

Operation Uplift Team Charter

A Comprehensive Initiative to Appreciate, Nurture and Support our Caregiver Heroes.

COVID-19 Fatigue & Burnout Best Practices





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COVID-19 Fatigue and Burnout Quick Hits

Employee Health Team Rounding

Employee Health Team make rounds every other week to check on departments and see if there are any needs, anyone wants to talk, and check on overall well-being. The team passes out small treats as they round.

Community Appreciation

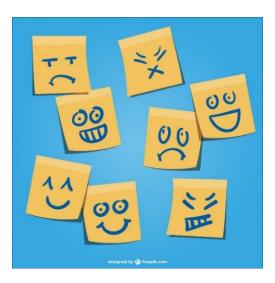
Community has been encouraged to get involved and demonstrate appreciation to the staff.



Ways to Respond to Intense Emotional Stress

1. Mental/Emotional

- Accept your response. You are normal and are having normal reactions. Don't label yourself "crazy."
- Accept that recurring thoughts, dreams, or ongoing memories of difficult experiences related to the pandemic are normal and don't try to fight them. They will diminish over time.
- Give yourself permission to feel rotten and to share your feelings with others. Now is not the time to become the "strong, silent type.
- Give yourself permission to do things that feel good for you.
- Be mindful. Stay aware that loved ones and friends are probably under stress too. Keeping a broad perspective will keep you from focusing solely on yourself.
- Allow yourself to delay or avoid making any major lifestyle changes.



2. Spiritual

- If you practice a formal religion, be sure to continue. If not, increase your involvement with those religious practices.
- Practice gratitude daily (make a formal habit of "counting your blessings").
- Bring laughter into your life every day.



Productive Ways to Multi-Task and Not Be Overwhelmed

1. Combine similar work

- All paperwork at once.
- Phone calls in one concentrated burst.
- Meetings.
- Appointments.

2. Multi-tasking

- Do paperwork while waiting for a meeting to start.
- File while making outbound or return calls.
- Exercise while watching television.
- 3. Cut out unnecessary tasks. Be rigorous. Ask these questions:
 - What would be the benefit of eliminating this task?
 - What's the cost (time, money) in continuing to do it?
 - Who is actually helped by this work? How do I know?
 - Does this task actually contribute to goals set?
 - Does doing it duplicate something else?
 - Am I/we the best people to do it?



Productive Ways to Learn to Say "NO!"

Too often we forget that setting boundaries and limits are just as important to our well-being as having positive attitudes.

When your boundaries are intact, you are always aware of choices --- and you don't feel you're enmeshed in a drama that is beyond your control.

When your boundaries are intact, you're acting out of agreement and negotiation --- not out of a need to be compliant and compromising.

Set Limits. Remember:

- You can't win 'em all. You can't please everybody.
- Limits/boundaries let others know your values and priorities.
- They let you know when you're wasting time with "unsolvable" problems.
- Firm boundaries allow you to relinquish feeling guilty.
- Boundaries keep you from taking on other people's problems and work.

Saying "No" To Your Boss

Key: Link your "No" to another priority.

Example: "Boss, right now I'm working on the department budget assignment you gave me. I'll be happy to set it aside for this new project, but the budget won't be turned in until next Friday. Can we set some priorities? Which job would you like to take precedence?"

"No" is not a rejection of the person, only of the request.



10 Ways to Put an End to Procrastination

"Nothing is so fatiguing as the eternal hanging of an incomplete task." -William James

PROCRASTINATION: Putting off things we ought to be doing.

TECHNIQUES:

| Will 7 | Fest? | | |
|--------|-------|-----|---|
| Yes | No | 1. | Salami-Slice Strategy Divide and conquer process of threats and alliances used to overcome opposition. |
| Yes | No | 2. | Swiss Cheese Break up a large project into smaller, manageable tasks. |
| Yes | No | 3. | Five Minute Plan Consider what you can do in five minutes (i.e. make a list, phone call, etc.) |
| Yes | No | 4. | Worst First Get started by doing what is most difficult or unpleasant that we tend to put off. |
| Yes | No | 5. | Balance Sheet Consider the pros and cons, likes and dislikes about a task or project. |
| Yes | No | 6. | Personal Journal Keep a log of your daily accomplishments or insights to become more aware of yourself. |
| Yes | No | 7. | Going Public Tell someone or a group of a goal you plan to accomplish. They will hold you accountable. |
| Yes | No | 8. | Written Reminder Short, visible note to remind you to do something. |
| Yes | No | 9. | Leading Task Get started by creating a list of to do's. |
| Yes | No | 10. | Behavioral Contract Affirmation statement(s) to describe your desired new habit or behavior. |



Stressful Behavior Check-Up

Invite everyone in your unit to circle their top three concerns in each category that may require intervention, counselling, or an empathetic listening Session

PHYSICAL

- Appetite changes
- Headaches
- Fatigue
- Poor sleeping
- Increased alcohol
- Frequent illnesses
- Digestive problems
- Pounding heart
- Teeth grinding
- Rash
- Restlessness
- Foot-tapping
- Finger drumming
- Nail Biting
- Smoking

- MENTAL
- Forgetfulness
- Poor concentration
- Dull senses
- Lethargy
- Boredom
- Low productivity
- Negative attitude
- Anxiety
- The "blues"
- Mood swings
- Anger
- Bad dreams
- Irritability
- Crying spells
- Nervous laughter
- Loss of loving
- Feeling

SPIRITUAL

- Emptiness
- Loss of meaning
- Doubt
- Martyrdom
- Loss of direction
- Cynicism
- Apathy
- Abandonment
- Worry
- Isolation
- Distrust
- "No one cares"

Source: Self-Care for Healthcare by LeAnn Thieman



The 12 Stages of Burnout

- 1. Excessive drive or ambition.
- 2. Pushing yourself to work harder.
- 3. Neglecting personal care or needs.
- 4. Displacement of conflict.
- 5. No time for nonwork-related needs.
- 6. Denial.
- 7. Withdrawal.
- 8. Behavioral changes.
- 9. Depersonalization.
- 10. Inner emptiness.
- 11. Depression.
- 12. Mental or physical exhaustion or collapse.



Source: Healthline





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5 Ways to Navigate Burnout During the COVID-19 Pandemic

Will healthcare workers experience an increase in burnout due to the COVID-19 outbreak? You bet.

As healthcare workers deal with the marathon of treating patients diagnosed with the virus - all while coping with limited resources - making plans to manage burnout and supporting the physical, mental, and emotional health of healthcare workers is imperative.

Preparing for Battle

We can't ignore the fact that the novel coronavirus, COVID-19, is reshaping our way of living. Cities and states nationwide have initiated stay-at-home orders, and nonessential businesses, restaurants, and public schools across the country have closed their doors.

While many businesses have shut down, hospitals are preparing for an influx of patients with COVID-19. Elective procedures are being canceled, and nurses and other healthcare providers have been crosstraining in preparation for the rush of new patients.

"I work in endoscopy, where most procedures are elective. To be proactive, we are starting to cross-train in different areas like emergency, urgent care, or phone triage. That way we've been oriented and can support the staff in those departments when they get slammed."

- Anna Rodriguez, BSN, RN, PCCN, CCRN

What Is Burnout?

Burnout is a psychological syndrome that involves a prolonged response to chronic interpersonal stressors on the job. Symptoms of burnout include:

- Emotional exhaustion
- Cynicism
- Decreased self-efficacy

Research shows a myriad of causes contributing to the development of burnout. Burnout is also impacted by personality factors and coping styles. Major work factors in burnout include:

- Unmanageable workload
- Lack of autonomy
- Decreased social support
- Insufficient rewards
- Unfairness and injustice
- Value conflicts

Those who experience burnout may deal with personal outcomes such as increased cold and flu episodes, chronic fatigue, and sleep disturbances.

As far as mental health goes, burnout can be a stepping stone for depression. Work performance may suffer, and presenteeism (physically at work but not functioning at full capacity) may present as a risk factor for further emotional exhaustion.



5 Ways to Navigate Burnout During the COVID-19 Pandemic (cont'd)

Burnout in physicians and nurses is associated with an increase in medical errors and patient mortality rate. Additionally, patient satisfaction and quality of care decline. Burnout means greater worker turnover rates, costing organizations millions of dollars each year.

Managing Burnout Amid the COVID-19 Outbreak

Practice these five tips to help keep burnout at bay:

1. Make sure the basics are covered.

What do you need in order to do your job well? In the case of COVID-19, you need personal protective equipment (PPE) when working with patients. You also need the proper tools, materials, and equipment for your patients, adequate staffing ratios, and sufficient breaks, as well as food and water while on the job.

The essentials may be difficult to come by these days, but they're important because they serve as the foundation to keep you safe and performing at your best. My wellness community, Joy Energy Time, has released free patient break cards with different ideas to ensure you have restorative rest breaks.

2. Access mental health and social support.

Does your organization have an employee assistance program? If so, take advantage of their services. Seek out or continue to visit (virtually, of course) a licensed mental health professional. Moreover, humans are social beings. Don't forget about social support, especially in this period of social distancing. Set up regular daily or weekly check-in calls, texts, or video conferences with friends, family, and loved ones.

There are a lot of emotions going on right now, and everything you feel is valid. You're not alone. Seeking mental health support can help you get through these extraordinary times.

3. Transparency and communication are key.

With fast-paced changes occurring in healthcare, two-way communication between management and employees is necessary. Employees should be kept in the loop of what's going on. Management must take note of what employees need most right now and should survey them to assess their top priorities and concerns. Hold a mindfulness huddle with your team before your shift and/or a debriefing huddle at the end of your shift.



5 Ways to Navigate Burnout During the COVID-19 Pandemic (cont'd)

4. Reframe your mindset.

Locus of control (LOC) refers to how inclined someone is to believe that they have control over their life circumstances. Nurses with high external LOC experience greater job stress, while internal LOC is correlated with increased well-being, performance, and confidence in solving work problems.

Implement mini mindful moments throughout the day to check in with yourself and observe how you are handling challenges at work. Do you tend to give up or do you make plans to problem solve?

5. Show appreciation and spread humor.

You and your team members are going into overtime, so frequent acts of kindness go a long way: a simple "thank you" to the co-worker who helped you out, surprise-ordering a round of coffee for the team, organizing the supply closet, air-fiving each other, or doing a "foot-shake" video for TikTok.

Doing small helpful acts, showing appreciation, and incorporating humor when possible will lift everyone's spirits.

Burnout is more than problematic for individuals - it also hurts patients and organizations. Now more than ever, healthcare workers and teams must all unite to put strategies in place to reduce burnout so we can keep workers and patients healthy during this pandemic and beyond.

Source: medbridgeeducation.com. Written by Erika del Pozo, MOT, OTR/L



A Guide to Burnout

What Is Burnout?

Coined by the psychologist, Herbert Freudenberger in the 1970s, burnout describes a severe stress condition that leads to severe physical, mental, and emotional exhaustion. Much worse than ordinary fatigue, burnout makes it challenging for people to cope with stress and handle day-to-day responsibilities. People experiencing burnout often feel like they have nothing left to give and may dread getting out of bed each morning. They may even adopt a pessimistic outlook toward life and feel hopeless. Burnout doesn't go away on its own and, if left untreated, it can lead to serious physical and psychological illnesses like depression, heart disease, and diabetes.

Who Gets Burnout?

Anyone who's continually exposed to high levels of stress can experience burnout. Helping professionals, such as first responders, doctors, and nurses are especially vulnerable to this health condition. Along with career-induced burnout, people caring for children can also have this type of extreme exhaustion. A recent study found that, just like doctors and business executives, mothers and fathers can also burn out. Personality characteristics like needing to be in control, perfectionism, and being "Type A" can also increase your risk of burnout.

What Are the Signs of Burnout?

Worried that you may be experiencing burnout but unsure of the signs? Here's a list of symptoms that you can use as a guide.

- **Exhaustion.** Feeling physically and emotionally depleted. Physical symptoms may include headaches, stomach aches, and appetite or sleeping changes.
- **Isolation.** People with burnout tend to feel overwhelmed. As a result, they may stop socializing and confiding in friends, family members, and co-workers.
- **Escape fantasies.** Dissatisfied with the never-ending demands of their jobs, people with burnout may fantasize about running away or going on a solo-vacation. In extreme cases, they may turn to drugs, alcohol, or food as a way to numb their emotional pain.
- **Irritability.** Burnout can cause people to lose their cool with friends, co-workers, and family members more easily. Coping with normal stressors like preparing for a work meeting, driving kids to school, and tending to household tasks also may start to feel insurmountable, especially when things don't go as planned.
- **Frequent illnesses.** Burnout, like other long-term stress, can lower your immune system, making you more susceptible to colds, the flu, and insomnia. Burnout can also lead to mental health concerns like depression and anxiety.



A Guide to Burnout (cont'd)

The 12 Stages of Burnout

Unlike a cold or the flu, burnout doesn't hit all at once.

Psychologists Herbert Freudenberger and Gail North have outlined the 12 phases of this stress syndrome:

- 1. Excessive drive/ambition. Common for people starting a new job or undertaking a novel task, too much ambition can lead to burnout.
- 2. Pushing yourself to work harder. Ambition pushes you to work harder.
- 3. Neglecting your own needs. You begin to sacrifice self-care like sleep, exercise, and eating well.
- 4. Displacement of conflict. Instead of acknowledging that you're pushing yourself to the max, you blame your boss, the demands of your job, or colleagues for your troubles.
- 5. No time for nonwork-related needs. You begin to withdraw from family and friends. Social invitations to parties, movies, and dinner dates start to feel burdensome, instead of enjoyable.
- 6. Denial. Impatience with those around you mounts. Instead of taking responsibility for your behaviors, you blame others, seeing them as incompetent, lazy, and overbearing.
- 7. Withdrawal. You begin to withdraw from family and friends. Social invitations to parties, movies, and dinner dates start to feel burdensome, instead of enjoyable.
- 8. Behavioral changes. Those on the road to burnout may become more aggressive and snap at loved ones for no reason.
- 9. Depersonalization. Feeling detached from your life and your ability to control your life.
- 10. Inner emptiness or anxiety. Feeling empty or anxious. You may turn to thrill seeking behaviors to cope with this emotion, such as substance use, gambling, or overeating.
- 11. Depression. Life loses its meaning and you begin to feel hopeless.
- 12. Mental or physical collapse. This can impact your ability to cope. Mental health or medical attention may be necessary.

How to Prevent Burnout

Stress may be unavoidable, but burnout is preventable. Following these steps may help you thwart stress from getting the best of you:

- 1. **Exercise.** Not only is exercise good for our physical health, but it can also give us an emotional boost. Stretched for time? You don't need to spend hours at the gym to reap these benefits. Mini-workouts and short walks are convenient ways to make exercise a daily habit.
- 2. **Eat a balanced diet.** Eating a healthy diet filled with omega-3 fatty acids can be a natural antidepressant. Adding foods rich in omega-3s like flaxseed oil, walnuts, and fish may help give your mood a boost.



A Guide to Burnout (cont'd)

- 3. **Practice good sleep habits.** Our bodies need time to rest and reset, which is why healthy sleep habits are essential for our well-being. According to the National Sleep Foundation, avoiding caffeine before bedtime, establishing a relaxing bedtime ritual, and banning smartphones from the bedroom can help promote sound sleep hygiene.
- 4. **Ask for help.** During stressful times, it's important to reach out for help. If asking for assistance feels difficult, consider developing a self-care "check-in" with close friends and family members so that you can take care of each other during trying times.

How to Help Friends or Family Members

How can you help someone experiencing burnout? While you can't take away someone's stress, offering support can help lighten their emotional load.

- 1. **Listen.** Before jumping into "fixing" mode, offer to listen to your friend or family member's difficulties. Having someone to talk to can make a world of difference. Often people need someone to witness their stress and suffering, and listening can go a long way.
- 2. Validate feelings and concerns. When friends and family members are feeling the effects of burnout, saying "It doesn't sound that bad" or "I'm sure things will get better" while meant to offer reassurance can feel invalidating if someone is really feeling low and hopeless. Instead, offer validation by saying, "You've been working so hard, I can understand why you feel depleted."
- 3. **Offer specific types of help.** Individuals who are burnt out are often too tired to think of ways that others can help them. Instead of asking, "How can I help?" offer to drop off a meal, pick up dry cleaning, or do a load of laundry.
- 4. **Kind gestures.** Sending flowers, a thoughtful text message, or a written card can remind friends and family members that they're not alone. Because they're often working long hours, people with burnout can feel lonely and underappreciated. But small gestures of kindness can be nurturing.
- 5. **Research resources.** If friends or family members need additional support, like childcare, a house cleaner, or a psychotherapist, offer to research and crowdsource for specific resources to help ease the stress.

Takeaway

Being exposed to continual stress can cause us to burnout. Feelings of exhaustion, anxiety, and isolating from friends and family members can be some of the signs. However, eating a balanced diet, regular exercise, and getting a good night's sleep may prevent this stressed state.

Worried about friends and family members who may be burnt out? Listening to their concerns, validating their emotions, and offering specific types of support can help lighten the load.



A Guide to Burnout (cont'd)

Burnout can be avoided by making self-care part of your daily routine. Even if you're working long hours, studying for exams, or taking care of young children, remember to sprinkle some joy into each day.

Try going for a walk, talking to a friend, or watching an enjoyable program on television. Small selfcare gestures like these can stop stress from turning into something more serious, like burnout.

Source: <u>healthline.com</u>. Written by Juli Fraga, PsyD



Burnout Isn't Just in Your Head - It's in Your Circumstances

We can fight emotional exhaustion by decreasing demands, increasing support and enhancing control.

For many labs in the U.S., getting results for the coronavirus test can take between two and seven days. But last week, the Cleveland Clinic introduced a test that offers results in just eight hours. They didn't stop there: for social distance and convenience, they're offering a drive-through option.

The health of a society depends heavily on health care professionals, but the profession has a problem: burnout. Over half of doctors and a third of nurses feel it, and the consequences are dire. When providers burn out, patients are less likely to get quality care and more likely to die. When you schedule an appointment, I'm pretty sure you don't want to see Dr. Burnout.

During a pandemic, the risks of burnout become even more acute: Medical professionals are braving high disease exposure, long hours and inadequate resources. That's the bad news. The good news is that the Cleveland Clinic has been working for years on a solution to this problem, too.

The heart of burnout is emotional exhaustion - feeling so depleted and drained by your job that you have nothing left to give. In the U.S., over half of employees feel burned out at least some of the time. It doesn't just hurt our productivity - it can harm our mental and physical health, too. There's evidence linking burnout to weakened immune systems and even cardiovascular disease. It's no wonder that burnout has been declared an occupational syndrome by the World Health Organization.

As an organizational psychologist, I've spent part of my career studying burnout in schools, fire departments, governments and hospitals. This week on my TED podcast, WorkLife, I explore what we've learned about how to fight burnout. My favorite model is demand-control-support: the basic idea is that if you want to prevent or cure emotional exhaustion, you have three options: reduce the demands of a job, provide support to deal with them, or increase control over them.

Reducing Job Demands

This is a structural change: it's about decreasing the load on the person doing the job. In health care, it often starts with decreasing digital demands. If you want to hear a health care provider curse, try asking them to estimate how many hours they waste a year clicking through electronic health records. At the Cleveland Clinic, they launched a task force to simplify the process. They also introduced some digital solutions to lift the burden of calling pharmacies for refills and insurance companies for tests: now they have automated refills and pre-authorizations.

Increasing Support

Here is where cultural change comes in. One of the biggest barriers to support is that people are often afraid to ask for help. People are afraid of being vulnerable and of being a burden to others. They want to look competent and self-reliant. To make sure people get the support they need, it helps to remind them that asking for help is a sign of strength, not a source of weakness. In a study of offshore oil rigs, errors decreased after macho men learned that lesson. In fire departments, units with strong cultures of care had fewer accidents and fewer health problems. In hospitals, my colleagues and I have found that creating a nurse preceptor role - a professional whose job is to help other nurses - facilitates help-seeking.



Burnout Isn't Just in Your Head - It's in Your Circumstances (cont'd)

Increasing Control

This is about giving people the freedom and the skills they need to handle the demands of their jobs. It often starts with psychological change: When we're feeling overwhelmed, it can help to apply some evidence-based techniques for regulating emotions. Two of the most effective strategies for gaining control over our emotions are reappraisal and distraction. An accountant feeling overloaded by finishing taxes remotely might reframe it as flextime or refocus on family time (looks like we'll all be getting extensions anyway). A teacher feeling daunted by the challenges of delivering online classes might reframe it as an opportunity to build new skills or refocus on topics students have been excited to explore.

Mind Your Emotions

Another avenue for control is to name our emotions. In one experiment, people with arachnophobia went through a weeklong exposure therapy course. At the beginning of the course, psychologists randomly assigned some of them to simply label their emotional response to spiders. A week later, they were less likely to show a physiological stress response to a live tarantula - and more likely to approach it. Compared with a hairy spider, burnout is less disgusting and more depressing, but it can still help to label it. When you name your exhaustion, it becomes easier to see that it's not a problem in your head; it's a problem in your circumstances. You can start to pinpoint situations where it rises and falls - and start doing something about it.

But the best way to gain some control over exhaustion is to change the situation that's causing it. The Cleveland Clinic tested an unusual solution: they sent thousands of physicians to communication skills training, and found that burnout decreased significantly afterward. Physicians felt less emotionally exhausted - and over the next few months, they felt a greater sense of accomplishment and less disconnection from patients.

It turned out that when physicians learned to engage with more empathy, they started hearing patients' concerns instead of dismissing their complaints, which gave them more control in the conversation. The Cleveland Clinic's chief experience officer, Adrienne Boissy, told me: "I can't tell you how many times, over and over again, we saw them simply forget to say, 'I care about you. I'm in this with you. We're going to figure this out together.""

Anyone can burn out in any job. But especially in a pandemic, we need to make sure we care for the caregivers.

Source: nytimes.com. Written by Adam Grant



How to Cope with Job Stress and Build Resilience During the COVID-19 Pandemic

Whether you are going into work or working from home, the COVID-19 pandemic has probably changed the way you work. Fear and anxiety about this new disease and other strong emotions can be overwhelming, and workplace stress can lead to burnout. How you cope with these emotions and stress can affect your well-being, the well-being of the people you care about, your workplace, and your community. During this pandemic, it is critical that you recognize what stress looks like, take steps to build your resilience and manage job stress, and know where to go if you need help.

Recognize the symptoms of stress you may be experiencing.

- **G** Feeling irritation, anger, or in denial
- □ Feeling uncertain, nervous, or anxious
- □ Lacking motivation
- □ Feeling tired, overwhelmed, or burned out
- □ Feeling sad or depressed
- □ Having trouble sleeping
- □ Having trouble concentrating

Know the common work-related factors that can add to stress during a pandemic:

- \Box Concern about the risk of being exposed to the virus at work
- **D** Taking care of personal and family needs while working
- □ Managing a different workload
- □ Lack of access to the tools and equipment needed to perform your job
- **□** Feelings that you are not contributing enough to work or guilt about not being on the frontline
- □ Uncertainty about the future of your workplace and/or employment
- □ Learning new communication tools and dealing with technical difficulties
- □ Adapting to a different workspace and/or work schedule

Follow these tips to build resilience and manage job stress:

- Communicate with your coworkers, supervisors, and employees about job stress while maintaining social distancing (at least 6 feet).
 - \circ Identify things that cause stress and work together to identify solutions.
 - Talk openly with employers, employees, and unions about how the pandemic is affecting work. Expectations should be communicated clearly by everyone.
 - Ask about how to access mental health resources in your workplace.
- Identify those things which you do not have control over and do the best you can with the resources available to you.
- Increase your sense of control by developing a consistent daily routine when possible ideally one that is similar to your schedule before the pandemic.
 - Keep a regular sleep schedule.
 - Take breaks from work to stretch, exercise, or check in with your supportive colleagues, coworkers, family, and friends.



How to Cope with Job Stress and Build Resilience During the COVID-19 Pandemic (cont'd)

- Spend time outdoors, either being physically active or relaxing.
- If you work from home, set a regular time to end your work for the day, if possible.
- Practice mindfulness techniques.
- Do things you enjoy during non-work hours.
- Know the facts about COVID-19. Be informed about how to protect yourself and others. Understanding the risk and sharing accurate information with people you care about can reduce stress and help you make a connection with others.
- Remind yourself that each of us has a crucial role in fighting this pandemic.
- Remind yourself that everyone is in an unusual situation with limited resources.
- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting and mentally exhausting
- Connect with others. Talk with people you trust about your concerns, how you are feeling, or how the COVID-19 pandemic is affecting you.
 - Connect with others through phone calls, email, text messages, mailing letters or cards, video chat, and social media.
 - Check on others. Helping others improves your sense of control, belonging, and selfesteem. Look for safe ways to offer social support to others, especially if they are showing signs of stress, such as depression and anxiety.
- If you feel you may be misusing alcohol or other drugs (including prescription drugs) as a means of coping, reach out for help.
- If you are being treated for a mental health condition, continue with your treatment and be aware of any new or worsening symptoms.

Source: <u>cdc.gov</u>



MANAGING CORONA VIRUS (COVID-19) ANXIETY

| For You -Avoid excessive exposure to media coverage | For Kids -Reassure them that they're safe -Let them talk | | | | |
|---|---|--|--|--|--|
| -Connect through calls/text/internet | about their worries -Share your own | | | | |
| -Add extra time for daily stress relief | coping skills -Limit their news | | | | |
| -Practice self-care -Focus on your //, mental health | exposure -Create a routine & structure | | | | |
| For Quarantine/Isolation -Keep in contact with your loved ones via social media, texts, and phone calls | | | | | |
| -Create a daily self-care routine -Keep yourself busy: games, books, movies | | | | | |
| -Focus on new relaxation techniques | | | | | |







Take a break



Practise relaxation techniques



Know that you are not alone in this problem

Source: Ministry of Health, Malaysia



Eat nutritious food & balanced meals



Manage your emotions



Talk to someone you trust with your issues



Repeat positive affirmations to yourself



Believe that you have given your best



counselling

Bernama Infographics



Doctor, Heal Thyself: Physician Burnout in the Wake of COVID-19

Physician burnout was an epidemic BEFORE the COVID-19 pandemic. According to a 2018 study, 400 physicians die by suicide each year – double that of the general population. In addition, doctors have the highest suicide rate of any profession in the U.S including combat veterans. From an economic standpoint, studies estimate that physician burnout is costing the health care system approximately \$4.6 billion per year. So, how do we stop this dreadful reality? Read on (HINT: it's NOT through resilience and wellness trainings).

Burnout Isn't Just Stress

Many doctors view medicine as a calling, entering the field with immense altruism paired with a passion for science and healing the sick. The erosion of these intrinsic motivators leads to burnout which psychologist Christina Maslach defines as a syndrome of emotional and physical exhaustion, depersonalization and diminished personal accomplishment.

"The stress of long hours, no sleep, poor eating, inadequate protection, the fear of contaminating loved ones, the fear of dying and seeing patients die no matter what you do, the disrespect by hospital administrators and the fear of being fired, all remain the reality for those who are in the thick of things," denounced Lynette Charity, MD, an anesthesiologist who speaks nationwide about physician burnout.

Studies also show that burnout is associated with negative clinical outcomes: decreased quality of patient care; increased number of medical errors; and higher rates of addiction, depression and suicide among physicians.

Burnout has nothing to do with weakness, laziness or incompetence. "The prevailing attitude," report Pamela Hartzband, MD and Jerome Groopman, MD in a recent NEJM article, "was that burnout is a physician problem and those who can't adapt need to get with the program or leave." Turns out that structural and systemic issues are heavy culprits. Despite lip service to "patient-centered care," many physicians believe the current healthcare system is propelled by money and metrics, according to Hartzband and Groopman. Doctors are well-meaning and willing to work long hours, and hospital executives know this and exploit it, as Danielle Ofri, MD aptly asserts in The Business of Health Care Depends on Exploiting Doctors and Nurses.

Why the COVID-19 Pandemic Will Worsen Doctor Burnout

The medical field is at a crisis. This pandemic has exposed many cracks in the U.S. healthcare system. From inadequate testing and personal protective equipment (PPE) to overcrowded emergency departments, frontline health staff are putting their lives at risk to care for highly infectious patients debilitated by COVID-19. And yet medical professionals are responding to this crisis with unprecedented selflessness, resilience and compassion.

"For many physicians, COVID-19 may be the proverbial straw that breaks the camel's back as they isolate themselves physically from their family and friends while encountering a surge of sickness and death," said Nisha Mehta, MD, radiologist, physician advocate and keynote speaker.



Doctor, Heal Thyself: Physician Burnout in the Wake of COVID-19

Here are a few real-world examples. About a month into the pandemic, at the end of a difficult shift, an infectious disease physician with 20 years of experience, texted me the following: "Just admitted a 28yo pregnant woman in 2nd trimester w COVID. About to get intubated. I hate these days." Two weeks later, this same physician texted: "I just started sobbing. I mean, bawling. But in the bathroom so my 6yo wouldn't see."

Tangible Solutions Moving Forward

Some hospitals have created the position, Chief Wellness Officer. Others have offered resilience and meditation workshops, social hours and tips for maximizing productivity. But, according to Hartzman and Groopman, none of these "solutions" address the underlying problem: a profound lack of alignment between caregivers' values and the reconfigured health care system. Here are some strategies that may actually curtail the wave of physician burnout and suicide:

- 1. **Reduce administrative burden.** This includes prior authorizations, disability paperwork and the electronic medical record (EMR) which has simply become a burdensome billing tool. "Let the bean counters and the C-Suite collect the data and enter it into the EMRs," suggested Dr. Charity, adding: "Provide scribes for the doctors."
- 2. Flexibility over schedules. A 2017 study showed that physician input in scheduling was one of the few systems solutions that reduced burnout as it allowed for individual practice styles and patient interactions.
- 3. **Mental health support.** Because burnout can lead to depression, anxiety, PTSD and secondary trauma, appropriate and timely mental health treatment is critical and can include counseling and medications.
- 4. **Reduce gender bias.** The National Academy of Medicine reported that burnout may be 20-60% higher among female vs male physicians. Over 70% of women doctors experienced gender discrimination; they are consistently paid less than their male counterparts, less likely to be referred by their professional titles and less likely to be promoted. Female physicians also spend 8.5 additional hours per week on childcare and other domestic duties, while men reported spending an extra 40 minutes on domestic work.
- 5. **Diversify doctor voices.** We need more women and women of color to be in decision-making positions. Minority voices are not being heard, and they are being disproportionately harmed.
- Speak out. If you're a physician who's going through a hard time, I promise you you're not alone. Please talk to somebody. And if you see a colleague suffering, please get her/him help. You may just be saving a life. Call National Suicide Prevention Lifeline 1-800-273-TALK (8255).

Medicine is a calling for many. But is it really worth dying for? I don't think so. Doctors are people, too. And that's not being trite. In order to stem the tide of physician burnout and suicide, we all have a role to play. If we want our doctors to be whole and full of joy, we must reaffirm their humanity and their value in society. Medical culture and health care systems must change – but this will only happen when they're forced to change. Physicians must first acknowledge and heal their own pain and suffering - for their sake and that of their patients and communities.

Source: forbes.com. Written by Lipi Roy, MD, MPH



Many of us are currently living without margins - the space to handle life's simplest stresses. It can happen after being mentally stretched and dealing with chronic stress for too long. Basically, we are left with zero margin for error. It also means that we don't realize we're at our max until it's too late. Before we know it, we've hit the wall.

It's from Dr. Åsberg that I learned about "hitting the wall." She describes this as the moment "where some additional burden is placed on the employee and they experience a mental break." She showed me the evolution of this disorder over an 18-month period. An employee tends to experience small ebbs and flows of stress and then suddenly, a cliff. That one stressor isn't any different from any others, it's just the final blow - the straw that breaks the camel's back. The margins eventually give way.

A brand-new survey of 3,900 employees and business leaders across 11 nations, led by The Workforce Institute at UKG (Ultimate Kronos Group) and Workplace Intelligence, discovered that burnout and fatigue are equally concerning for employees working remotely (43%) and those in a physical workplace (43%). Overall, three in five (59%) employees and business leaders say their organization has taken at least some measures to guard against burnout, though nearly a third (29%) of employees wish organizations would act with more empathy.

The key word here is empathy. In my communication with leaders, I encourage them to rethink the definition of empathetic leadership - particularly as it pertains to preventing burnout. We tend to connect empathy to the golden rule, "Do unto others as you would have them do unto you." But I don't believe that goes far enough. If you authentically want to demonstrate empathy you have to "Do unto others as they would have done unto themselves." That requires stepping outside of your own needs, assessing and removing bias and privilege, actively listening to your people, and then taking action. I did discover some bright spots in my research - there are plenty of leaders who are working tirelessly to bridge the divide. During interviews for my book, I wandered into these stories of authentic empathy - the use of golden rule 2.0 - to stop burnout from rapidly escalating. These leaders were (and still are) pivoting their policies and practices at lighting speed - attempting to stay one step ahead of the pandemic's destructive path. All of them are learning on the fly and abandoning old thinking for new approaches, as they realized that what may have been helpful at the start of the COVID-19 lockdown could quickly become harmful. For example, they realized that asking employees to spend hours on end on video conferences, and then expecting them to come back on for an afternoon happy hour or morning yoga, was defeating the purpose of those activities and turning well-being into workload.

Pivot for Your People, Not Just Your Products

Todd McKinnon, CEO of Okta, says he realized during the pandemic that his people weren't taking the time off they needed to recuperate. "The data shows that, at home, our staff were kind of working 24/7." Although he assumed that giving Fridays off would help, his staff just ended up working Saturdays because the workload remained the same. So, he decided to change the deliverables. "If you really want to take the pressure off the team, you have the adjust the workload."

Although the payoff for Okta employees remains to be seen, McKinnon has the right idea here. First, we leverage data-based decisions to quickly assess what is at the root of the stress. Then, we employ upstream strategies to tackle the problem. And, being patient and supportive about people's fears right now will be critical to preventing burnout.

Take for example, Eugenie Fanning, VP of People at Squarefoot, a tech-enabled commercial real estate company based in Manhattan, who shared in our interview that during the pandemic, reinforcing trust has helped to mitigate burnout. Understanding that there was fear about returning to the office, her team went far beyond the standard safety protocols in an effort to reduce anxiety for their staff.

Employees had the autonomy to choose when they would return, and for many, the office was a respite from working at home. Parents with children under 18 comprise almost one-third of the U.S. workforce and many of them are suffering. Nearly half of parents (46%) saying their stress level is high (between 8 and 10 on a 10-point scale where 1 means "little or no stress" and 10 means "a great deal of stress") according to the American Psychological Association's report, "Stress in the Time of COVID-19."

It's likely why my conversation with Jamie Coakley, VP of People for Electric, a New-York based IT Solutions company, resonated. She has been working to address the major impact on working parents. Coakley set up a parent forum to open up discussions about how parents are faring during the pandemic. It was after seeing an exchange between two senior VPs that she realized how challenging it had become. One senior executive just put it out there, "How are you all doing this?" The response, "We're not. You're either a bad parent or a bad employee.

Coakley had already instituted flex hours, planned to introduce a childcare stipend, and opened the office for anyone who needed it. But she says, "We've started to brainstorm that next layer of support. Flexible hours are not enough. It's not really solving for the day-today challenges of having to be in two places at once. So, my job now is just better programming and support for our parents."

Both of Jamie and Eugenie's examples are rooted in empathy. Their actions tell a story. "How can I make you feel safe? What else can I do to help? I'm not afraid to keep learning. I can do more."

Dr. Chris Mullen, Ph.D., executive director of UKG, agrees: "Even though the economy is struggling, organizations have a tremendous opportunity to emerge from the COVID-19 pandemic even stronger than before. By going back to the foundational needs that should form the basis of the employer-employee relationship - physical safety, psychological security, job stability, and flexibility - they will cultivate newfound trust and empathy."

Know Your Workforce

Elaine Davis, Chief Human Resources Officer at Continuum Global Solutions, leads an organization of mostly hourly workers - about 17,000 - who are based in call-centers. In mid-March, she moved all of them to remote work - no small feat. Davis knows that her staff, comprised of majority female workers and many single moms, are overwhelmed by the juggle right now. The biggest need for her employees? Davis says it's pay. Obviously, in any organization, appropriate compensation is a top priority. But, for many hourly workers, getting paid could mean the difference between getting access to medical care, keeping the lights on, eating properly, or even preventing an eviction - situations that are becoming even more precarious during the pandemic.



According to a survey of more than 3,000 hourly workers by Branch, a wellness platform turned challenger bank, approximately 80% of hourly workers had less than \$500 saved for an emergency, and 52% had \$0 saved because of the pandemic - a 12% increase from last year; 76% had already delayed or missed a bill payment. In light of this reality, Davis joined up with the CEO of Branch, Atif Siddiqi. His company had already been partnering with employers that wished to give employees' access to a portion (50%) of their pay before payday. Particularly for employees who'd been hit hard from COVID-19, it helped to keep their heads above water.

The Psychological Safety of Physical Safety

If you've read my other Harvard Business Review articles on burnout, you'll see conversations with Dr. Edward Ellison, a medical doctor and co-CEO of The Permanente Federation, frequently cited. He wrote about the massive negative impacts of physician burnout in the Annals of Internal Medicine, and has spent a large part of his career prioritizing strategic burnout prevention in the places he's worked.

When I spoke to Dr. Ellison this time around, he was right in the epicenter of the fires ravaging his home state of California. He'd previously created practices and procedures for the communities he serves in response to the wildfires - such as increased virtual and in-home care. But now with COVID-19, he's trying to juggle both situations, all while prioritizing the safety of his staff. He says, "When you talk about the biggest questions related to burnout and mental health, the first thing our staff wanted to know at the outset of the pandemic was, 'Can you keep me safe and can you keep my family safe?' I had to ensure that they were also taking care of themselves."

Although Dr. Ellison says he's worried about the potential risk of his employees experiencing posttraumatic stress disorder (PTSD) as a result of this "horrifying experience," he's taken away some critical learnings.

"First, we realized we can be agile and nimble - we reacted very quickly. Second, we realized how well our members, patients, physicians, and staff embraced telemedicine/telehealth. And third, there was an undeniable commitment to interdependence and selflessness - a leaning-in and helping approach to the job each day, which was something that kept us in really good stead."

And yet, it always comes back to relationships. Friendships at work - whether in person or virtual - can be the difference between surviving these extremely stressful events, or burning out entirely. "I think there's a tendency in the pandemic for everyone to feel alone, especially with physical distancing," says Dr. Ellison. "But for caregivers, it becomes all about what connects you. Often, that's the camaraderie with other members of the team, and the sense that team members can lean on one other to deal with the isolation and grief - both in their personal lives and when they're losing patients they've come to really care for."

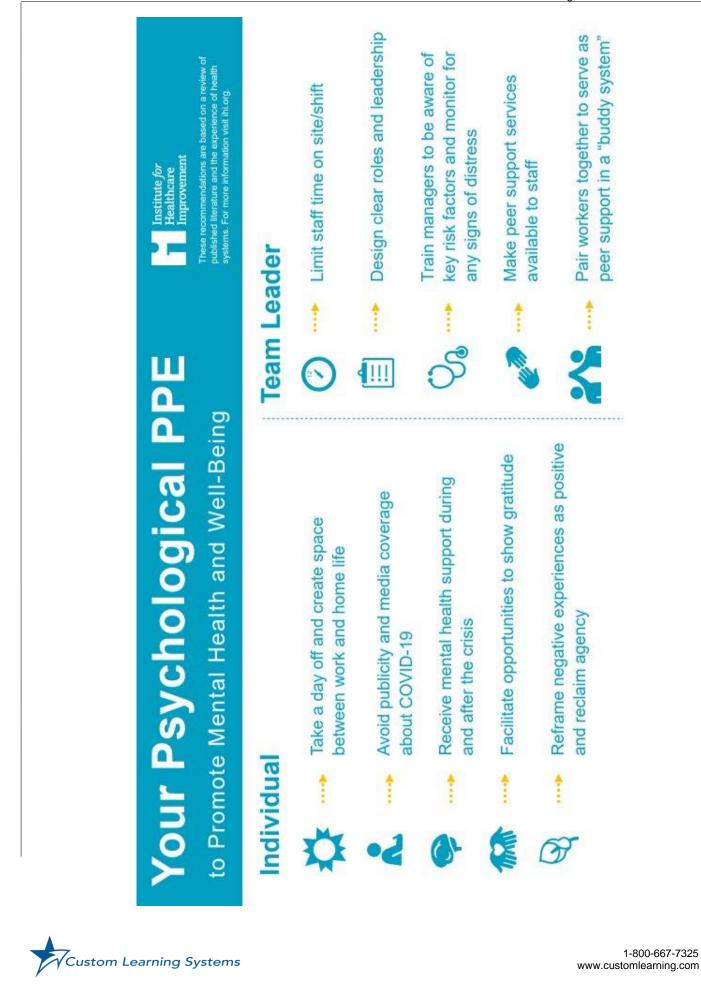
Although some situations may seem more dire, each of these issues is a real threat to the mental health and psychological safety of our people. We, as leaders, all have to meet different needs for the individuals we serve. If there's one more lesson we can take away from the pandemic, it's that burnout was always there, but in times of real stress, it explodes.



What is compelling about Dr. Ellison's experience and the others I mention is their uniqueness. From balancing family burnout, to the fears associated with entering a physical office, to managing overwork, to protecting lives, they reinforce the reality that taking a one-size-fits-all approach to burnout prevention won't help. Resilient leaders make quick pivots and remain nimble. Empathetic leaders dial in to the needs of their employees and adjust to the moment. And human-centered leaders give their companies a fighting chance to flourish in the middle of a global pandemic.

Source: hbr.org. Written by Jennifer Moss





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