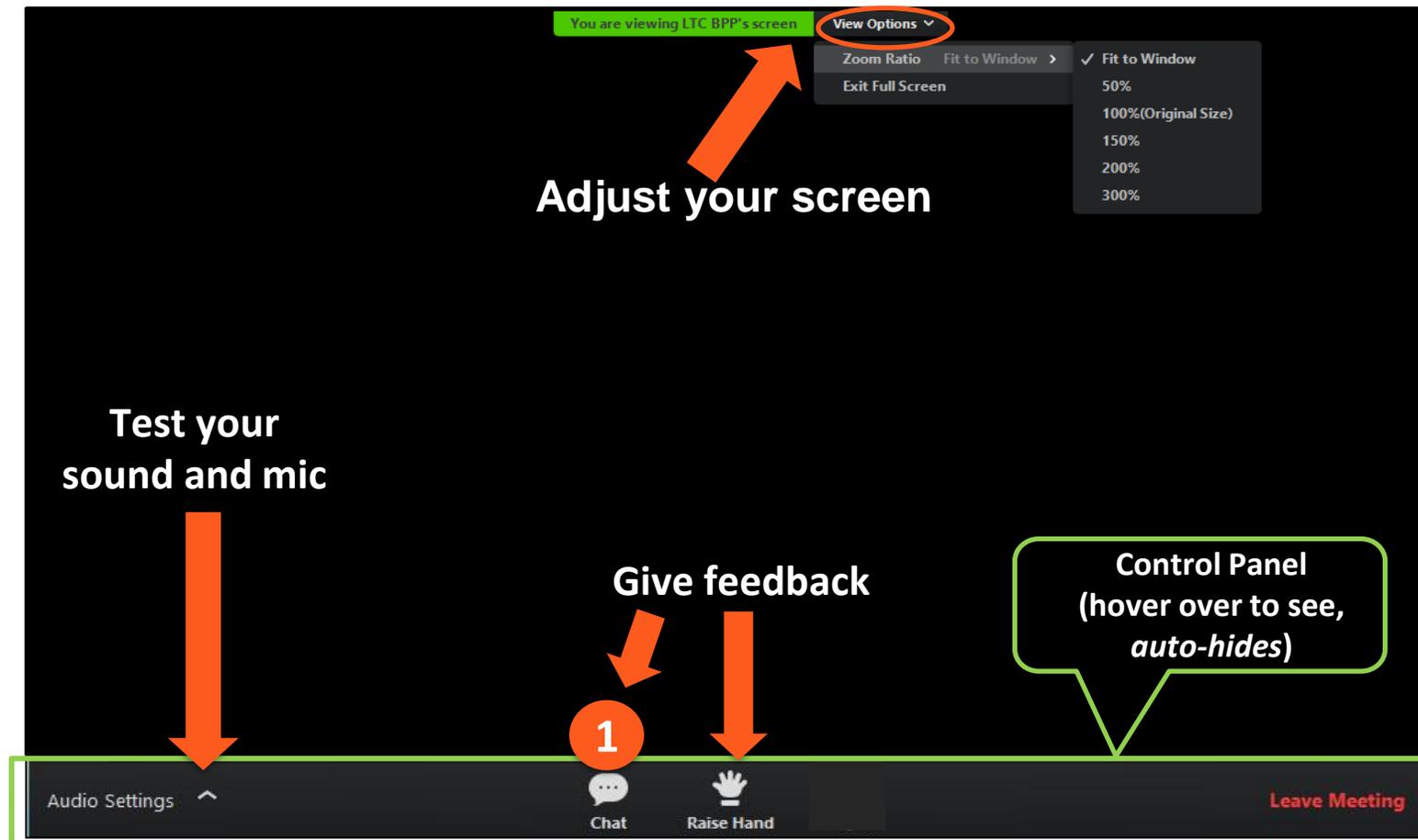


How to participate in this webinar

(Your line is muted upon entry)



The webinar will begin at 12:00 pm ET

Click to open the **Chat** box to chat with all panelists and/or attendees.



R

N

the VOICE for
registered nurses,
nurse practitioners
and nursing students
in Ontario

O

RNAO and NPIG webinar series

Supporting workforce mental health in the face of adversity:

A trauma-informed organizational capability approach

Tuesday, January 17, 2023



Webinar Objectives

- Understand the impacts of the current work environment context on nurses' health and well-being
- Explore the use of a trauma-informed lens to support workforce mental health
- Discuss various strategies that individual nurses, nursing leaders and organizations can implement to strengthen resilience and improve nurses' mental health and well-being

Housekeeping

- Turn off microphones and cameras
- Chat box and Q&A
- Today's webinar will be recorded
- The full Bio for our speakers, a resource sheet and the evaluation link will be forwarded post webinar.



Land Acknowledgment



<https://native-land.ca/>

Guest Speaker

**Rosanra (Rosie) Yoon MN,
PhD, NP-Adult**

**Assistant Professor,
Daphne Cockwell School of Nursing,
Faculty of Community Services
Toronto Metropolitan University**

**Evaluation and QI Lead, Mid-West
Toronto Ontario Health Team**



Supporting Workforce Mental Health in the Face of Adversity:

A TRAUMA-INFORMED
ORGANIZATIONAL CAPABILITY
APPROACH

Presented By: Rosanra (rosie), Yoon PhD, MN, NP-Adult
RNAO Tuesday January 17th, 2023

Crisis Response Vs. Marathon Resiliency Response

Time
Limited
Crisis
Approach

COVID-19
Marathon

Resiliency
Approach

COVID-19 Challenges Faced by Health Care Workforce



Risk of
Exposure

Extreme
Workloads

Moral
Dilemmas

Rapidly
Changing
Work
Environment

1. Shanafelt T, Ripp J, Trockel M. Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the COVID-19 Pandemic. *JAMA*. 2020;323(21):2133–2134. doi:10.1001/jama.2020.5893
2. Creating a Safe Space: Psychological Safety of Healthcare Workers. Available online: <https://www.patientsafetyinstitute.ca/en/toolsResources/Creating-a-Safe-Space-Psychological-Safety-of-Healthcare-Workers/Pages/creating-a-safe-space-addressing-the-psychological-safety-of-healthcare-workers-2020-01-06.aspx> (accessed on 1 May 2020).
3. Santarone, K.; McKenney, M.; Elkbuli, A. Preserving mental health and resilience in frontline healthcare workers during COVID-19. *Am. J. Emerg. Med.* 2020. [CrossRef]

Without a Pandemic Workforce There is No Pandemic Response

'Running on fumes': Amid rising COVID cases, health workers struggle with fatigue, lack of support



'There's more likelihood that you'd be criticized ... for standing up for your doctor'

CBC Radio - Posted: Sep 18, 2020 3:24 PM ET | Last Updated: September 18, 2020



CBC WHITE COAT BLACK ART
SEPTEMBER 18, 2020.

For many health-care workers, it's been months working on the front lines and wearing up-to-date protective equipment. (Evan Mitsui/CBC)

The Next Blaze: Pandemic Burnout Among Health Professionals

Physician burnout was already a concern, but now with COVID-19, experts stress the need to address the well-being of staff.

Women in health care at increased risk for stress, burnout and depression during COVID-19: U of T study



The U of T researchers' early findings suggest the pandemic is creating a number of serious, negative health outcomes for women, who comprise 85 per cent of Canada's health workforce (photo by Simon Russell/Toronto Star via Getty Images)

July 24, 2020



<https://www.tctmd.com/news/next-blaze-pandemic-burnout-among-health-professionals>

Without Healthy Healthcare Workforce there is no Healthcare delivery system

NATIONAL POST

News / Canada

Depressed and burned out, Ontario nurses planning to leave the field in droves, poll finds

The survey found that 70% of respondents were planning to leave their jobs in five years. Among those who wanted to leave the profession, 42% said they wanted out for good

Swikar Oli

Published May 13, 2022 • 4 minute read

216 Comments



Emergency room nurse Aimee Earhart speaks to a reporter as the Omicron coronavirus variant continued to put pressure on Humber River Hospital in Toronto, on Jan. 20, 2022. PHOTO BY CARLOS OSORIO /REUTERS

[HTTPS://NATIONALPOST.COM/NEWS/CANADA/ONTARIO-NURSES-PLANNING-TO-LEAVE-THE-FIELD-IN-DROVES-POLL-FINDS](https://nationalpost.com/news/canada/ontario-nurses-planning-to-leave-the-field-in-droves-poll-finds)



RNAO
Nursing Through Crisis
A Comparative Perspective

<https://rnao.ca/sites/default/files/2022-05/Nursing%20Through%20Crisis%20-%20A%20Comparative%20Analysis%202022.pdf>

Global NEWS World Canada Local Politics Money Health Entertainment Life

thinking huts 3D printing access to education. How we do it.

HEALTH

Over 75% of Canadian nurses burnt out, RNAO survey finds

By Hannah Jackson • Global News
Posted May 12, 2022 12:20 pm • Updated May 13, 2022 9:42 am

A photograph of a healthcare worker in blue scrubs walking past a 'THANK YOU' sign in a hospital hallway. The sign features a cartoon character of a nurse. In the background, other healthcare workers are visible.

A health-care worker walks past a thank you sign in the intensive care unit at the Humber River Hospital during the COVID-19 pandemic in Toronto on Tuesday, January 25, 2022. THE CANADIAN PRESS/Nathan Denette

Psychological PPE

Your Psychological PPE

to Promote Mental Health and Well-Being



These recommendations are based on a review of published literature and the experience of health systems. For more information visit [ihl.org](https://www.ihl.org).

Individual

-  Take a day off and create space between work and home life
-  Avoid publicity and media coverage about COVID-19
-  Receive mental health support during and after the crisis
-  Facilitate opportunities to show gratitude
-  Reframe negative experiences as positive and reclaim agency

Team Leader

-  Limit staff time on site/shift
-  Design clear roles and leadership
-  Train managers to be aware of key risk factors and monitor for any signs of distress
-  Make peer support services available to staff
-  Pair workers together to serve as peer support in a "buddy system"



Viewpoint

FREE



April 7, 2020



More ▾

Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the COVID-19 Pandemic

Tait Shanafelt, MD¹; Jonathan Ripp, MD, MPH²; Mickey Trockel, MD, PhD¹

[» Author Affiliations](#) | [Article Information](#)

JAMA. 2020;323(21):2133-2134. doi:10.1001/jama.2020.5893

1. Shanafelt T, Ripp J, Trockel M. Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the COVID-19 Pandemic. *JAMA*. 2020;323(21):2133–2134. doi:10.1001/jama.2020.5893



Table. Requests From Health Care Professionals to Their Organization During the Coronavirus Disease 2019 Pandemic

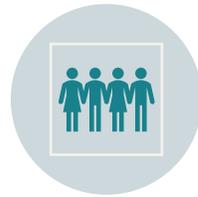
Request	Principal desire	Concerns	Key components of response
Hear me	Listen to and act on health care professionals' expert perspective and frontline experience and understand and address their concerns to the extent that organizations and leaders are able	Uncertainty whether leaders recognize the most pressing concerns of frontline health care professionals and whether local physician expertise regarding infection control, critical care, emergency medicine, and mental health is being appropriately harnessed to develop organization-specific responses	Create an array of input and feedback channels (listening groups, email suggestion box, town halls, leaders visiting hospital units) and make certain that the voice of health care professionals is part of the decision-making process
Protect me	Reduce the risk of health care professionals acquiring the infection and/or being a portal of transmission to family members	Concern about access to appropriate personal protective equipment, taking home infection to family members, and not having rapid access to testing through occupational health if needed	Provide adequate personal protective equipment, rapid access to occupational health with efficient evaluation and testing if symptoms warrant, information and resources to avoid taking the infection home to family members, and accommodation to health care professionals at high risk because of age or health conditions
Prepare me	Provide the training and support that allows provision of high-quality care to patients	Concern about not being able to provide competent nursing/medical care if deployed to new area (eg, all nurses will have to be intensive care unit nurses) and about rapidly changing information/communication challenges	Provide rapid training to support a basic, critical knowledge base and appropriate backup and access to experts Clear and unambiguous communication must acknowledge that everyone is experiencing novel challenges and decisions, everyone needs to rely on each other in this time, individuals should ask for help when they need it, no one needs to make difficult decisions alone, and we are all in this together
Support me	Provide support that acknowledges human limitations in a time of extreme work hours, uncertainty, and intense exposure to critically ill patients	Need for support for personal and family needs as work hours and demands increase and schools and daycare closures occur	Provide support for physical needs, including access to healthy meals and hydration while working, lodging for individuals on rapid-cycle shifts who do not live in close proximity to the hospital, transportation assistance for sleep-deprived workers, and assistance with other tasks, and provide support for childcare needs Provide support for emotional and psychologic needs for all, including psychologic first aid deployed via webinars and delivered directly to each unit (topics may include dealing with anxiety and insomnia, practicing self-care, supporting each other, and support for moral distress), and provide individual support for those with greater distress
Care for me	Provide holistic support for the individual and their family should they need to be quarantined	Uncertainty that the organization will support/take care of personal or family needs if the health care professional develops infection	Provide lodging support for individuals living apart from their families, support for tangible needs (eg, food, childcare), check-ins and emotional support, and paid time off if quarantine is necessary

Table Title: Requests From Health Care Professionals to Their Organization During the Coronavirus Disease 2019 Pandemic

Essential Actions to Promote Workforce Resiliency



Design Organizational Systems to Address Human Needs



Develop Leaders with Participative Management Capacity



Remove Sources of Frustration & Inefficiency



Build Social Community



Reduce preventable harm to patients and providers



Bolster Individual Wellness

Poll Question

My Workplace implements and openly champions their commitment to the Mental Health Commission's 13 Factors of Psychological Health and Safety in the Workplace

- Yes
- No
- Unsure



The Mental Health Commission of Canada, in partnership with [Ottawa Public Health](#), adapted content from [The Mind Project](#) videos that aim to raise awareness around the 13 factors that can impact the mental health of employees in promoting psychologically safe places to work.

The 13 factors of psychological health and safety in the workplace are:

- Organizational Culture
- Psychological and Social Support
- Clear Leadership & Expectations
- Civility & Respect
- Psychological Demands
- Growth & Development
- Recognition & Reward
- Involvement & Influence
- Workload Management
- Engagement
- Balance
- Psychological Protection
- Protection of Physical Safety

13 Factors of Psychological Health and Safety in the Workplace

Cornerstones for Organizational Resilience to guide Workforce Mental Health : Pandemic & Beyond

Worker Trust and Psychological Safety are Pre-Requisites for Organizational Resilience in HCOs

Holistic Consideration for Worker Psychological Safety During & beyond COVID-19 to provide for broader impact of Emotional Distress & Burnout

Absence of Leadership Support for Emotional Distress during COVID-19 & Beyond Can Adversely impact Organizational Resilience, Patient Safety, & Staff Retention

Rangachari, P., & L Woods, J. (2020). Preserving Organizational Resilience, Patient Safety, and Staff Retention during COVID-19 Requires a Holistic Consideration of the Psychological Safety of Healthcare Workers. *International journal of environmental research and public health*, 17(12), 4267. <https://doi.org/10.3390/ijerph17124267>

A Call to Action : Workforce Resilience Strategy

Prioritize Staff Health, Morale,
Well-being

Transparent Communication

Offer support, where, how and
when staff need it

Address COVID-19 related
working conditions

Why: Workforce Resiliency Essential to Organizational Resiliency

Finite Resources
Human & Time

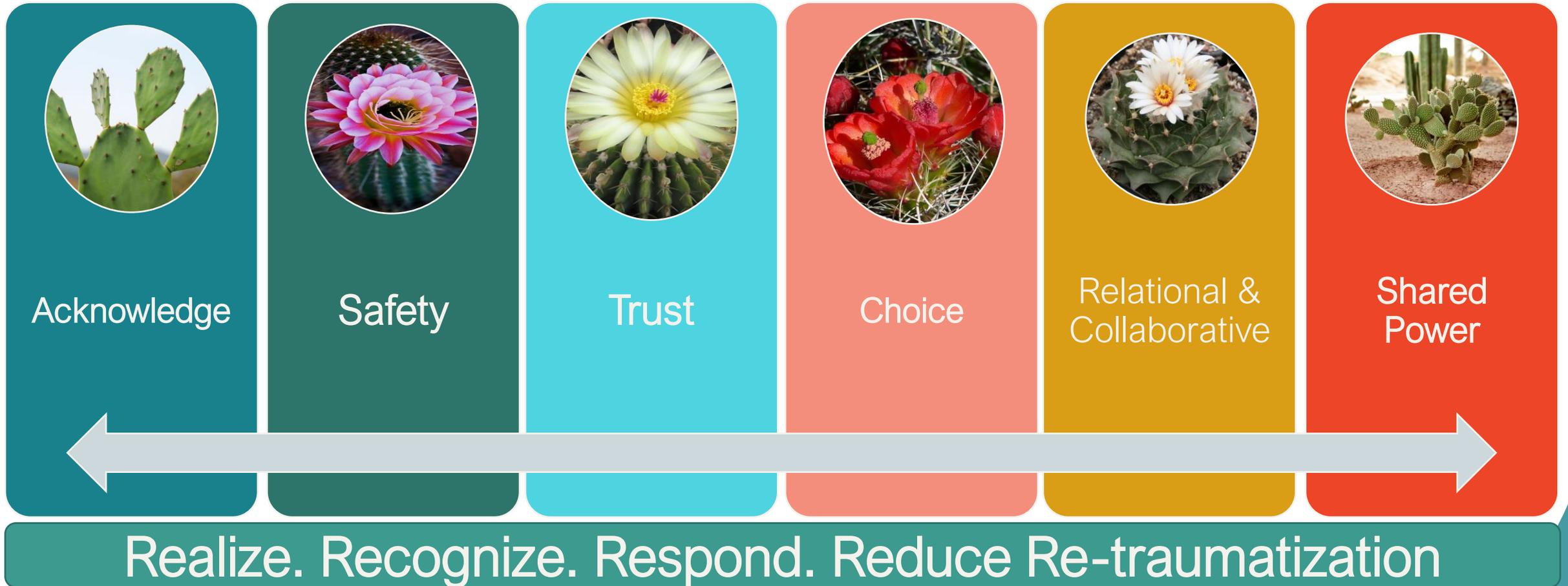
Workforce
Capacity
= Surge Capacity

NOT a Wellness
Program

Resilience Strategy: Senior Leadership & Middle Managers Essential



Core Principles of Trauma-informed Approach



Jean Tweed, 2013; Substance Abuse and Mental Health Services Administration, 2014

Cultivating an Organizational Culture of Trauma-Informed Practice





Question

To what extent do you feel that your own organization is congruent with the TIA principles to support workforce mental health?

- Not at all
- Somewhat
- Mostly
- Very much
- Unsure

Essential Cornerstones of Workforce Resilience Strategy



Culture

Trust & Transparency
Safety



Decision Making & Processes

Participative & Lateral
Closed Loop Feedback

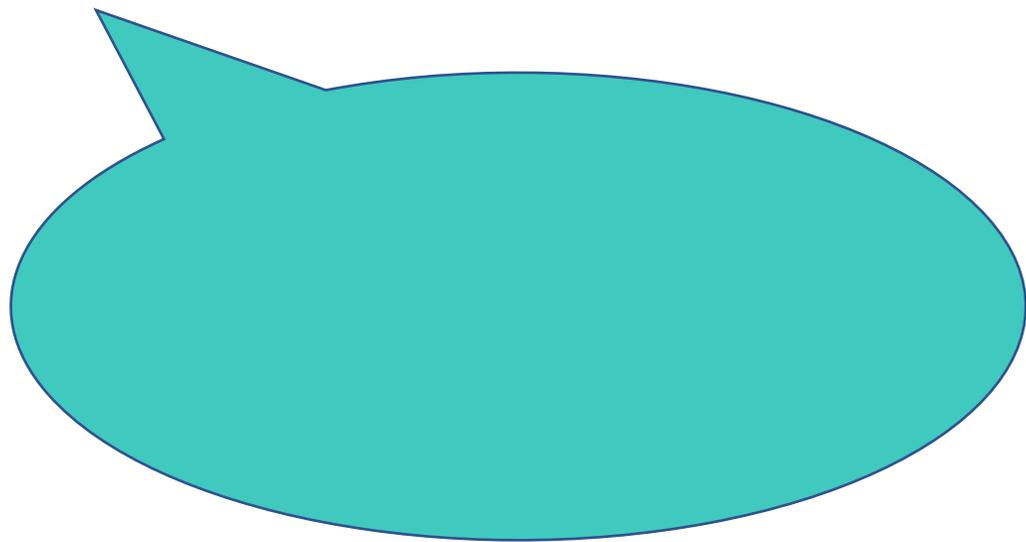
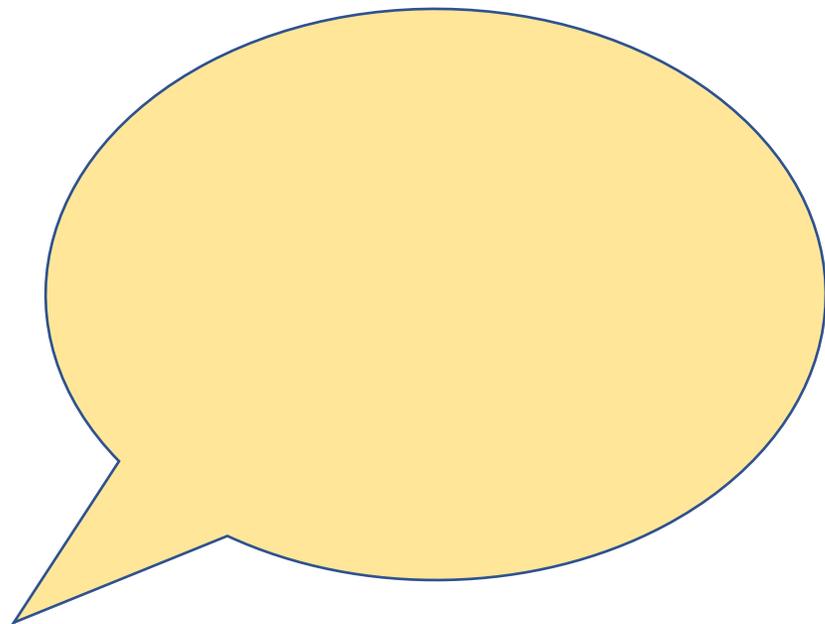


People

Self-Awareness
Agile & Adaptive



Thank You



Q&A

Thank you for joining us today

An evaluation will be sent to you shortly.
When you're able, please share your
feedback on this and future webinars!



<https://myrnao.ca/webinarevaluationjan172023>

Questions or suggestions

CONTACT: mha@RNAO.ca

Visit: www.RNAO.ca/mentalhealth

RNAO InFocus page: <https://rnao.ca/in-focus/mental-health-addiction>

