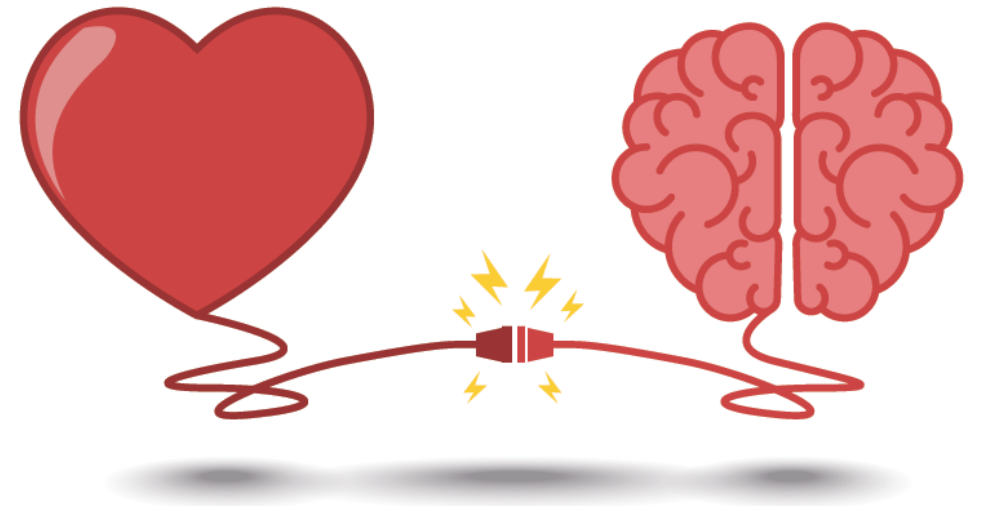# Caring full circle: Managing your needs as you care for your patients

Session I: Workplace safety and emotional health in a changing world

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Objectives

- Navigating the impact of high-stress healthcare settings
- Recognizing and addressing compassion fatigue while nurturing compassion satisfaction
- Learning practical coping strategies for dealing with grief and loss within patient care
- Exploring a variety of individual and group techniques for maintaining emotional well-being

The evolving landscape of healthcare: Key changes over the past decade

Technological advancements:

- Telehealth usage increased by **154%**
- **96%** of hospitals adopted electronic health records (EHRs)

Policy changes:

- **20 million** more Americans insured due to the Affordable Care Act

Shifting patient demographics:

- By 2030, **20%** of the population will be over 65
- **60%** of adults have at least one chronic condition

Importance:

- Increased pressure on HCPs: 44% report burnout
- Rising workplace violence: 47% increase in incidents

Resources:

- The Commonwealth Fund
- HIMSS
- Kaiser Family Foundation

The importance of addressing these changes

Impacts on healthcare providers

- **Physical and mental health:**
  - **34%** report physical injuries due to workplace violence *(OSHA)*
  - **41%** increase in mental health issues *(Kaiser Family Foundation)*

Quality of patient care:

  - **23%** increase in patient care errors linked to worker stress *(The Commonwealth Fund)*

Necessity for supportive measures

- **Policy implementation:**
  - Policies reducing workplace violence cut incidents by **27%** *(The Commonwealth Fund)*
  - Telehealth improves efficiency by **20%** *(HIMMS)*

Workplace violence (WPV)

Workplace violence (WPV):

- Any act or threat of violence that occurs in the workplace, including verbal abuse, intimidation, and physical assaults. In healthcare, this can involve patients, visitors, or colleagues, leading to harm for healthcare workers.

Source: OSHA (Occupational Safety and Health Administration)

Effects of workplace violence in healthcare

Physical effects:

•Injuries ranging from minor to severe

•Long-term health issues due to trauma

Psychological effects:

•Increased anxiety, depression, and PTSD among healthcare providers

•Decreased job satisfaction and morale

Impact on patient care:

•Reduced quality of care due to staff stress

•Increased turnover rates, leading to staffing shortages

Economic consequences:

•Higher costs related to medical treatment and lost workdays

•Increased expenses for training and replacing staff

Organizational impact:

•Strained workplace culture and employee relations

•Greater scrutiny from regulators and the media

Risk factors

- Working with volatile people (e.g., those who are under the influence of alcohol/drugs, have a history of violence or are diagnosed as psychotic)
- Working when understaffed or working alone
- Transporting patients
- Long waits for service
- Overcrowded waiting rooms
- Poorly-lit areas (parking lots, corridors)
- Inadequate security
- Unrestricted movement of the public

Incidence rates for nonfatal assaults and violent acts by industry, 2020
Incidence rate per 10,000 full-time workers
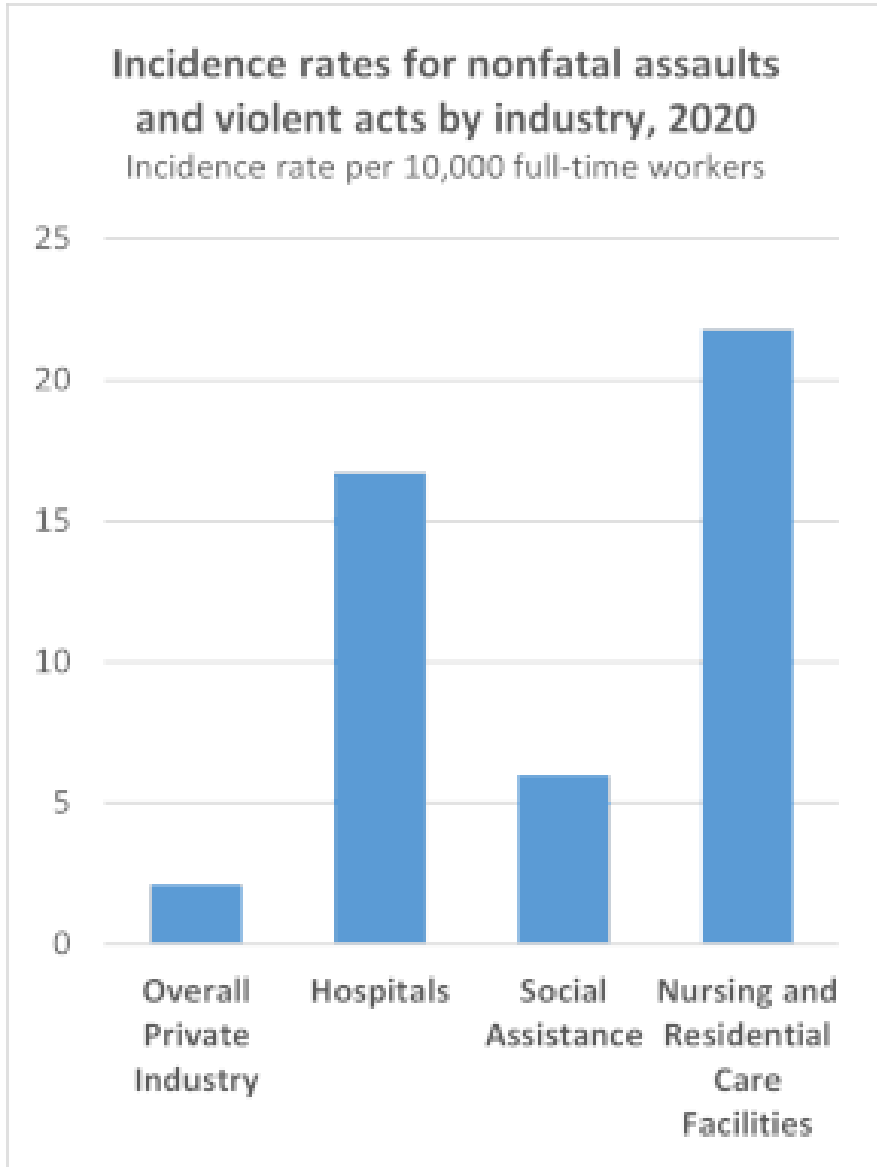
Source: Bureau of Labor Statistics,
U.S. Department of Labor (BLS, 2021)

Workplace Violence Experienced by Nurses Compared to All Hospital Roles

■ Bedside Nurses ■ All Respondents

	Experienced violence	Emotional/verbal abuse	Physical/sexual abuse
Bedside Nurses	65%	34%	66%
All Respondents	43%	47%	53%
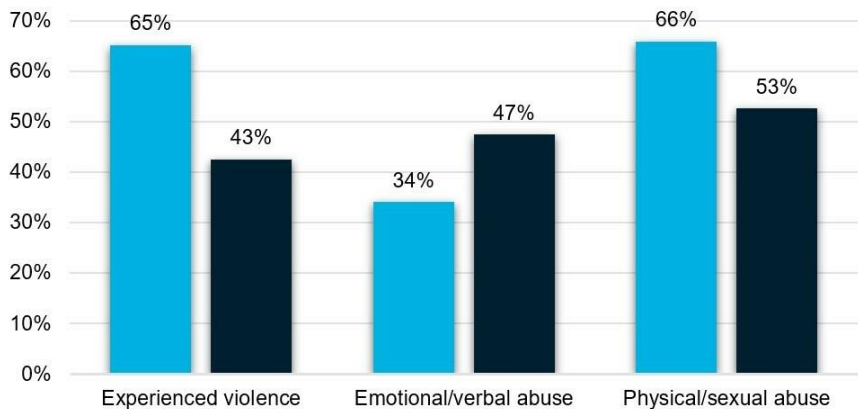
Source: Premier Workforce Violence Survey, February - April 14, 2023*

N=669

Respondents' Experiences with Combative Patients

- Other (e.g., intimidation) 2%
- Shot with firearm 1%
- Threw object(s) 21%
- Scratching, biting, hitting 62%
- Sexually assaulted or harassed 14%

Source: Premier Workforce Violence Survey, February - April 14, 2023*

N=669

One organization's way of adding support (pandemic and post-pandemic: A summary of offerings

Revamped programs: Adapted existing programs based on engagement levels, shifting focus to team-based interventions to reduce stigma and better meet specific needs.

Expanded self-care resources: Enhanced the Covid-19 Well-being page with toolkits (e.g., Winter Wellness Guide) and manager training resources, leading to significant engagement.
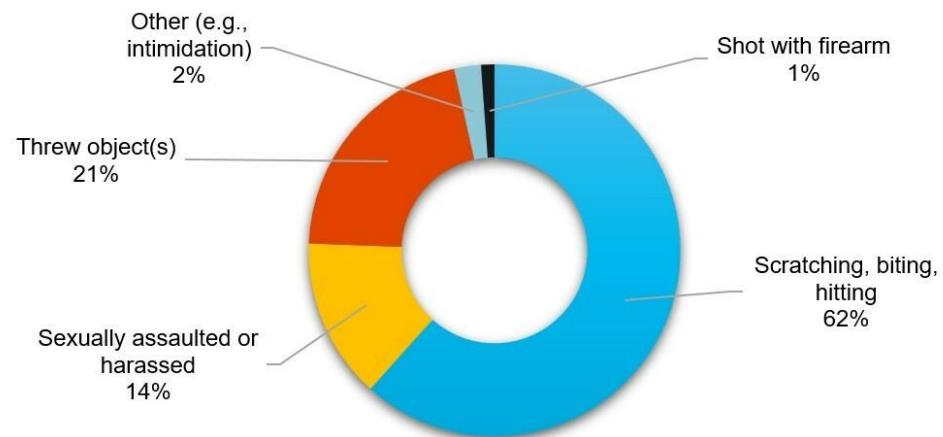
Integrated behavioral health Inpatient Response Team: Provided psychological support for Covid-19 patients, including individual wellness sessions via telehealth.

Be Well Sessions: Launched drop-in sessions addressing pandemic-related challenges, sustaining participation through targeted themes.

Peer support programs: Developed initiatives like Nurse2Nurse, focusing on peer support for nurses, adjusting structure based on feedback.

Coping skills workshops: Offered workshops on various coping strategies, addressing work-life balance and mindfulness.

Adopt a Department: Matched behavioral health liaisons with departments for tailored support, reaching over 90% of departments at center city location.

We Care teams: Established regional teams for proactive mental health support, integrating licensed professionals for immediate assistance.

Student counseling response: Provided extensive telehealth services and wellness programs for students, promoting engagement through diverse outreach.

Resilience in Stressful Events (RISE): Implemented a peer support program for healthcare providers affected by adverse events, promoting coping strategies and wellness.

Covid-19 Four-Tier Interventional Model

The Covid-19 four-tier interventional model from the Department of Psychiatry and Human Behavior and HR at Sidney Kimmel Medical College. Dept. = Department, EAP = Employee Assistance Program.


Tier 4: Professional Support

Time-critical access to professional help
- EAP 1:1 Counseling Sessions
- Pastoral Care Hotline
- Psychiatry & Human Behavior Dept. Counseling
- Critcal Incident Support Protocol

Tier 3: Peer Support

Self-referral or referral made by local unit/department supporter
- Support Group: Sign Out Support (SOS) sessions
- Support Group: Nurse2Nurse sessions
- Education: Jeff Be Well Coping Skills sessions
- Education: Effective Coping Skills for Healthcare Providers
- 1:1 Peer Support: Resilience in Stressful Events (RISE) Program for health care providers
- Mental Health First Aid Training

Tier 2: Local Unit/Department Support

One-on-one reassurance and practical help-
- Department/unit support from manager, chair
- Colleague support and personal network/community
- Facility-specific virtual *We Care* Teams

Tier 1: Self-help Resources

Provides self-help/early intervention support
- Print, audio, and video resources
- EAP well-being webinars
- Managing anxiety and building resilience
- Dealing with difficult emotions
- Mindfulness/breathing
- Family/Parenting; remote work

Tier 4:
1:1
Professional
Support
(I am having difficulty coping It's impacting my relationships and/or work and speaking with a professional would help.)

Tier 3:
Peer Support
(I am experiencing stress in work and other areas of life, and speaking to those with similar experiences would help.)

Tier 2:
Local Unit/Departmental Support
(I am experiencing stress directly related to my work, and prefer to discuss with my leaders or colleagues.)

Tier 1:
Self-help Well-being & Coping Support
(I want to learn how to be healthy and maintain my wellness during challenging times.)

Adapted from UofM peer support model

Comparison of Usage of Behavioral Health Offerings with Covid-19 Inpatient Census Across Jefferson Hospital System in 2020

Total Usage of Behavioral Health Offerings in 2020

Well-being Programming Usage — 2020 Total
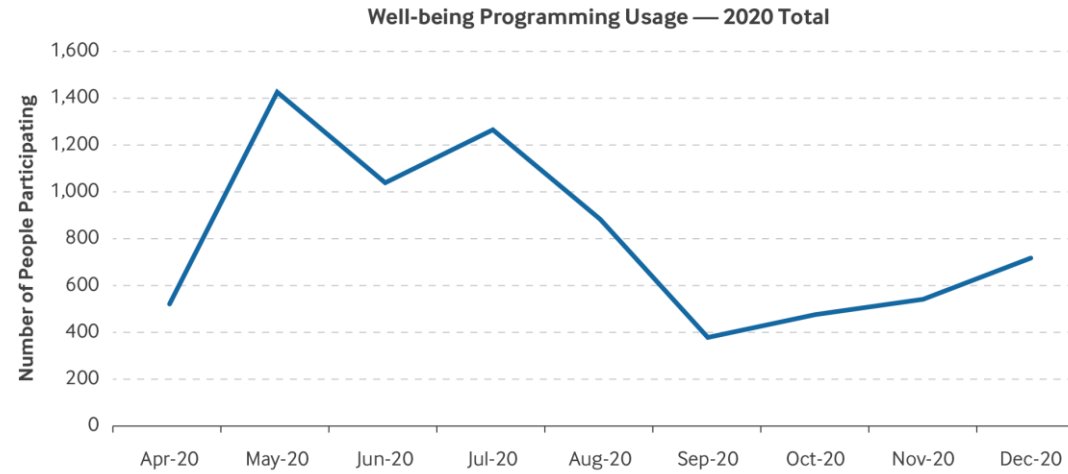
Covid-19 Inpatient Census across Jefferson Hospital System
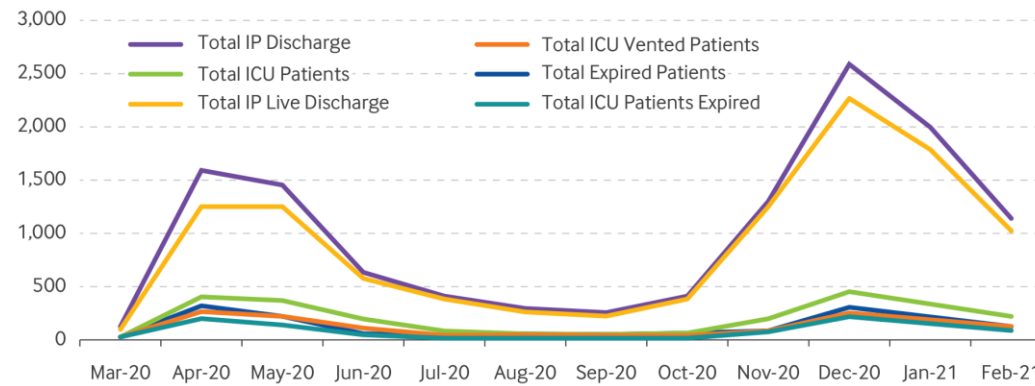
IP = inpatient.
Source: Jefferson Health

NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society

From understanding to action: Addressing compassion/empathy fatigue in healthcare

- **Impact of change**: In what ways have the recent changes in healthcare affected your daily routine and patient interactions? Can you share specific examples?

- **Barriers and enablers**: What barriers have you encountered in adapting to these changes, and what factors have facilitated a smoother transition?

- **Success stories**: Can you share any success stories where adjustments or new strategies led to positive outcomes for patients or staff?

- **Evolving needs**: How have the needs of patients and staff evolved in response to recent changes? What new needs or challenges have emerged?

- **Employee well-being**: What strategies have been most effective in supporting employee well-being and resilience during times of transition?

Compassion fatigue or empathy fatigue

Distress caused by helping others

Extreme state of tension and preoccupation with the suffering of others

Over identifying with others

Physical and emotional exhaustion

Disconnecting and detaching from others and things that are important to you

Emotionally numbing or shutting down from your passion for your work

Compassion fatigue

Apathy: lack of compassion for others, often fear of compassion for others

Isolation: removing oneself from important relationships

Bottled up emotion: Feeling emotionally overwhelmed, like you're going to burst

Substance abuse: Feeling a need to "numb out" or decompress after interaction with others that has been difficult

Progressive loss of idealism, energy, and sense of purpose

Symptoms of compassion fatigue

Can develop slowly or suddenly

Can cause a sense of dread about doing this type of work, which then leads to guilt

Irritability, anger, or anxiety

Hypersensitivity

Lack of sensitivity to highly emotional material

Headaches, insomnia

Problems in important relationships (feeling that others just don't understand)

Compassion fatigue

3 key characteristics

- Physical and emotional exhaustion
- Cynicism
- Inefficiency

Moral distress

- Less able to act in a manner consistent with one's personal and professional values

Compassion satisfaction

Ability to enjoy your work

↓

Ability to feel satisfied with your work

↓

Finding meaning/purpose in your work

↓

Feeling that you make a difference

↓

Deep understanding and connection with the importance of your work
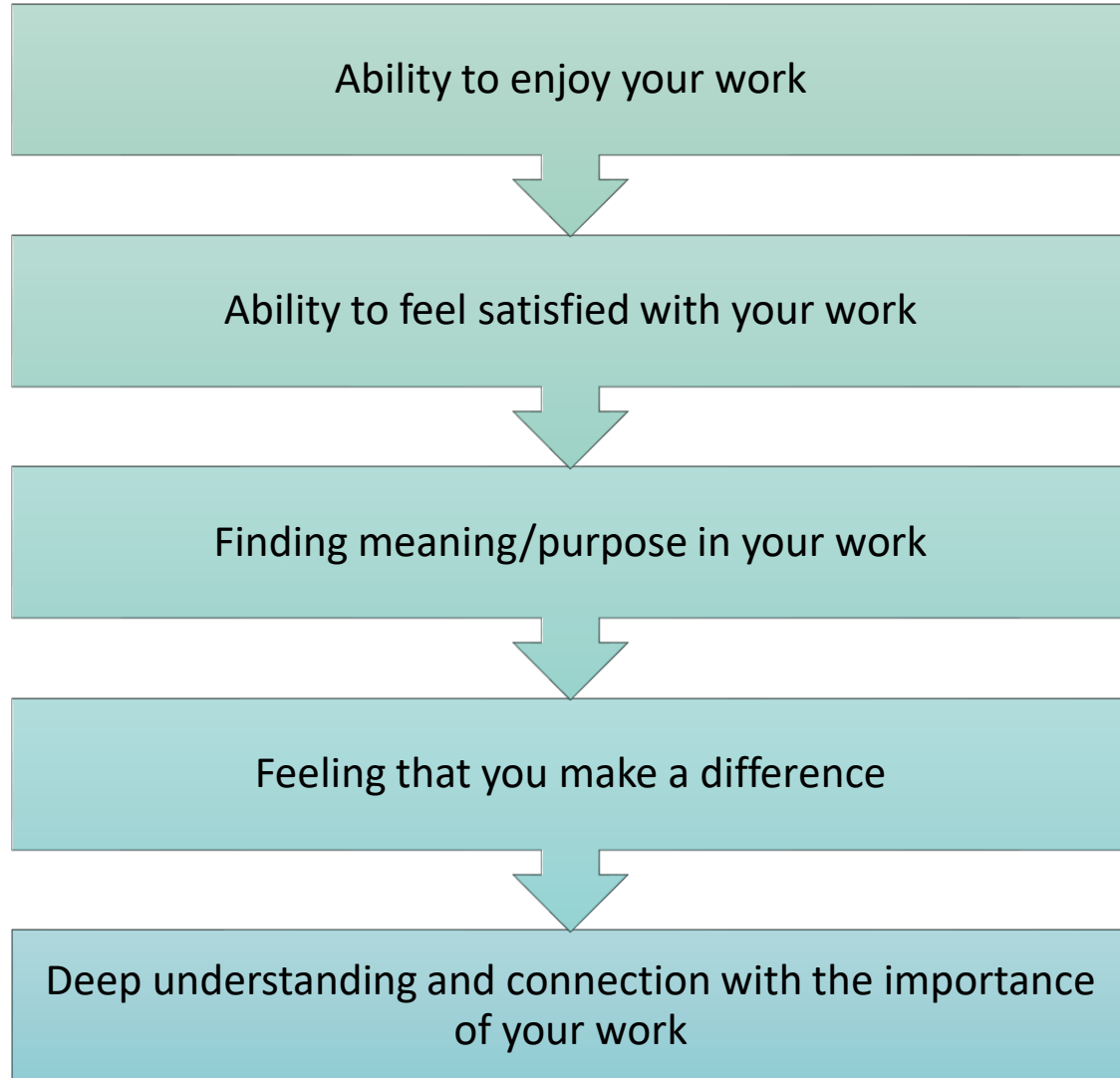
COMPASSION

(kəm'paSHən) noun

Deep awareness of the suffering of another coupled with the wish to relieve it.

kingcreative.tumblr.com

Loss is unavoidable:
Reaching for compassion satisfaction

How do you connect with meaning in the losses: Sources of meaning in your work

Difficult life experiences are not meaningless, but we can be disconnected with the meaning when more connected with pain

Death does not indicate failure

WOW moments: Intense connection, spiritual experiences, incredible coincidences

What can you derive from the care and kindnesses that you provided to patient or family?

Can you find a sense of accomplishment even when there is a poor outcome?

Self-care

4 pillars of self-care: Exercise, nutrition, sleep, water

Relationships

Pursuing hobbies and interests

Mindfulness practices

Spiritual practices

Identifying what refills the well

Cognitive set

Where do you focus your attention

The way you think about something has a direct impact on how you feel

Choose how you interpret your pain

Always look for the meaning

Always look for the value in your work

Threat vs. challenge appraisal

Threat

| Challenge |

| Overwhelmed, anxious |

| Can mobilize psychological resources |

| Paralyzed, unable to think through the problem |

| Willingness to try new coping strategies, experiment with new plan or solution |

| "I can't do this" or "I'm going to fall apart" |

| Breaking the situation into manageable pieces |

| Applying coping skills that are not working |

| "I can handle this" or "where do I start?" |

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