

# Taking Care of Your Emotional Health: A NEQCA Webinar for Clinicians

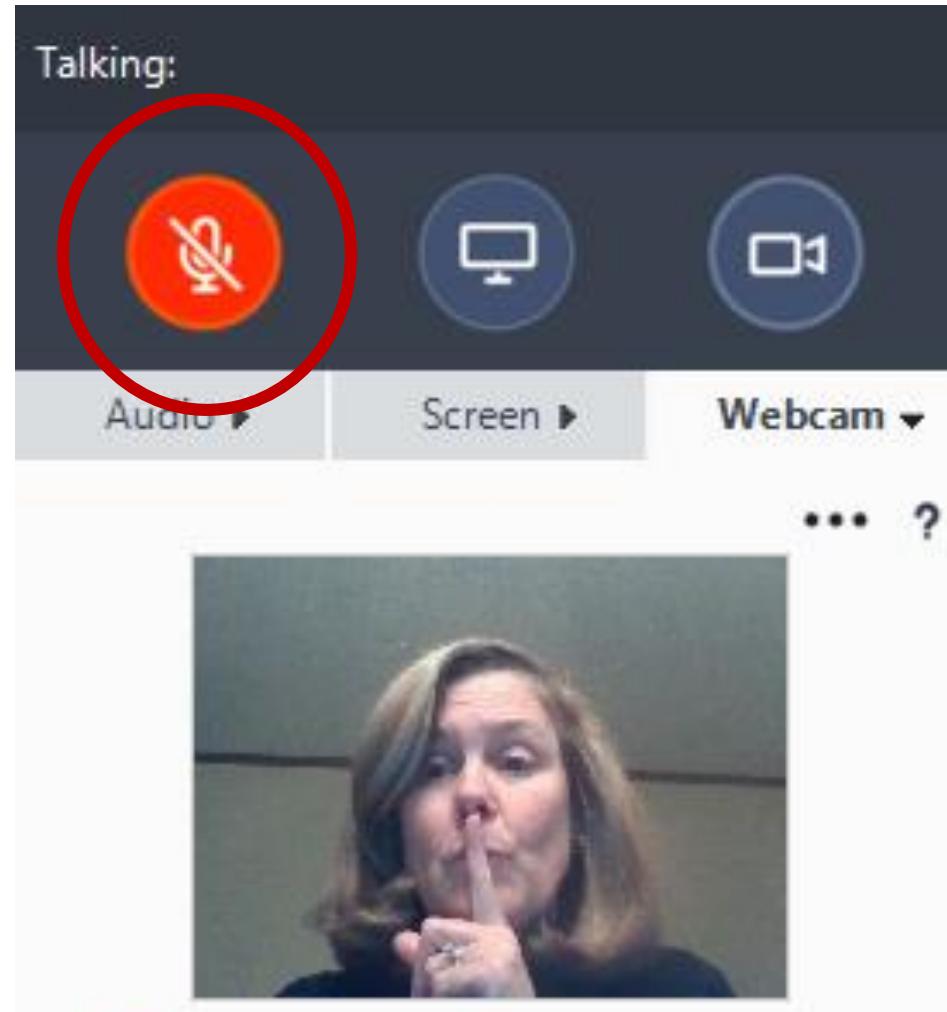
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**Drs. Andrew Chandler and Jatin Dave**  
**NEQCA's Clinician Wellbeing and Satisfaction Council**  
**April 16, 2020**

# Agenda

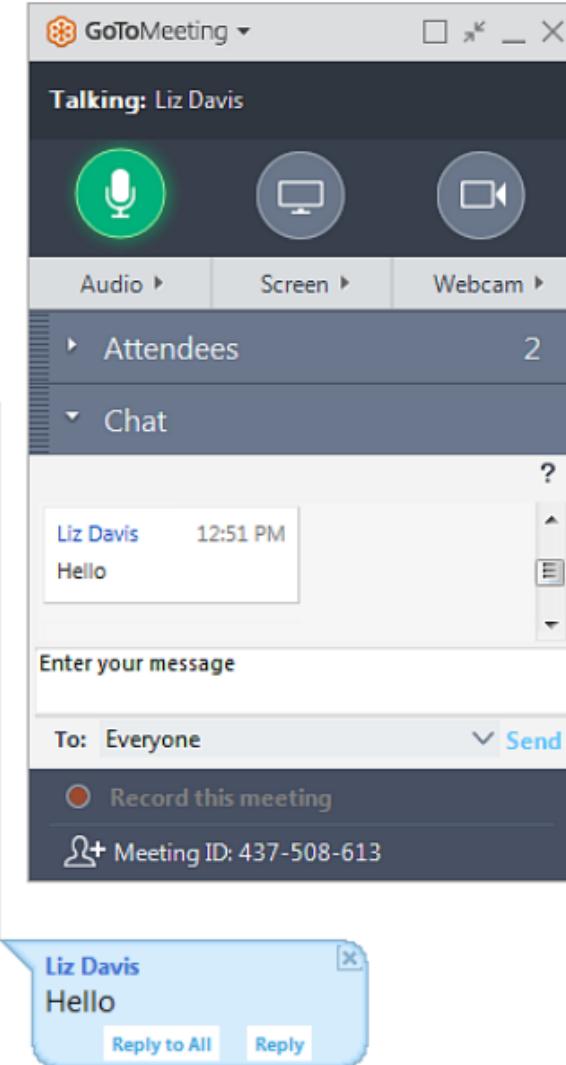
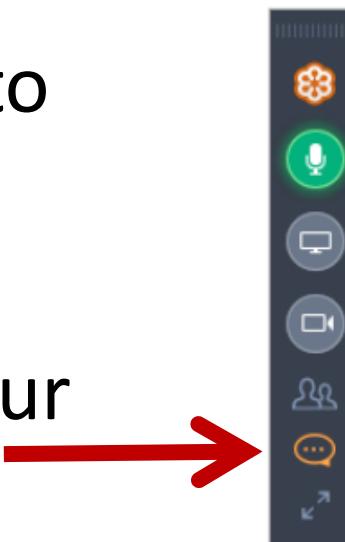
- Rationale
- Recognize
- Legitimize
- Diagnose
- Questions for Reflection
- Treat/Intervene
- Helpful Resources

# Please Mute



# To Ask A Question or Share An Insight

- Please use the “chat” feature to submit your question
- A moderator will then pose your question(s) to the presenters



# Opening Comments

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**Joseph Frolkis, MD, PhD**

**CEO and President**

# Goals and Approaches

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**Andrew Chandler, MD**

**Hallmark Health Medical Associates/Tufts MC Community Care**

# Goals

1. Summarize the challenges clinicians face during the COVID-19 pandemic
2. Provide practical information you can use today
3. Provide best practices for addressing wellbeing with your team or organization

# Why this matters, now more than ever

2020 study of front-line healthcare workers in Wuhan, China (vs. outside Wuhan):

Direct care of patients with COVID-19 was associated with a **higher risk of symptoms of:**

- **depression** (OR, 1.52; 95% CI, 1.11-2.09;  $P = .01$ ),
- **anxiety** (OR, 1.57; 95% CI, 1.22-2.02;  $P < .001$ ),
- **insomnia** (OR, 2.97; 95% CI, 1.92-4.60;  $P < .001$ ),
- **distress** (OR, 1.60; 95% CI, 1.25-2.04;  $P < .001$ ).

Jianbo Lai, MSc; Simeng Ma, MSc; Ying Wang, MSc et al. JAMA Netw Open. 2020;3(3):e203976.  
doi:10.1001/jamanetworkopen.2020.3976

# Why this matters, now more than ever (continued)

- BMJ Review: **Moderate evidence that burnout is associated with safety-related quality of care.**

Dewa CS, Loong D, Bonato S, et al. The relationship between physician burnout and quality of healthcare in terms of safety and acceptability: a systematic review. BMJ Open 2017

- NHS study: **More engagement is associated with less MRSA in hospitals**

West, M. Dawson, J. The King's Fund. Employee engagement and NHS performance. 2012.

- Mayo: **“Physician burnout is at least equally responsible for medical errors as unsafe medical workplace conditions.”**

Shannafelt T, Tawfik D. Mayo Medical Proceedings, July 8 2018.

# Stanford-WellMD Professional Fulfillment Model



We will focus on **Culture of Wellness** and **Efficiency of Practice** during this presentation and will provide resources for personal resilience

# Why this matters, for the long-term

- Clinicians are likely to remember how they were supported by their organization during their times of greatest need
- We are seeing many in our communities (including clinicians) with a desire to unify
  - This is a unique opportunity to build incredible bonds between clinicians

# Framework For Assessment and Treatment

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**Jatin Dave, MD**

**Chief Medical Officer**

# Recognize It: Importance

- Emotionally healthy and engaged clinicians are essential to fight this pandemic
- Understanding and addressing sources (via targeted approaches and support) of distress/anxiety are of paramount importance
- If not addressed these sources can weaken the confidence of health care professionals in themselves and the health care delivery system precisely when their ability to stay calm and reassure the public is most needed
- Unambiguous assurance that their organization will support them and their family (both medically and socially) is must for frontline professionals

Source: Shanafelt T JAMA 2020

# Acknowledge and Legitimize It

## Understand and Identify Secondary Traumatic Stress

- Secondary traumatic stress – stress reactions and symptoms resulting from exposure to another individual's traumatic experiences, rather than from exposure directly to a traumatic event.
- Experiencing stress and secondary traumatic stress during such crisis is human and normal reaction
- If stress builds up it can lead to burnout

TIME

HEALTH • COVID-19

'We Carry That Burden.' Medical Workers Fighting COVID-19 Are Facing a Mental Health Crisis



Christine McCarthy, a nurse for over 20 years and a palliative nurse for the past year, sits for a portrait on an empty hospital bed at Massachusetts General Hospital in Boston on Apr. 2. Erin Clark—Boston Globe/Getty Images

# Diagnose

- Assess sources of distress/stress/anxiety in your own setting (whether you are an LCO or practice leader)
- Diagnose underlying cause(s) and identity factors in our control vs. those that require additional advocacy

# Diagnose: Sources of Distress

1. Access to appropriate personal protective equipment,
2. Being exposed to COVID-19 at work and taking the infection home to their family
3. Not having rapid access to testing if they develop COVID-19 symptoms and concomitant fear of propagating infection at work,
4. uncertainty that their organization will support/take care of their personal and family needs if they develop infection
5. Access to childcare during increased work hours and school closures,
6. Support for other personal and family needs as work hours and demands increase (food, hydration, lodging, transportation)
7. Being able to provide competent medical care if deployed to a new area (eg, non-ICU nurses having to function as ICU nurses)
8. Lack of access to up-to-date information and communication.

<https://jamanetwork.com/journals/jama/fullarticle/2764380>

# Questions For Reflection

Take 5 seconds to share your reflections via Chat box. We will also open up the lines in the second half if you want to share verbally.

What have been the major sources of stress for you personally over the last few weeks?

What strategies have you found helpful to manage the stress?

# Reflection

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# *One example of a* **Diagnosis and Treatment Framework**

1. Hear me
2. Protect me
3. Prepare me
4. Support me
5. Care for me

Source: Shanafelt T JAMA 2020

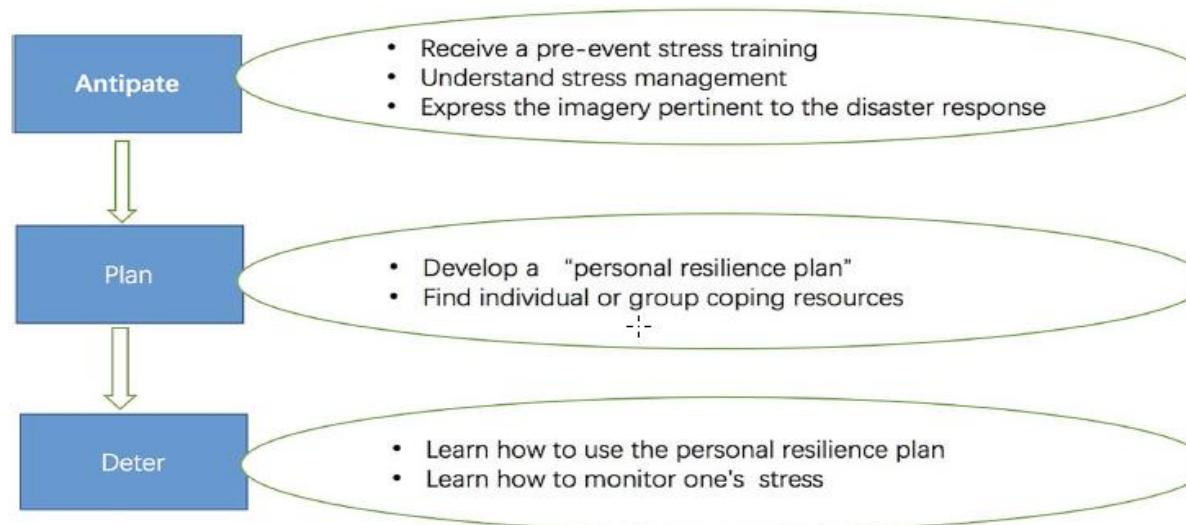
# Formulating Treatment Plan: Translating Sources of Distress into Five Themes

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

# Approaches to Mitigating Sources of Distress

	Practice Support	LCO Support	NEQCA Support	Other Suggestions
Hear Me	Regular huddles	Regular (best practice weekly) forum with frontline clinicians	LCO Advisory Committee Regular Check-in by all stakeholders	
Protect Me	Adequate PPE			
Prepare Me	Provide information customized to your Practice	Provide information customized to your LCO	Website and Webinars	Tell clinicians the potential order for “re-deployment”
Support Me			Q & A and drop-in sessions	
Care for Me			Tonight's Webinar	

# Model for Psychological Interventions for Epidemics



**Figure 5.** The process of Anticipate, Plan and Deter (APD) methods for the psychological intervention of epidemics.

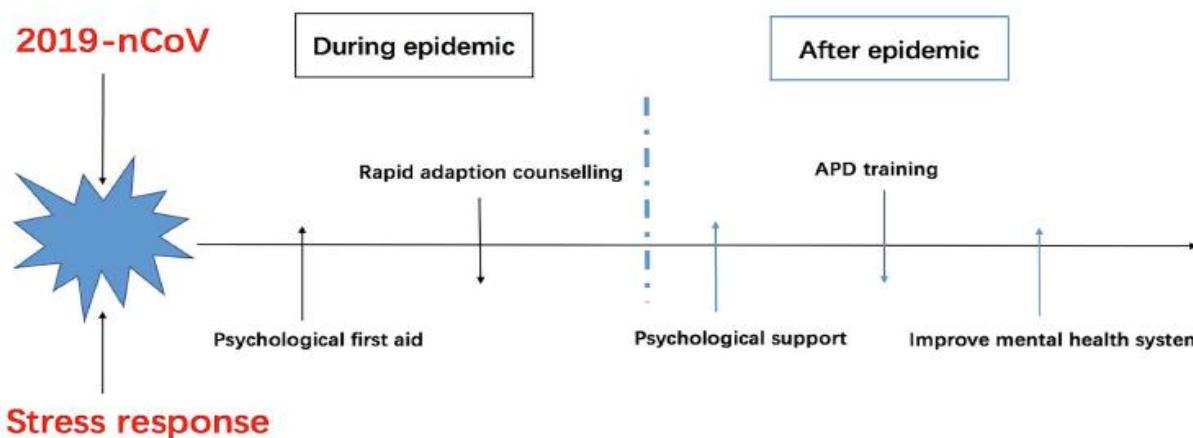


Figure 6. The two-stage model of psychological intervention for epidemics

Reference: Jun Zhang. Recommended psychological crisis intervention response to the 2019 novel coronavirus pneumonia outbreak in China: a model of West China Hospital  
Precis Clin Med. 2020 Feb 18 : pbaa006.

# Single Interventions

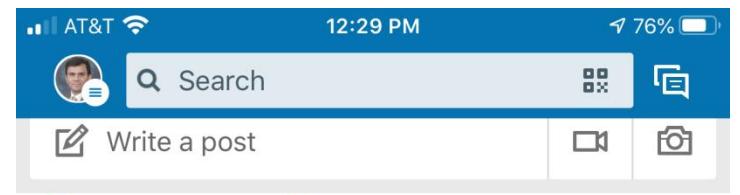
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**Andrew Chandler, MD**

**Hallmark Health Medical Associates/Tufts MC Community Care**

# Strategies

- Organizational:
  - ✓ Team Support
  - ✓ Peer Support
  - ✓ Employee Assistance Programs
- Individual
  - ✓ Self-help strategies
  - ✓ Gratitude even during this time of crisis



Unlike most Americans and 1st World Countries around the globe,

Some human beings **#quarantine** quarters do NOT have the space nor the amenities that a lot of us take for granted.

If you're having trouble practicing **#gratitude**, take a look at this picture and count your blessings.

**#perspective #gratitudeattitude #healthcare**



# Tufts Medical Center Community Care's Approach

- Identify (Hear me)
  - Well-being Committee
- Classify and Prioritize
- Act



# NAM Infographic on Strategies for Healthcare Leaders



## Strategies for Health Care Leaders During COVID-19

[bit.ly/CWCOVID19](https://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

<https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-resources-during-covid-19/>

# Tufts Medical Center Community Care's Approach

## Culture of Wellness

- Communicate efforts
- Invite feedback
- Encourage managers to refrain from non-constructive criticism as we learn new workflows
- Code “happy”



## Efficiency of Practice

- Offer training now for potential future “re-deployment”
- Create forums to share best practices in new workflows

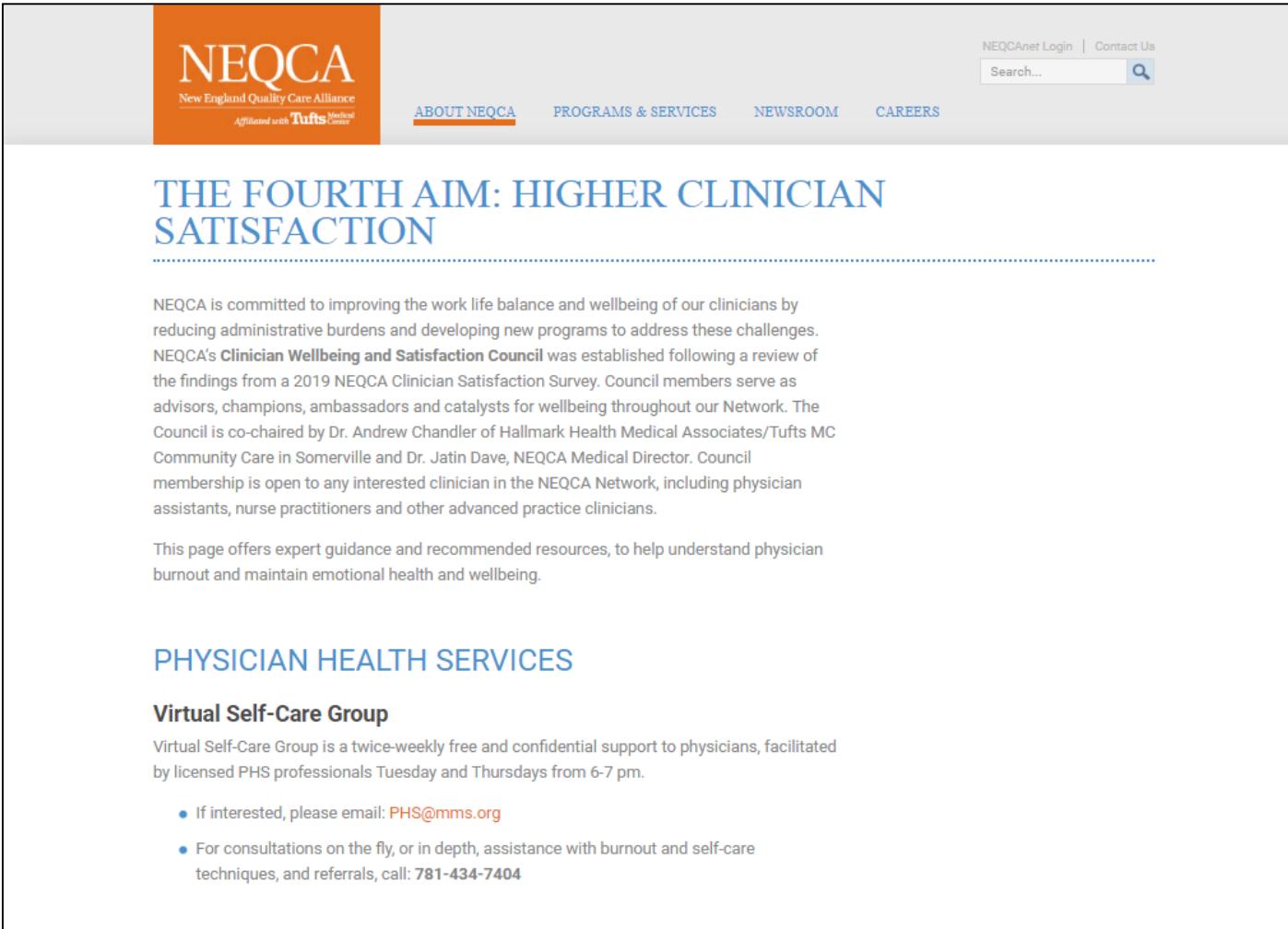
## Personal Resilience

- Address social isolation with small support groups
- Distribute resources for behavioral health
- Zoom meditations

# Discussion and Next Steps

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# NEQCA Website and Resource Walkthrough



The screenshot shows the NEQCA website with a header featuring the NEQCA logo, 'New England Quality Care Alliance', and 'Affiliated with Tufts Medical Center'. The header also includes links for 'NEQCAnet Login', 'Contact Us', 'Search...', and a magnifying glass icon. Below the header, the main navigation menu includes 'ABOUT NEQCA' (which is underlined in orange), 'PROGRAMS & SERVICES', 'NEWSROOM', and 'CAREERS'. The main content area has a blue header 'THE FOURTH AIM: HIGHER CLINICIAN SATISFACTION'. Below this, a text block discusses NEQCA's commitment to clinician wellbeing, mentioning the Clinician Wellbeing and Satisfaction Council, its co-chairs, and its membership. A smaller text block below provides guidance on physician burnout and emotional health. A section titled 'PHYSICIAN HEALTH SERVICES' follows, with a sub-section for the 'Virtual Self-Care Group'. It describes the group as a twice-weekly support service for physicians, facilitated by licensed PHS professionals, and provides contact information for interested individuals.

NEQCA is committed to improving the work life balance and wellbeing of our clinicians by reducing administrative burdens and developing new programs to address these challenges. NEQCA's **Clinician Wellbeing and Satisfaction Council** was established following a review of the findings from a 2019 NEQCA Clinician Satisfaction Survey. Council members serve as advisors, champions, ambassadors and catalysts for wellbeing throughout our Network. The Council is co-chaired by Dr. Andrew Chandler of Hallmark Health Medical Associates/Tufts MC Community Care in Somerville and Dr. Jatin Dave, NEQCA Medical Director. Council membership is open to any interested clinician in the NEQCA Network, including physician assistants, nurse practitioners and other advanced practice clinicians.

This page offers expert guidance and recommended resources, to help understand physician burnout and maintain emotional health and wellbeing.

## PHYSICIAN HEALTH SERVICES

### Virtual Self-Care Group

Virtual Self-Care Group is a twice-weekly free and confidential support to physicians, facilitated by licensed PHS professionals Tuesday and Thursdays from 6-7 pm.

- If interested, please email: [PHS@mms.org](mailto:PHS@mms.org)
- For consultations on the fly, or in depth, assistance with burnout and self-care techniques, and referrals, call: **781-434-7404**

# Upcoming Events

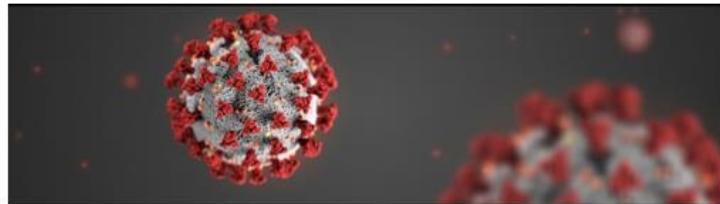
**Friday, April 17**

**Bioethics in the COVID-19 Pandemic Era**

**Noon - 1:00 p.m., CMEs available**

**Tuesday, April 21**  
**COVID-19 Update**  
**5:30-6:30 p.m.**

**Details on NEQCA's website**



Last updated: 4/14/2020

In collaboration with our colleagues at [Tufts Medical Center](#) and [Floating Hospital for Children](#), NEQCA is closely following the spread of the respiratory disease COVID-19. We encourage you to use this page as a resource to ensure you have the latest information.

NEQCA's priorities include: providing [clinical support](#) for our LCO leadership and Network providers with COVID-19 protocols and telehealth, [operational support](#) to keep our practices open and continuing to care for patients and [economic support](#), to help physicians weather the economic impact of COVID-19. Information about how to apply for loans and address human resources matters are being provided through instructional webinars and phone consultations.

**NEW VIDEO: A Thank You Message from Wellforce President and CEO Mike Dandorph**

## PROGRAMS FOR OUR NETWORK

April 2020											
Sun	Mon	Tue	Wed	Thu	Fri	Sat					
29	30	31	Apr 1	2	3	4					
		5:30pm NEQCA C	7:30pm Tufts Med								
5	6	7	8	9	10	11					
			12pm Telemedici	7:30am Q&A Sess							
				5:30pm Q&A Sess							
12	13	14	15	16	17	18					
		5pm Q&A Session	5:30pm NEQCA C	7:30am Q&A Sess	12pm Telemedici						
				12pm Tips For Te	6:30pm Taking Ca						
19	20	21	22	23	24	25					
				12pm Telemedici							
26	27	28	29	30	May 1	2					

# In Summary

- Thank you for all you are doing to adapt and manage the new-normal with this pandemic
- Together we will get through these trying times. Please use these strategies to reflect on your stress level and implement strategies for you, your team and your organization to help manage the inevitable stress we all are experiencing
- Please continue to let us know how we all support and help each other

# Appendix

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# Additional Resources

**Schwartz Center:** <https://www.theschwartzcenter.org/covid-19>

- <https://www.theschwartzcenter.org/media/SAMHSA.-Guide-to-Managing-Stress-in-Crisis-Response-Professions.pdf>

**NAM resources:** Clinician Well-Being during COVID-19 resources: [bit.ly/CWCOVID19](http://bit.ly/CWCOVID19)

- General Clinician Well-Being resources: [nam.edu/CW](http://nam.edu/CW)

**AMA:** <https://www.ama-assn.org/delivering-care/public-health/managing-mental-health-during-covid-19>

**Center for the Study of Traumatic Stress/Uniformed Services University:**

<https://www.cstsonline.org/resources/resource-master-list/coronavirus-and-emerging-infectious-disease-outbreaks-response>

- [https://www.cstsonline.org/assets/media/documents/CSTS\\_FS\\_Leadership\\_Communication\\_Anticipating\\_Responding\\_to\\_Stressful\\_Events.pdf](https://www.cstsonline.org/assets/media/documents/CSTS_FS_Leadership_Communication_Anticipating_Responding_to_Stressful_Events.pdf)
- [https://www.cstsonline.org/assets/media/documents/CSTS\\_FS\\_Sustaining\\_Well\\_Being\\_Healthcare\\_Personnel\\_during.pdf](https://www.cstsonline.org/assets/media/documents/CSTS_FS_Sustaining_Well_Being_Healthcare_Personnel_during.pdf)

**MMS:** [http://www.massmed.org/COVID-19/#.Xphl\\_TipVPY](http://www.massmed.org/COVID-19/#.Xphl_TipVPY)

**UCSF Weil Institute for Neurosciences:** <https://psych.ucsf.edu/coronavirus/webinars>

**Harvard School of Public Health**

- [https://sailthru-media.s3.amazonaws.com/composer/images/sailthru-prod-643/First%20Responders%20First%20Microstep%20Sheet.pdf?utm\\_source=Newsletter\\_FRF&utm\\_medium=Thrive](https://sailthru-media.s3.amazonaws.com/composer/images/sailthru-prod-643/First%20Responders%20First%20Microstep%20Sheet.pdf?utm_source=Newsletter_FRF&utm_medium=Thrive)

# Additional Resources (continued)

## Patient Care

- [https://www.cstsonline.org/assets/media/documents/CSTS FS Psychological Effects Quarantine During Coronavirus Outbreak Providers.pdf](https://www.cstsonline.org/assets/media/documents/CSTS_FS_Psychological_Effects_Quarantine_During_Coronavirus_Outbreak_Providers.pdf)

## Self-Care

- <https://www.headspace.com/health-covid-19>

**“You’re here for them, we’re here for you.”** *Headspace* is offering all US health care professionals who work in public health settings free access to Headspace Plus through 2020.

## Family Care

- Organizations offering discounts and offers:

<https://nurse.org/articles/offers-freebies-discounts-healthcare-workers/>

<https://www.100millionmasks.org/system/files?file=media/file/2020/04/COVID-Discounts-Updated-4-7-20-v5.pdf>

**Peer Support Resource:** a free, peer-supported program designed to help physicians and others on the care team move toward thriving both personally and professionally

<https://www.peerrxmed.com/>

# Infographics for Printing in Office

## Coping with a Disaster or Traumatic Event



After a disaster, it is important to take care of your emotional health. Pay attention to how you and your family members are feeling and acting.

Taking care of your emotional health will help you think clearly and react to urgent needs to protect yourself and your loved ones.

Follow these tips to help you and your family recover or find support.

### Steps to Care for Yourself

- Take Care of Your Body
  - Try to eat healthy, exercise regularly, get plenty of sleep, and avoid alcohol and other drugs.
- Connect
  - Share your feelings with a friend or family member. Maintain relationships and rely on your support system.
- Take Breaks
  - Make time to unwind. Try to return to activities that you enjoy.
- Stay Informed
  - Watch for news updates from reliable officials.
- Avoid
  - Avoid excessive exposure to media coverage of the event.
- Ask for Help
  - Talk to a clergy member, counselor, or doctor or contact the SAMHSA helpline helpline at 1-800-985-5990 or text TalkWithUs to 66746.

### How to Help Your Children

- Talk with them.
  - Share age-appropriate information.
  - Reassure them.
  - Address rumors.
  - Answer questions.
- Set a good example by taking care of yourself.
- Limit exposure to media and social media coverage of the event.

### Common Signs of Distress

- Feelings of shock, numbness, or disbelief
- Change in energy or activity levels
- Difficulty concentrating
- Changes in appetite
- Sleeping problems or nightmares
- Feeling anxious, fearful, or angry
- Headaches, body pain, or skin rashes
- Chronic health problems get worse
- Increased use of alcohol, tobacco, or other drugs

Seek help from your healthcare provider if these stress reactions interfere with your daily activities for several days in a row.

**Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Hotline: 1-800-985-5990 or text TalkWithUs to 66746.**

People with deafness or hearing loss can use their preferred relay service to call 1-800-985-5990.

CS209503A



## 6 STEPS TO MINDFULLY DEAL WITH DIFFICULT EMOTIONS

-  **1 Turn toward your emotions with acceptance**  
Become aware of the emotion and identify where you sense it in your body.
-  **2 Identify and label the emotion**  
To stay mindful, say to yourself, "This is anger" or "This is anxiety."
-  **3 Accept your emotions**  
Don't deny the emotion. Acknowledge and accept that it is there.
-  **4 Realize the impermanence of your emotions**  
Even if the emotion feels overwhelming, remember that it will pass.
-  **5 Inquire and investigate**  
Ask yourself, "What triggered me? Why do I feel this way?"
-  **6 Let go of the need to control your emotions**  
Be open to the outcome of your emotions and what unfolds.

**The Gottman Institute**

# National Academy of Medicine



## Strategies for Clinicians During COVID-19

[bit.ly/CWCOVID19](https://bit.ly/CWCOVID19)  
#ClinicianWellBeing

**1** Meet basic needs

**5** Stay updated

**2** Take breaks

**6** Perform self check-ins

**3** Stay connected

**7** Honor your service

**4** Respect differences

A collection of resources to promote clinician well-being is available online.



## Supporting the Health and Well-Being of Clinicians During COVID-19

[bit.ly/CWCOVID19](https://bit.ly/CWCOVID19)  
#ClinicianWellBeing

### Strategies for Health Care Leaders

For leaders and managers to implement to help sustain the well-being of clinicians amidst the COVID-19 outbreak

### Strategies for Clinicians

For health care professionals to implement to help support themselves and their colleagues

### Other Resources

More information on how to promote clinician well-being from sources such as global health organizations, U.S. government agencies, professional associations, health care providers & schools of health professions

<https://nam.edu/initiatives/clinician-resilience-and-well-being/clinician-well-being-resources-during-covid-19/>