#### STAY SAFE

# Addressing Anxieties: 7 Things Health Care Leaders Can Do Now

This document offers steps leaders can take during the COVID-19 pandemic to address the special anxieties and concerns of health care workers and build their spirit and strength.

# 1. Talk directly with your staff, and listen

- Hold a meeting where all staff can talk and ask questions. If social distancing is an issue, hold several smaller meetings, or meet one-on-one as needed. Consider holding a meeting on Zoom, Skype or other platforms.
- Let staff know you care about their safety, well-being, and concerns.
- Chose a staff member before the meeting to serve as a staff point of contact. Tell staff during the
  meeting to bring their concerns and anxieties to this person.
- Have staff set up and use small listening groups to share concerns and solutions.
- Offer text or email suggestion boxes, and respond to suggestions.
- Listen actively during the meeting to staff concerns and anxieties. Address as many of them as
  possible using ideas and tips in this document.
- Let staff know what steps leadership will take right now and going forward to address some of their concerns.

# 2. Walk the floors weekly to show your support for workers

 Have a CEO, a director of nursing, or some other trusted person in management walk the floors at least once a week to recognize the hard work being done. This may raise morale.

# 3. Model the right way to put on and take off personal protective equipment (PPE)

Choose at least one person for each shift to show others the right way to put on and take off masks, gloves, and other PPE.

- Have these same people check staff weekly to be sure they are still using PPE the right way.
- Think about reinforcing the modeled PPE behavior by asking health care workers to watch a video on the right way to put on and take off PPE.
- Work alone with each worker that has trouble learning how use PPE the right way.

# 4. Set up a buddy system

- Have workers form groups of two who can:
  - Keep an eye on each other and make sure they each use PPE the right way.
  - Check in with each other often to make sure they are both doing OK.
  - Watch each other's workload and tell leadership when a buddy needs help or has reached their limits.
  - Offer their buddy help with basic needs, such as supplies and transportation.

### 5. Post or share tools and resources

- Share relevant MDH mental health resources.
- Share videos that teach and show how to do important things like putting on and taking off PPE.

## 6. Give support to health care workers

- Leaders and staff should work together to make sure needed safety measures are in place and followed. This can lower the level of worry and anxiety within long term care facilities.
- Protect staff from physical and psychological stress as much as you can to help workers do their
  jobs. Be aware of added stress on staff that may come from their families and communities.
- Watch closely and support the well-being of all staff. Hold daily meetings, with social distancing, to give staff timely information, listen to their concerns, and learn what they need.
- Schedule email updates to staff one or more times a week to keep them informed about new guidance and resources.
- Consider offering staff time to rest and renew, a place to stay nearby, and other help they may need.
- Treat your staff to pizza and other light meals and snacks. Offer self-care gift bags with things like laundry pods, dryer sheets, and hand lotion.
- Create symbols of appreciation for staff working in COVID-19 units. For example, Minnesota
   Veterans Homes created small "Hero" pins for those who work in COVID-19 units.
- Offer mental health and psychosocial support. Give staff access to free telehealth sessions with licensed psychologists or therapists. Set limits on when and how long sessions last.

 Offer psychological first aid training, so staff have the skills to give emergency psychological support to others.

### 7. Hold a simulation training exercise

Exercises are useful for thinking through actions before an emergency happens and for testing emergency procedures already in place. The following sample is adapted from a training exercise designed by Julie Organ and Mallorie Habisch, licensed nursing home administrators with the Minnesota Good Samaritan Society - Specialty Care Community.

#### **Exercise goal**

Create or test standard operation procedures (SOPs), including roles and responsibilities, when residents test positive for COVID-19.

#### **Exercise scenario**

The COVID-19 lab result of one of your residents is positive. What do you do now?

- Set the scene for exercise players by describing the situation. The amount and type of information you give players depends on what you want them to exercise.
- The description may or may not include such things as:
  - Current standard operating procedures.
  - What is known about the resident's condition and whether the person is already in isolation.
  - The number of other residents newly diagnosed with COVID-19.
  - The number of other residents in isolation.
  - The number and type of staff who would be assigned to care for each resident in isolation.
  - Guidance on work breaks.
  - Where patients with pending test results may be roomed.

#### **Exercise instructions**

A common concern that health care workers may have is not knowing what to expect if there is a COVID-19 case at your facility. Practice exercises can help address this anxiety by allowing health care workers to feel more prepared by executing the response plan in a less stressful environment. Use the following guidelines to develop an exercise for your facility.

#### Staging the scene

To make this simulation exercise as realistic as possible, create a "COVID unit or room". This can be an actual unit in your workplace or another space-- inside or outside-- where items are designated and labeled, such as "beds", "waste disposal", "donning/doffing room", etc.

#### Leadership

- Tell staff in each department their roles, and that their contributions matter to the success of the unit.
- Debrief players after the exercise to hear what did and did not work. Revise SOPs accordingly.

#### Nursing staff, isolation units

Focus on procedures and steps related to:

- Arriving at work
- Meal times
- Care
- Cleaning
- Breaks
- End of shift
- Laundry

#### Nursing staff, non-COVID units

Focus on procedures:

- Infection, protection and control.
- Coordinating with isolation unit staff for bringing garbage bags out and disposing of them.
- Coordinating with isolation unit staff on what things need to be disinfected continuously, such as door handles.

#### Social services staff

- Talk by phone to nursing units for updates and touching base with families.
- Make sure advance directives/physician orders for life sustaining treatment (POLST) are up to date and accurate.

#### Therapy staff

Stop therapy for isolation patients

#### Non-isolation laundry and dietary staff

Non-isolation staff may not be working directly with patients, however they may handle materials
coming in and out of the room. Discuss how roles will be reassigned to isolation staff and the need
for PPE when handling materials used by patients.



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