



Psychological First Aid for UW Medicine Leaders & Managers: Increasing Resiliency of Healthcare Workers During COVID-19

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Trauma Recovery Innovations

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ACKNOWLEDGMENTS

> **Adapted from:**

- World Health Organization *Psychological First Aid: Guide for Field Workers* and *Psychological First Aid Adapted for the Ebola Outbreak*
- National Child Traumatic Stress Network *PFA Manual, 2nd edition*
- Materials developed by Dr. Debra Kaysen, Stanford University

> **Thanks to:**

- Department of Psychiatry and Behavioral Sciences
- UW COVID-19 Mental Health Working Group
- Mollie Forrester, Rebecca Sladek, Rosemary Whitright
- Anne Browning and Patricia Kritek

Objectives: Provide an overview of PFA and highlight key elements to provide support during this crisis



UW Medicine managers and leaders

Elements of PFA can serve as a framework for:

- 1) responding to in-the-moment distress
- 2) making referrals & promoting engagement in services

TRAINING OVERVIEW: WHY, WHAT, WHEN, WHO, & HOW OF PSYCHOLOGICAL FIRST AID (PFA)

> The PFA Model

- **WHY:** Resilience and the need for support following a pandemic
- **WHAT:** The foundations of PFA, what it is and is not
- **WHEN:** The timing of PFA delivery
- **WHO:** Those most likely to benefit and who should provide it
- **HOW:** Overview of PFA

> Adapting it to fit your context and role

- **HOW:** to provide support and make a referral

PFA: THE WHY

Resilience is the process of adapting well in the face of adversity or significant sources of stress



- Resilience is ordinary & common, not extraordinary.
- Resilience does not mean the absence of difficulty or distress.
- Resilience is not a trait -- it can be learned and acquired.
- There is no one path of resiliency

HOW MIGHT COVID-19 AFFECT HEALTHCARE WORKERS?

- High workload and increased stress
- Possible loss of coworkers
- Anxiety about their coworkers, patients, and families
- Distress about decisions about safety precautions, prioritizing & allocating care
- Difficulty accessing social support and resources for themselves

WHAT WE DO DURING THE CRISIS MATTERS FOR WHO RECOVERS



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PFA: THE WHAT

Psychological First Aid (PFA) is a humane, supportive response to someone suffering



Acute intervention to reduce initial distress caused by traumatic events



Evidence informed



Increase sense of safety, connection, calmness, and hope



Increase access to social, physical and emotional support



Increase self-efficacy

PFA differs from traditional treatment

- PFA is not therapy
- It does not look like a standard therapy setting or structure
- It is NOT psychological debriefing

General PFA guidelines



Operate within a framework of an **organized response system (part of a team)**



Remain within **scope of your expertise, role, and training**



Maintain **confidentiality**



Respect their **right to make their own well-informed decisions**



Be **culturally sensitive** and aware



Practice self-care and be aware of your own physical and emotional reactions

PFA: THE WHEN

PFA CAN BE DELIVERED

- ✓ **During** a mass disaster
- ✓ In the **immediate aftermath**

PFA: THE WHO

PFA CAN BE APPLIED BROADLY, IN DIVERSE SETTINGS AND CONTEXTS

Providers

Do not need to have a mental health background

Do need to be trained in PFA

Do need to have met their own needs first

Recipients

Do need to express interest in support and/or stabilization

Are often those at higher risk for developing negative outcomes due to proximity to crisis and/or other risk factors

Can include **healthcare workers**, patients & their families, & community members

PFA: THE HOW

PFA is comprised of 8 core actions that are:



Not necessarily sequential



Flexible



Based on the person's specific needs and concerns

PFA has 8 core actions:



1. Contact and engagement



2. Safety and comfort



3. Stabilization



4. Information gathering



5. Practical assistance



6. Links to social supports



7. Information on coping



8. Links to services

PFA CORE ACTIONS:

- 1. CONTACT & ENGAGEMENT**
- 2. SUPPORT SAFETY AND COMFORT**

GOALS:

- Build rapport
- Support and enhance emotional and physical safety
- COVID-19 context
 - Concerns about safety and wellbeing of self, loved ones, patients, & coworkers

PFA CORE ACTION

3. Stabilization

Goal:

To calm and orient
emotionally
overwhelmed/
disoriented survivors

- Not all individuals will need stabilization
- Pay attention to individuals whose reactions are so **intense and persistent** that it is impacting their **ability to function**

PFA CORE ACTIONS:

4. Information Gathering

5. Practical Assistance

Goals:

- 1) Identify immediate needs & concerns, gather information, & prioritize**
- 2) Clarify needs & develop action plan**

PRO-TIPS

- PFA **is not** one-size fits all
- Use active listening skills
- Prioritization should be collaborative
- Know what resources are available and/or know how to find out

PFA CORE ACTION:

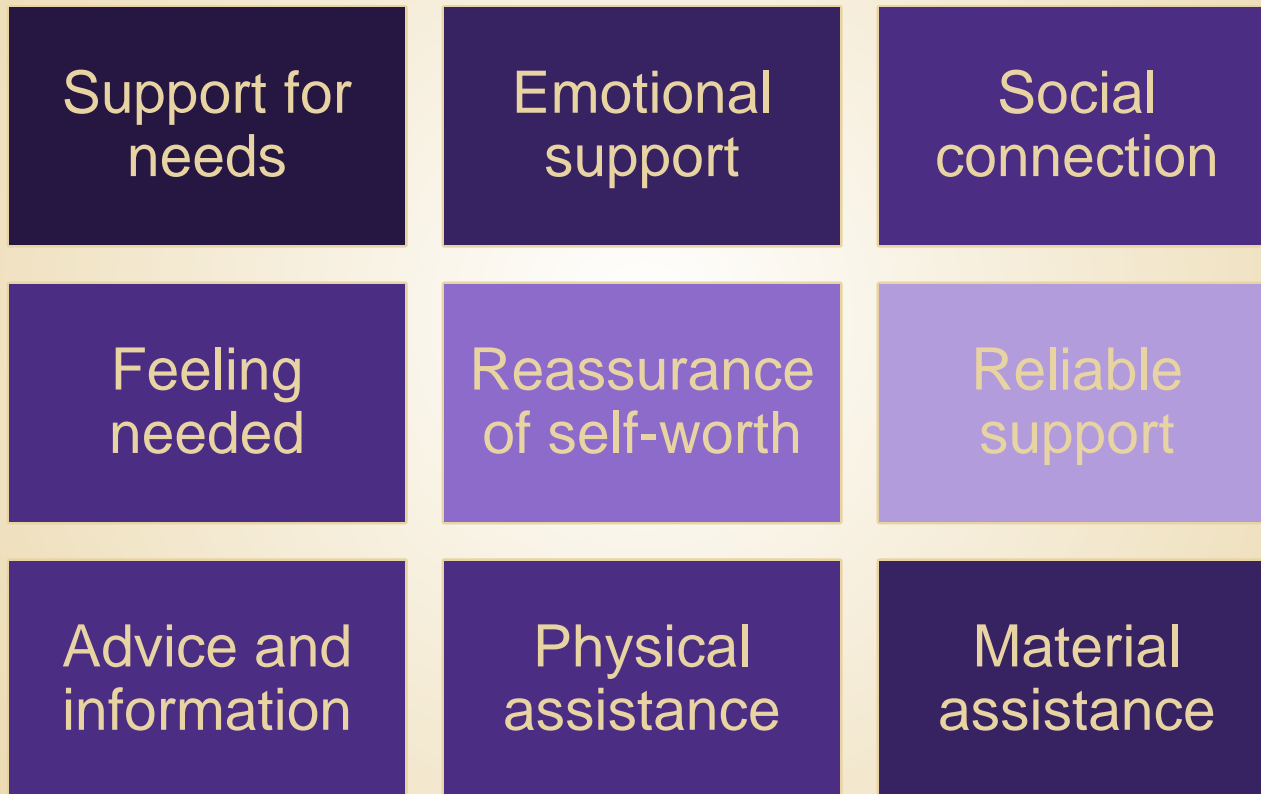
6. Connection with Social Supports

Goal:

Links to Social
Supports

- Help establish brief or ongoing contacts with primary support persons and other sources of support
 - *family*
 - *friends*
 - *community*

SOCIAL SUPPORT HAS MANY FORMS



PFA CORE ACTION

7. Coping

Goals:

Provide information about

- stress reactions
- practical ways to cope, reduce stress, and promote adaptive functioning

REMEMBER: Information that is provided and skills that are taught will be in response to the individual's unique concerns and priorities

Encouraging Self-Care



Sleep

- Regular schedule
- Avoid caffeine, alcohol

Substance use

- Less helpful as a coping strategy
- Monitor and reduce

Physical Health

- Exercise, eat healthy
- Relaxation

Identify existing coping strategies and potential new coping strategies

Talking to others

Positive
distracting
activities

Resting and
eating healthy
meals

Keeping a normal
schedule

Taking regular
breaks

Using humor

Scheduling
pleasant activities

Focusing on
something
practical you can
do right now

Using relaxation
methods

Engaging in
support
groups/counseling

Exercising

Journaling

Addressing Unhelpful Thoughts



Gentle, curious questions can help address unhelpful thoughts and the strong emotions linked to them:

- What would your kindest self say about this?
- What are other ways to look at this situation?

PFA CORE ACTION

8. Link with other services

Key Action:

Connect

- to additional resources or services to address current needs **as needed**

Know

- what is available
- how to connect them to services (or who to ask)

Collaborate

- to identify what they need

Offer

- to follow up and check-in

PRO-TIPS for UW Medicine Managers and Leaders: How this applies in your role at UW



UW Medicine managers and leaders can use PFA components

Provide good support

Communicate calm, compassion, and respect

Listen to concerns, and maintain professional boundaries

Share information openly and honestly

Help troubleshoot challenges

Facilitate referrals

Normalize the need for support

Know the referrals and resources that are out there or who to ask when you need more information

Common Stress Reactions

Intrusive Reactions

- ways the event comes back to mind

Avoidance

- attempts to remove themselves from or protect themselves from distress

Physical Arousal

- The body reacts as if danger is still present

Grief

- Response to death of loved ones

Depressive Symptoms

- Sleep problems, fatigue, worthlessness/guilt, suicidality

Physical Reactions

- Headaches, dizziness, muscle aches, rapid heartbeat, hyperventilation

Normalize Common Stress Reactions

- These reactions are **natural, expected, and common**
- **Avoid** statements that could be perceived as **judgmental or minimizing**

It may be time to suggest more help if they:



continue
more than 2
months

worsen and
impair
functioning

There may be situations when someone needs more advanced support



Know your limits



Know when and where to refer

PFA provides guidance about responding to distress from individuals in your teams

- > Supervisors are often the first point of contact for those in distress
- > **Opportunity** to put people on the right path toward recovery and adaptive functioning

RESPONDING TO DISTRESS

Listening & Communication Tools

Communicate calm, compassion, and respect through WHAT you say and do and HOW you say and do it

Listen to concerns and maintain professional boundaries by not pressuring them to share or asking personal questions

Let them tell you what they feel and need

Express empathy and concern as professionally appropriate

Expect widely varying reactions to a crisis and do not judge

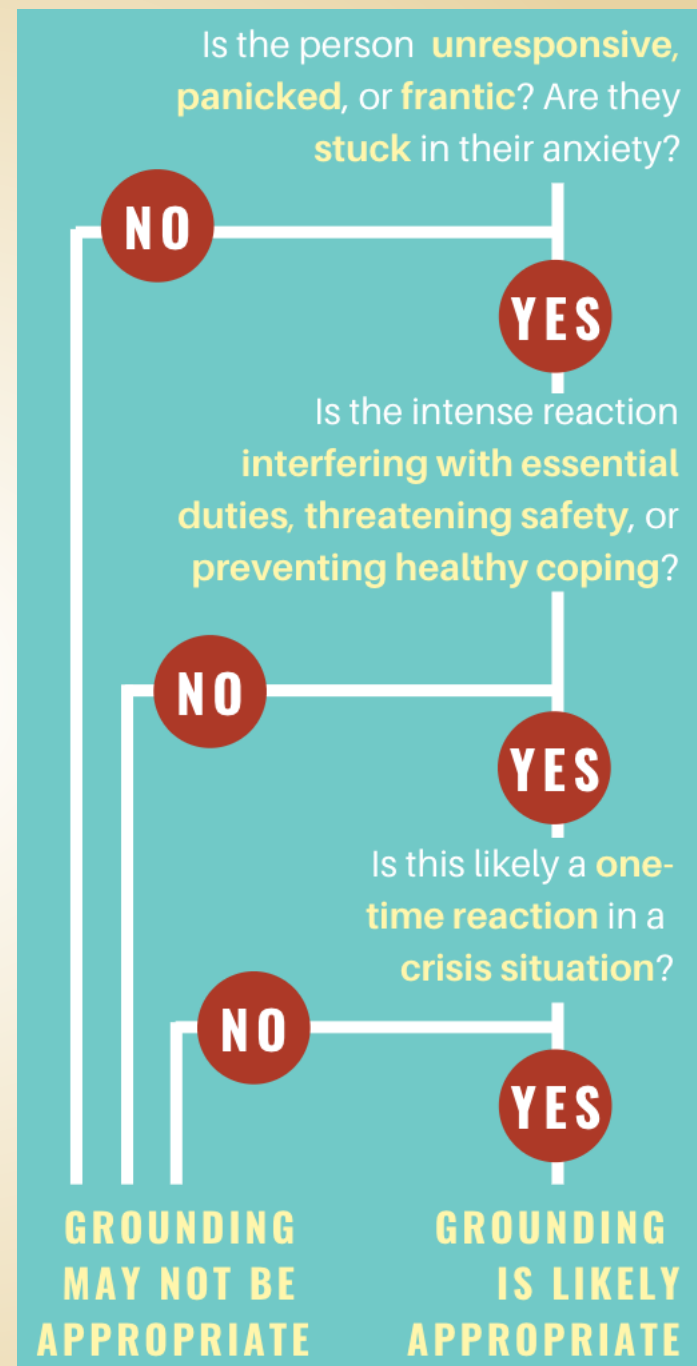
Remain calm, control your own emotions, and don't rush thing

Remember that you can't take away their pain and you don't need to

STABILIZATION: WHEN TO USE GROUNDING



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STABILIZATION: HOW TO USE GROUNDING



Sit comfortably and **breathe** slowly and deeply



Name 5 non-distressing things you can **see**.



Pause and **breathe**.



Name 5 non-distressing sounds you can **hear**.



Pause and **breathe**.



Name 5 non-distressing things you can **feel**.



Pause and **breathe**.

PFA provides guidance about what information to gather and how to address individuals' concerns

- > Supervisors are uniquely positioned to understand challenges and brainstorm solutions
- > Maintain professional boundaries
 - Balance of helping to problem solve what is in your wheelhouse and refer for what is not

PROBLEM SOLVING

Collaboratively **assess** and **prioritize** needs and concerns

Choose the **most pressing controllable issue** to address

Brainstorm possible solutions to the problem

Consider **pros and cons** and **choose a solution**

Make an **action plan** for carrying out the solution

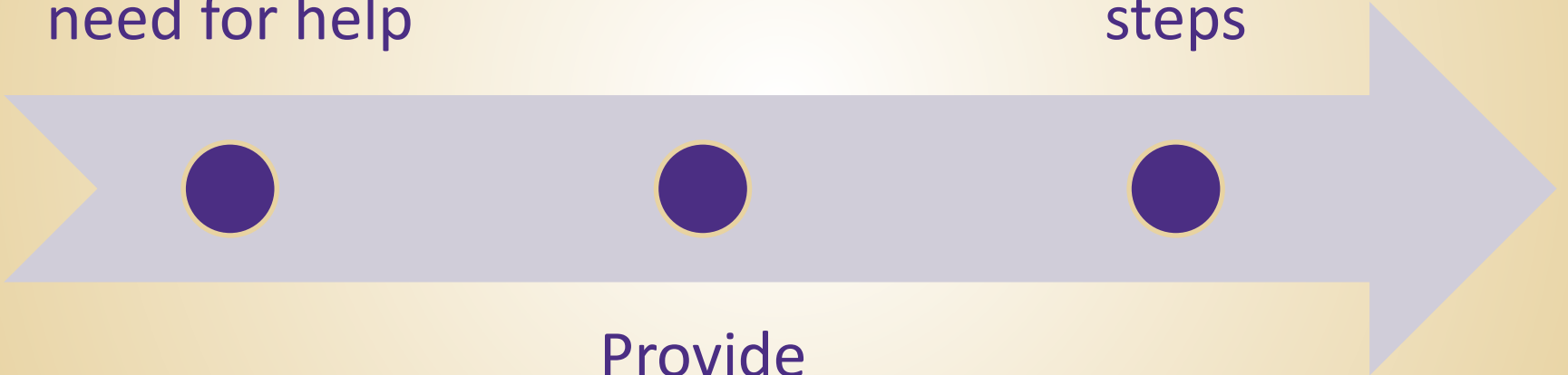


LINK WITH OTHER SERVICES

Normalize
reactions and
need for help

Ask about
helpful next
steps

Provide
information
and
encourage
engagement



PFA is a Framework for Building Resilience: Apply as Self-Care



Referrals & Resources

Questions about PFA

Contact Michele and Kristen
triheal@uw.edu

Referrals for PFA and support

COVID Support Program

<https://psychiatry.uw.edu/clinical-care-consultation/covid-19-resources-for-mental-well-being/>

Peer to Peer Program:

<https://faculty.uwmedicine.org/p2p/>

UW Care Link (EAP):

<https://hr.uw.edu/benefits/uw-carelink/>

Today's materials

Slides and handouts

<https://psychiatry.uw.edu/clinical-care-consultation/covid-19-resources-for-mental-well-being/>

PSYCHOLOGICAL FIRST AID

FOR STAFF AFFECTED BY THE COVID-19 PANDEMIC

It's normal for people affected by a pandemic to have a wide range of reactions, but not all will develop long-term problems. Managers should not be in a counseling role with their staff. However, when staff face personal or work challenges related to COVID-19, managers are encouraged to react in ways that promote resilience and emotional healing.



COMMUNICATE CALM, COMPASSION, AND RESPECT

through what you do, what you say, and how you say it. Don't rush; meet them where they are.



LISTEN TO CONCERNS, BUT MAINTAIN PROFESSIONAL BOUNDARIES

by not pressuring them to share or asking personal questions. Express empathy and concern as professionally appropriate.



SHARE INFORMATION OPENLY AND HONESTLY

without giving false promises or reassurances, like "it will be OK" or "at least things aren't worse."



HELP THEM TROUBLESHOOT NOVEL CHALLENGES

by seeking their input, helping them prioritize and focus on what's in their control, and using their skills.



REFER TO SERVICES & SUPPORTS AS APPROPRIATE

that are tailored to what they say that they need. As much as possible, not mandate that they seek services.



OFFER SHORT-TERM WAYS TO MANAGE STRONG EMOTIONS

like grounding or deep breathing, if emotions interfere with patient care.

GROUNDING

A SHORT-TERM COPING SKILL FOR INTENSE REACTIONS



IS GROUNDING APPROPRIATE?

Is the person **unresponsive, panicked, or frantic**? Are they **stuck** in their anxiety?

NO

YES

Is the intense reaction **interfering with essential duties, threatening safety, or preventing healthy coping**?

NO

YES

Is this likely a **one-time reaction** in a **crisis situation**?

NO

YES

**GROUNDING
MAY NOT BE
APPROPRIATE**

**GROUNDING
IS LIKELY
APPROPRIATE**

HOW TO PRACTICE GROUNDING



Sit comfortably and **breathe** slowly and deeply into your belly.

1

Name 5 non-distressing things you can **see** around you.



Pause and **breathe**.

2

Name 5 non-distressing sounds you can **hear** around you.



Pause and **breathe**.

3

Name 5 non-distressing things you can **feel** against your skin.



Pause and **breathe**.

HELPING PEOPLE COPE IN HEALTHY WAYS



Use a problem-solving approach to define the problem and make a coping plan.

Collaboratively
assess and
prioritize needs
and concerns

Choose the
most pressing
controllable issue
to address

Brainstorm
possible
solutions to the
problem

Consider
pros and cons
and choose a
solution

Make an
action plan for
carrying out the
solution

HEALTHY COPING IS...

Consistently meeting basic needs
for sleep, nutrition, and health

Reaching out to others and finding
ways to connect, even at a distance

Expressing your feelings (e.g., journaling,
crying, talking to supportive people)

Doing daily activities that give a sense of
pleasure or achievement (e.g., exercise)

Trying to **maintain a normal schedule** as
much as possible, or creating a new routine

Using calming and
compassionate **self-talk**

Focusing on things you can control and
what you can do about those things

...RATHER THAN

Sleeping, eating, or taking medicine
inconsistently or on an **irregular schedule**

Withdrawing from family and friends or
waiting for others to reach out to you

Suppressing negative feelings,
including with drugs or alcohol

Withdrawing from activities or focusing only
on activities that aren't possible at the moment

Working too many hours or
avoiding responsibilities

Using **negative self-talk** or
treating worries like they're facts

Ruminating about things you can't
control or hypothetical situations