Welcome! Today’s webinar will begin shortly.

Submit questions during today’s presentation using the Q&A tool located on the webinar controls panel below.
Welcome

Shelly Schwedhelm, MSN, RN, NEA-BC
Welcome: Shelly Schwedhelm, MSN, RN, NEA-BC

Pandemic Response Workforce Support: David Cates, Ph.D.

NETEC Resources: Shelly Schwedhelm, MSN, RN, NEA-BC

Questions and Answers with NETEC
Welcome

National Emerging Special Pathogens Training and Education Center

To increase the capability of the United States public health and health care systems to safely and effectively manage individuals with suspected and confirmed special pathogens

For more information

Please visit us at www.netec.org or email us at info@netec.org
NETEC Overview

**Assessment**
- Empower hospitals to gauge their readiness using **Self-Assessment**
- Measure facility and healthcare worker readiness using **Metrics**
- Provide direct feedback to hospitals via **On-Site Assessment**

**Education**
- Provide self-paced education through **Online Trainings**
- Deliver didactic and hands-on simulation training via **In-Person Courses**

**Technical Assistance**
- Compile **Online Repository** of tools and resources
- Develop customizable **Exercise Templates** based on the HSEEP model
- Provide **Emergency On-Call Mobilization**

**Research Network**
- **Online Repository** Built for rapid implementation of clinical research protocols
- **Develop Policies, Procedures and Data Capture Tools** to facilitate research
- **Create infrastructure for a Specimen Biorepository**

**Cross-Cutting, Supportive Activities**
Pandemic Response Workforce Support

David Cates, Ph.D.
Agenda

- Challenges for healthcare workers in a pandemic
- Risk factors for psychological distress
- Nebraska Medicine – UNMC programs/strategies
  - 1:1 Peer support
  - Resilience workshops
  - Referral line
  - Intranet resources
  - Prioritized referrals
- Preventing moral injury
- Leadership
- Basic principles
Challenges for Healthcare Workers in a Pandemic

American Psychiatric Association National Poll*

<table>
<thead>
<tr>
<th>Anxious about the possibility of getting COVID-19</th>
<th>48%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxious about becoming seriously ill or dying from COVID-19</td>
<td>40%</td>
</tr>
<tr>
<td>Anxious about the possibility of family and loves ones getting COVID-19</td>
<td>62%</td>
</tr>
<tr>
<td>Serious impact on mental health</td>
<td>36%</td>
</tr>
<tr>
<td>Serious impact on day-to-day lives</td>
<td>59%</td>
</tr>
<tr>
<td>Concerned about serious negative impact on finances</td>
<td>57%</td>
</tr>
<tr>
<td>Trouble sleeping</td>
<td>19%</td>
</tr>
<tr>
<td>Consuming more alcohol or other drugs/substances</td>
<td>8%</td>
</tr>
<tr>
<td>Fighting more with partner</td>
<td>12%</td>
</tr>
<tr>
<td>Trouble concentrating on other things</td>
<td>24%</td>
</tr>
</tbody>
</table>

*Online poll via a Porter Novelli PN View: 360 survey using online CARAVAN Omnibus survey. Nationally representative sample of 1,004 adults, March 18-19, 2020. Margin of error +/-3.1% at 95% confidence level.
Blanket Versus Individual Waivers?

Blanket Waivers
- Apply to all healthcare facilities in a given geographic area
- Do not require individual requests

Individual Waivers
- Approved on a case by case basis
- Facilities may request to have certain regulatory requirements waived
- Requests must be made to regional CMS office

Figure 8
Significant Shares Say The Coronavirus Has Had A Negative Impact On Their Mental Health

Percent who say they feel that worry or stress related to coronavirus has had a negative impact on their mental health:

<table>
<thead>
<tr>
<th></th>
<th>Major impact</th>
<th>Minor impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>19%</td>
<td>26%</td>
</tr>
<tr>
<td>Male</td>
<td>15%</td>
<td>22%</td>
</tr>
<tr>
<td>Female</td>
<td>24%</td>
<td>30%</td>
</tr>
<tr>
<td>White</td>
<td>17%</td>
<td>27%</td>
</tr>
<tr>
<td>Black</td>
<td>24%</td>
<td>25%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>24%</td>
<td>24%</td>
</tr>
<tr>
<td>Parent of child&lt;18</td>
<td>19%</td>
<td>27%</td>
</tr>
<tr>
<td>Not a parent</td>
<td>19%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Challenges for Healthcare Workers in a Pandemic

What Types of Challenges?

- Proper use of PPE / infection control protocols
- Lack of organization and role clarity
- Changes in workflow and responsibility
- Limited resources/supplies
- Altered standards of care and ethical challenges ("moral injury")
- Separation from usual colleagues
- Witnessing the death of patients
- Illness and death in colleagues
- Challenging team dynamics
- Fear of contracting the illness
- Concerns for safety of family and friends
- Feeling misunderstood; pressure to justify work
- Stress with re-entry to regular unit
- Stigmatization, lack of appreciation
- Fatigue and limited rest time
- Personal and team pressure to succeed in care of patients
- Self-doubt
Challenges for Healthcare Workers in a Pandemic

Most healthcare workers are resilient and will not experience lasting distress. However, depending on stress during the response, 10-20% of healthcare workers are at risk for a new disorder they didn’t have before the event (based on research with disaster responders).

Symptoms may appear after the outbreak is under control. Symptoms usually decrease over time. Relapses may occur, especially if:

- Pre-existing mental health conditions
- Re-exposure to additional infectious disease outbreaks
Psychological Distress

**JAMA Network Open** article, March 23, 2020*:

- Data on 1,257 HCWs from 34 hospitals in China
- Data collected January 29 – February 3, 2020
- PHQ9 (depression), GAD-7 (anxiety), Insomnia Severity Index, Impact of Events Scale-Revised (acute stress)

<table>
<thead>
<tr>
<th></th>
<th>Any Symptoms</th>
<th>Moderate or Severe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>50.4%</td>
<td>14.8%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>44.6%</td>
<td>12.3%</td>
</tr>
<tr>
<td>Insomnia</td>
<td>34.0%</td>
<td>7.8%</td>
</tr>
<tr>
<td>“Distress” (acute stress)</td>
<td>71.5%</td>
<td>35.0%</td>
</tr>
</tbody>
</table>

- Highest levels of symptoms reported by nurses, women, those working in Wuhan, and frontline providers

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Challenges for Healthcare Workers in a Pandemic

Selected Risk Factors for Psychological Distress

- Perception of heightened risk of infection
- Longer duration of high-risk exposure
- Previous history of psychiatric illness
- Lack of social support
A Comparison of Decreased Mortality across Social Connection and Leading Health Indicators

- Social Connection: Complex measures of social integration [A]
- Social Connection: High vs. low social support contrasted [A]
- Smoking < 15 cigarettes daily [B]
- Smoking Cessation: Cease vs. Continue smoking among patients with CHD [C]
- Social Connection: Average across multiple indicators [A]
- Alcohol Consumption: Abstinence vs. Excessive drinking ( > 6 drinks/day) [D]
- Social Connection: Divorce (inverse HR) [E]
- Flu Vaccine: Pneumococcal vaccination in adults (for pneumonia mortality) [F]
- Social Connection: Loneliness (inverse) [G]
- Physical Activity (controlling for adiposity) [H]
- Obesity (Inverse HR) [I]
- Air Pollution: Low vs. high [J]

Social Support

Essential in building resilience

Buffers the effects of stress
Challenges for Healthcare Workers in a Pandemic

Phases of Disaster

Emotional Highs

Pre-disaster

Heroic

Impact

Disillusionment

Honeymoon

Community Cohesion

Reconstruction

A new Beginning

Setback

Working Through Grief

Coming to Terms

Anniversary Reactions

Trigger Events

Inventory

Warning

Threat

Impact

Up to One Year

After Anniversary
# Behavioral Health Response Plan for Workforce Resilience

| 1:1 Peer Support |
| Resilience Workshops |
| Referral Line |
| Intranet Resources |
| Prioritized Referrals |
Behavioral Health Response Plan: 1:1 Peer Support

Peers in Need of Support (“PiNS”)

120+ Behavior health responders
  - Nebraska Medicine or UNMC staff/faculty
  - Responders identified in disaster surge plan
  - Several non-behavioral health volunteers

Training

1. Psychological First Aid
   - In-person or 6-hour online course through National Child Traumatic Stress Network (NCTSN)
   - If previous training, then refresher course through University of Nebraska Public Policy Center

2. Just-in-time training specific to current pandemic
Challenges for Healthcare Workers in a Pandemic

Behavioral Health Response Plan: 1:1 Peer Support

Components of Just-in-time Training
- Hospital Incident Command System (HICS)
- Unique challenges for HCWs in a pandemic
- Risk factors for psychological distress
- Psychological First Aid refresher
- Documenting 1:1 support provided
- Self-care
Challenges for Healthcare Workers in a Pandemic

Behavioral Health Response Plan:
1:1 Peer Support

Psychological First Aid Refresher

*From University of Nebraska-Lincoln Public Policy Center Course

• Take emotional temperature
• Bring temperature of 8-10 down to 6-7
  • Unlikely to get down to 0-4 range
• Encourage action
• Encourage self-reliance
• Convey that they are not alone
• Provide information on common reactions to stress
• Convey that reactions are normal
Behavioral Health Response Plan:
1:1 Peer Support

Psychological First Aid Refresher (continued)
* From University of Nebraska-Lincoln Public Policy Center Course

• Signs of trouble warranting referral
• How to make a referral
• Dealing with anger
3. Tracking PiNS contacts
4. Additional training and resources
  • PFA Just-in-time training materials
  • Handouts for HCWs
Challenges for Healthcare Workers in a Pandemic

Behavioral Health Response Plan: 1:1 Peer Support

Employees request 1:1 Peer Support by sending an email to a designated mailbox.

Psychology Services Manager triages all requests and assigns each to one of the behavioral health responders.
Challenges for Healthcare Workers in a Pandemic

Behavioral Health Response Plan: Resilience Workshops

Model
- Based on PsySTART® Responder / Anticipate, Plan, Deter™ © 2003-2018, Merritt Schreiber, Ph.D. with permission
- U.S. Airforce Pre-Exposure Preparation (PEP) Training
- Plan ahead for what is likely to be most stressful and how to respond

Trained 11 behavioral health responders
- Psychologists, social workers, nurse, pharmacist

Training
- Similar to 1:1 Peer Support content with additional training on workshop elements
Challenges for Healthcare Workers in a Pandemic

Behavioral Health Response Plan:
Resilience Workshops

Workshop components

- Unique challenges for HCWs
- Risk factors for psychological distress
- Definition and elements of resilience
- Identify personal signs of stress
- Identify what is likely to be most challenging
- Identify existing techniques to relieve stress
- Additional tips for coping and stress management
- Learn formal relaxation techniques
  - Deep breathing and body scan exercises
- Healthy thinking (based on CBT and resilience literature)
- Gratitude
- Social support
- Healthful sleep, eating and exercise habits
- When to seek additional help
- Where to find help
- Address common barriers to getting help (stigma, pride, embarrassment)
Challenges for Healthcare Workers in a Pandemic

Resilience Roadmap

- Participants complete throughout the workshop
- Participants identify
  - Individual signs of stress
  - Elements of the response likely to be most difficult
  - Existing coping strategies
  - New coping techniques
  - Social supports
- Also includes
  - Tips for healthy thinking
  - Apps and websites to learn relaxation techniques
  - Indicators for when to seek help
  - Resources available to employees (e.g., PiNS program, EAP, etc.).
Behavioral Health Response Plan: Resilience Roadmap

My signs of stress (circle those that apply):

Physical: Back pain, muscle tension, stomachache, headache, changes in appetite, sleep disturbance, fatigue, other: ____________________________

Emotional: Worry, irritability, sadness, anger, anxiety, fear, depression, guilt, sadness, mood swings, hopelessness, other: ____________________________

Cognitive: Difficulty concentrating, trouble remembering things, feeling confused, catastrophizing, etc. Other: ____________________________

Behavioral: Snapping at others, overworking, withdrawing, poor self-care, increased substance use, picking, increased conflicts, other: ____________________________

Which aspects of the response are likely to be most stressful for you (circle those that apply)?

Proper use of PPE / infection control protocols Lack of organization and role clarity

Altered standards of care/ethical conflicts (moral injury) Limited resources/supplies

Safety and security Separation from usual colleagues

Witnessing the death of patients Challenging team dynamics

Illness or death in colleagues Fear of contracting illness

Separation from family Feel misunderstood, pressure to justify work

Stress with re-entry to home / regular unit Stigmatization, lack of appreciation

Fatigue and limited rest time Concerns for safety of family and friends

What techniques already work for you (circle those that apply)?

- Reading a book
- Games on smartphone
- Taking a walk
- Yoga
- Socializing
- Hobby
- Listening to music
- Journaling
- Writing poetry
- Knitting
- Puzzles
- Alone time

Other: ____________________________

Additional tips:

- Take frequent short breaks
- Limit media consumption
- Keep a gratitude journal
- Spend time outdoors

Formal relaxation techniques you may want to learn:

- Deep breathing
- Body scan
- Mindfulness
- Visualization

Healthy Thinking includes:

- Accepting what you can’t change
- Avoiding comparison
- Focusing on mission
- Adapting to the situation
- Maintaining a hopeful outlook
- Sense of humor

Identify your social supports

Eat well, exercise and get sufficient sleep when possible.

For trouble sleeping, try this app:

When should I seek help?

- Intrusions (nightmares, flashbacks, intrusive thoughts)
- Hyper-arousal (anxiety, insomnia, irritability, etc.)
- Feeling numb, spaced out or like things aren’t real
- Avoiding reminders of a traumatic event
- Avoiding feelings by using substances
- Daily functioning is affected

Where can I find help?

- Peers in Need of Support (PNS) program
- Confidential 24/7 support from trained colleague
- Email PNS@nchadvocated.com
- Your supervisor
- Federal disaster distress helpline
- (800) 985-5990 or text ‘talkwithus’ to 66746
- http://disasterdistress.hhs.gov
- Confidential 24/7 for anyone experiencing distress due to a disaster
- Arbor Family Counseling
- EAP for Nebraska Medicine and UNMC
- 402-855-5660 or 1-800-922-7570
- Arborfamilycounseling.com

Resilience Roadmap, p. 3
RESILIENCE AND CARE OF THE CAREGIVER WEBINAR

Item Type:
Webinar

Title
Resilience and Care of the Caregiver Webinar

Subject
Infection Control

Description
Monday, April 6th NETEC webinar “Resilience and Care of the Caregivers.” This webinar will provide tips on teaching resiliency among healthcare workers, risk factors, how to overcome and develop a peer support plan, resiliency roadmap and overall strategies.

Download the associated documents below. Download by right-clicking and choosing Save as, or click to view.

- PINS Just-in-time training
  - Download the PINS Just-in-time training Video here.
  - Download the associated PINS slides.
- Pandemic Response Resilience Workshop downloadable
  - Download the Pandemic Response Resilience Workshop video.
  - Download the Pandemic Response Resilience slides.
  - Download the Pandemic Response Resilience Roadmap.
Behavioral Health Response Plan: Referral Line

Behavioral Health Connection

• Existing grant-funded program
• Helps individuals/families identify providers and services
  • Psychiatrists, psychologists, therapists, support groups, employment and housing support, etc.
• Accessing prescription assistance programs
• Accessing transportation
• In-person (currently virtual) visits to assist with paperwork necessary to access services
• Free to anyone in the Omaha metro area
Intranet page listing all behavioral health support services

- 1:1 peer support, including link to email address to request
- Resilience workshops
- Behavioral Health Connection
- Employee Assistance Program
- Spiritual care
- Federal Disaster Distress Helpline
- National Suicide Prevention Lifeline
- Recommended apps and websites
- Links to tip sheets on self-care, managing anxiety and stress, helping children, working from home, educational resources for children at home, etc.

<table>
<thead>
<tr>
<th>Resource</th>
<th>Brief Description</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:1 Peer Support</td>
<td>Colleagues are matched with one of our behavioral health responders, made up of</td>
<td><a href="mailto:pina@nebraskamed.com">pina@nebraskamed.com</a> (requests for 1:1</td>
</tr>
<tr>
<td></td>
<td>Nebraska Medicine and UNMC psychologists, psychiatrists, social workers, marriage</td>
<td>support should only be made by colleagues</td>
</tr>
<tr>
<td></td>
<td>and family therapists, staff chaplains, and other personnel. This is not a</td>
<td>themselves, and not by their peers or</td>
</tr>
<tr>
<td></td>
<td>formal evaluation or treatment, but a supportive peer to listen, offer</td>
<td>supervisors)</td>
</tr>
<tr>
<td></td>
<td>suggestions, share resources and make referrals when needed. Requests are</td>
<td></td>
</tr>
<tr>
<td></td>
<td>handled confidentially and are separate from HR, One Chart or other record-keeping</td>
<td></td>
</tr>
<tr>
<td></td>
<td>systems.</td>
<td></td>
</tr>
<tr>
<td>Team Support</td>
<td>For workgroups/teams who would like to learn resiliency and stress management</td>
<td><a href="mailto:pina@nebraskamed.com">pina@nebraskamed.com</a></td>
</tr>
<tr>
<td></td>
<td>tips, managers can request a 45-minute interactive webinar with one of our</td>
<td></td>
</tr>
<tr>
<td></td>
<td>behavioral health team members.</td>
<td></td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>A staff to help connect you to resources in our community, including:</td>
<td>Behavioral Health Connection</td>
</tr>
<tr>
<td>Connection</td>
<td>- Psychiatrists</td>
<td>(402) 836-9292 Monday through Friday</td>
</tr>
<tr>
<td></td>
<td>- Mental health therapists</td>
<td>8 a.m. to 5 p.m.</td>
</tr>
<tr>
<td></td>
<td>- Support groups</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Substance use disorder recovery</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Employment support agencies</td>
<td></td>
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<tr>
<td></td>
<td>- Housing assistance programs</td>
<td></td>
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<tr>
<td></td>
<td>- Medical care options</td>
<td></td>
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<tr>
<td></td>
<td>- Peer support services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Prescription assistance programs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Transportation options</td>
<td></td>
</tr>
<tr>
<td></td>
<td>These services are provided free to anyone in the Omaha-Metro area with compassion</td>
<td></td>
</tr>
<tr>
<td></td>
<td>and confidentiality.</td>
<td></td>
</tr>
<tr>
<td>Employee Assistance</td>
<td>Arbor Family Counseling offers a variety of confidential services. You can call</td>
<td>Arbor Family Counseling (402) 836-9292</td>
</tr>
<tr>
<td></td>
<td>EAP 24 hours a day, 7 days a week to speak confidentially with a trained</td>
<td>Monday through Friday 8 a.m. to 5 p.m.</td>
</tr>
<tr>
<td></td>
<td>professional.</td>
<td></td>
</tr>
</tbody>
</table>
Behavioral Health Response Plan: Prioritized Referrals

Psychiatry and Psychology Departments
- Commitment to prioritize frontline providers for medication evaluation and psychotherapy
- All behavioral health providers agreed to work in these patients
Challenges for Healthcare Workers in a Pandemic

Moral injury is emotional distress from actions, or lack thereof, that violate one’s morals

- Dilemmas that may contribute to moral injury include:
  - Allocating limited resources to a surge of critically ill patients
  - Balancing one’s own physical and mental health needs with those of patients
  - Balancing duty to patients with duty to family

Feelings of guilt, shame and disgust

Negative thoughts about self and/or others

Can contribute to mental health difficulties

Challenges for Healthcare Workers in a Pandemic

Prevent Moral Injury

Before surge
- Provide opportunities to discuss expected ethical challenges
  - Include honest assessment of what is likely to occur

During surge
- Create safe space to share emotional challenges
- Similar to Schwarz Rounds
- Team leaders or experienced colleagues can reach out to staff to initiate discussions

After surge
- Provide opportunities to discuss
  - Create a meaningful narrative rather than a traumatic one

Clear vision for response effort
Supportive engagement with team
Frequent communication
  • Key messages – short, simple, and repeated
  • Positive messages outnumber negative 3:1
  • "I don’t know" is ok
    • Commit to finding out and following up
  • Compassion, Conviction, Optimism (CCO)

"When people are stressed and upset, they want to know that you care before they care what you know."* - Will Rogers

*As quoted in “Leadership Communication: Anticipating and Responding to Stressful Events,” Center for the Study of Traumatic Stress
Recognition for healthcare workers
  • Meet with groups
  • Communicate organizational commitment to and appreciation for employees

Develop strategy team for wellness

Reinforce self-care

Promote team care
### Leadership: Promoting Team Care (Example)

Look out for signs of stress in your colleagues

<table>
<thead>
<tr>
<th></th>
<th>Physical</th>
<th>Emotional</th>
<th>Cognitive</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Back pain, muscle tension, stomachache, headache, changes in appetite, sleep disturbance, fatigue</td>
<td>Worry, irritability, sadness, anger, anxiety, fear, depression, guilt, mood swings, hopelessness</td>
<td>Worry, irritability, sadness, anger, anxiety, fear, depression, guilt, mood swings, hopelessness</td>
<td>Snapping at others, overworking, impulsivity, pacing, withdrawing, poor self-care, using drugs or alcohol more than usual, increased conflicts</td>
</tr>
</tbody>
</table>
Leadership: Promoting Team Care (Example)

Look out for signs for stress in your colleagues

Recognize the signs of distress in colleagues
- Often these are the very things that push people away, such as irritability and withdrawal

Reach out – try to connect
- “You don’t seem like your usual self.”
- “Is there anything I can do to help?”

Try to come up with a plan
- What has worked for them in the past
- Share what has worked for you
- PiNS
- Supervisor
- EAP
### Challenges for Healthcare Workers in a Pandemic

#### Peer support
- Upon request (Nebraska “PiNS” model)
- Buddy system
  - Pair experienced staff with junior staff

#### Resilience training
- Workshops (Nebraska model)
- Ongoing education related to symptom recognition, coping strategies, and stigma reduction

#### Family resilience
- General information sessions
  - Address fears, risks, coping strategies
  - Encourage “family plan” for contingencies
Challenges for Healthcare Workers in a Pandemic

Basic Principles

- Access to counseling
  - Prioritized referrals (Nebraska model)
  - Referral line (Nebraska model)
  - EAP
- Debriefing after critical incidents
- Reinforce self-care
- Promote team care and social support
- Ensure employees are aware of all resources
- Effective leadership
Basic Principles:
Get the word out

- Daily e-newsletter
- Employee forums
- HR via managers
- Medical Staff Office
- Nursing meetings, e-newsletters, emails
- Post on units
- Other?
NETEC Resources

Shelly Schwedhelm, MSN, RN, NEA-BC
NETEC will continue to build resources, develop online education, and deliver technical training to meet the needs of our partners.

**Ask for help!**

- Send questions to [info@netec.org](mailto:info@netec.org) - they will be answered by NETEC SMEs.
- Submit a Technical Assistance request at [Netec.org](http://Netec.org)
Questions and Answers