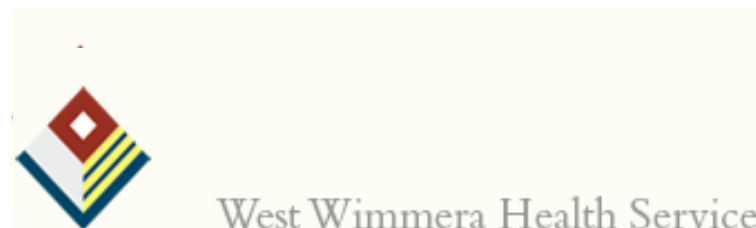


# Psychological Well Being Response to COVID19: Caring for our teams

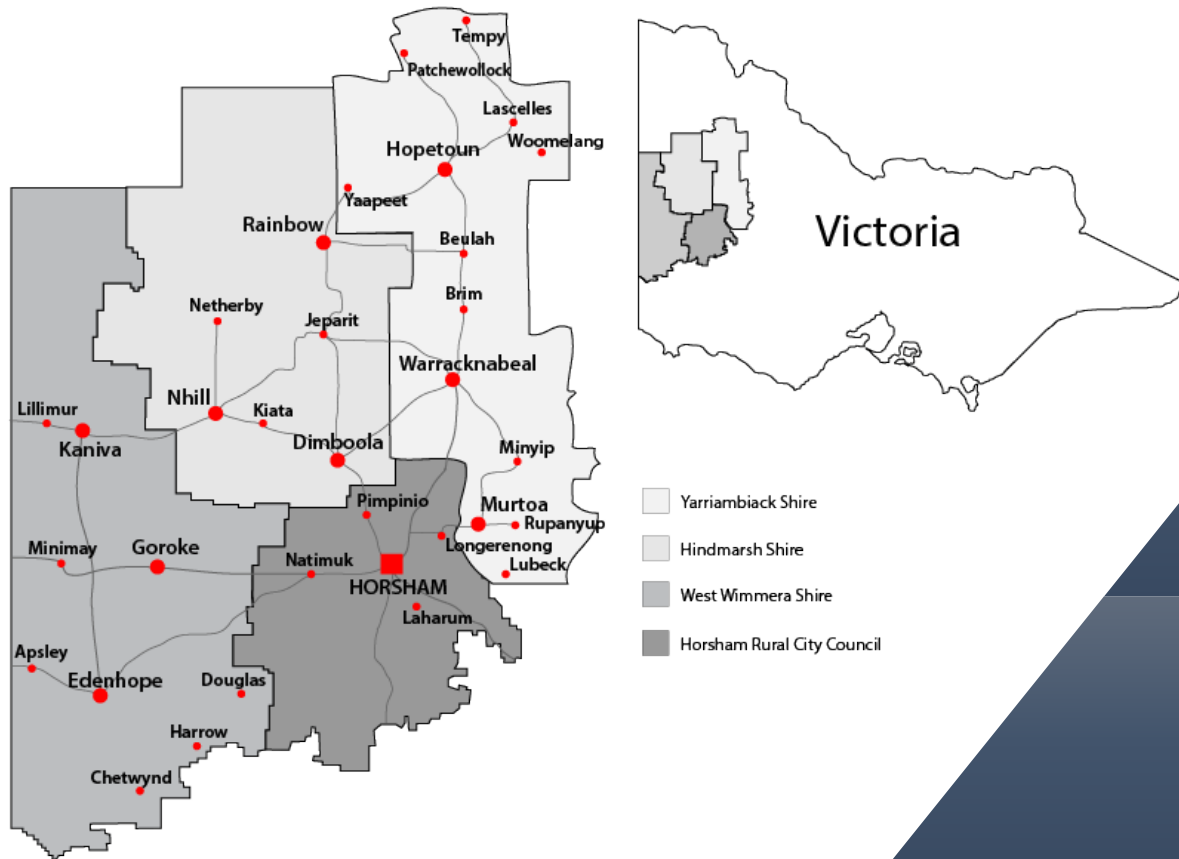
16 September 2020

**Dr Meg Dennison**  
Clinical Psychologist  
&

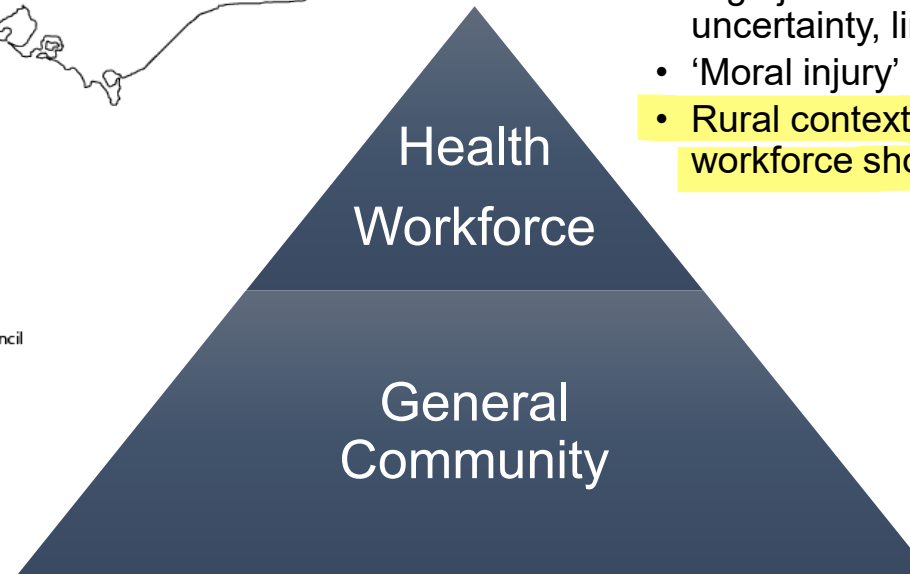
**Catherine Morley**  
CEO, Wimmera Health Care Group



# COVID in Wimmera Southern Mallee



- Exposure to potentially traumatic events (OVA, many deaths)
- Fear and anxiety (...of infection, impending disaster)
- Stigmatisation
- High job demands: fatigue, burnout, exhaustion, uncertainty, limited resources
- 'Moral injury'
- Rural context – knowing who you care for, workforce shortages



- Fear of infection
- Social isolation
- Uncertainty → anxiety
- Change fatigue (living arrangements, work/life imbalance)
- Adjustment, grief and loss
- Chronicity

# Structuring a mental health response

Expert guidance (disaster mental health, high risk organizational contexts)  
What we were learning from around the world

- Over 100 confirmed cases
- Over 200 confirmed cases
- Over 500 confirmed cases
- Over 1000 confirmed cases

Open source data visualization  
<https://github.com/globalcitizen/2019-wuhan-coronavirus-data>

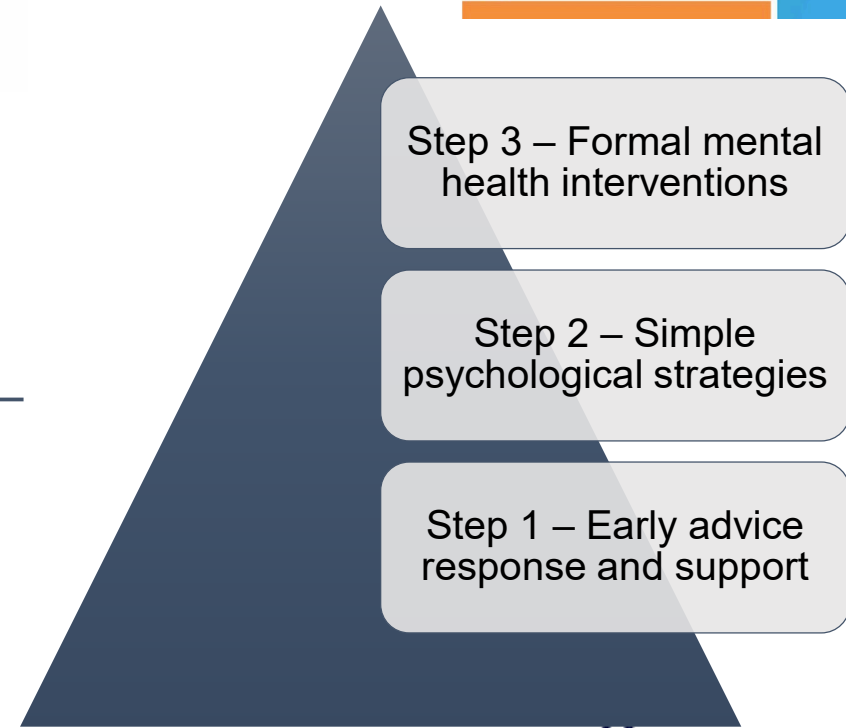
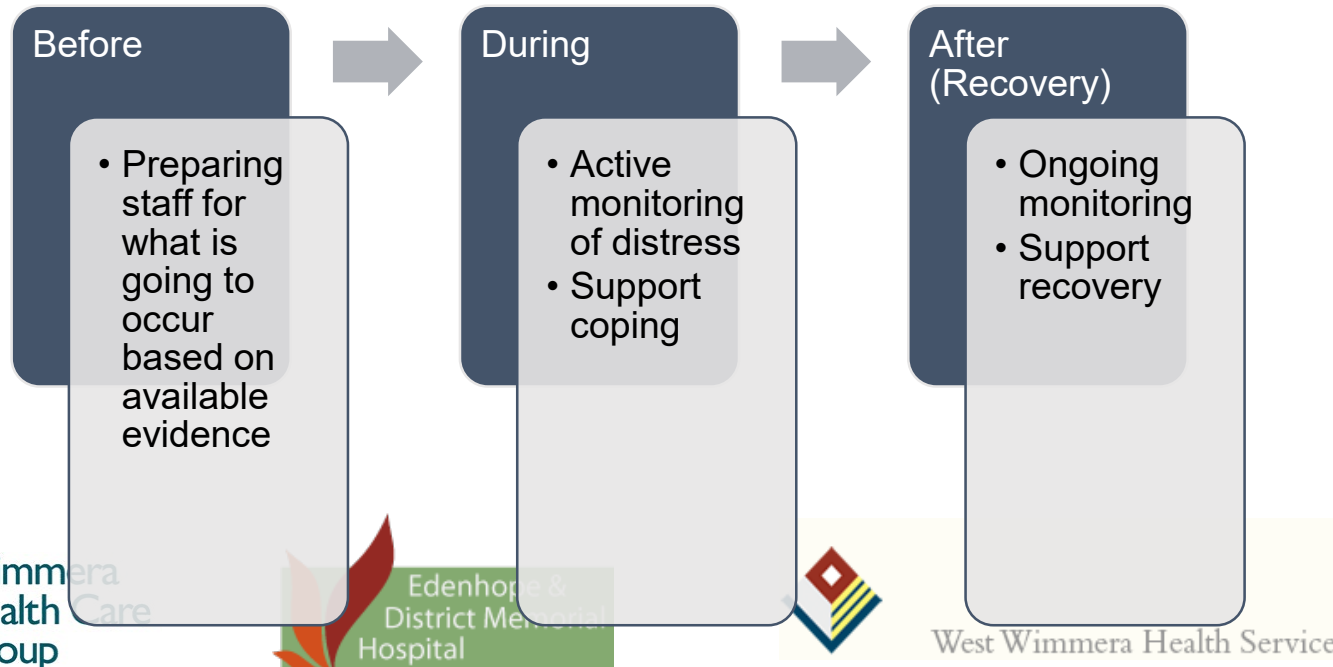
## Managing mental health challenges faced by healthcare workers during covid-19 pandemic

Neil Greenberg and colleagues set out measures that healthcare managers need to put in place to protect the mental health of healthcare staff having to make morally challenging decisions



COVIDSAFE

### NATIONAL MENTAL HEALTH AND WELLBEING PANDEMIC RESPONSE PLAN



# Intervention Map

Quick Wins

> Time commitment & investment

Before

During

After

Ongoing distress  
Diagnosis

## Step 3 – Formal mental health interventions

- Enable continuity of care with specialist providers
- Enable continuity of care with specialist providers

## Step 2 – Simple psychological strategies

- Increase EAP network with insurer ready providers
- Maintain EAP network

## Step 1 – Early advice, response and support

- Resources and information
- PFA training for staff
- PFA training for staff/Peer Support Network
- Develop Peer Support Network
- Peer Support Network

Initial distress,  
reduced coping

# Project outcomes to date...

- ✓ Rapid set up of an interagency steering committee to advise the project team
- ✓ Education delivered to the steering committee and the WSMHA CEO group about evidence informed approaches to support mental wellbeing of staff
- ✓ Wellbeing newsletter for each health service - stress management and coping skills, and other mental health resources
- ✓ Phoenix Australia delivered PFA pilot online.
  - ✓ Evaluation positive – **100% reported that it was 'quite or highly likely' they'd recommend the course to a colleague,** and use the knowledge and skills gained in the coming month.
- ✓ Full roll out of PFA almost complete with **249** people registered to complete by September
- ✓ Development of a 3/6 month follow up evaluation surveys on PFA training
- ✓ Research into alternative EAP options
- ✓ Engagement with Safer Care Victoria to discuss project and aspirations for future development of a peer support model
- ✓ Detailed proposal regarding design and implementation of a peer support model across our region



# Feedback from steering group on project so far....

“The project is purely focused on our team and mental health wellbeing. It's an investment that will go a long way to improve the psychological safety, recruitment, retention and help to build a stronger more appealing brand for our health services. Being involved in an organisation who is prepared to invest in people in both gratifying and professional satisfying on a personal level. This will be something the services can be proud to have achieved (or continual work towards achieving).”

“Great to get lots of people trained in PFA and to consider the potential for a regional peers' support network. Project provides great gains for individuals in learning PFA which are applicable beyond the workplace.”

“[I learned about]...the level of interest that exists in working in partnership to improve the mental health and wellbeing of healthcare workers in our region.”

“The Peer Support Program [proposed] appears to be a complementary model to an EAP that improves flexibility and accessibility for team members.”

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