

Supporting Well-being in COVID and Beyond

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NYS Department of Health
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Agenda



Framing the problem



Strategies and practical
tips for leaders



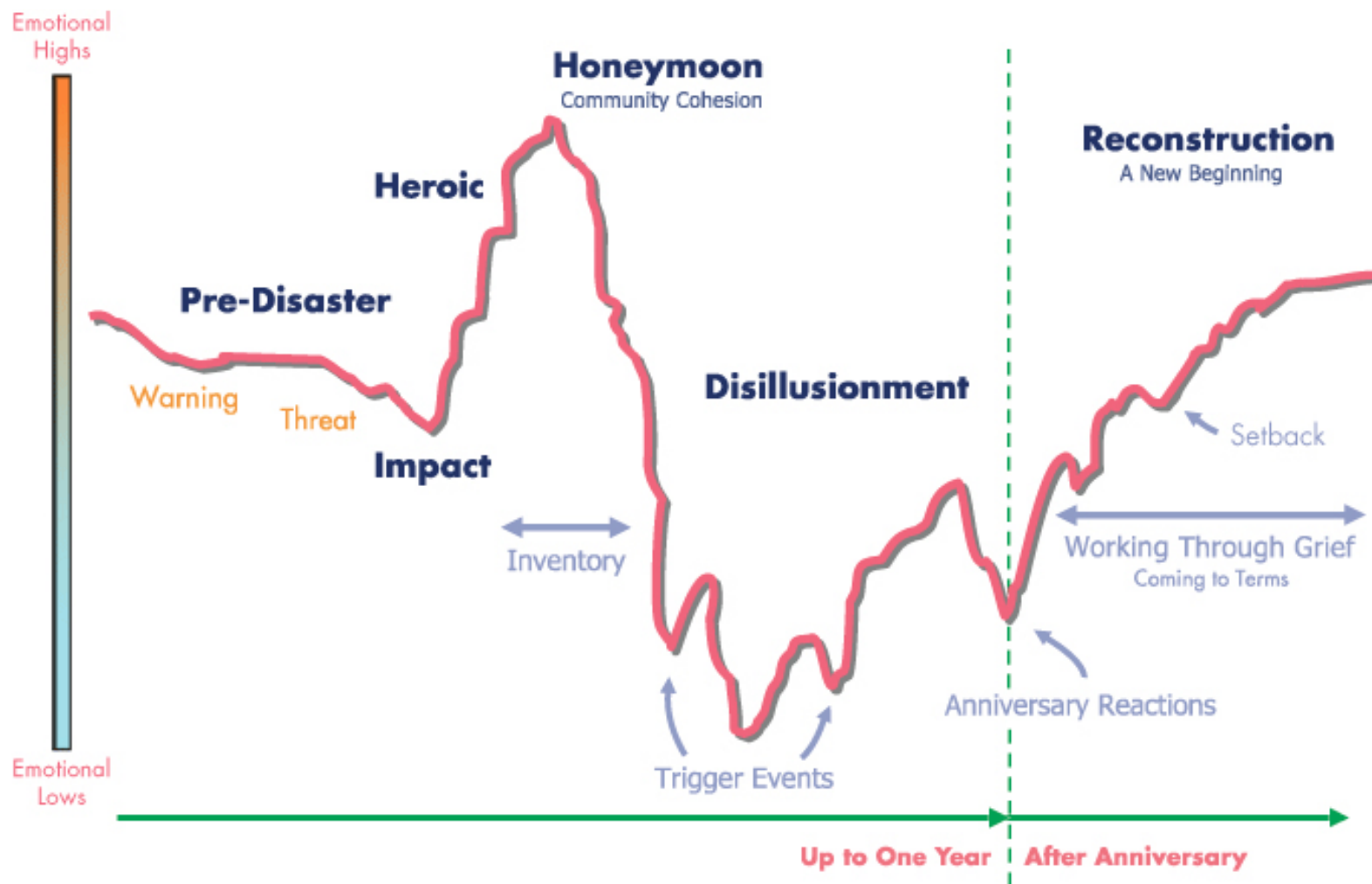
Strategies and practical
tips for individuals



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!



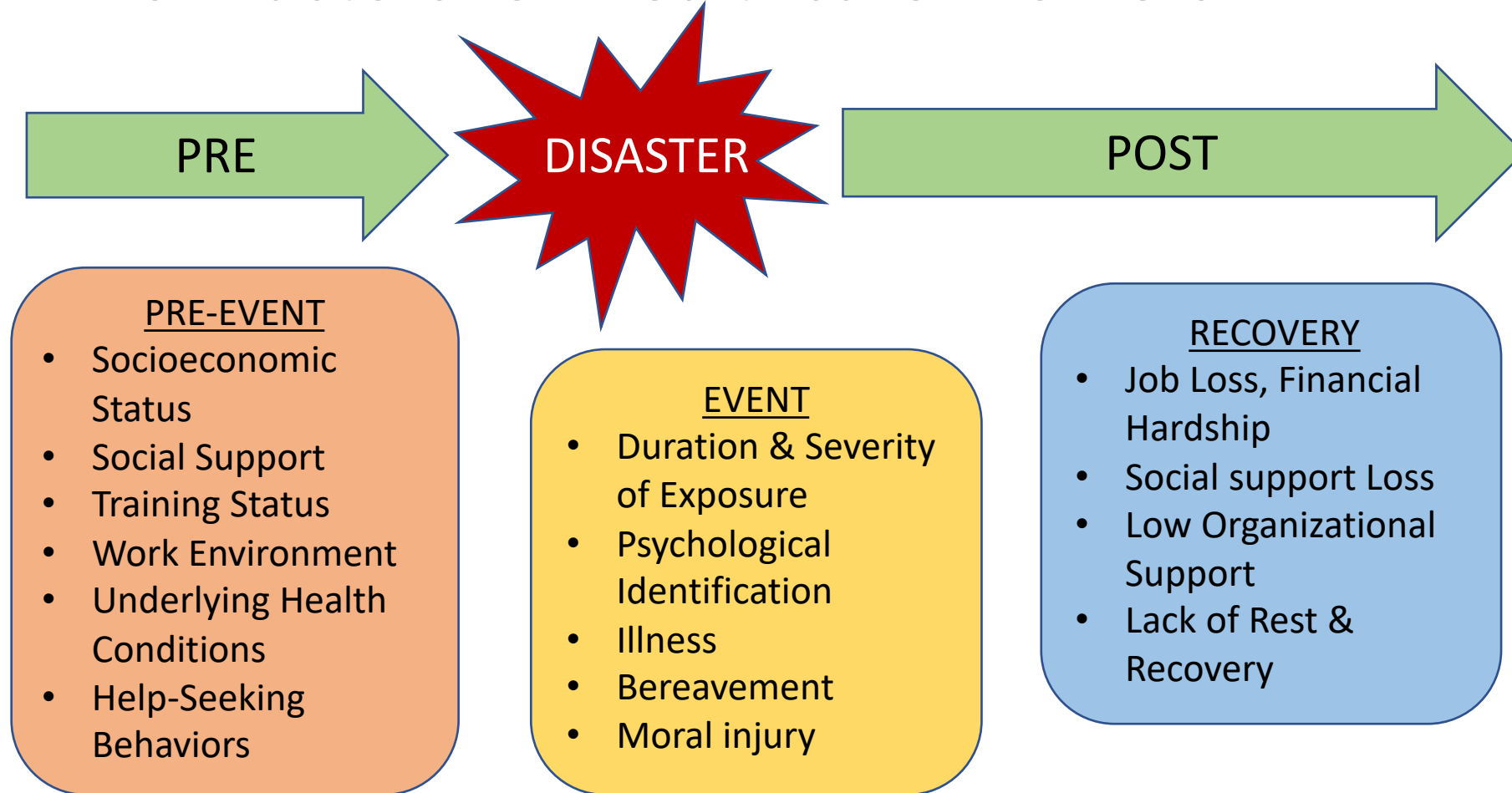
Community Phases of Disasters

Shared with permission from Josh Morganstein, MD

DeWolfe, D. J. (2000). Training manual for mental health and human service workers in major disasters. (D. J. Nordboe, Ed.) (2nd ed.). SAMHSA. Retrieved from <https://files.eric.ed.gov/fulltext/ED459383.pdf>

Gladwell, M. (2000). The Tipping Point: How Little Things Can Make a Big Difference. Little Brown & Company. New York, NY.

Risk Factors for Healthcare Workers



Shared with permission from Josh Morganstein, MD

Morganstein, J. C., West, J. C., & Ursano, R. J. (2017). Work-Associated Trauma. In K. A. Brower & M. B. Riba (Eds.), *Physician mental health and well-being: research and practice* (pp. 34–60).

Norris, F. H., Friedman, M. J., Watson, P. J., Byrne, C. M., Diaz, E., & Kaniasty, K. (2002). 60,000 disaster victims speak: Part I. An empirical review of the empirical literature, 1981–2001. *Psychiatry*, 65(3), 207–239.

Somasundaram and van de Put (2006). Management of Trauma in Special Populations after a Disaster. *J Clin Psychiatry*;67(suppl 2):64-73



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)

JAMA. 2020;323(21):2133-2134. doi:10.1001/jama.2020.5893

Time Magazine <https://time.com/5817435/covid-19-mental-health-coronavirus>

For Leaders: Where to Start

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



Strategies for Health Care Leaders During COVID-19

bit.ly/CWCOVID19
#ClinicianWellBeing

- 1** Value clinicians
- 2** Communicate best practices
- 3** Monitor & promote clinician well-being
- 4** Provide supportive environment
- 5** Enable cooperation & collaboration
- 6** Provide central information access point
- 7** Ensure clinicians aren't required to return to work during dire situation
- 8** Provide appropriate resources if clinicians are infected

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 1

Priority Areas and Deliverables to Promote and Maintain the Well-Being of the Entire Mount Sinai Health System (MSHS) Workforce During the COVID-19 Pandemic

Priority area	Work group representation	Categories	Deliverables
Basic needs	Office of Well-being and Resilience (OBWR), human resources, recreation office, housing office, security office, infection prevention, nursing	Food	<ul style="list-style-type: none"> • System-wide provision of food for staff and physicians • Free or reduced-cost options for staff to order
		Housing	<ul style="list-style-type: none"> • Onsite call room options • On-campus option • Local hotel options (reduced rates)
		Transportation	<ul style="list-style-type: none"> • Free parking • Reduced-cost/free car rentals • Free bike rental options
		Personal safety	<ul style="list-style-type: none"> • Clear guidelines for use of and updates on status of PPE • Provision of scrubs • Clear guidelines for reducing exposure for self and loved ones
		Childcare	<ul style="list-style-type: none"> • Online tool to link employees, faculty, trainees in need of childcare with available services
Communications	OWBR, institutional leadership, communications team, department and divisional leadership, infection prevention	System wide	<ul style="list-style-type: none"> • System-wide email (with inspiring and honest messaging) • Website with pandemic resources and well-being resources • Town halls with leadership and infection prevention personnel (weekly to a few times per week)
		Local	<ul style="list-style-type: none"> • Department/division emails (daily updates, with information distilled to fit group) • Department/division conference meetings (daily to weekly) to allow for information sharing, and questions and concerns to be raised
Psychosocial and mental health support	OWBR, psychiatry, psychology, social work, employee assistance, nursing	Resilience and self-care	<ul style="list-style-type: none"> • Virtual mindfulness, yoga, music therapy • Social networking groups • Free apps for the above
		Group debrief support	<ul style="list-style-type: none"> • Virtual social worker-/psychologist-facilitated support groups • Spiritual care support groups
		Individual brief support	<ul style="list-style-type: none"> • System-wide peer support hotline • Employee Assistance Program counseling • Spiritual care one-on-one counseling • Government/nonprofit help lines
		Individual long-term mental health support	<ul style="list-style-type: none"> • Institutional psychiatry and mental health services • Voluntary and offsite mental health services
		Crisis management	<ul style="list-style-type: none"> • System-wide peer support hotline

Structuring Your Response

Department of Medicine



Search

🇺🇸 English

Pages

- COVID-19 Guidance Documents
- COVID-19 seminars, conferences and videos
- Department of Medicine
 - About
- Stories from the DOM Front Lines
- The Department of Medicine re-imagined
- COVID-19 Research Guidance
- Center for Physician Well-being
 - Center for Physician Well-being COVID-19 Resources**
 - DOM Faculty Coaching Program
 - Epic & Dragon Optimization Options
 - Stories of the MGH
- Clinical Services
- Education
- Faculty Appointments
 - HMS Appointments
 - MGH Appointments
- Contact Us
- MGH & HMS Titles
- Faculty Development
- Finance & Billing


- Food
- Child Care & Household
- Transportation & Parking
- Housing
- Hygiene @ Work
- Volunteering
- Physical Health
- Student Loans
- Email Archive



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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.

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CENTER FOR PHYSICIAN
WELL-BEING

Zoom out (⌵)

GUIDE TO CHOOSING PSYCHOSOCIAL RESOURCES



We have an abundance of resources available to support your mental and emotional health, and we know it may be challenging to figure out what's the best place to start for you. We've organized the available resources to help you decide what's the right next steps for you.

1 ON 1 SUPPORT

Therapy
Mental Health CARES 617-724-7150
[Employee Assistance Program](#)
Call 1-866-724-4327
[ReLOVEution](#)
We're here to listen! [Sign up here!](#)

Peer Support for Processing
Physician Support Line 1-888-409-0141
[We care Peer Support Program](#)
[Request Peer Support](#)
Peer SIC Support Team
Request using pager [47778](#) 7am–7pm.

Coaching for Reflection/Goal-setting
MGH Clinician Coaching Services
[Register here](#) to sign up for 1:1 coaching.
Boda Coaching
MGH DOM Clinicians have the opportunity for up to 3 hours of coaching with a Boda coach.
[FAQ MGHCOVIDcoaching@bodagroup.com](#)

GROUP SUPPORT

NEW Time Management and Work-Life Boundaries: A Facilitated Group Discussion
June 4th, 4–5pm [Join Zoom meeting!](#)
Meeting ID: 920 7047 0290

GMed Balint group for DOM clinicians
Thursdays 5–6 pm: 5/28, 6/11, 6/25. Contact the group's co-leaders, Dr. Karen Carlson and Dr. Kathleen Ulman, for the Zoom link or info.

Guide: [Reflection Rounds To Address MGH Clinician Needs in Light of the COVID- 19 Pandemic](#)

Benson Henry Institute's Front-line Clinician Resiliency Groups
[Learn more and sign up here.](#)

Frigioletto Daily, Free Sessions for Mindfulness and Resiliency
For all physicians, NPs, and PAs.

SELF CARE ACTIVITIES

[Availability and Mini-Sessions on Relaxation](#)
[Tips on Managing the Fear of Coronavirus](#)
McLean: [Caring for Your Mental Health](#)
[5 Ways to Reduce Anxiety](#)
MIT: [Making Time to Meditate](#)
Mayo Clinic: [Meditation Basics](#)
[Relaxation Basics](#)
TenPercent: [Coronavirus Sanity Guide FREE](#)
[Headspace Website](#)
[Insight Timer Website](#)
[Thrive Inside with Smiling Mind](#)
[Evermind](#) Science-based wellbeing App
[Thankful](#) FREE Gratitude Journal
[Three Good Things](#) FREE Happiness Journal
[Streaks](#) The Habit-forming To-do List

SPIRITUAL WELL-BEING**LEARNING & GROWTH****ENTERTAINMENT**

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/>
 - Mayo Physician Well-being Index – Free in many professional societies
 - Ideas from CultureAmp - <https://academy.cultureamp.com/hc/en-us/articles/360013679579-Welcome-to-the-COVID-19-Employee-Wellbeing-survey-template>

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>
- National Academy of Medicine: <https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-strategies-during-covid-19/>
- American College of Physicians: <https://www.acponline.org/practice-resources/physician-well-being-and-professional-fulfillment>



Shifting Gears to Individual Well-being

Photo credit: <https://www.acc.org/latest-in-cardiology/articles/2020/06/01/12/42/feature-the-urgency-of-clinician-well-being-during-the-covid-pandemic>



Strategies for Clinicians During COVID-19

bit.ly/CWCOVID19
#ClinicianWellBeing

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.

Going home checklist

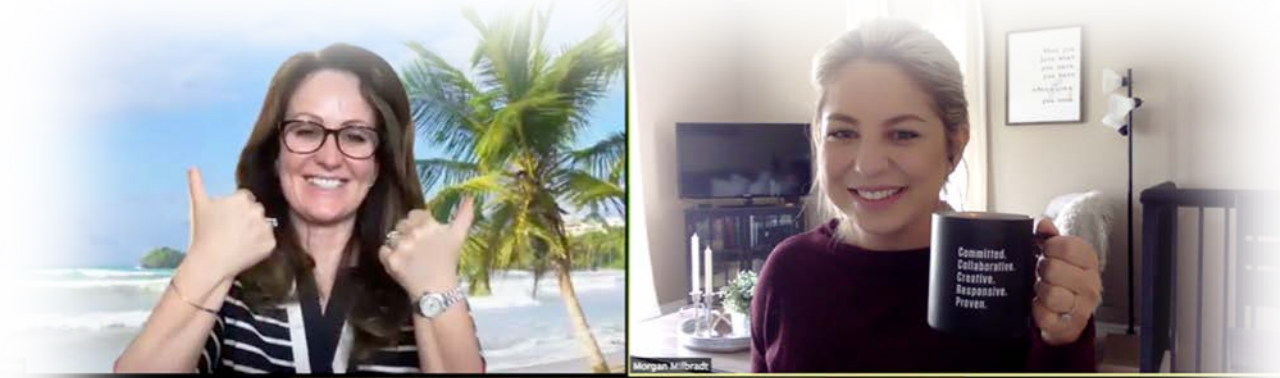
- ✓ Take a moment to think about today.
- ✓ Acknowledge one thing that was difficult during your working day - let it go.
- ✓ Consider three things that went well.
- ✓ Check on your colleagues before you leave - are they OK?
- ✓ Are you OK? Your senior team are here to support you.
- ✓ Now switch your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



The Going Home Checklist From NHS

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

FEELINGS

Delighted

Joyful
Happy
Amused
Adventurous
Blissful
Elated

Thankful

Appreciative
Moved
Touched
Tender
Expansive
Grateful

Excited

Enthusiastic
Overjoyed
Fervent
Giddy
Eager
Ecstatic
Thrilled

Satisfied

Fulfilled
Gratified

Interested

Curious
Absorbed

Healthy

Empowered
Alive
Robust

Relaxed

Relieved
Rested
Mellow
At ease
Light

Content

Cheerful
Glad
Comfortable
Pleased

Friendly

Affectionate
Loving
Passionate

Energetic

Exhilarated
Exuberant
Vigorous

Alert

Focused
Awake
Clearheaded

Peaceful

Tranquil
Serene
Calm

Confident

Secure
Safe
Hopeful

Scared

Apprehensive
Dread
Worried
Panicky
Frightened
Vulnerable

Nervous

Jittery
Anxious
Restless
Vulnerable

Tense

Cranky
Stiff
Stressed
Overwhelmed
Agitated
Aggravated

Hurt

Pain
Agony
Anguish
Heartbroken
Lonely

*Depressed

Disconnected
Detached
Despondent
Dejected
Bored

Tired

Burnt Out
Exhausted
Lethargic

*Angry

*Furious
*Rage
*Irate
*Resentful
Irritated

Frustrated

Disappointed
Discouraged
Disheartened
Impatient

Shocked

Disturbed
Stunned
Alarmed
Appalled
Concerned
Horried

Sad

Grief
Despair
Gloomy
Sullen
Downhearted
Hopeless

Torn

Ambivalent
Confused
Puzzled

Jealous

Envious
*Bitter

Embarrassed

*Ashamed
Contrite
*Guilty

NEEDS

Intimacy

Empathy
Connection
Affection
Warmth
Love
Understanding
Acceptance
Caring
Bonding
Compassion
Communion
Divine Union
Sexuality

Autonomy

Choice
Freedom
Spontaneity
Independence
Respect
Honor

Security

Predictability
Consistency
Stability
Trust
Reassurance

Partnership

Mutuality
Friendship
Companionship
Support
Collaboration
Belonging
Community
Consideration
Seen/heard
Appreciation

Purpose

Competence
Contribution
Efficiency
Growth
Learning
Challenge
Discovery

Order

Structure
Clarity
Focus
Information

Celebration

Mourning
Aliveness
Humor
Beauty
Play
Creativity
Joy

Honesty

Integrity
Authenticity
Wholeness
Fairness

Peace

Groundedness
Hope

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.



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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

[MSSNY](#)

[AAFP](#)

[ACP](#)

[AAP](#)

[NAM](#)

[AHRQ well-being](#)
[AHRQ burnout](#)

[AMA](#)

[NIH](#)

[IHI](#)

[Stanford](#)

A photograph of two individuals wearing full-body white protective suits, including hoods and gloves, walking away from the camera down a hospital hallway. The person in the foreground has 'MICA' written in red on their back. The hallway has orange walls, a green exit sign, and a trash bin on the left.

Questions?

kpalamara@partners.org