



1

## **Who am I? Twitter: @Profngreenberg**

**Psychiatrist and Professor at King's College London**

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

**Served in the Royal Navy for 23+ years**

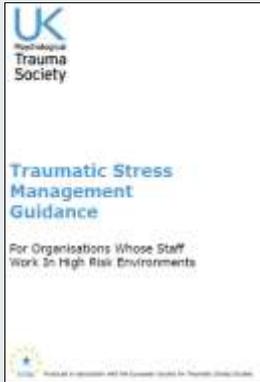
**Managing Director of March on Stress Ltd**

**Part of NHSE/I Wellbeing Team & Recovery Commission**

**Set up the MH staff support strategy at London Nightingale Hospital**

2

## Main Sources of www. Information



[www.ukpts.co.uk](http://www.ukpts.co.uk)



[www.kcl.ac.uk/kcmhr](http://www.kcl.ac.uk/kcmhr)

<http://epr.hpru.nihr.ac.uk/>



[www.marchonstress.com/](http://www.marchonstress.com/)

3

## Risks to mental health during COVID 19

**Traumatic exposure**

**Workload and shift patterns**

**Home life stressors**

**Moral injury**

4

## Moral Injury



5

## What is Moral Injury?



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

well - moral distress - moral injury - illness

6

## 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 by a higher authority

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

7

## Moral injury and mental ill health



### • Meta-analysis findings (effect size)

- PTSD 0.30
- Depression 0.23
- Suicidality 0.14
- Anxiety n/a
- Hostility n/a

### Conclusions:

- Most studies in military samples
- Moderate impact of PTSD; small impact of depression and suicidality
- Too few papers to draw any firm conclusions

8

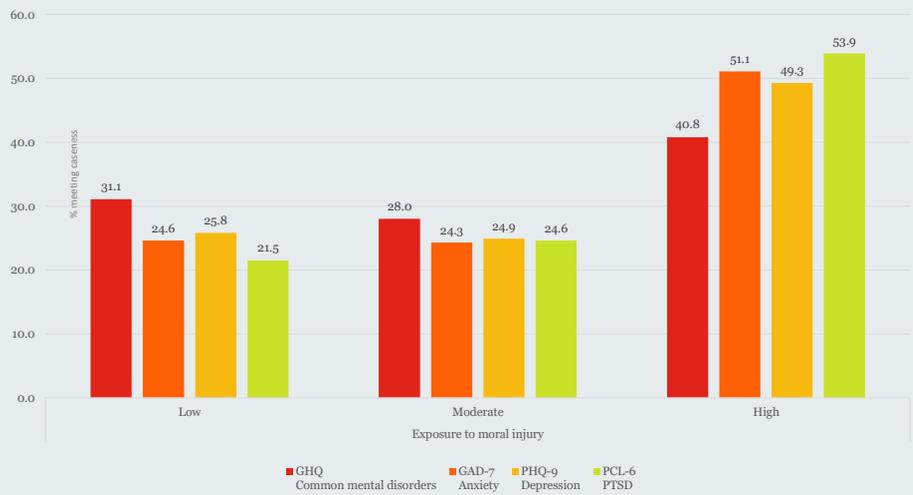
## PTSD rates – NHS generally & ICU in particular



Measure	Total sample n/N (%)	Doctors n/N (%)	Nurses n/N (%)	Other clinical* n/N (%)	Non-clinical** n/N (%)
PCL-6- PTSD					
<b>NHS CHECK</b>	1,510/5,764 <b>(26.2)</b>	89/507 <b>(17.55)</b>	430/1,468 <b>(29.29)</b>	451/1,715 <b>(26.30)</b>	540/2,072 <b>(26.06)</b>
<b>ICU Staff</b>	622/1407 <b>(44.2)</b>	177/532 <b>(33.3%)</b>	373/698 <b>(53.4%)</b>	72/177 <b>(40.7%)</b>	

9

## Moral injury and mental health outcomes in HCW



10

## Prepare

### Frank preparatory briefings

### Self check before taking up the role

### 'Psychological PPE'

### Role specific training

#### Managing mental health challenges faced by healthcare workers during covid-19 pandemic

Neil Greenberg, Mary Docherty, Sam Grunzeigstein, Simon Weston

Neil Greenberg and colleagues set out measures that health care managers need to put in place to protect the mental health of healthcare staff having to make morally challenging decisions.

Greenberg et al. BMJ, March 2020

11

## Pre- screening does not work

*Occupational Medicine* 2020;70:162–168

Advance Access publication on 10 February 2020 doi:10.1093/occmed/kqaa008

### A prospective study of pre-employment psychological testing amongst police recruits

R. E. Marshall<sup>1</sup>, J. S. Milligan-Saville<sup>1,2</sup>, Z. Steel<sup>1,2,3</sup>, R. A. Bryant<sup>2,4,5</sup>, P. B. Mitchell<sup>1,2</sup> and S. B. Harvey<sup>2</sup>

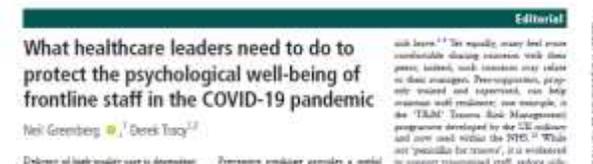
<sup>1</sup>School of Psychiatry, University of New South Wales, Sydney, New South Wales 2031, Australia, <sup>2</sup>Black Dog Institute, Sydney, New South Wales 2031, Australia, <sup>3</sup>St John of God Hospital, Richmond, New South Wales 2753, Australia, <sup>4</sup>School of Psychology, University of New South Wales, Sydney, New South Wales 2031, Australia.

12

## Sustain

### Buddy up

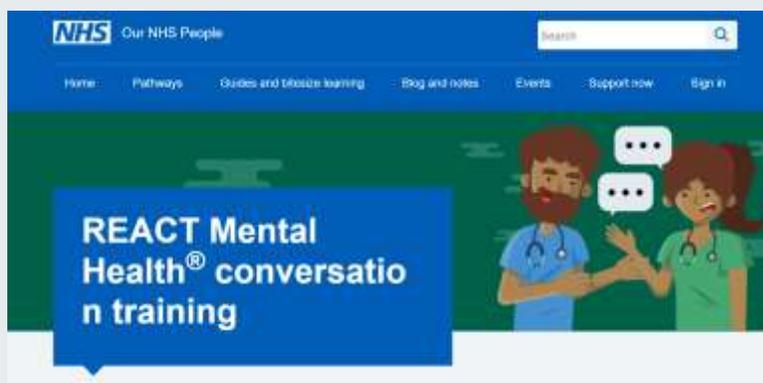
## Supervisors able to have psychologically savvy chats carry out post shift reviews



Greenberg & Tracy BMJ Leader, May 2020

13

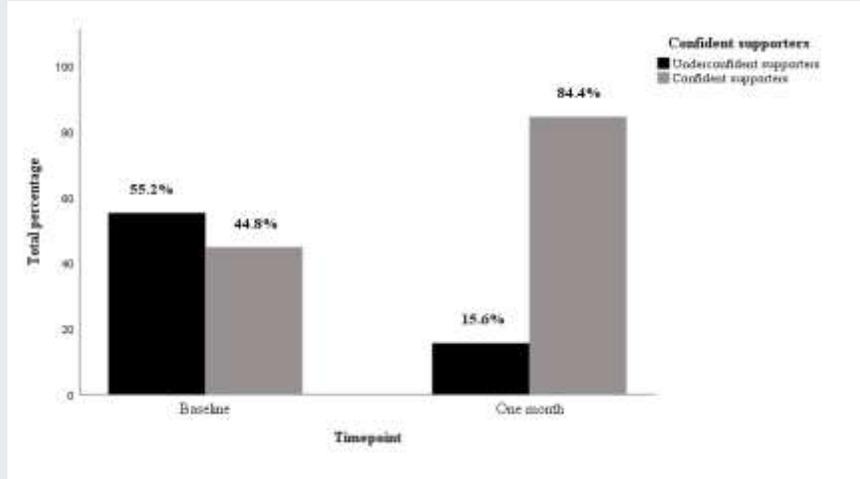
## REACT<sub>MH</sub> training – supervisor confidence



**One hour's remote active listening skills training led to a substantial improvement in supervisor's confidence to recognise, speak with and support distressed colleagues which was still evident one month after the training**

14

## REACT<sub>MH</sub> evaluation



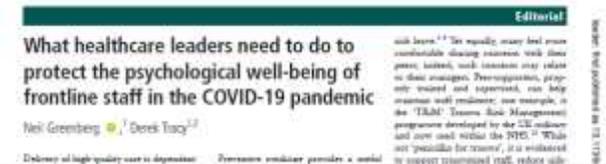
15

## Sustain

### Buddy up

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

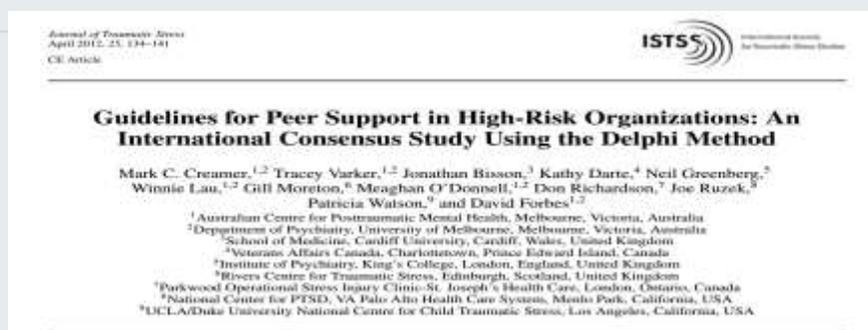
### Peer support



Greenberg & Tracy BMJ Leader, May 2020

16

## Peer support



### Peer supporters should:

- (a) provide an empathetic, listening ear;**
- (b) provide low level psychological intervention;**
- (c) identify colleagues who may be at risk to themselves or others;**
- (d) facilitate pathways to professional help.**

17

## TRiM – Trauma Risk Management



Occupational Medicine Advance Access published April 16, 2015

© 2015 British Association of Occupational Physicians

### Promoting organizational well-being: a comprehensive review of Trauma Risk Management

D. Whybrow<sup>1</sup>, N. Jones<sup>2</sup> and N. Greenberg<sup>3</sup><sup>1</sup>Academy Department of Military Mental Health, King's College London, Western Education Centre, London SE5 8RL UK, <sup>2</sup>Department of Psychological Medicine, King's College London, Western Education Centre, London SE5 8RL UK,

Correspondence to: D. Whybrow, Academic Department of Military Mental Health, King's College London, Western Education Centre, Colindale Road, London SE5 8RL UK. Tel: +44 (0)20 7848 1311; fax: +44 (0)20 7848 1346; e-mail: d.whybrow@kcl.ac.uk

18

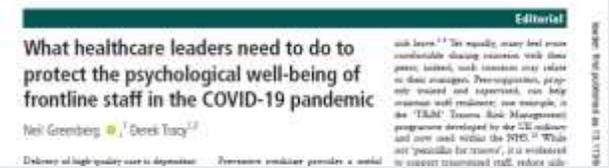
## Sustain

### Buddy up

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

### Peer support

### But don't do.....



Greenberg & Tracy BMJ Leader, May 2020

19

## 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...

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

20

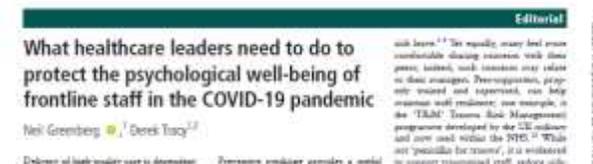
## Sustain

### Buddy up

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

### Peer support

**Forward mental health supervision and support (PIES)**



Greenberg & Tracy BMJ Leader, May 2020

21

## '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**



22

## Recover

**Thank you and provision of information**

**Graded return to work**

**Supervisor discussions esp for higher risk/secondary stressors**

**Time for reflection/meaning making**

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



Throughout the COVID-19 crisis, many health care workers have worked long hours in high-pressure, novel circumstances characterised by trauma and moral dilemmas. Health care workers have contended with the risk of infection, and by extension infecting their families, with outcomes seemingly worse for some, including Black, Asian, and minority ethnic staff. Additionally, agency working is likely to have had its own challenges. Some staff will undoubtedly thrive in such circumstances,

despite a meaningful narrative that reduces risks of harm. Schwartz recommends a structured forum for clinical and non-clinical staff to discuss emotional and social aspects of work, an online evidence-based model. 'Successful recovery planning' should recognise the onset of mental illness while maximising the opportunity for psychological growth. Practitioner managers should follow the evidence, which is both legally required and what staff deserve.



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



23

## Reflective Practice

- **Meaningful, open discussion about a particular event or a period of time**
- **Facilitated by a leader who may share their story and encourage others to do the same**
- **Whole group discussion about impact, current functioning & education about self-help & normalises**
- **Facilitator advises support options & encourages access**
- **Aims to create 'a meaningful narrative', reduce stress & improve working relationships amongst colleagues**

24

## Recover

**Thank you and provision of information**

**Graded return to work**

**Supervisor discussions esp for higher risk/secondary stressors**

**Time for reflection/meaning making**

**Ongoing active monitoring**

**Timely access to evidence based care**

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



Throughout the COVID-19 crisis, many health care workers have worked long hours in high pressured novel circumstances characterised by trauma and moral dilemmas. Health care workers have contended with the risk of infection, and by extension infecting their families, with outcomes seemingly worse for some, including Black, Asian, and minority ethnic staff. Additionally, agency working is likely to have had its own challenges. Some staff will undoubtedly thrive in such circumstances,

doing a meaningful narrative that reduces risk of harm. Schwartz recommends a structured forum for clinical and non-clinical staff to discuss emotional and social aspects of work, an one such evidence-based model. 'Successful recovery planning' should recognise the need of mental illness while maximising the opportunity for psychological growth. Practitioner managers should follow the evidence, which is both legally required and what staff deserve.



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



25

## Conclusion of what to do for HCW (and other key workers)

**Do not over medicalise**

**Nip it in the bud approach**

**Build team support as a priority**

**Psychologically savvy supervisors**

**'Forward mental health teams'**

**Thank you, phased return to work and time for reflection**

**Active monitoring and evidence based care**

26

## Any Questions?- Fire Away!



[Neil.greenberg@kcl.ac.uk](mailto:Neil.greenberg@kcl.ac.uk)  
[Twitter: @profgreenberg](https://twitter.com/profgreenberg)  
[www.kcl.ac.uk/kcmhr](http://www.kcl.ac.uk/kcmhr)  
<http://epr.hpru.nihr.ac.uk/>