

Report Title	Psychological wellness post Covid 19 - Overview and Scorecard		
Sponsoring Executive	Raffaella Goodby, Director of People and OD		
Report Author	Raffaella Goodby, Director of People and OD		
Meeting	Public Trust Board	Date	7 th May 2020

1. Suggested discussion points *[two or three issues you consider the Committee should focus on]*

The Trust has recognised that the Covid 19 Pandemic will give rise to stress, anxiety, panic and have a long lasting impact on the mental health of our colleagues, which, in turn, will impact on the quality of patient care. The Trust has developed a comprehensive set of interventions to support colleagues during Covid 19, in the three main phases of prepare, active and recovery, which have received positive feedback and kept absence at a manageable level, it is 7.7% at the time of writing this report, inclusive of colleagues shielding.

The Trust has developed a comprehensive long term offer to support our colleagues to remain mentally well and resilient, as we plan for the recovery phase of Covid 19. We recognise that this will give rise to new pressures for our colleagues if there are future surges and as they reflect, process and heal from the experiences they have had. The paper sets out the data points, in a scorecard, that we will use to measure whether these interventions and the investment is having a sustained positive impact.

We have partnered with a well-known organisation 'March on Stress' to help deliver an offer for psychological support across the Trust. We will also remain open to working with other partners including our local Mental Health Trusts following evaluation of this work.

2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan	X	Public Health Plan		People & Education Plan	X
Quality Plan	X	Research & Development		Estates Plan	
Financial Plan		Digital Plan		Other <i>[specify in the paper]</i>	

3. Previous consideration *[where has this paper been previously discussed?]*

People and OD Committee April 2020

4. Recommendation(s)

The Trust Board is asked to:

- a. **DISCUSS** the interventions in this paper and their application to the Covid 19 Pandemic
- b. **DISCUSS** the proposed scorecard with relevant data points
- c. **RECEIVE** an update at a future Board meeting.

5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register	x	Risk 114				
Board Assurance Framework	x	BAF 1				
Equality Impact Assessment	Is this required?	Y	x	N	If 'Y' date completed	1 st July
Quality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to the Public Trust Board: 7th May 2020

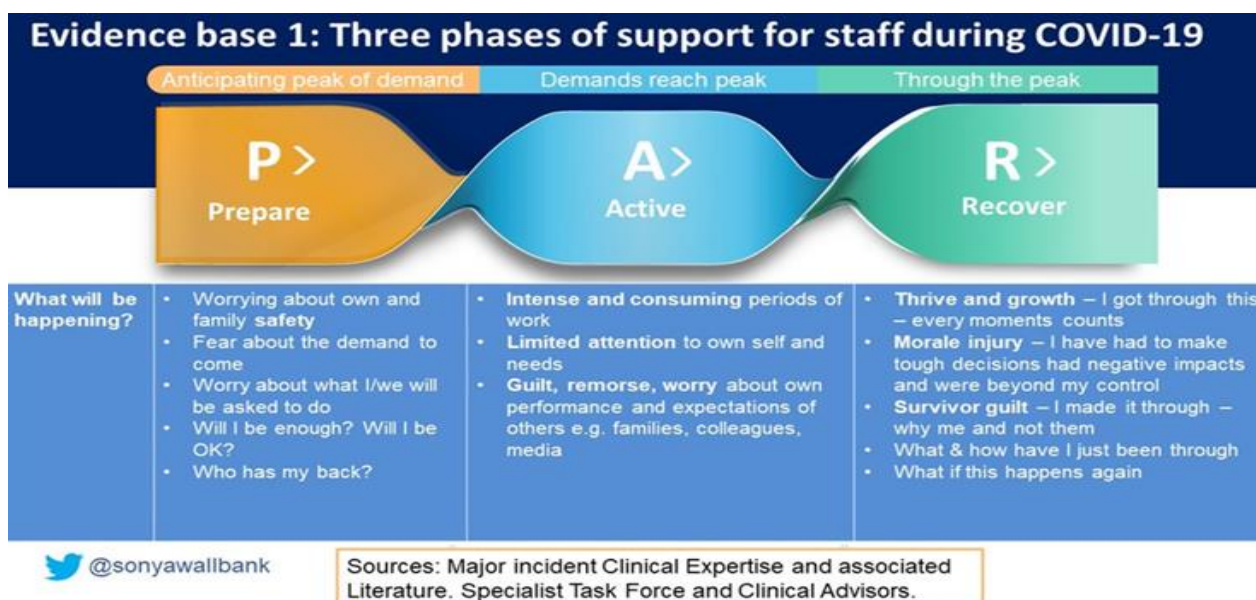
Covid 19: Psychological Interventions

1. Introduction

- 1.1 The Trust has recognised that the Covid 19 Pandemic will give rise to stress, anxiety, panic and potentially have a long lasting impact on the mental health of our colleagues, which , in turn, will impact on the quality of patient care and the success of the recovery phase if colleagues are absent due to illness related to mental health.
- 1.2 The Trust has responded developed a suite of well-being interventions that are designed to support colleagues immediately, in the medium term whilst responding to the pandemic, and in the longer term as feelings of guilt or trauma surface 'after' the event. For example post traumatic stress disorder and other longer mental health issues such as anxiety and depression.
- 1.3 The Trust has set up a temporary well being team, that are providing a 24/7 service, both onsite and remotely. This team are working closely with professional leads who are carrying out professional de-brief interventions, and closely with the charity team on well being in terms of food provision .They are also organising the hotel booking to ensure a wrap around personalised well being service for all colleagues. There are currently 267 colleagues staying in hotels to shield from family or be present at work.
- 1.4 The request on review at Gold Command is to develop and present to the Board meeting a scorecard that can be used to track weekly the effectiveness of the interventions to demonstrate that they are making a difference. It is recognised that this is difficult to do, but that it is why it is necessary.

2. Theoretical model

- 2.1 The Trust has structured the response to the Covid 19 Pandemic in three main phases as outlined in the table above. We want to prepare as best we can for what is to come and to respond proactively and swiftly to feelings of uncertainty and trepidation that arise from the unknown. For example, fear of being redeployed, worry for family members and worry for one's own health and worry arising from caring in PPE for patients or experiencing patients passing away rapidly or unexpectedly. The Trust has adopted the mantra of #kindness from the outset, which has flavoured all of the communication channels including social media, press releases and interactions with our colleagues and patients.



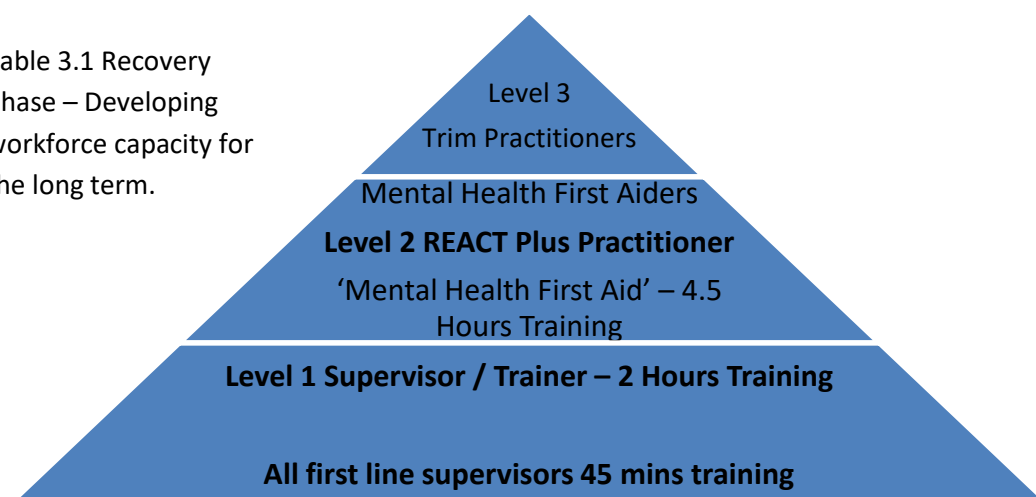
2.2 The People and OD Committee considered the interventions taking place in the Prepare and Active Phase, this paper focusses on 'Recovery'.

3.0 The Recovery Phase

3.1 We have deployed our existing resources to support the pandemic. This includes counselling services, our pastoral junior doctor lead, and our chaplaincy team. Recognising that PTSD is beyond the scale and scope of experience, Gold has requested that we develop a much larger offer which is outlined below.

3.2 The Trust are partnering with 'March on Stress' www.marchonstress.com a well renowned provider who are skilled in supporting people who have experienced trauma or stress, for example after war or traumatic world events.

Table 3.1 Recovery Phase – Developing workforce capacity for the long term.



3.2 Explanation of different interventions

SWBH 'in house' Level 1 Trainers

- Training Time – 2 hours – training delivered by MOS using ZOOM

- 64 planned spaces. All staff above a band 7 in People and OD will undertake this training, for sustainable resources to be delivered in house.
- Estimated time commitment 4x45 minute training sessions across first three months

Level 1 – 'REACT 45 Practitioner' - Front Line Supervisor

- Training Time - 45 Minutes - Training Delivered in House by SWBH Trainers (POD). All Accredited Managers to complete this training (c.750) 'How to have a psychologically savvy conversation'.
- No meaningful time commitment beyond the initial 45 minutes is needed to fulfil this role. It involves having ad hoc informal conversations with colleagues displaying signs of stress and asking if they need any help. It may also involve facilitating 10 minute debriefs at the end of shifts in appropriate teams.

Level 2 – 'REACT Plus Practitioner' – Mental Health First Aider

- Training time – 4.5 hours – training delivered by Zoom using MOS trainers
- As many staff as we deem necessary, currently 60 planned
- Any staff member regardless of position can fulfil this role, same principle of peer to peer support as above applies
- Estimated time commitment of two hours per week per person on averaged across a one month period to have more detailed 1-1 support conversations where needed.
- Pictures will be added to posters in work areas, alongside Health and Safety and Fire Warden.

Level 3 - TriM Practitioners

- Training time – 16 hours across two days – training delivered face to face by MOS on SWBH premises, in a socially distanced way.
- 32 planned spaces
- Any staff member regardless of position can fulfil this role, same principle of peer to peer support as above applies
- Estimated Commitment time of six days per year per person to have highly detailed supportive conversations with colleagues

4.0 Psychological Interventions Scorecard

- 4.1 The general scorecard has been developed to measure both inputs of the psychological interventions (how many people trained) and the predicted outputs (e.g. what is the sickness absence coded to mental health in a certain area). The scorecard will produce

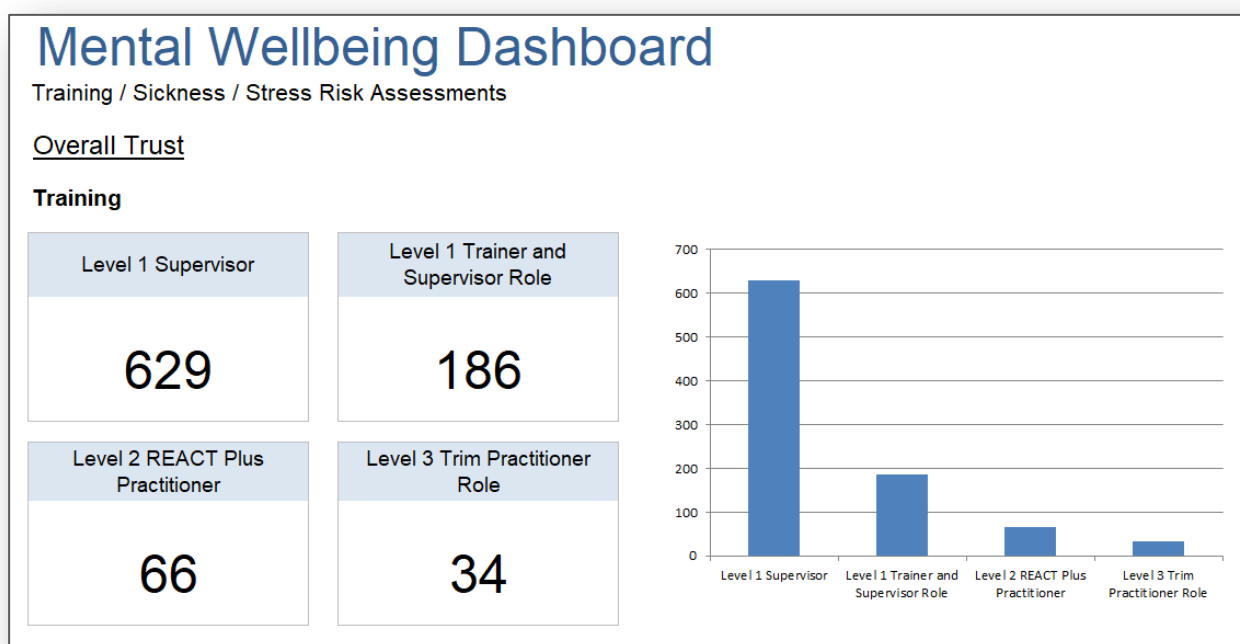
monthly reports, in a similar format to PDR and Mandatory Training reporting, that will be broken down in to departments / wards, to enable local managers, to identify trends and take action. The scorecard would also be considered in Clinical Group Reviews and through the People and OD Delivery Committee.

4.2 However, over coming days we need to work through how we will include mood and mental wellbeing data that includes:

- Mandated health and safety risk assessments, which were due to be implemented in 2019 and are now being rolled out through June and July by HRBPs.
- Thrive take up and mood measure which could give an indication of anonymised individual stress
- Weconnect data on team wellbeing
- Other metrics of the Board's suggestion

This data will need to be in place not less than once a fortnight in Hot Spot areas.

Mock Up Dashboard



The table above shows an example of the training completion overview at Trust level.

Stress risk assessments and sickness absence

Group	Directorate	Department	Long Term Absence			Short Term Absence			Training				Stress Risk Assess
			LT %	LT Abs FTE	Emp Headcount (LT)	ST %	ST Abs FTE	Emp Headcount (ST)	Level 1 Supervisor	Level 1 Trainer and Supervisor Role	Level 2 REACT Plus Practitioner	Level 3 Trim Practitioner Role	
			2.99%	68091.5	3,454	1.97%	44937.2	10,056	629	186	66	34	
Corporate	Finance	NGDOF - Finance Administration											
Corporate	Finance	NGFMG - Operational Finance											
Corporate	Finance	NGFSV - Financial Accounts											
Corporate	Finance	NGPAY - Payroll Services											
Corporate	Finance	NGPJT - Finance Projects Team											
Corporate	Finance	NGSJP - Supplies Dept											
Corporate	Finance	NGFNP - Contracting & Income Te											
Corporate	Operations	BPOUT - Out Patients General											
Corporate	Operations	CFEPP - Medical Engineering											
Corporate	Operations	CFKPS - Car Park & Security											
Corporate	Operations	CFPOR - Portering											

Long Term Absence		
LT %	LT Abs FTE	Emp Headcount (LT)
2.99%	68091.5	3,454

Short Term Absence		
ST %	ST Abs FTE	Emp Headcount (ST)
1.97%	44937.2	10,056

Training			
Level 1 Supervisor	Level 1 Trainer and Supervisor Role	Level 2 REACT Plus Practitioner	Level 3 Trim Practitioner Role
629	186	66	34

Stress Risk Assess
Number of staff completing a stress risk assessment

Columns identifying mental health related absence can be included.

Long Term Absence			Sickness Rate with related Mental Health code	Short Term Absence			Sickness Rate with related Mental Health code
LT %	LT Abs FTE	Emp Headcount (LT)		ST %	ST Abs FTE	Emp Headcount (ST)	
2.99%	68091.5	3,454		1.97%	44937.2	10,056	

Tracking columns can also be included, for example we can apply red flags next to areas with high level of absence due to mental illness that haven't completed any stress risk assessments, for immediate action to be taken.

5.0 Recommendations

The Trust Board is asked to:

- DISCUSS** the interventions in this paper and their application to the Covid 19 Pandemic
- DISCUSS** the proposed scorecard with relevant data points
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Raffaella Goodby
Director of People and OD

30th April 2020

Annex 1 – Excerpt from Plan and Active phases interventions

Annex 2 – Detailed explanation of Table 3.1 Training Interventions

Annex 3 – Recharge Booths on a page (**we**learn)

Extract from People and OD Committee Paper – Prepare and Active Phase Interventions

Counselling and well being support

Our Trust offer a **free and confidential counselling service**. The contact number for Occupational Health is **extension 3306**. Ask for a counselling appointment and leave your phone number. A counsellor will be in touch. Additional counsellors are being added to increase capacity

3.1 A drop in counselling telephone counselling service can be accessed via one of the Trust's accredited counsellors.

- **Linda, Mondays between 7-9pm Telephone 07973664125**
- **Tony, Thursdays between 7-9pm Telephone 07970225929**

3.2 **Health Assured /24/7** are offering SWBH staff remote counselling 24 hours a day. This can be accessed by ringing 0800 783 2808

NHS National Staff support line – launched 8th April 20

The National NHS teams have introduced a confidential staff support line, operated by the [Samaritans](#) and free to access **from 7.00 am – 11.00 pm, seven days a week**.
[Call: 0300 131 7000](#)

You can call the number for support, signposting and confidential listening. Alternatively, you can text **FRONTLINE** to 85258 for support 24/7 via text

Additional support for SWB colleagues

Coaching / support Keith Tanner

Free Wellbeing Coaching and Support for NHS Staff with Dr. Keith Tanner

If you would like coaching and support, whatever your circumstances, even if it's just a one-off call, please e-mail me with your name and contact details.

One-to-one on-line coaching and, if wanted, personalised ideas to help maintain wellbeing and resilience at a very difficult time. Dr Keith Tanner keith247@mac.com www.blossom-wellbeing.net

Richard Burnell- Resilience support. One to one coaching sessions, advice nad resilience training available, booked through contacting Richard directly on richard.burnell@nhs.net . Daily 60 second videos available and coaching sessions and resilience. These are shared on Connect / My Connect and through social media.




Lavinia Hines – Lavinia is a trained hypnotherapist and coach and is offering appointments and a 'cup of tea and a listening ear chat' interventions to all colleagues. 07970 88 21 08 Mon-Fri 9-5pm

The Covid well being team are also offering 'Coffee and a Chat' for anyone in the Trust who is feeling like they want someone to talk to. This is being serviced by qualified coaches in the L&D team and will be delivered via phone or webex or Facetime. swbh.letsgettalking@nhs.net

Wellbeing Apps / Remote Psychological Support

The Trust is promoting using mindfulness apps that are available for free to download and use at any time. These are available both through Connect and My Connect, and are being actively promoted in every interaction with colleagues, from the Well Being Team.

Free access to wellbeing apps for all NHS staff

 unmind Unmind Unmind is a mental health platform that empowers staff to proactively improve their mental wellbeing. More information and sign-up details...	 headspace Headspace Headspace is a science-backed app in mindfulness and meditation, providing unique tools and resources to help reduce stress, build resilience, and aid better sleep. More information and sign-up details...	 Sleepio Sleepio Sleepio is a clinically-evidenced sleep improvement programme that is fully automated and highly personalised, using cognitive behavioural techniques to help improve poor sleep. More information and sign-up details...	Daylight Daylight is a smartphone-based app that provides help to people experiencing symptoms of worry and anxiety, using evidence-based cognitive behavioural techniques, voice and animation. More information and sign-up details...
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Exercise

The gyms remain open, albeit with social distancing. Yoga has moved online with videos and remote sessions being offered including breathing techniques. Promoting free exercise videos through the Well Being area, including daily Joe Wicks, going for walks and other free offers to the NHS. The Trust Yoga teacher, Chris Randall is delivering remote yoga classes.

Videos are being created by the Junior Doctors to promote exercise and this will be released week commencing 20th April.

Financial Well Being

We are promoting access to the financial well being Hub provided through Neyber and access to the NHS Discounts 'all in one place' that are being made available

Proactively keeping in touch with colleagues who are shielding or isolating

Every colleague who is shielding has received a call from the well being team, being led by Lawrence Kelly. They are checking that colleagues are well, have access to shopping and are able to work if possible, and liaising with onsite teams, local government volunteers and others to ensure that our shielding colleagues are receiving support. The team are signposting to all of the well being support available and ensuring colleagues have the My Connect App downloaded and know who they can talk to for support for loneliness, frustration or fear.

They will regularly keep in touch with all colleagues who are shielding. If, for any reason, they were worried (no response, colleague reports poor mental health) we would follow our usual procedure of informing next of kin to try and contact them, and if this did not work we would inform the police. (this is the Trust's usual process)

Psychological Debriefing.

Squares Club for Junior Doctors and Nurses

The Junior Doctors have set up the 3 Squares Club, led by Dr Mike Blaber, Dr Alison Eastaugh (Chief Registrar) and Dr Eoin Dore (Chair of Junior Doctor Forum). They are running debrief sessions three times a week with 8-15 people attending each one. They are signposting to additional support, and also feeding back themes. These are hosted on a rota and some snacks / breakfast are available. These sessions are highlighting issues such as travel to sites, accommodation, rest facilities, access to food overnight, and escalating for support where needed. The 3 Squares Club is being rolled out to nursing colleagues from 20th April onwards. The junior doctor well being team have developed a series of videos that are multi professional.

Debriefing and end of life conversations

Dr Mike Blaber and colleagues are running training and conversations about end of life patients with clinical colleagues, and debriefing in AMU and critical care with all clinical staff. They are working with a structured clinical model that is evidence based.

Trainers for REACT 45 Practitioners – 2 Hours – Identified by Self-Assessment Survey (Appendix C)

Training Completed by MOS via Zoom - 8

People Per Session, Webcams and Microphones Required to Participate

Basic Role – To provide REACT 45 Training to colleagues in groups of 6-10 either face to face or via video-link. These staff will also be qualified REACT 45 Practitioners (Supervisors)

Measurement of Impact – Number of staff Trained and sessions Completed. Feedback survey after training (Appendix F)

Skill Set – Confidence and skills to lead a short training session; an interest and awareness of mental health Challenges people can face at work

REACT 45 Practitioner (Supervisor Role) – 45 Minutes Training Identified by Self-Assessment Questionnaire (Appendix E)

Training completed by an SWBH 'Train the Trainer.' Our trainers can deliver this via video or face to face, recommended group size 6-10 depending on experience of trainer – Quality Assured by Learner feedback (Appendix E)

Basic role: To lead a debrief at the end of a shift and look for individuals who are showing signs of struggling with mental wellbeing. If individuals are identified have a brief 'Psychologically Savvy Conversation' with them. Where appropriate they should open the door to services that might help support them further

Measurement of Impact: The 'number of doors' they open (i.e. referrals) that are utilised. This can be measured by the *React Plus Practitioner* or the *TriM Practitioner* asking where the referral came from. We can then record which supervisors and areas are providing referrals. Tracking relevant sickness absence pre and post implementation

Skill set – Confidence to lead a group debrief at the end of a shift; Interpersonal skills to have a sensitive conversation; Knowledge of pathways that are open to the individual who needs support – we will produce a directory of services that can be used for this



REACT Mental Health Plus Practitioner (Mental Health First Aider) – 4.5 Hours Training - Identified by Self-Assessment and line manager Questionnaire (Appendix D)

Training completed by MOS via Zoom, 10 people per session. They will need webcams and microphones to participate

Basic role: To have a more in depth supportive conversation with an individual that has been referred by a REACT 45 Practitioner. This may be sufficient to help to the individual; however the MH Plus Practitioner may identify a need to refer the individual to a further support service

Measurement of Impact: The number of individual that they see. Where individuals access this service and do not require further support a feedback survey (Appendix A)

Skill set – Good level of interpersonal skills to have a sensitive and confidential conversation knowing the limitations of their role; Knowledge of pathways that are open to the individual who needs support – we will produce a directory of services that can be used for this; An interest and awareness of Mental Health challenges people can face at work



Trim Practitioner – Two Days Training – Identified by Self-Assessment and line manager Questionnaire (Appendix D)

Training completed by MOS face to face, 16 people per session. Appropriate classroom Facilities required (Appendix B)

Basic role: To provide a detailed 1-1 supportive conversation with an individual that has been referred by a REACT 45 Practitioner (Supervisor) or REACT MH Plus Practitioner (Mental Health First Aider). Staff members may also self-refer. The conversation focuses on a traumatic incident or compounded traumatic incidents – i.e. a build-up of similar incidents over time

Measurement of Impact: The number of individual that they see. Where individuals access this service and do not require further support a feedback survey (Appendix A)

Skill set – Very high level of interpersonal skill to have a sensitive and confidential conversation knowing the limitations of their role; existing coaches may be good candidates; Knowledge of pathways that are open to the individual who needs support – we will produce a directory of services that can be used for this; Basic (or higher) level of understanding and awareness of Mental Health challenges people can face at work

Plan on a Page: Headspace Webinar to Improve Wellbeing



Strap line: Contemplation, Conversation, Compassion: #standtogether

Aim:

- To provide a twenty minute headspace via webinar where staff can reflect on a real world experience and then apply it to their own working day or environment.
- The Recharge Booth is a virtual environment which creates time for contemplation of experiences and acknowledgment of feelings, shared conversations, and support and compassion from colleagues. A space that promotes psychological safety and being open about feelings.

How the sessions work:

- The Recharge Booth is open twice a week, on a Tuesday and Thursday at 2:00pm.
- The Recharge Booth is accessed via WebEx, and colleagues can sign up to be part of the session.
- Prior to the session colleagues will be encouraged to share a story about something that had a powerful impact upon them at work. This can be by a phone call to Richard Burnell or by email, of roughly 250 words. One story will be chosen by the session facilitator.
- The colleague who submitted the story can decide if they would like it to be anonymised or if they are happy to be identified.
- Email stories will be submitted via email to swbh.rechargebooth@nhs.net.

Order of events:

- **0-3 Minutes** the chosen story will be recounted
- **4-6 Minutes** staff will be invited to reflect silently about what struck them most powerfully about the story
- **7-17 Minutes** staff will share their views on the story and relate to any emotions that are familiar to them
- **18-20 Minutes** a short summary and session closing
- At the end of the session staff should have had the opportunity to recognise that their feelings and emotions are normal and legitimate to experience. This process should also help them decompress and feel restored.

- Flex of +10 minutes to enable flow of conversation, storytelling.

Communications:

- Daily communications
- Flyers or posters
- Heartbeat, TeamTalk
- Connect: Covid-19 and welearn pages
- Screensaver and Twitter

Follow Up:

Within 7 days of attending the session a follow up email will be sent that asks for some simple feedback

How would you rate the session?	Poor	Moderate	Good	Excellent
Please rate your mental wellbeing before attending on a scale 1 (low) to 10 (high)				
Please rate your mental wellbeing after attending on a scale 1 (low) to 10 (high)				
Will you recommend this session to colleagues?	Yes	No	Maybe	