

Care Home Managers

Key messages: Promoting Good Mental Wellbeing

Research suggests that there are five core actions we can proactively do to improve our wellbeing and mental health. The “Five ways to wellbeing” is an evidence-based study published by the New Economics Foundation in 2008.

5 Ways to Wellbeing and Good Mental Health

1. **Connect** - Stay in touch with friends, family, neighbours; be there for others, build strong meaningful relationships. Remember, it's OK not to be OK and ask for help.
2. **Keep Learning** – be curious and seek out new experiences. Find the time to ask questions and learn from your service users and colleagues.
3. **Be Active** – do regular physical activity whether that's going for a walk, yoga or the gym. Do some activity that makes you feel good.
4. **Give** – working in the care sector requires vast amount of kindness. Take a step back and appreciate yourself for the work you are doing; caring for those in need.
5. **Take Notice** - Sometimes we are just too busy to notice and be mindful of our surroundings; take time appreciate the world around you and appreciate yourself!



Good mental wellbeing doesn't mean that you will never experience situations you find difficult. But it does mean that you might have resilience to cope when things get tough...

Care Home Managers

What can you do to help your staff?

Skilling up normal principles apply

Staff may feel vulnerable when being asked to undertake tasks that they do not feel trained to do.

- Ensure that training, support, ongoing supervision, and feedback are provided

Staff or students who have been redeployed or had their training interrupted may experience additional stress or anxiety about this move.

- Enable these people particularly to 'buddy up' with an experienced team member and try to offer familiar supervision and support
- Encourage team members to map their new experiences on to their original programmes of study/training, so that all learning makes more sense
- Encourage them to use reflective journals or other methods of documenting their time
- 'Fresh eyes' can sometimes be most useful in seeing what was missed by others; encourage them to openly question for everyone's benefit

Principled and value based good leadership

- High quality leadership is hugely important: be a good role model and follow the principles you are suggesting to your staff
- This means honesty, fairness and transparency about the challenges and ambiguities staff are facing, along with: Good supervision, access to proper equipment, time for rest breaks, quiet rooms, peer support within teams, allowing for questions from colleagues, be aware of staff who may be more vulnerable (e.g. with pre-existing medical or mental disorders) and find appropriate solutions for them

Structured Operational debriefing

- Structured operational debriefs: These are made routine ways to relieve the build-up of stress during a shift by sharing at its end and learning from each other. This sharing has to be blame-free, iterative, reflective, kind and supportive. It cascades and influences compassion and attitudes to each other and residents.
 - Ensure staff do not feel compelled to talk about personal experiences they do not feel ready to talk about
 - It is necessary to have other mechanisms to reach out to those who do not immediately participate (or even more worryingly, refuse to participate) in offers of support or processes intended to support mental wellbeing
 - We are not superheroes. We need to be looked after too. That is a top priority so that we can carry on effectively in our role or service
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Moral distress and moral injury

- Moral injury occurs when there is conflict between your moral code and the decisions that you and others have had to take. This is a well-recognised risk when difficult decisions have had to be made under pressure
 - Moral injury can result in persistent guilt, shame, self-disgust or disillusion with the team and the task
 - Moral injury can make a person much more vulnerable to mental health problems
 - Team leaders need to help their staff with these dilemmas. Operational team debriefing may help
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- Remember simple things like support from each other buddies, team members and line manager can make a huge difference. Some staff may have additional needs. Support should be considered along the usual pathways for the organisation, locally and using national support services
 - Learning from experiences means that at times decisions or policies may need to be reviewed
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Advice from those who have already faced this pandemic

- Encourage staff not to hesitate to ask you or your institution for help
 - Encourage them to call friends or family – it helps to avoid them feeling isolated inside a closed environment
 - Ensure you and your staff have breaks during the day: you will be more useful if you're well rested than if you are too tired
 - Think about putting into place rotations between high stress duties and lower stress duties
 - Think about working in pairs, between junior and senior professionals. This facilitates support and management of stress
 - Make use of existing support mechanisms in your organisation
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Having the right physical resources in place supports psychological safety

- The correct PPE in plentiful supply
- Adequate rest breaks
- Good quality food available

- Assisting with maintaining contact virtually with loved ones
 - Psychological safety within teams has been shown to reduce errors
 - Emotional support does not stand in place of physical needs and resources
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Staff need to look after their basic physical needs

- Stay hydrated, eat and have toilet breaks
 - If it gets too hot – tell others and take a short break
 - Beware exhaustion –
 - Constant awareness and vigilance regarding infection control is a pressure – and it's important to recognise it
 - Be aware that masks etc can rub the skin and distract; use a barrier cream on cleansed skin
 - Counter the physical isolation of PPE – staff need to be able to communicate with others when possible, including of course residents – remember residents may also feel overwhelmed
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Stigma: Social Care Workers may face Stigma

- Social care workers can be affected by both self-critical and external stigma related to the COVID-19 virus and its impact, such as:
 - Self-stigma about voicing their needs and fears
 - Managers can help by empathising, pointing out that stigma is unsurprising, if distressing within the COVID-19 situation, and highlighting camaraderie at work
 - Others' fear of contact with those treating patients with COVID-19
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Home, Work and redeployment

- Potential trauma plays out across more than one aspect of staff members' lives. Work, home and friendships may be affected over time
 - Set up a system for staff to feedback on management initiatives so that concerns can be raised and responded to rapidly in a visible way
 - If staff are being moved away from their home area, or cannot go home because of a fear for their loved ones, this can exacerbate guilt at not being at home to support their families
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Look out for staff and supervisors who may be struggling

- They may show you this through what they say or how they behave
- Be supportive and compassionate. It is not their fault but rather the situation
- People may display longer term stress and even burnout in an apparently disproportionate response to a single incident
- Allow for people who are new to an environment or situation often need longer to process what's happening.

Source: Health Education England

<https://covid.minded.org.uk/helping-each-other/>