellbeing and needs

- You may have your own pressures and concerns outside of work, as well as all the pressures of creating and maintaining an effective team.
- When pressure and stress on your team increases, the emotional load on you in attending to the wellbeing of your staff can increase exponentially.
- To support your effectiveness as a leader and manager, try to pay attention to your own wellbeing and resilience. If you can, take the time to apply all the same self care principles to yourself



Taking care of your own wellbeing and needs

- If it is helpful, approach your peers and manager for support if you need it, and create your own wellbeing plan.
- Your staff are more likely to take their own self care seriously if they see that you do.
- You do not need to have all the solutions all of the time. People can relate to you and trust you with their own uncertainties if they know you have some too.
- At times of crisis we do what we can with what we have. Remind yourself that this is OK.





1. Try to be visible, available and supportive



2. Provide the training and equipment your team need to do their job safely



- 3. Have a clear communication strategy.
 - 1. Mitigate "fear of the unknown" with regular communications open, honest, accurate and frank briefing
 - 2. Give as much information and updates as you can clearly and regularly to all staff, to make sure that everyone has the same information at the same time.
 - 3. In a rapidly evolving situation it can be difficult to have certainty, but do continue to maintain chains of communication (for example daily briefings) so that all staff know when and where they will next get more information
 - 4. Have open and honest discussion about the nature of the tasks and decisions that staff may face, particularly any traumatic or morally injurious situations that they maybe exposed to. More information about preventing responding to Moral Injury can be found here
 - 5. Acknowledge to yourself as a manager that tolerating uncertainty for yourself and your team can be difficult and demanding
 - 6. Accept that your responses too are normal, and don't have unreasonable expectations of yourself as being able to solve everything.
 - 7. Communicate about successes as well as risks or challenges. Routinely recognise, thank and reward the hard work of your team.

4. Help your team to recognise the normal ways that we all tend to respond to stressful situations, and to pay attention to one another's wellbeing

More information about normal responses to pandemic situations can be found in the psychological first aid e-module.



- 5. Provide information about tools to cope with the impact of potentially traumatic situations.
 - 1. Shifting focus from dwelling on what has happen during the shift to the present
 - 2. Breaking the link between memories of past traumatic events and the present
 - 3. Spotting signs of feeling overwhelmed and asking for help

More information can be found in <u>this leaflet</u> from OXCADAT about evidence based tools to support the health and wellbeing of staff

6. Set up effective feedback systems between staff teams and management so that causes and sources of staff stress can be quickly identified and acted upon or, where this is not possible, the reasons why are communicated clearly.



NHS Education for Scotland Moral Uncertainty injury Isolation Bereavement and change Connection and cohesion

To support your team to feel connected and supported you can:

1. Be visible, available and supportive – check in regularly with all team members, together and as individuals

Create a team culture that invites dialogue and welcomes help seeking when people are struggling.



To support your team to feel connected and supported you can:

2. Support redeployed or inexperienced staff:

- 1. Partner inexperienced workers with their more experienced colleagues. The buddy system helps to provide support, monitor stress and reinforce safety procedures.
- 2. Pay attention and manage the impact of redeployment to alternative roles or teams on staff by
 - Giving as much clarity and certainty as to the details of the redeployment – how long for, who with, roles and responsibilities
 - 2. Provide adequate training for new role, alongside other staff who will also be working in the same team / role
 - 3. Recognise the likely impact on redeployed staff uncertainty, loss of valued working relationships with prior colleagues, lack of existing relationship with current work colleagues.
 - 4. Support staff to stay in regular contact with the "home" team and manager where possible

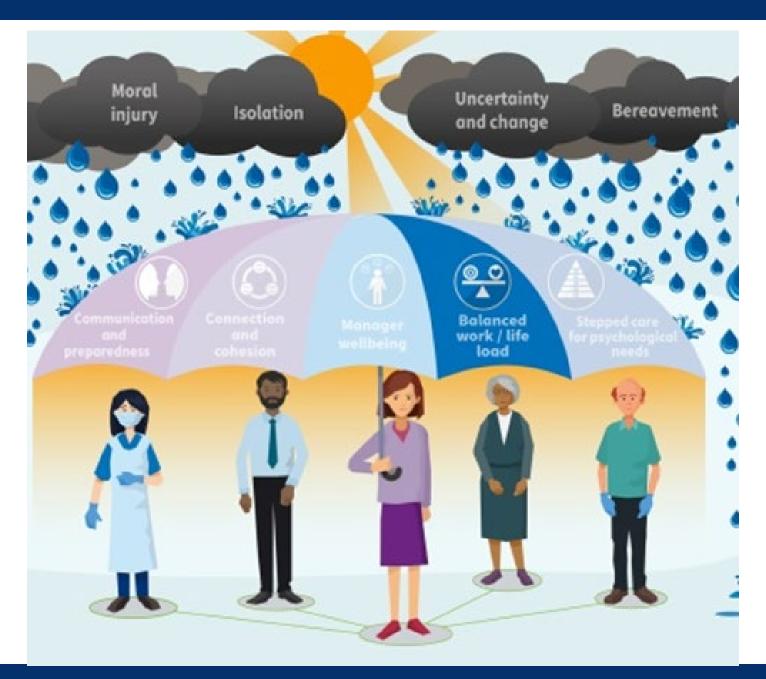


To support your team to feel connected and supported you can:

3. Build team cohesion and connection

- 1. Foster strong links between team members and managers, encouraging cohesion throughout the team as "in it together"
- 2. Make time to ensure that staff have time and safe place to talk about their experiences together, if they wish (this should not be mandated)
- 3. This includes more formal space and time, like reflective practice space and supervision, and less formal social support
- 4. Build in time and structures for colleagues to provide informal social support to each other, and make sure that you encourage and enable staff to actually use them. Some creative examples here and here and here :
- 5. Evidence suggests that when staff have the informal support of peers (rather than a single "trained" staff member) following traumatic exposure, they are less likely to require a formal psychological intervention





To balance workloads you can:

- 1. Where it is possible, rotate workers from higher-stress to lower-stress functions. Partner the less experienced with the more experienced.
- 2. Initiate, encourage and monitor work breaks, where staff are able to access food and hydration, rest and sleep where necessary, and practice self care.
- Implement flexible schedules for workers who are directly impacted or have a family member impacted by a stressful event.
- 4. Support staff to leave "work at work" through informal team brief / reflection at the end of shift, or by using an "end of shift checklist"





To effectively respond to the evolving psychological needs of the team you can:

- 1. Normalise reactions
- 2. Provide stepped care response
- 3. Some don'ts
- 4. Support the vulnerable
- 5. Further sources of information

NHS Education for Scotland

To effectively respond to the evolving psychological needs of the team you can

1. Normalise responses:

Be clear that most responses, including stress and the feelings associated with it, are quite normal reactions in the current situation. This is understandable, and most people will be resilient and recover without the need for formal psychological intervention.

If you are interested in learning more about what happens when we are exposed to stress and trauma, and some helpful ways of supporting a person to stay in their calm zone, you can watch a 20 minute video with Jennie Young discussing the impact of psychological trauma on our window of tolerance here:



https://vimeo.com/380206862

NHS Education for Scotland

To effectively respond to the evolving psychological needs of the team you can:

2. Provide stepped care response

Respond to concerns about staff wellbeing in a stepped way (links to slide 35)

- 1. Identify and meet basic practical and safety needs across the organisation / team (links to slides 37 & 38)
- 2. Identify and meet basic emotional needs across the organisation / team (links to slides 39 & 40)
- 3. Respond to individual's distress with psychological first aid as a first line approach (links to slides 41 43)
- 4. Facilitate access to local informal psychological supports for individuals in distress (links to slides 44 & 45)
- 5. Collaborate to facilitate referral for formal psychological intervention for individuals that require it (links to slides 46 & 47)



See next section for further information

3. Some don'ts when responding to the evolving psychological needs of the team:

- 1. Don't rush to offer formal psychological interventions too soon, but do continue to actively monitor and support staff through and beyond the crisis period. Where necessary refer on for evidence based psychological treatment
- 2. Don't offer psychological debriefing, critical incident stress debriefing, or any other single session intervention which involves mandating staff to talk about their thoughts or feelings. This may be ineffective or detrimental.



To effectively respond to the evolving psychological needs of the team you can 4. Support the vulnerable:

Think about how you will support staff who may have additional concurrent pressures or their own prior mental health needs, bereavement or loss, or trauma history, as they maybe especially vulnerable.



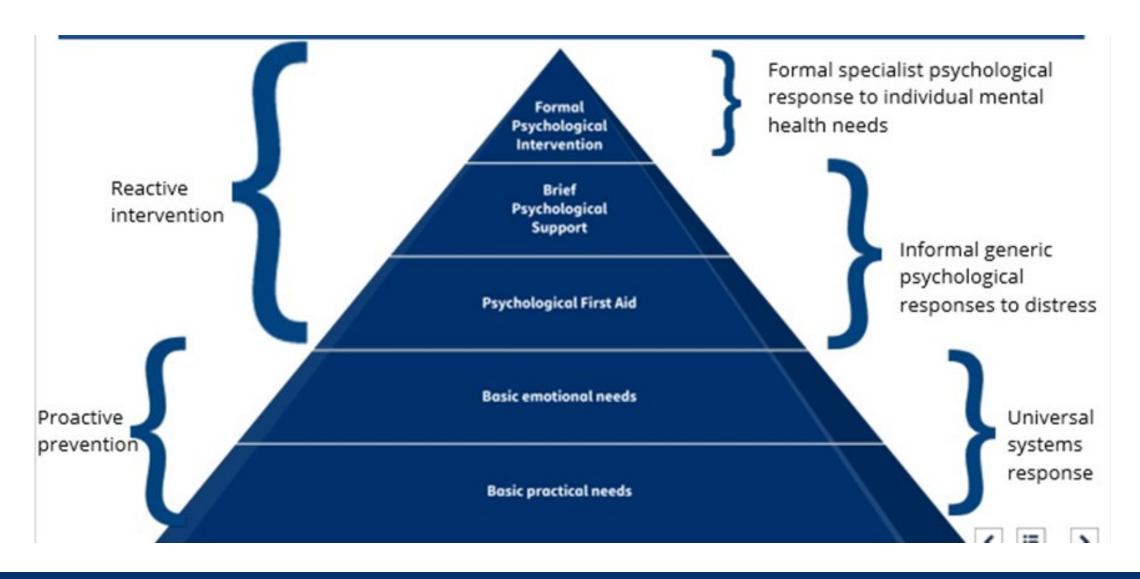
More information

On the psychological needs of healthcare staff as a result of the Coronavirus pandemic: Guide for leaders and managers from the British Psychological Society here: https://www.bps.org.uk/sites/www.bps.org.uk/files/News/News-Files/Psychological needs of healthcare staff.pdf

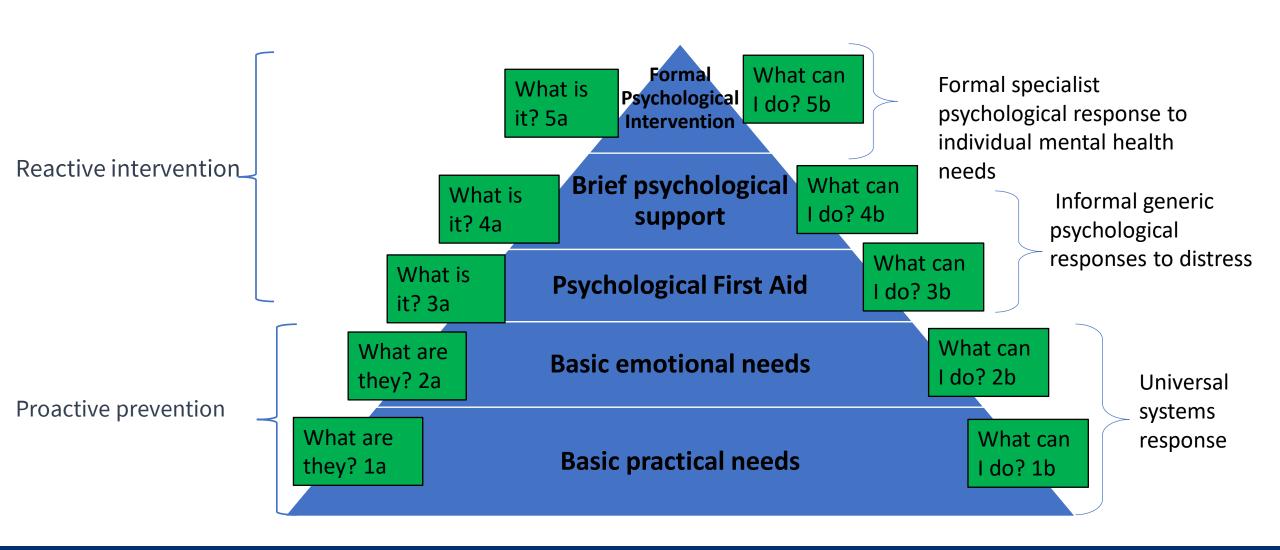
Rapid guidance for planners of the psychosocial response to stress experienced by hospital staff associated with COVID: Early Interventions from the COVID trauma response group here:

https://232fe0d6-f8f4-43eb-bc5d-6aa50ee47dc5.filesusr.com/ugd/6b474f_daca72f1919b4c1eaddb8cfcbb102034.pdf

A stepped care model for responding to staff distress



Responding to staff distress – a stepped care model



Pop out 1a: Practical needs - What are they?

Practical support with work tasks where necessary

Safe working environment

Sufficient equipment and training

Safety for colleagues and family when returning home

Breaks

Nutrition

Pop out 1b: Practical Needs - What you can do?

- If a staff member seems distressed:
- Ask "is there anything that is making you feel unsafe at the moment?"
- Think about what the staff member has talked to you about, are their basic needs being met?
 - When was their last break?
 - Are they eating/drinking properly on shift?
 - Are they looking after themselves?
 - Are they being provided with the correct PPE to keep them safe?
 - Do they have sufficient training and confidence in their capacity to perform their job effectively and safely?
 - Do they need medication or medical help?
 - Do they have issues with childcare needs?
 - Do they have financial issues?
 - Are there transport issues?
 - Is there any risk to their safety at the moment?

Pop out 2a: Emotional needs: What are they?

- Supportive connections with colleagues
- Sufficient time for reflection and rest
- Active monitoring and attention to own wellbeing
- Environment and culture where it is safe to say "I need help, I'm not coping"
- Empathic team response to signs of emotional distress

Pop out 2b: emotional needs - What you can do:

- 1. Support staff to be proactive about protecting their wellbeing, to take the time to create and implement their own wellbeing plan they know what works for them, but they may need your support to be explicit about it and to put it int practice.
- 2. Where staff may be working away from home for long shifts or period, create time and space them have to have restorative time or contact with loved ones
- 3. Create an environment and culture where seeking help for distress and mental wellbeing is actively welcomed
- 4. Take a whole team approach to supporting peer wellbeing after exposure to traumatic event rather than single trained staff member
- 5. Provide emotional support through formal (meetings, supervision, reflective practice) and informal connections with team
- 6. Create safe opportunities, both formal and informal, for staff to tell you about how they are feeling and coping.

Pop Out 3a: Psychological First Aid - What is it?

Psychological First Aid:

is a set of evidence based principles that anyone can use to respond to the immediate needs of people in distress during or after crises and emergencies

Use the principles of Psychological First Aid as a first line response when someone is distressed to help them to feel safe, calm, and able to cope.



Pop out 3b: Psychological First aid- What you can do?

- Recognise the signs that a staff member is distressed (a staff member may approach you in tears, may seem to be more agitated, or may be more quiet than usual)
- If you are able to speak face to face, have a room that you can talk to the staff member in without interruptions (you might want to think about having a do not disturb sign on the door)
- If you are in contact remotely via internet or phone, make a time to talk when you both have privacy and are not going to be interrupted
- Give the staff member your full attention (good eye contact, nodding head, saying hmm)
- Actively listen to what the staff member is saying allow them time to talk through what is going on for them at the moment without interrupts or interpretations from you.
- Complete the psychological first aid module on Turas Learn and use the principles as a first line of response to immediate distress.

Pop out 3c: When to seek additional support when a staff member is distressed:

Seek additional support (which may include informal or formal psychological intervention) when a member of staff requires more than psychological first aid or informal psychological support – for example if they:

- have not been able to sleep for the last week and is confused and disorientated
- are so distressed that they are unable to function normally and care for themselves or their children by, for example, not eating or keeping clean
- lose control over their behaviour and behaves in an unpredictable or destructive manner
- threatens harm to themselves or others
- start excessive and out-of-the-ordinary use of drugs or alcohol
- are living with a psychological disorder and/or were taking medication prior to the situation of distress may also need continued mental health support.
- present chronic health conditions and need more supports.
- present symptoms of severe mental health conditions
- are experiencing violence or are being sexually abused in any way.

Pop out 4a: Brief psychological support - What is it?

Many health and social care partnerships offer informal psychological support with psychological therapists through

- Phone: staff support telephone lines
- Face to face: in wellness hubs in hospitals
- Online: through Attend Anywhere technology.

These vary between local areas, but in general offer psychological first aid, and emotional and psychological support from trained psychological therapists

Health and social care staff also also have access to a range of evidence based online resources and apps to help manage their wellbeing here

https://learn.nes.nhs.scot/29700/psychosocial-mental-health-and-wellbeing-support/taking-care-of-myself

Pop out 4b: Brief psychological support - What can you do?

Try to stay aware of the psychological supports available for heath and social care staff in your own local area.

Make sure your staff know how and where to access the informal psychological resources available for their psychological wellbeing.

Try to create a culture within your team(s) where it is acknowledged and accepted that needing support for psychological wellbeing is a normal response in a very abnormal situation.

If you are concerned about the wellbeing of a member of staff and they are showing signs of being overwhelmed and PFA has not helped, create the time and space to have a sensitive conversation with them about how they are.

Show compassion, and refute any beliefs they may have about their responses meaning that they are weak or letting the team down. Consider the options together for supporting their wellbeing, and enable staff to access informal psychological support quickly and easily

Have a low threshold for referring staff members for formal psychology services if they are in agreement.

Pop out 5a: Formal Psychological intervention - What is it?

• There is emerging evidence to suggest that in the context of the COVID 29 pandemic, a minority of health and social care workers may develop more than transient mental health difficulties in response to exposure to trauma, bereavement, moral injury and other stressors.

• Most staff will recover once the immediate crisis period is over, but for those who do not, it is important that their needs are formally assessed and if necessary that they are able to access evidence based psychological therapies.

Pop out 5b: Formal psychological therapies - What you can do

- Have appropriate protocols in place to monitor and respond to mental health needs of staff during and after the acute phase.
- Actively monitor those who are at high risk of developing mental health difficulties:
 - Frontline health and social care workers, especially if redeployed
 - Those exposed to traumatic or potentially morally injurious events in the course of their work
 - Those with pre-existing chronic physical or mental health conditions
 - People who exhibit high levels of distress, anxiety or avoidance during the first month.
- Be aware of referral routes to local formal psychological services for health and social care staff, and preferably have a point of contact to facilitate referrals
- Have a low threshold for referral for formal evidence based psychological intervention, especially if someone has:
 - High levels of anxiety, distress, low mood or avoidance that is interfering with their ability function, or lasts longer than a month.
 - Been exposed to traumatic or morally injurious event(s) and continues to have symptoms 1
 month post exposure

Active monitoring definition

"Regularly monitoring a person who has some symptoms but who is not currently having clinical intervention for the condition" the National Institute for Clinical Excellence

It does not normally involve a formal assessment process, but rather monitoring a person's symptoms with them to see whether they improve or get worse.

- Collaborate with the person to find out who they feel is best placed to monitor their symptoms this could be their GP, Occupational Health or yourself as manager
- As a manager, consider routinely incorporating opportunities to discuss any ongoing difficulties into your ongoing management with the member of staff.
- Collaborate with the member of staff to see if it would be helpful to arranging regular "check ins", but do not push them to do so.

Protecting the emotional and physical wellbeing of your team through COVID-19 Risk of Moral Uncertainty infection Bereavement Isolation injury Intensity of and change workload Communication Connection Balanced work / life load Stepped care for psychological needs Manager and and wellbeing preparedness cohesion (??)

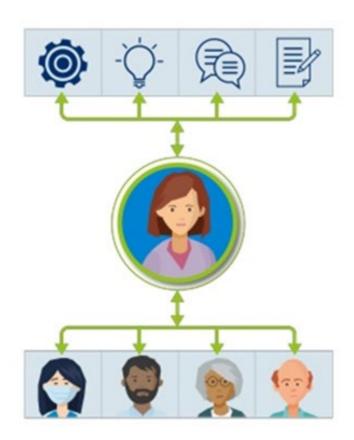
Summary:

In summary as a manager, you can use the principles outlined here for

- 1. Proactive prevention of the negative impact of COVID 19 using principles of connection, cohesion, manager wellbeing and balancing workload to protect the wellbeing and resilience of you and your team through the acute crisis phase
- 2. Reactive intervention for individual mental health needs: using an individualised stepped approach according to each person's needs.

In summary:

- 1. Try to take active steps to protect your own **manager wellbeing**, creating your own wellbeing plan and seeking support from your manager when you need it
- 2. Create effective **communication and team preparedness** by being available, reducing uncertainty through clear communication, providing the necessary training and equipment, helping the team recognise how to cope with normal ways of responding in a crisis, and set up effective feedback systems



In summary:

3. Build team **connection and cohesion** by creating a culture of openness and support, integrating redeployed or inexperienced staff, and building connections with and between team members through formal processes like supervision and reflective practice, and more informal time and space for peer support.

4. **Balance team work / life load** by trying to make sure that:

whilst at work all staff have access to and take adequate breaks, rest, nutrition and hydration,

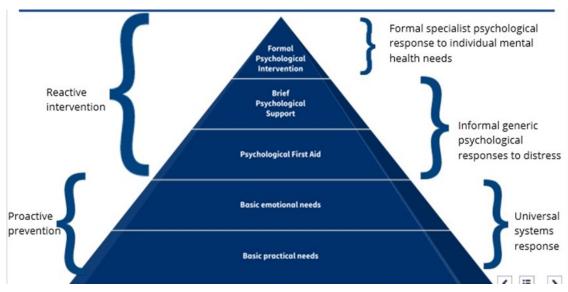
When leaving, staff are able to leave work at work and are able to rest and replenish at home

There is a flexible response to the needs of staff who are directly or indirectly impacted by COVID 19 at home, for example by infection, shielding, bereavement or caring responsibilities.



In summary:

5. Offer **stepped care for psychological needs** when responding to staff in distress or concerns about staff wellbeing, with psychological first aid as a first line approach, access to local informal psychological supports as a second line, and collaborative referral for formal psychological intervention for individuals that require it as a third line .



For further information:

Williams et al. 2020	Top ten messages for supporting healthcare staff during the COVID-19 pandemic	<u>leaflet</u>
Oxford Centre for Anxiety Disorders and Trauma	Evidence based tools to support the health and wellbeing of frontline workers	<u>leaflet</u> and <u>infographic</u>
British Psychological Society	The psychological needs of healthcare staff as a result of the Coronavirus pandemic: Guide for leaders and managers	this guide
COVID trauma response working group (CTRWG)	Rapid guidance for planners of the psychosocial response to stress experienced by hospital staff associated with COVID: Early Interventions	<u>leaflet</u> and <u>infographic</u>
CTRWG	Guidance for managers in supporting care home workers	<u>leaflet</u>
Smith & Williamson 2020 CTRWG	Information about responding to Moral Injury	<u>leaflet</u> <u>dos & dont's</u>
Support the Workers	Briefing notes for staff and managers	<u>webpage</u>
Nobles et. al. April 2020	The potential impact of COVID-19 on mental health outcomes and the implications for service solutions	<u>Paper</u>