

Leading with Compassion: Supporting Healthcare Workers in a Crisis

A Compassion in Action Webinar
April 7, 2020



the schwartz center
FOR COMPASSIONATE HEALTHCARE



Your Moderator

Stephanie Adler Yuan, MS
Director, Education & Training
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The Schwartz Center for Compassionate Healthcare

**Putting compassion at the heart of healthcare
through programs, education and advocacy**

*Through national and international partnerships, the Schwartz Center's coalition of caregivers, patients, families and other leaders work together to make **compassion a vital element** in every aspect of healthcare.*

Please Note

- This webinar is funded in part by a donation in memory of Julian and Eunice Cohen, whose generosity inspired others to give and to learn.
- You may submit your questions via the “Questions” pane to the right of your screen at any time.
- We appreciate your feedback! Please take a moment to complete our very brief survey following the webinar.



Today's Host

Beth Lown, MD

Chief Medical Officer

The Schwartz Center for Compassionate Healthcare



Today's Speakers

Richard Westphal, PhD, RN, FAAN
University of Virginia, School of Nursing



Patricia Watson, PhD
National Center for PTSD



Occupational Stress in Healthcare

- Occupational stress occurs when the requirements of an individual's job exceed the abilities, resources, and needs of the individual (National Institute for Occupational Safety and Health [NIOSH], 2014)
- Occupational stress can be detrimental to worker physical and psychological wellbeing and patient safety (National Academy of Medicine, 2019)
- Healthcare as profession and institution (24/7) is a “greedy organization” that exerts pressure for members to reduce ties to other institutions (marriage, parenting, social groups, etc.) (Coser, 1974; Rubin & Brody, 2005)
- Promotion and leaderships roles increase organizational pressure while reducing peer networks

Leader Roles and Responsibilities

- Leaders are responsible for making decisions about individuals, units, and mission capability across a continuum of stress
- Occupational and traumatic stress are both strengths and vulnerabilities for team members
- Leaders leverage the skills, knowledge, and attitudes of every single unit member to achieve even basic mission goals
- Leaders leverage the strengths and vulnerabilities to build resilience and conserve those who become injured

The Good News

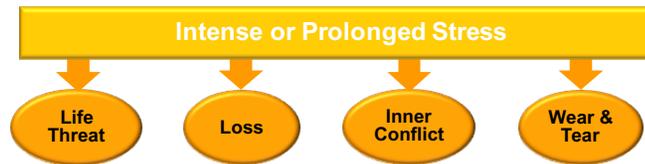
- Stress injury is a manageable risk
- Stress First Aid is a set of knowledge and skill tools that leaders can leverage to address unit and individual stress risks; not an additional burden or requirement on leaders
- Trained peers and team members using the stress continuum, Stress First Aid and the resilience practices are potential tools for the leaders
- Stress First Aid is a workforce multiplier to save a life, prevent further injury, and promote recovery
- SFA training is flexible and tiered to meet unit and individual needs while accounting for dynamic healthcare demands

Stress First Aid Major Concepts

Stress Continuum

READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
<ul style="list-style-type: none"> • Good to go • Well trained • Prepared • Fit and focused • Cohesive units & ready families 	<ul style="list-style-type: none"> • Distress or impairment • Mild and transient • Anxious, irritable, or sad • Behavior change 	<ul style="list-style-type: none"> • More severe or persistent distress or impairment • Leaves lasting memories, reactions, and expectations 	<ul style="list-style-type: none"> • Stress injuries that don't heal without help • Symptoms persist for many weeks, get worse, or initially get better and then return worse
Unit Leader Responsibility	Individual, Spouse, Family Responsibility		Caregiver Responsibility

Stress Injury



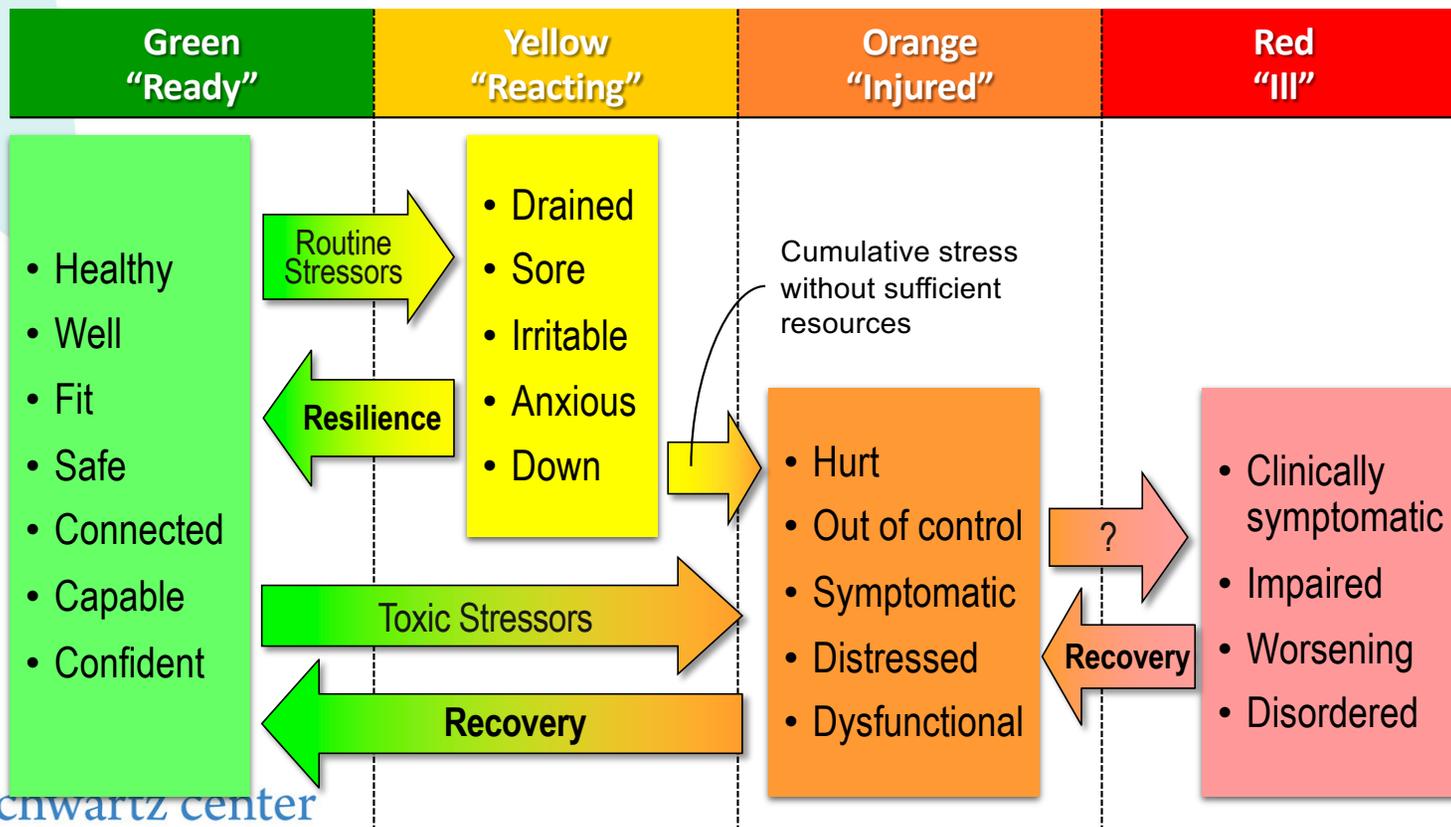
Stress First-Aid



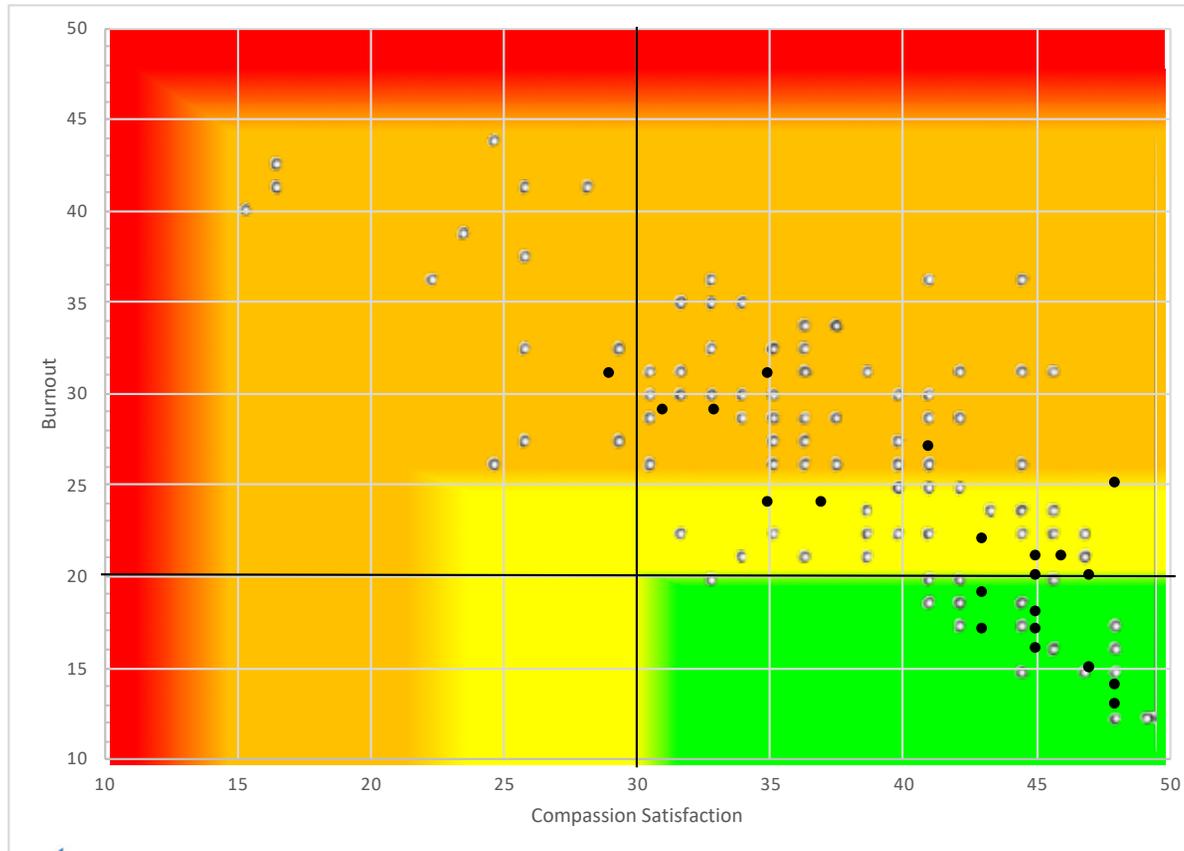
Seven Cs of Stress First Aid:

- 1. CHECK**
Assess, observe and listen
- 2. COORDINATE**
Get resp. refer as needed
- 3. COVER**
Get us safely ASAP
- 4. CALM**
Reduce, slow down, refocus
- 5. CONNECT**
Get support from others
- 6. COMPETENCE**
Restore effectiveness
- 7. CONFIDENCE**
Restore self-esteem and hope

Recognize Stress Zone Transitions: Demand::Resource Balance

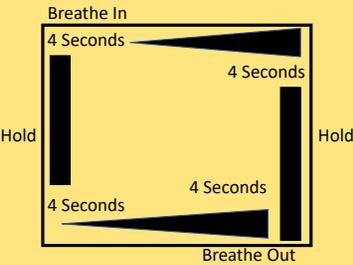


Pro-QOL Burnout and Compassion Satisfaction



Poll

Stress Continuum and Strategies

READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
<p>DEFINITION</p> <ul style="list-style-type: none"> Optimal functioning Adaptive growth Wellness <p>You have the focus to help others.</p> <p>Reflect on the good you are doing and how you are making a difference.</p> <p>Continue to balance your rest and sleep.</p>	<p>DEFINITION</p> <ul style="list-style-type: none"> Mild and transient distress or impairment Always goes away <p>Slow down your body for a moment when reacting to stress.</p> <p>Time for a 4 square breath</p> 	<p>DEFINITION</p> <ul style="list-style-type: none"> More severe and persistent distress or impairment <p>Feeling that moments and things in your life are getting out of control?</p>  <p>Stop: <i>pause for a moment</i> Take a Breath: <i>to calm</i> Observe: <i>what am I feeling?</i> <i>What are my goals?</i> <i>What are my choices?</i> Proceed with awareness</p>	<p>DEFINITION</p> <ul style="list-style-type: none"> Unhealed stress injury causing life impairment Activating other symptoms <p>Having difficulty thinking about how much longer you can keep doing this? Talk with a peer or a leader.</p> <p>For confidential help contact EAP at https://YourEAP.com</p>

Four Sources of Stress Injury

Life Threat

A traumatic injury

Due to the experience of or exposure to intense injury, horrific or gruesome experiences, or death.

Loss

A grief injury

Due to the loss of people, things or parts of oneself.

Inner Conflict

A moral injury

Due to behaviors or the witnessing of behaviors that violate moral values.

Omission
Commission
Bearing Witness

Wear and Tear

A fatigue injury

Due to the accumulation of stress from all sources over time without sufficient rest and recovery.

Five Essential Needs

- Promote sense of safety
- Promote calming
- Promote connectedness
- Promote sense of self- and collective-efficacy
- Promote hope

Hobfoll, S. E., Watson, P., Bell, C. C., Bryant, R. A., Brymer, M. J., et al. (2007). Five essential elements of immediate and mid-term mass trauma intervention: Empirical evidence. *Psychiatry* 70(4), 283-315.

SFA Framework Assessment

	Cover	Calm	Connect	Competence	Confidence
Trauma/ Life Threat					
Loss					
Inner Conflict					
Wear and Tear					

1. First Assess: Do not assume all have been affected or need an intervention
2. Look for themes at intersections of stress injury source and essential needs
3. Identify strengths and vulnerabilities
4. What have the leaders already done or current status?
5. What resources are available?

STRESS FIRST AID MODEL



Seven Cs of Stress First Aid:

1. CHECK

Assess: observe and listen

2. COORDINATE

Get help, refer as needed

3. COVER

Get to safety ASAP

4. CALM

Relax, slow down, refocus

5. CONNECT

Get support from others

6. COMPETENCE

Restore effectiveness

7. CONFIDENCE

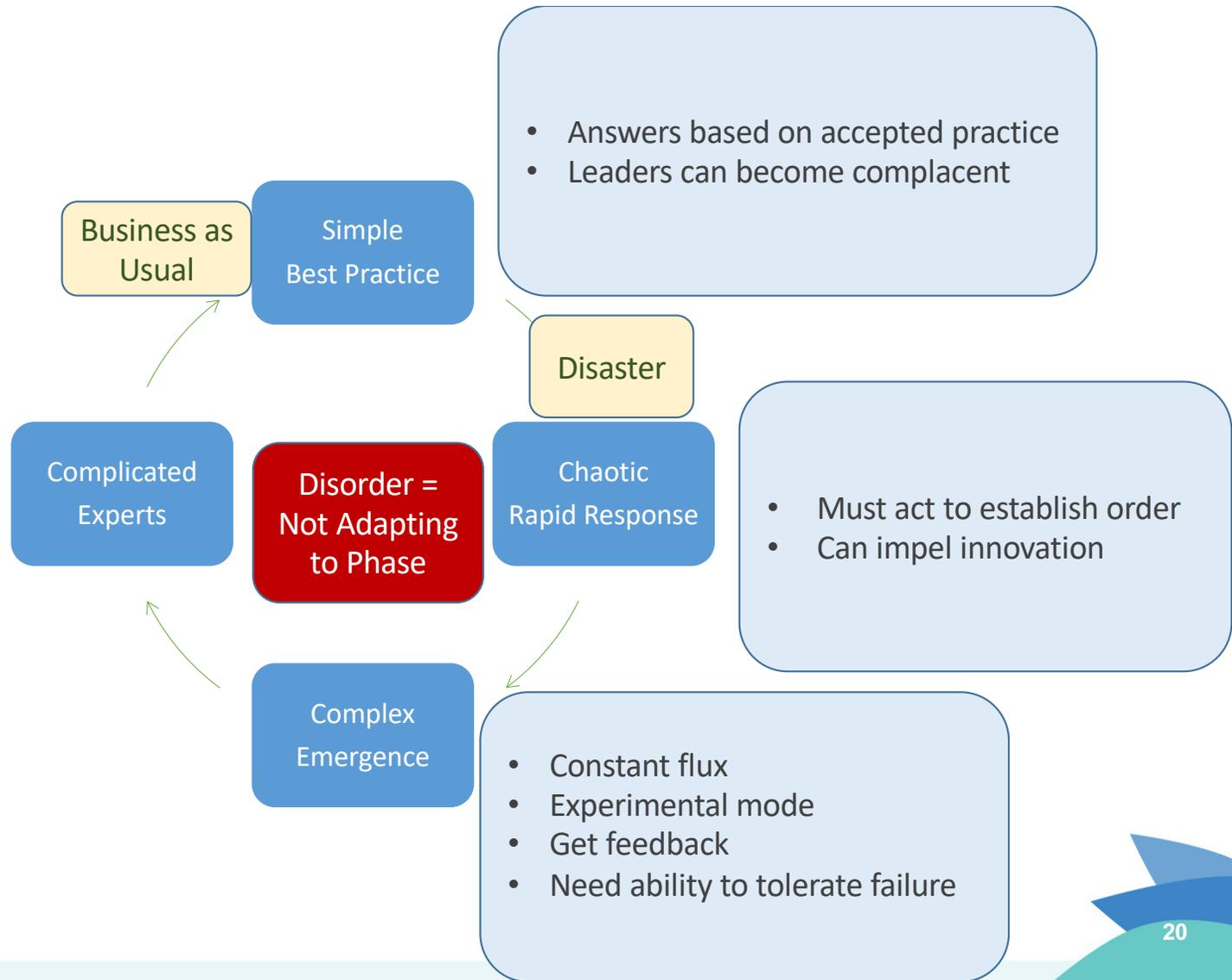
Restore self-esteem and hope

Focused Communication and Strategies

- Check and Coordinate: "Help me understand." Listen
- Cover – Physical and Psychological Safety
- Calm – Honest Communications and Grow the Green
- Connect – Unit Cohesion and Social Support
- Competence – Acknowledge Successes and Lessons Learned
- Confidence – Meaning Making and Future Orientation

Complexity Science: Cynefin Framework

- Investigation and expertise needed
- Listen to the experts / welcome solutions from others



Adult Development: Three Plateaus in Mental Complexity

The Socialized
Mind

Socialized

- Team player
- Seeks direction
- Reliant

Getting Myself in the Car

The Self-
Authoring
Mind

Self-Authoring

- Learns to lead
- Own compass
- Problem-Solving
- Independent

Behind the Wheel

The Self-
Transforming
Mind

Self-Transforming

- Leads to learn
- Multi-frame, holds contradictions
- Problem-finding
- Interdependent

*Considering Whether to
Remake the Road Map*

Be a Force Multiplier



- In times of team stress, being a force multiplier is especially important to balance out what is happening.
- Focus on:
 - What you can *affect* (influence)
 - What you can *effect* (change or control)
- The overall effectiveness of your group is increased by your presence and your actions:
 - Respect individuality
 - Communicate regularly
 - Give recognition
 - Seek out opportunities to reframe/raise others up



Leader SFA Actions When Someone Has a Stress Injury

BE FLEXIBLE

SHOW
SUPPORT

ASK
QUESTIONS

INFORM

MODEL
RESPECT

BE PATIENT

BELIEVE IN
THE PERSON

ADVISE AND
REFER

FACILITATE
PROGRESS



Potential Check Strategies: Others

Offer basic resources like food, water, etc.

Begin with a casual two-way communication to get someone talking.

Find the right way to check on someone without annoying them (i.e., email/texting versus calling).

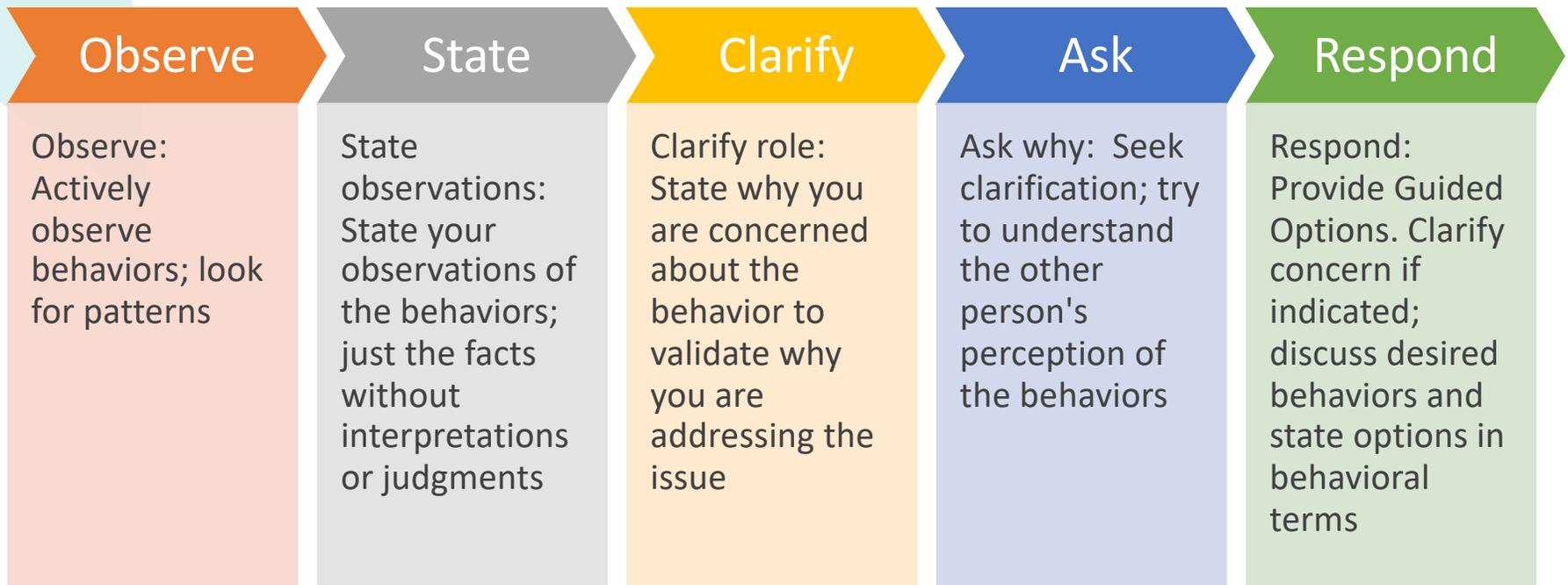
Check in more than once.

Be approachable and authentic.

Monitor / check on staff needs regularly.

Set ground rules.

Check Skill: OSCAR



SFA Group Questions

1

What are/have been your greatest challenges, hassles, or frustrations?

2

What are/have been your greatest rewards or successes?

3

What does it mean to be in this unit?

SFA Group Questions

Cover

- How has this affected your sense of safety?

Calm

- What changes have occurred regarding sleep or ability to keep calm?

Connect

- Has there been an impact on how you connect with others?

Competence

- Do you have any concerns about being able to handle anything?

Confidence

- Have you noticed any change in your confidence in:
 - yourself
 - leadership
 - equipment

What do you need ?
What can I/we do to help?

Potential Cover Actions: Others

Reduce anything that make the person feel unsafe.

Remind them about how they are safe here and now.

Educate about stress reactions, what to expect, how to feel safer.

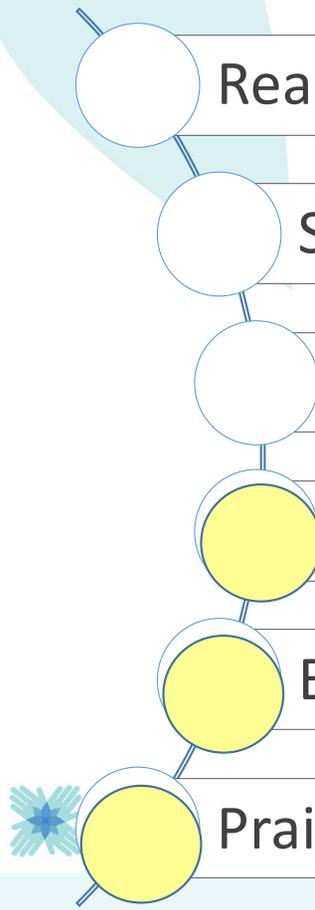
Brainstorm and problem solve solutions with them.

Communicate with administrative leaders.

Brief staff about changes in practice / strategies / resources / events.

Provide an authoritative, accurate voice to limit perceived threat.

Potential Calm Actions: Others



Reassure by authority and presence.

Show understanding.

Validate concerns.

Provide information about reactions and coping.

Encourage staff to take brief breaks.

Praise and give positive feedback.

Potential Connect Strategies: Others



- Provide support yourself.
- Ask about social support.
- Act to remove obstacles to social support.
- Offer different types of social support (practical, inclusion, emotional).
- Help link with supportive others.
- Address potential negative social influences.

Potential Competence Strategies: Others

- *Remind* of strategies and skills that have worked before
- *Encourage* active coping
- Help *problem-solve* and set achievable goals
- Give *extra training* / mentoring
- Help “*recalibrate*” expectations/goals
- Connect to community *resources*



Potential Confidence Strategies: Others



- Normalize reactions and concentrate on strengths.
- Be authentic and nonjudgmental.
- Honor and make meaning of losses.
- Reframe guilt and self-defeating statements.
- Be willing to talk with them as many times as they need.
- Connect them to treatment or to people who have dealt with similar things.
- Clarify rumors, misunderstandings, distortions.

Questions & Answers



**Richard Westphal,
PhD, RN, FAAN**



**Patricia Watson,
PhD**



**Beth Lown,
MD**

Please type your questions in the “Questions” pane on your screen.

Next Up

April 16

“Managing Our Fears and Stress: Strategies to Cultivate Emotional Agility”

Dr. Susan David

April 28

“Supporting Patients and Families in a Crisis”

Dr. Patricia Watson and Dr. Richard Westphal

Register at theschwartzcenter.org



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for joining us

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