

# Who am I? Twitter: @Profngreenberg

Psychiatrist and Professor at King's College London

Managing Director of March on Stress Ltd

President Elect of the Society of Occupational Medicine

Served in the Royal Navy for 23+ years

Past RC Psychiatrists Chair of Occupational Psychiatry SIG and Lead for Trauma

Have been part of NHS England's Expert Advisory Group [on staff mental health and wellbeing]

# Risks to mental health to healthcare staff

**Traumatic exposure** 

**Workload and shift patterns** 

**Home life stressors** 

**Moral injury** 

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# **Moral Injury?**



Profound distress following a 'transgressive act' that violates one's moral or ethical code

well - moral distress - moral injury - illness

# **Potential Morally Injurious Events**

#### **Commission**

I did things I should not have done

I am a monster

My team did things they should never have done

#### **Omission**

I froze and people died

I just let it happen

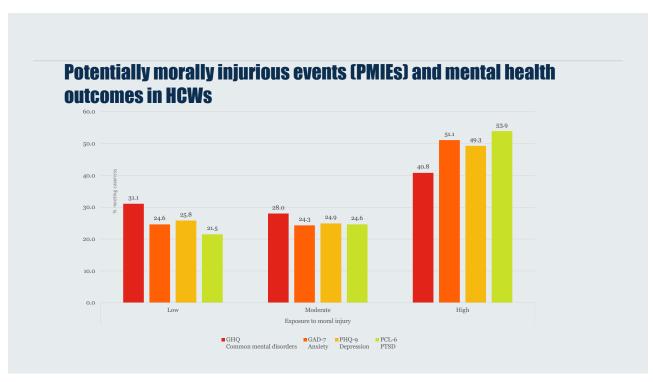
#### Betrayal loften, but not always, by a higher authorityl

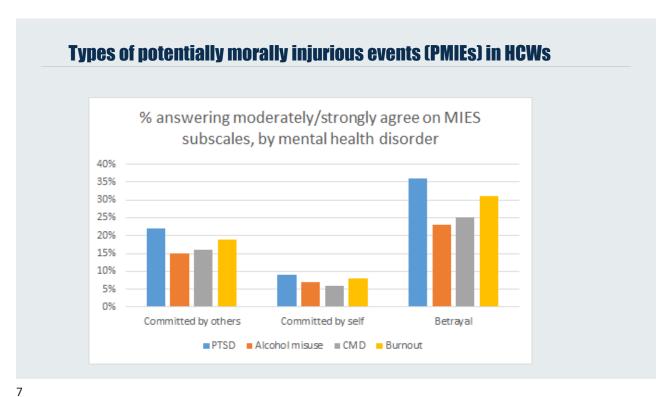
My supervisor had no interest in my safety They lied to cover up their errors



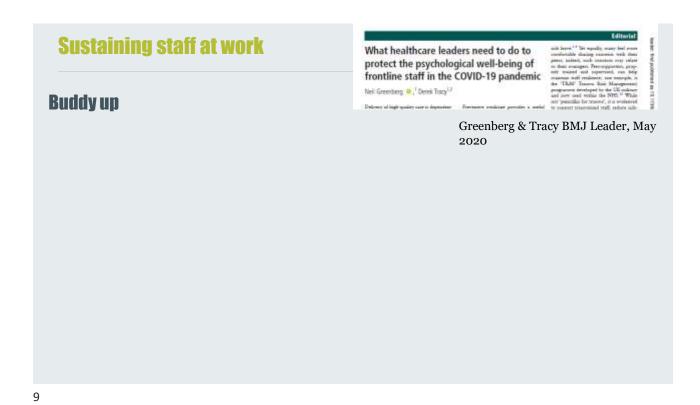


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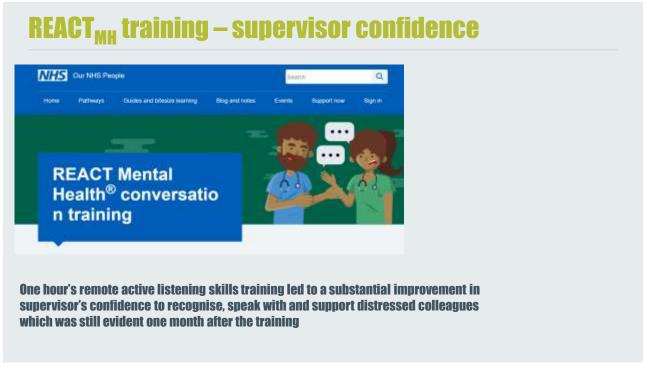


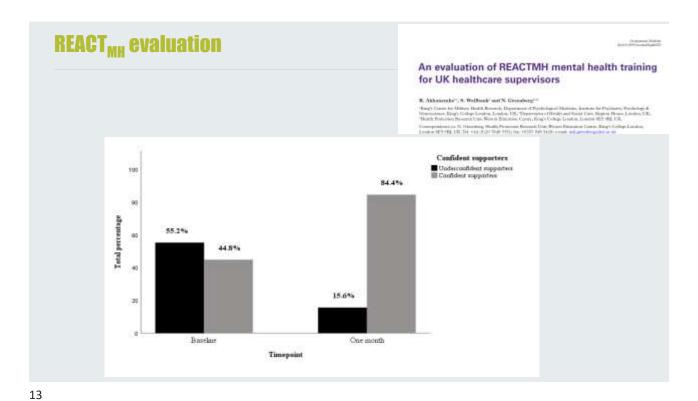


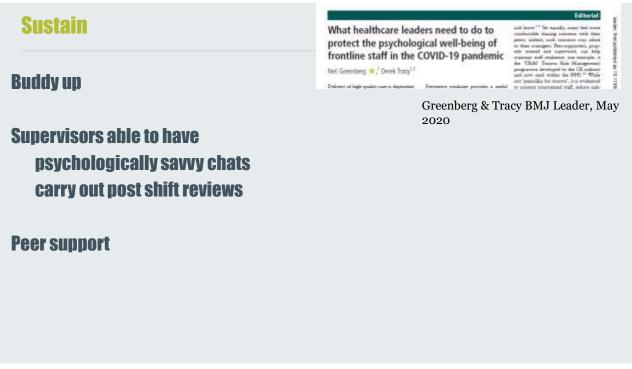
Who do deployed staff talk to? 100 90 military peer ouse or another military peer civilian chain of medical w elfare group same group not on friends/peer services services family command deployment member same group deployment Trauma Society

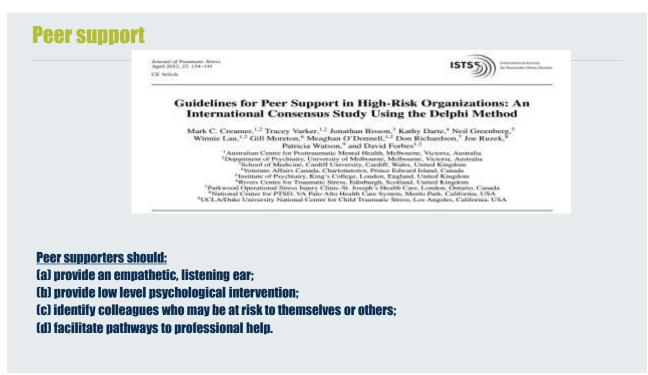
Greenberg et al, JMH, 2003



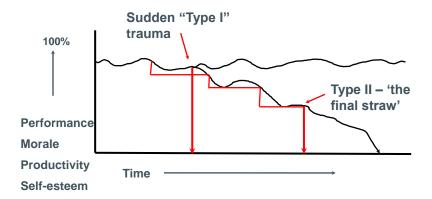








## Type 1 and type 2 traumas





## TRiM – Trauma Risk Management





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## **What Peer Practitioners are not!**

Counsellors
Therapists
Pseudo-psychologists
Group Huggers
Scented Candle users



## Sustain

### **Buddy up**

**Supervisors able to have** psychologically savvy chats carry out post shift reviews

**Peer support** 

But don't do.....

What healthcare leaders need to do to protect the psychological well-being of frontline staff in the COVID-19 pandemic Neil Greenberg, 10,7 Derek Tracy<sup>1,7</sup>

Greenberg & Tracy BMJ Leader, May

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# How to deal with PTSD

NHS National Institute for Clinical Excellence

What isn't recommended...

### • "Psychological Debriefing"

- •For PTSD, drug treatments NOT a first line treatment (different for depression)
- Not Benzodiazepines

What is recommended...

- "Active monitoring"
- ·Checking in after a month
- •Trauma-focused treatments (CBT and EMDR) for adults and children if unwell [EMDR slightly less evidenced that TF-CBT]

## Sustain

### **Buddy up**

**Supervisors able to have** psychologically savvy chats carry out post shift reviews

**Peer support** 

Forward mental health supervision and support (PIES)

What healthcare leaders need to do to protect the psychological well-being of frontline staff in the COVID-19 pandemic Nei Grenteg 0,7 Deek Traq<sup>1,7</sup>

Greenberg & Tracy BMJ Leader, May

22

# **'Forward' Psychiatry**

This refers to a nip it in the bud approach

Can be put in place by managers and/or health professionals who adopt a 'return to duty' approach **Four principles (PIES)** 

**Proximity Immediacy Expectancy Simplicity** 

Article Frontline Treatment of Combat Stress Reaction: A 20-Year Longitudinal Evaluation Study Objective: The purpose of the study was to contact the Despitation (Doyna) of the trooping of the property of Zahava Solomon, Ph.D. Ramii Shklar, Ph.D. Mario Mikulincer, Ph.D.

# The aim for recovery land evolutionl



Aim not just to avoid illness but foster Post Traumatic Growth (PTG) which is:

- 1. a concept which describes
- 2. positive psychological change
- 3. experienced as a result of 'struggling with' [or experiencing] highly challenging, highly stressful life circumstances

There is a debate about whether someone needs to 'struggle' to experience **PTG** 

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## **Recovery and evolution**

### Thank you and provision of information

- **Personalised**
- **Family**
- Reminder of services available



#### How might the NHS protect the mental health of health-care workers after the COVID-19 crisis?



difference. Houlds care evident base contended with the sol of silection, and to extension infecting their barriers with concerns warringly were in some, studies with concerns warringly were in some, studies consist of practical disservabile assessmenting the opportunity. Maik, Asian, and miscoriny often staff. Additionally for psychological graneth: Proactive managem should sensor working is likely to leave half its own challenges. Sollow the welforce, which is both logally regressed and some staff will unabulateally three in such incurrelations, what staff degrees.



Greenberg, Brooks, Wessely & Tracy Lancet Psychiatry, May 2020



## **Recovery and evolution**

#### Thank you and provision of information

#### **Graded return to work**

- Take leave due
- **Extra leave**
- Reconnect
- **Downtime (switch off)**
- **Personal reflection**

#### How might the NHS protect the mental health of health-care workers after the COVID-19 crisis?



Throughout the COVID-19 citis, many health-case, developament and saruthe that indicounts of last Throughout the COVID-19 cells, many hostife-case weekers have worked his phase in high-president and controlled extraordises and record and an extraordise and an ext Some staff will analout endly throw in such aircurreture



Greenberg, Brooks, Wessely & Tracy Lancet Psychiatry, May 2020



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## **Recovery and evolution**

## Thank you and provision of information

#### **Graded return to work**

### **Time for reflection/meaning making**

#### How might the NHS protect the mental health of health-care workers after the COVID-19 crisis?



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Greenberg, Brooks, Wessely & Tracy Lancet Psychiatry, May 2020



## **Reflective Practice**

- Meaningful, leader-led, open discussion
- Discussion about: Facts, Impact, functioning Now & Education
- Aims to:
  - Create 'a meaningful narrative'
  - Reduce stress
  - · Improve working relationships
- Needs to take account of the multiple levels within organisations especially where staff feel let down/betrayed

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## **Recovery and evolution**

## Thank you and provision of information

#### **Graded return to work**

### **Time for reflection/meaning making**

#### How might the NHS protect the mental health of health-care (1) workers after the COVID-19 crisis?

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Greenberg, Brooks, Wessely & Tracy Lancet Psychiatry, May 2020

## Supervisor discussions esp for higher risk/secondary stressors

ORIGINAL ARTICLE

J Nerv Ment Dis 2021:00: 00-00

Health-Promoting Leadership During an Infectious Disease Outbreak

A Cross-Sectional Study of US Soldiers Deployed to Liberia

health-promoting leadership focused on psychological Health was associated with decreased odds of PTSD, depression, anxiety, and burnout, and increased odds of high morale and avoiding unnecessary risk

## **Recovery and evolution**

How might the NHS protect the mental health of health-care workers after the COVID-19 crisis?

Thank you and provision of information

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**Time for reflection/meaning making** 

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Supervisor discussions esp for higher risk/secondary stressors

### **Ongoing active monitoring**

iaw NICE guidelines

Graded return to work

Self-check tool (protect the person and the employer)



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## **Recovery and evolution**

Thank you and provision of information

**Graded return to work** 

**Time for reflection/meaning making** 

Supervisor discussions esp for higher risk/secondary stressors

**Ongoing active monitoring** 

Timely access to occupationally, focused, evidence based care

How might the NHS protect the mental health of health-care workers after the COVID-19 crisis?



Throughout the COVD-IS inter, many health-use develop a meaningfol natural text indices miss of larm workers have worked larg hours in high pressent. Schools rounds a structured forum for dissociated now. novel ctrumstance, pharacterised by trusters and moral stated to the one precional and social aspects of Alternac' Hould's saw workers have contended with the work, an one such midrace based model risk of infection, and to extension infecting their bandles. Successful incovery planning should insurement the with outcomes werningly were for some training point of mental firms while magnitude the apportunity Maik, Asian, and miscoriny often staff. Additionally for psychological graneth: Proactive managem should sensor working is likely to leave half its own challenges. Sollow the welforce, which is both logally regressed and some staff will unabulateally three in such incurrelations, what staff degrees.



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# Conclusion of what to do for HCW land other key workersl

Do not over medicalise

'Nip it in the bud' approach

Build team support as a priority inc. psychologically savvy supervisors & peer support

**Active line management (PIES) for acute distress** 

### **Recovery and evolution**

- Thank you
- Graded return
- Time for reflection
- Supervisory rtw interviews
- Active monitoring (inc self check)
- Evidence based care

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