

# ADVICE FOR SUSTAINING **STAFF WELLBEING** IN CRITICAL CARE DURING AND BEYOND **COVID-19**

The anticipated needs of staff will vary across each of the phases, consider the following support mechanisms:

Phases	Issues and likely impact	Needs and recommended approach
<b>Pre-phase:</b>  <b>No cases on unit</b>	Anticipatory anxiety about what's on its way. Inability to think clearly, feeling overwhelmed, planning. Communication errors. Tension in working relationships. "Readiness" burnout.	Increase a sense of control - the team are in a safe pair of hands. Reassurance and planning. Communication updates are key (you may be thinking ahead, they are thinking now). Escalation plan. Support to managers who are making plans and holding the stresses.
<b>Initial phase:</b> <b>Case 1</b>	Starting to get going, lots of trying out, lost time, repetition and frustration. Further anticipatory anxiety	War room - planning central to allow centralised communication. Management are visible and available. Regular communication bulletins and open forums. Have runners in PPE areas. Promote peer support. It's okay to say you are not okay - Senior staff to model this. Rotate workers from high-stress to lower-stress functions. Small pre-brief and debrief the day. Partner inexperienced workers with their more experienced colleagues. Psychological first aid - drop in sessions for staff with employee wellbeing if you have it. Ensure the basics: Breaks, Facilities (food trolley in staff room), Sleep, Days off. Manage visitors
<b>Core Phase:</b> <b>Full scale -Multiple cases</b>	Biggest risk period. Fear infection and implications for families. Overwhelming workload. Full go mode- adrenalin and automatic pilot. Exhaustion. Moral distress as healthcare rationed. Distress linked to personal or family experience of COVID-19. Experience fear or stigma when out in public.	Debriefing. Staff 1-1 and group sessions. Learning and preparation for the future. Organise thanks and reward. Look out for signs of PTSD in staff: <ul style="list-style-type: none"> <li>• on edge and hyper arousal, poor sleep</li> <li>• flashbacks or re-experiencing</li> <li>• avoidance of reminders.</li> </ul>
<b>End Phase:</b> <b>Immediate aftermath</b>	Exhaustion and post trauma recovery / stress	Debriefing. Staff 1-1 and group sessions. Learning and preparation for the future. Organise thanks and reward. Look out for signs of PTSD in staff: <ul style="list-style-type: none"> <li>• on edge and hyper arousal, poor sleep</li> <li>• flashbacks or re-experiencing</li> <li>• avoidance of reminders.</li> </ul>
<b>Long term</b>	Some ongoing PTSD Reflection and learning	Debriefing. Staff 1-1 and group sessions. Learning and preparation for the future. Organise thanks and reward. Look out for signs of PTSD in staff: <ul style="list-style-type: none"> <li>• on edge and hyper arousal, poor sleep</li> <li>• flashbacks or re-experiencing</li> <li>• avoidance of reminders.</li> </ul>