

PROPOSED: oneED Covid-19 Staff Wellness Support Plan

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The oneED Covid-19 Staff Wellness Support Plan is based on the following principles.

Our strategy and implementation must consider all staff groups:

- clinical
- management
- administrative
- ancillary: wardspersons, cleaners, security, kitchen (these are the colleagues who are at times less connected with our core communication, yet vital to the ongoing function of our service)
- other; and we must also consider our volunteers

Maslow's hierarchy of needs (Fig 1) illustrates the relative importance of various necessities for humans. Once each tier of the hierarchy is established, a person aspires to the next tier. See also Shapiro's modified hierarchy for healthcare workers. My feeling is that our most effective way to enhance staff support at this time is to ensure their **safety**: we can achieve this quickly and cost-effectively by:

(1) informing them of evolving circumstances (and our escalation plan) in a timely and effective manner.

(2) ensuring that we have optimised their access to and training in PPE.

(3) conducting dialogues in order to mitigate risk for potentially vulnerable staff

WrapEM's framework for Synergistic Wellness (Fig 2) illustrates how individuals, departments and organisations can act in concert to develop collaborative approaches to staff wellness. See [here](#) for further detail.

The Translational Wellness (Wellness | Professionalism | Performance) triad (Fig 3) illustrates how staff wellness links with professionalism as well as individual and team performance. See [here](#) for further detail.

Finally, we would be wise to consider the Covid19 phase not as a sprint, and not even as a marathon, but as a **relay**. We are going to need sequential teams and should work to actively encourage and coordinate stretches of leave for staff.

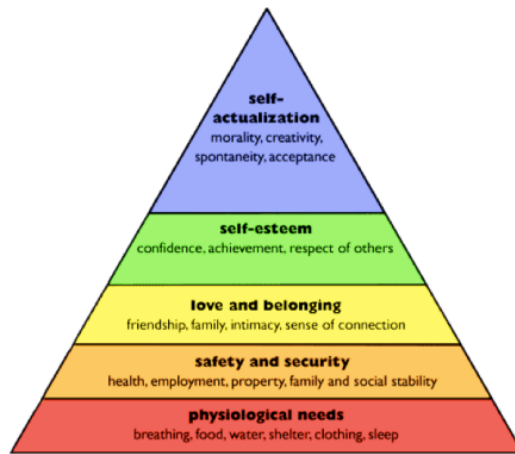
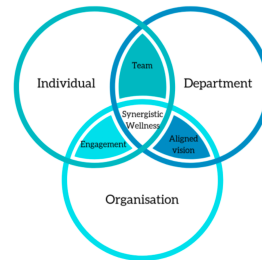


Fig 1 Maslow's hierarchy of needs

Synergistic Wellness and Performance



wrapem.org

Fig 2 Synergistic Wellness (WRaPEM)

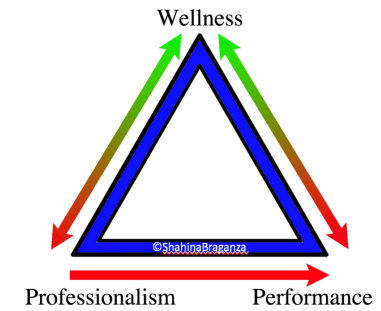
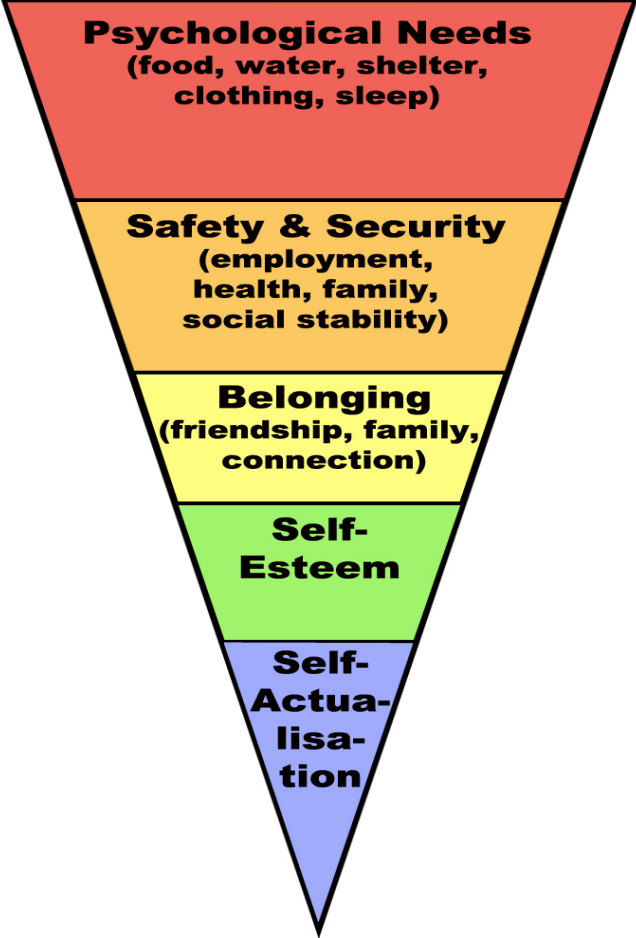


Fig 3 Translational Wellness

Strategy according to tier:	Organisation	Department	Individual
	PHYSIOLOGICAL NEEDS: This is also relatively easy: food, bedding, toiletries.		
	Provide snacks, staff toiletry packs to leave at work Invite the community to create Care Packs for healthcare staff (write notes of encouragement) Invite transport providers to discount fares for HCW (taxis, ride-share) so they can avoid public transport and get to and from work more easily	Ensure safe and secure location for staff who want to keep supplies at work Staff Resuscitation Trolleys (individual packed snacks eg muesli bars) Allocate rest areas for staff doing long/double shifts. Ensuring physical sustainability: - breaks - rotating staff through high-stress vs low-stress roles	Keep snacks, toiletries, other supplies at work Consider showering and changing clothes prior to leaving work. Or shower as soon as you return home, before you have contact with others in the household. Leave your work shoes and work bag in your garage or at your door. Wipe down your ID badge and phone regularly.
	SAFETY: This, to me, is the low-hanging fruit with greatest yield: investment ratio. Main elements are (1) being informed (2) feeling safe, physically and psychologically		
	PPE access and training Ensuring staff access to information , curated in an accessible manner Always There Program Spiritual Care Program/ Chaplaincy Employee Assistance Program (facilitating access for staff, individual or group)	Recognising and supporting vulnerable/at-risk staff members , and modifying their duties (establishing what duties are modifiable). Ensure skill-mix optimised as much as possible. Manage visitors	Ensure you are well informed and well trained on your own safety Maintain safe contact with usual supports: family, friends. Ensure you have a GP and other health care providers as needed Doctors' Health Provider Qld (DHPQ) and specialist colleges Lifeline, Beyond Blue
	BELONGING: How we create sense of team, community and belonging within our workplaces.		
	Ensuring staff access to activity Staff Wellness Hub – outdoor or indoor (quiet time, reading, puzzles) Management visible and available	Informal peer support within teams Compassion rounds Management visible and available Pre-brief and debrief each shift Zen Den (MDU)	Encourage contribution to team activity Ask RUOK? Know what to do if the answer is "No"
	SELF-ESTEEM: We have an opportunity to enhance this layer over the weeks and months to come: by encouraging staff to reflect upon individual and team responses, to consider what enhanced sense of wellness and performance, and to celebrate achievements		
	Recognition and reward of all staff Learning and preparing for future	De-briefing Compassion and Celebration rounds	
	SELF-ACTUALISATION: This is about personal and professional development and growth. Challenges/opportunity around resource rationing, compassion fatigue.		
	...		

See also:

<https://www.ics.ac.uk/ICS/Education/Wellbeing/ICS/Wellbeing.aspx?hkey=92348f51-a875-4d87-8ae4-245707878a5c>

provides wellness posters for display, including response according to Covid-19 phases (pre, initial, core, end).

ADVICE FOR SUSTAINING STAFF WELLBEING IN CRITICAL CARE DURING AND BEYOND COVID-19



The anticipated needs of staff will vary across each of the phases, consider the following support mechanisms:

Phases	Issues and likely impact	Needs and recommended approach
Pre-phase: No cases on unit	Anticipatory anxiety about what's on its way. Inability to think clearly, feeling overwhelmed, planning. Communication errors. Tension in working relationships. "Readiness" burnout.	Increase a sense of control - the team are in a safe pair of hands. Reassurance and planning. Communication updates are key (you may be thinking ahead, they are thinking now). Escalation plan. Support to managers who are making plans and holding the stresses.
Initial phase: Case 1	Starting to get going, lots of trying out, lost time, repetition and frustration. Further anticipatory anxiety	War room - planning central to allow centralised communication. Management are visible and available. Regular communication bulletins and open forums.
Core Phase: Full scale - Multiple cases	Biggest risk period. Fear infection and implications for families. Overwhelming workload. Full go mode- adrenalin and automatic pilot. Exhaustion. Moral distress as healthcare rationed. Distress linked to personal or family experience of COVID-19. Experience fear or stigma when out in public.	Have runners in PPE areas. Promote peer support. It's okay to say you are not okay - Senior staff to model this. Rotate workers from high-stress to lower-stress functions. Small pre-brief and debrief the day. Partner inexperienced workers with their more experienced colleagues. Psychological first aid - drop in sessions for staff with employee wellbeing if you have it. Ensure the basics: Breaks, Facilities (food trolley in staff room), Sleep, Days off. Manage visitors
End Phase: Immediate aftermath	Exhaustion and post trauma recovery / stress	Debriefing. Staff 1-1 and group sessions. Learning and preparation for the future. Organise thanks and reward. Look out for signs of PTSD in staff: • on edge and hyper arousal, poor sleep • flashbacks or re-experiencing • avoidance of reminders.
Long term	Some ongoing PTSD Reflection and learning	

Author: Dr Julie Highfield, Consultant Clinical Psychologist, Cardiff Critical Care

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SELF-CARE DURING COVID-19



Most importantly this is unprecedented: It is okay to not be okay

- Seek information updates at specific times during the day once or twice.
The sudden and near-constant stream of news reports can cause anyone to feel worried. Get the facts. www.gov.uk
- Feeling stressed is an experience that you and many of your colleagues are likely going through. It is normal to be feeling this way in the current situation. Stress and the feelings associated with it are by no means a reflection that you cannot do your job or that you are weak.
- Managing your stress/psychosocial wellbeing during this time is as important as managing your physical health.
- Take care of your basic needs and ensure rest and respite during work or between shifts, eat sufficient and healthy food, engage in physical activity, and stay in contact with family and friends.
- This is an unprecedented scenario, don't try to learn new strategies, use the ones that you have used in the past to manage times of stress.
- This is likely to be a marathon - pace yourself
- Consider your psychological energy levels - you will need to "fill up" after "emptying the tank"
- Be aware of your "bandwidth" - it might take longer to think things through and make sense of things if you are feeling overwhelmed
- Beware dramatic language that might panic your colleagues.
- Avoid using unhelpful coping strategies such as tobacco, alcohol or other drugs.
- Some workers may unfortunately experience avoidance by their family or community due to stigma or fear. If possible, staying connected with your loved ones including through digital methods is one way to maintain contact. Turn to your colleagues or team leader for social support - your colleagues may be having similar experiences to you.

STOP, BREATHE, then THINK- slowing your breathing slows the stress cycle and re-engages your frontal lobes - then you can think.

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Beyond Burnout: A Physician Wellness Hierarchy Designed to Prioritize Interventions at the Systems Level, Shapiro, Daniel E. et al, The American Journal of Medicine, Volume 132, Issue 5, 556 - 563



COVID 19

Keeping your family safe

It's normal to be worried about family, here are a few things you can do to keep them safe

- Change out of your work clothes before you have contact with family



- Leave work shoes, pen, stethoscope at work or in a bag in the car

- WASH HANDS



- Avoid touching faces

- Minimise contact with elderly family members



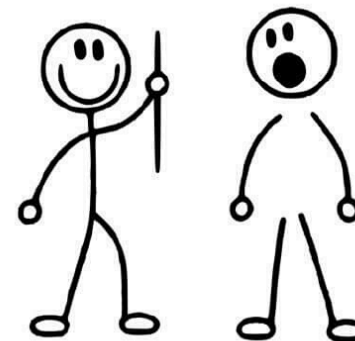
- Avoid social gatherings

- Get tested if you have had any contacts / travel and are unwell

COVID 19

It's going to be tough for all of us.

We can make it easier if we have each others back!



don't worry...
i've got your back

COVID 19

This is a marathon not a sprint, so let's look after ourselves, our families and each other so we can do the best for them and our patients.



COVID 19

Post Shift Decontamination- to reduce risk to your family



Before Work

- Bring clean clothes to change into post shift
- Remove watch and rings - bare below elbows



After Work

- Wash arms from elbows down with soap and water
- Place used scrubs in a bag
- Change into clean clothes
- Wash hands
- Sanitize badge and phone



On arrival home

- Leave shoes, work bag in garage / laundry
- Water bottle and lunch box in dishwasher
- Wash scrubs and clothes you wore home
- Shower with soap and water
- Greet family

COVID -19 Efforts

Not a sprint
Maybe not even a
marathon
But a RELAY.



Do what you can to take
regular time out and time
away

And if you become sick or need
to be isolated, you're not
letting the team down -.

You are resting up until you can
pick up the baton again



WR P M
Wellness Resilience and Performance



DECONTAMINATION CHECKLIST FOR END OF SHIFT

EQUIPMENT

Clean stethoscope, phone & pens with
antiseptic wipes & store in sealed plastic bags

CLEAN SHOES

Remove shoes, clean with antiseptic wipes
& store in sealed plastic bag

REMOVE SCRUBS

Remove scrubs & place in sealed plastic bag
(or return to linen bin if using hospital-issued scrubs)

CHANGE CLOTHES

Change into a clean set of clothes for travel to & from work

HAND HYGIENE

Perform hand hygiene with soap & water
or alcohol based hand gel

TRAVEL

Travel straight home, practicing social distancing
if using public transport

SHOWER

Shower immediately on arrival home,
prior to greeting others

LAUNDRY

Wash scrubs separately in hot water setting in machine.
Air dry clothing outside or use clothes dryer.