Supporting Well-being in COVID and Beyond

Kerri Palamara, MD
NYS Department of Health
July 2020
Agenda

Framing the problem

Strategies and practical tips for leaders

Strategies and practical tips for individuals

Q&A
Disclaimer/Disclosures

• The term physician and/or clinician well-being is used throughout this talk, but this content can be extrapolated and applied to other populations in healthcare.

• Dr. Palamara is the Director of the Center for Physician Well-being at MGH and shares some internally-located resources in this talk. Please reach out directly for more information about these resources – kpalamara@partners.org.

• Dr. Palamara is the Physician Lead for the American College of Physicians Coaching Services and is paid for this work.

• To ask a question during this talk, email your question to COVIDproviderinfo@health.ny.gov. We will do our best to address these at the end!
Community Phases of Disasters

Shared with permission from Josh Morganstein, MD


Risk Factors for Healthcare Workers

**PRE-EVENT**
- Socioeconomic Status
- Social Support
- Training Status
- Work Environment
- Underlying Health Conditions
- Help-Seeking Behaviors

**EVENT**
- Duration & Severity of Exposure
- Psychological Identification
- Illness
- Bereavement
- Moral injury

**RECOVERY**
- Job Loss, Financial Hardship
- Social support Loss
- Low Organizational Support
- Lack of Rest & Recovery

---


---

**Shared with permission from Josh Morganstein, MD**
Healthcare Workers Risk

- Exposures
- Extreme workloads
- Moral dilemmas
- Rapidly evolving practice environment that differs from what they are familiar with
- Uncertainty – PPE, clinical care guidelines, safety, future
- Fear about your own health or the health of someone in your home
- Worrying about loved one’s, financially and medically
- Feeling useless at home when we can’t be at work
- Feeling stress at work when we are needed at home
- Lack of humanity in the workplace (physical touch, facial expressions, individual identity

<table>
<thead>
<tr>
<th>Request</th>
<th>Principal desire</th>
<th>Concerns</th>
<th>Key components of response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hear me</td>
<td>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</td>
<td>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</td>
<td>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</td>
</tr>
<tr>
<td>Protect me</td>
<td>Reduce the risk of health care professionals acquiring the infection and/or being a portal of transmission to family members</td>
<td>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</td>
<td>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</td>
</tr>
<tr>
<td>Prepare me</td>
<td>Provide the training and support that allows provision of high-quality care to patients</td>
<td>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</td>
<td>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</td>
</tr>
<tr>
<td>Support me</td>
<td>Provide support that acknowledges human limitations in a time of extreme work hours, uncertainty, and intense exposure to critically ill patients</td>
<td>Need for support for personal and family needs as work hours and demands increase and schools and daycare closures occur</td>
<td>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</td>
</tr>
<tr>
<td>Care for me</td>
<td>Provide holistic support for the individual and their family should they need to be quarantined</td>
<td>Uncertainty that the organization will support/take care of personal or family needs if the health care professional develops infection</td>
<td>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</td>
</tr>
</tbody>
</table>
# Strategies for Health Care Leaders During COVID-19

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>Value clinicians</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Communicate best practices</td>
</tr>
<tr>
<td><strong>3</strong></td>
<td>Monitor &amp; promote clinician well-being</td>
</tr>
<tr>
<td><strong>4</strong></td>
<td>Provide supportive environment</td>
</tr>
<tr>
<td><strong>5</strong></td>
<td>Enable cooperation &amp; collaboration</td>
</tr>
<tr>
<td><strong>6</strong></td>
<td>Provide central information access point</td>
</tr>
<tr>
<td><strong>7</strong></td>
<td>Ensure clinicians aren't required to return to work during dire situation</td>
</tr>
<tr>
<td><strong>8</strong></td>
<td>Provide appropriate resources if clinicians are infected</td>
</tr>
</tbody>
</table>

[ClinicianWellBeing](https://ClinicianWellBeing)
Ask, Listen, Acknowledge

• Seek to understand (ie – ask!) anxieties and fears before developing approaches.

• Leaders should ask team members “What do you need?” and make every effort to address those needs.
  • Don’t have to have all the answers
  • Will feel their voice and expertise are included in the conversation

• Don’t outsource gratitude – say thank you, express gratitude & appreciation, share their value with them.
  • Managing the pandemic together is a priority

Lead with Empathy

• Begins with self – you can’t expect to have compassion for others if you do not have self-compassion!

• Normalize a wide range of emotions.

• Not the time for tough love – assume everyone is doing the best they can with the resources they have at their disposal.

• Express gratitude & appreciation.

• Include and empower emerging leaders.

• Develop your perspective and use this to create meaning for others.

• What could the future look like? Engage others in this conversation.
<table>
<thead>
<tr>
<th>Priority area</th>
<th>Work group representation</th>
<th>Categories</th>
<th>Deliverables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic needs</td>
<td>Office of Well-being and Resilience (ORWR), Human resources, human resources, security office, housing office, infection prevention, nursing</td>
<td>Food</td>
<td>- System-wide provision of food for staff and physicians</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Housing</td>
<td>- On-site call room options</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- On-campus option</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Local hotel options (reduced rates)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transportation</td>
<td>- Free parking</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Reduced-cost car rentals</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Free bike rental options</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Personal safety</td>
<td>- Clear guidelines for use of and updates on status of PPE</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Provision of scrubs</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Clear guidelines for reducing exposure for self and loved ones</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Chilcare</td>
<td>- Online tool to link employees, facing families in need of childcare with available services</td>
</tr>
<tr>
<td>Communications</td>
<td>ORWR, institutional leadership, communications team, department, and divisional leadership, infection prevention</td>
<td>System wide</td>
<td>- Systemwide email with inspiring and honest messaging</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Local</td>
<td>- Website with pandemic resources and well-being resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Town halls with leadership and infection prevention personnel</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(weekly to a few times per week)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Psychosocial and mental health support</td>
<td>- Departmental emails (daily updates, with information directed to fit group)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Departmental division conference meetings (daily to weekly) to allow for information sharing, and questions and concerns to be raised</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Resilience and self-care</td>
<td>- Virtual mindfulness, yoga, music therapy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Social networking groups</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Free apps for the above</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Group level support</td>
<td>- System-wide peer support hotline</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Employee Assistance Program counseling</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Spiritual care one-on-one counseling</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Government/Health help lines</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Individual long-term mental health support</td>
<td>- Institutional psychiatry and mental health services</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Voluntary and onsite mental health services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Crisis management</td>
<td>- System-wide peer support hotline</td>
</tr>
</tbody>
</table>
Variety is Essential

- There is no one-size fits all to psychosocial support
- Develop an evidence-based menu of interventions tailored to various workplace settings and provide guidance to help others choose from their options.

Annals Int Med 2020 https://doi.org/10.7326/M20-1033
Measure

- To understand the impact of COVID on clinician well-being throughout subsequent phases, we need to measure its impact.
  - AMA Coping with COVID-19 Caregiver Survey - [https://clinician.health/](https://clinician.health/)
  - Mayo Physician Well-being Index – Free in many professional societies
For Leaders to Consider Through Subsequent Phases

1. Normalize the wide range of emotions people may be feeling at different times.
2. Have clear communication re: safety – including PPE, transportation to/from work, risk to self and families.
3. Ensure transparent communication around finances – compensation, bonuses, time away, support staff, programs, hiring.
4. Connect with people where they are at – understand that people’s experiences are wide-ranging - from feeling overworked, to feeling under-utilized, wishing they had time away, wishing they could do more, fearing for self or family, less present at work but more needed at home, less present at home due to work demands, etc.
5. Create a supportive culture – encourage self-compassion, empathy and safety with communicating concerns.
6. Encourage vigilance with PPE.
7. Be positive – keep morale going through the waves and uncertainty.
8. Enable choice wherever possible – schedules, finances, remote work.
9. While you think in the future, help them focus on what’s in front of them – work together to set shared, clear, and achievable weekly goals for the practice or division.
10. Encourage healthy boundary setting, and respect boundaries.
11. Restore FTE expectations – full time vs part time, non-clinical FTE roles.
12. Create time away for people – even if a few hours here and there.
13. Acknowledge potential funding issues (grants, programs that will be cut) and help connect people with resources to restore/ensure funding.
14. Consider retention – some may leave to be closer to family or follow employment opportunities, some may need to reduce clinical time or consider early retirement. Flexibility such as remote opportunities, cost of living adjustments and friendly childcare policies can help!
Feeling Alone?

Here are several resources to support you and get you started:

• AMA Quick Start Guide: [https://app.svwps.com/americanmedicalassociation/ama/covid19/index.html](https://app.svwps.com/americanmedicalassociation/ama/covid19/index.html)


• American College of Physicians: [https://www.acponline.org/practice-resources/physician-well-being-and-professional-fulfillment](https://www.acponline.org/practice-resources/physician-well-being-and-professional-fulfillment)
Shifting Gears to Individual Well-being

Strategies for Clinicians During COVID-19

1. Meet basic needs
2. Take breaks
3. Stay connected
4. Respect differences
5. Stay updated
6. Perform self check-ins
7. Honor your service

A collection of resources to promote clinician well-being is available online.
The Going Home Checklist From NHS

Going home checklist

- Take a moment to think about today.
- Acknowledge one thing that was difficult during your working day - let it go.
- Consider three things that went well.
- Check on your colleagues before you leave - are they OK?
- Are you OK? Your senior team are here to support you.
- Now switch your attention to home - rest and recharge.
Physical Distance ≠ Social Isolation!!

• **Share a good story!**
  • This connects us while boosting happiness, creativity, and open-mindedness in both parties.
  • Allows you to re-live the experience and unpackage what was great about it.
  • The listener gets a chance to experience your positivity and are also reminded of their own positive experiences.

• **Reach out and talk to someone!**
  • The next time you are busy or overwhelmed at work, consider talking to someone about something non-medical for just a few moments, rather than burying yourself further in your work.
  • This actually INCREASES efficiency and productivity!

Have a positive mindset!

• It is ok to be afraid, in fact, we should be! The trick is in the mindset!
• When you aren’t sure how to act or what to do, ask yourself, “what would my positive role model do”?
• When you are really overwhelmed, focus on the baby steps and put one foot in front of the other. Ask yourself, “what is the next thing I need to do?”
• Consider this quote from Mark Twain – “Courage is not the absence of fear, it is acting in spite of it.”
When things aren’t going well,

1) Consider the need behind the feeling

2) then focus on how that need can best be addressed
Ask Yourself, What Does Resilience Mean to Me, and How Can I Connect With That?

• What are your strengths? When have you used them well?
• What has gotten you through hard times before?
• What are you grateful for?
• What makes you feel good? What fills your tank?
• How can you ask for help? What are your needs?
• How can you use your energy in ways that are serving you?
• If things were going well, what would that look like? What does better look like?
1. Practice self-compassion – be kind to yourself when you are not as productive, efficient, creative, or perfect as you are used to being.

2. Take life day by day, and when ready, week by week – set reasonable goals for yourself to work toward.

3. Ask for help when you need it – even if just a few hours. Offer help when you can so you do not feel badly asking for help.

4. Do the best that you can do with the resources you have. This may not be the best you could have done before, but it is the best you can do now. Consider where there may be new potential cracks in the system and ask for help with decreasing risk patients may fall through them.

5. Practice acceptance – we cannot be where we are not. Allow yourself to be where you are. Don’t fight today; work toward a brighter tomorrow.

6. Practice gratitude and share it with others. This improves well-being and instills hope.

7. Stay vigilant with your PPE usage.

8. Set healthy boundaries around your time. Share them and stick with them.

9. Focus on what serves your resiliency. If you don’t know, consider coaching which is available for free to MGH Clinicians.

10. Focus your energy on what you can control. For the things that are out of your control, focus on managing your emotional response.
When this is over,
may we never again
take for granted
A handshake with a stranger
Full shelves at the store
Conversations with neighbors
A crowded theatre
Friday night out
The taste of communion
A routine checkup
The school rush each morning
Coffee with a friend
The stadium roaring
Each deep breath
A boring Tuesday
Life itself.

When this ends,
may we find
that we have become
more like the people
we wanted to be
we were called to be
we hoped to be
and may we stay
that way—better
for each other
because of the worst.

Laura Kelly Fanucci
Healthcare Provider/Physician Wellness

• The state is partnering with the Kate Spade New York Foundation and Crisis Text Line to provide a 24/7 emotional support service for frontline healthcare workers
• **Text NYFRONTLINE to 741-741** to access these emotional support services
• New York State-regulated health insurers will be required to waive cost-sharing, including deductibles, copayments and coinsurance, for in-network mental health services for frontline essential workers during COVID-19
Mental Health Resources

• NYS Mental Health Helpline 1-844-863-9314
  – The helpline is staffed by specially trained volunteers, including mental health professionals, who have received training in crisis counseling related to mental health consequences of infectious disease outbreaks, typical stress reactions, anxiety management, coping skills, and telephonic counseling

• MSSNY Peer to Peer (P2P) Program for Colleagues
  – Email P2P@mssny.org to be connected to a peer supporter or call 1-844-P2P-PEER (staffed M-F 8:30-5).
## Healthcare Provider Well-being Resources

<table>
<thead>
<tr>
<th>MSSNY</th>
<th>AAFP</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACP</td>
<td>AAP</td>
</tr>
<tr>
<td>NAM</td>
<td>AHRQ well-being AHRQ burnout</td>
</tr>
<tr>
<td>AMA</td>
<td>NIH</td>
</tr>
<tr>
<td>IHI</td>
<td>Stanford</td>
</tr>
</tbody>
</table>
Questions?

kpalamara@partners.org