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# Building Resilience - Strategies to Help Us Continue to Find Meaning in Medicine

Omayra Mansfield, MD MHA FACEP  
Chief Medical Officer  
AdventHealth Apopka and Winter Garden

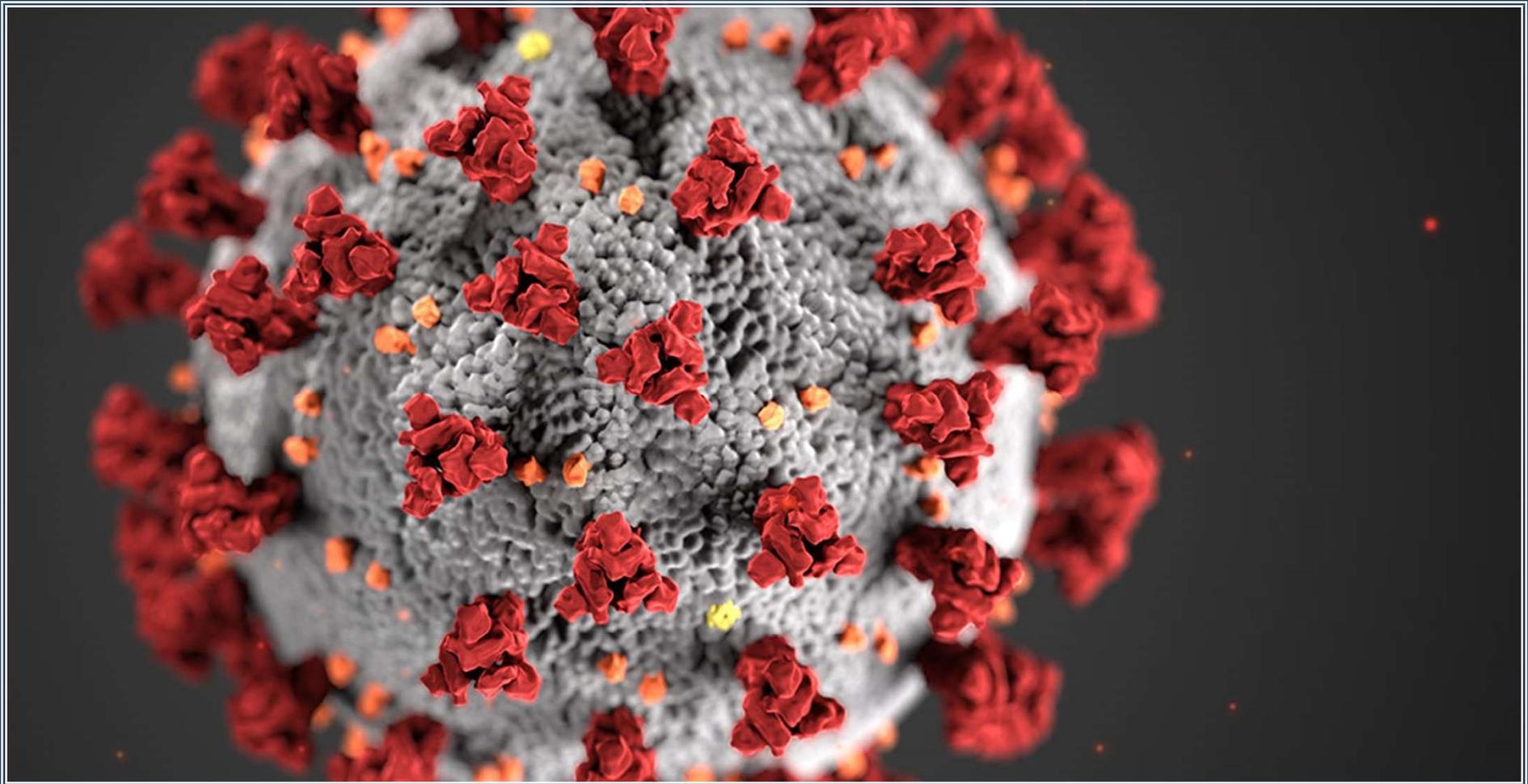
# Disclosures

I have no disclosures.

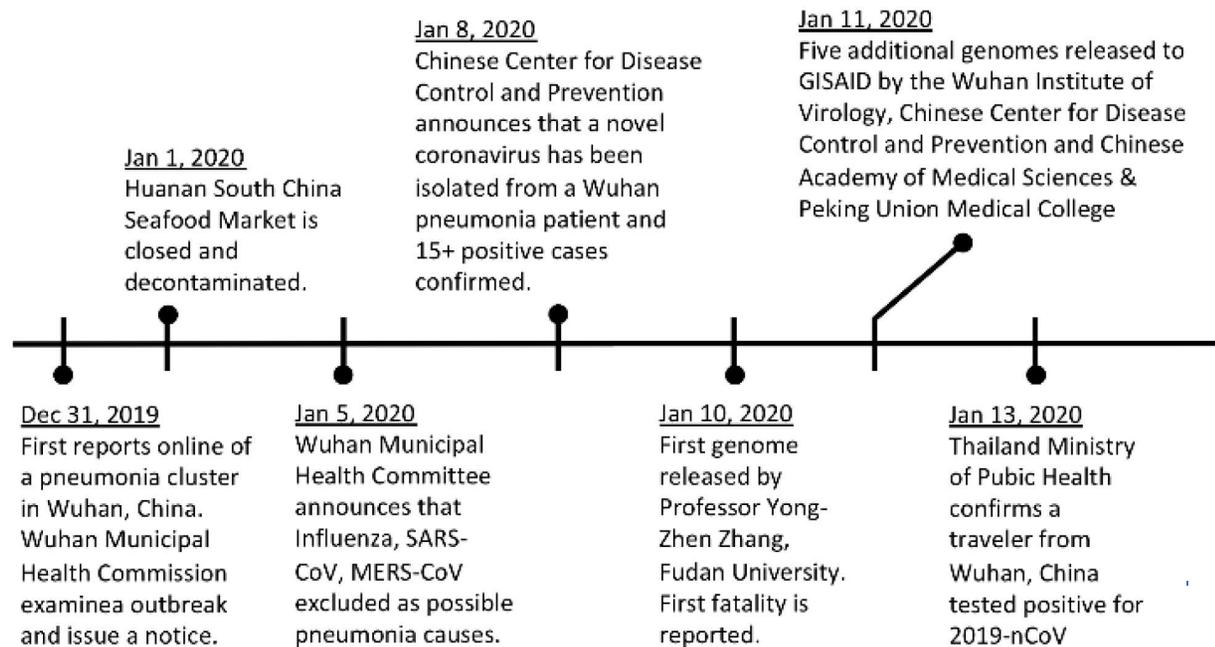
**THIS**

**IS 2020**





# The Beginning



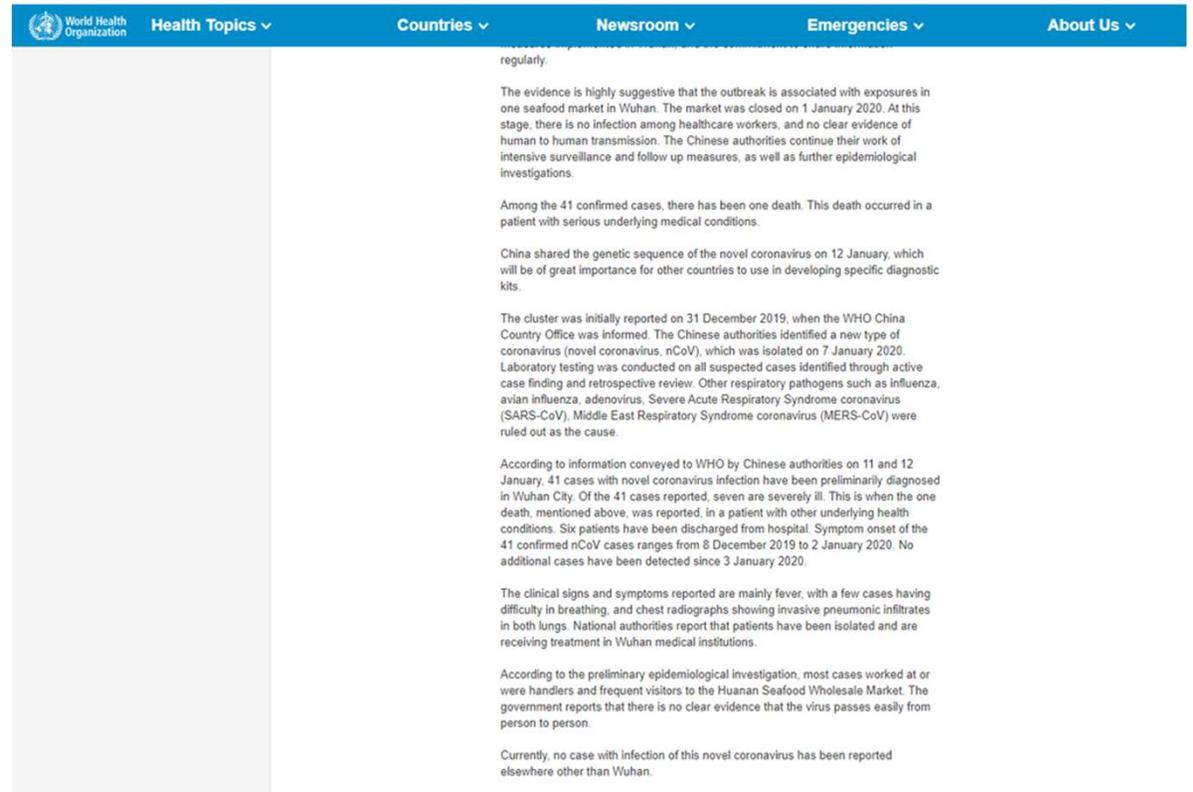
WHO

January 12, 2020

“At this stage, there is no infection among healthcare workers, and no clear evidence of human to human transmission.”

“Among the 41 confirmed cases, there has been one death. This death occurred in a patient with serious underlying medical conditions.”

“Wuhan city is a major domestic and international transport hub. To date, there have been no reported cases outside of Wuhan City.”



The screenshot shows the WHO website's news page for the novel coronavirus outbreak. The navigation bar includes 'World Health Organization', 'Health Topics', 'Countries', 'Newsroom', 'Emergencies', and 'About Us'. The main content area contains several paragraphs of text:

regularly.

The evidence is highly suggestive that the outbreak is associated with exposures in one seafood market in Wuhan. The market was closed on 1 January 2020. At this stage, there is no infection among healthcare workers, and no clear evidence of human to human transmission. The Chinese authorities continue their work of intensive surveillance and follow up measures, as well as further epidemiological investigations.

Among the 41 confirmed cases, there has been one death. This death occurred in a patient with serious underlying medical conditions.

China shared the genetic sequence of the novel coronavirus on 12 January, which will be of great importance for other countries to use in developing specific diagnostic kits.

The cluster was initially reported on 31 December 2019, when the WHO China Country Office was informed. The Chinese authorities identified a new type of coronavirus (novel coronavirus, nCoV), which was isolated on 7 January 2020. Laboratory testing was conducted on all suspected cases identified through active case finding and retrospective review. Other respiratory pathogens such as influenza, avian influenza, adenovirus, Severe Acute Respiratory Syndrome coronavirus (SARS-CoV), Middle East Respiratory Syndrome coronavirus (MERS-CoV) were ruled out as the cause.

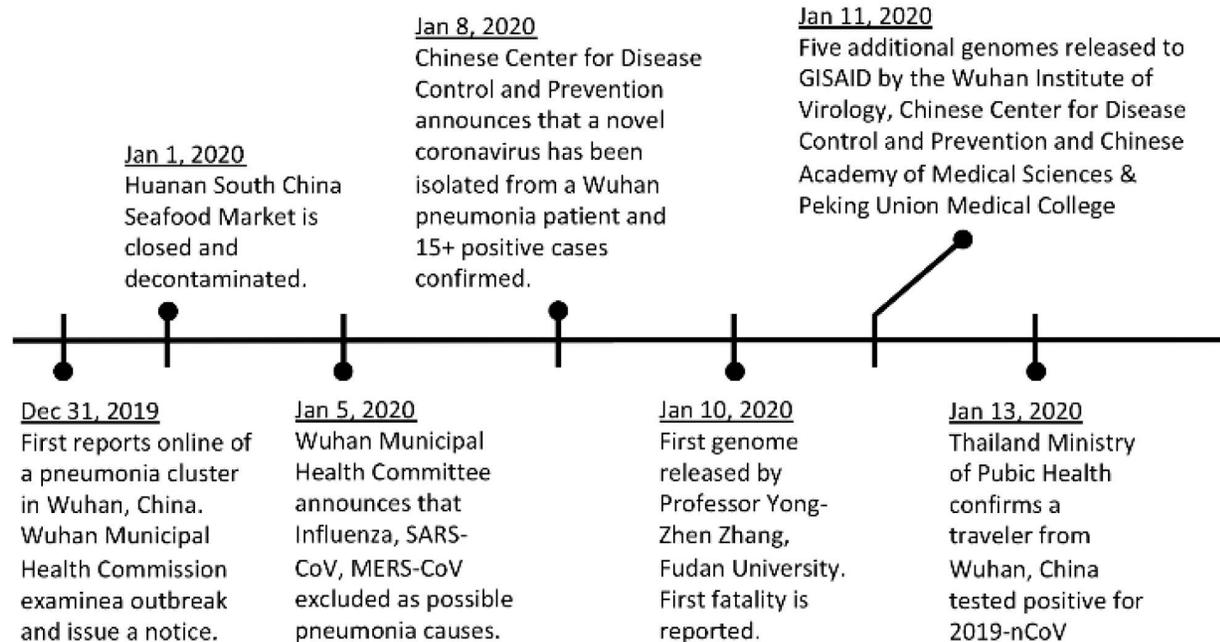
According to information conveyed to WHO by Chinese authorities on 11 and 12 January, 41 cases with novel coronavirus infection have been preliminarily diagnosed in Wuhan City. Of the 41 cases reported, seven are severely ill. This is when the one death, mentioned above, was reported, in a patient with other underlying health conditions. Six patients have been discharged from hospital. Symptom onset of the 41 confirmed nCoV cases ranges from 8 December 2019 to 2 January 2020. No additional cases have been detected since 3 January 2020.

The clinical signs and symptoms reported are mainly fever, with a few cases having difficulty in breathing, and chest radiographs showing invasive pneumonic infiltrates in both lungs. National authorities report that patients have been isolated and are receiving treatment in Wuhan medical institutions.

According to the preliminary epidemiological investigation, most cases worked at or were handlers and frequent visitors to the Huanan Seafood Wholesale Market. The government reports that there is no clear evidence that the virus passes easily from person to person.

Currently, no case with infection of this novel coronavirus has been reported elsewhere other than Wuhan.

# The next day



CDC

February 26, 2020

First US case of Community Acquired COVID-19.

121 Health care workers exposed, three tested positive.

All three had unprotected contact.

Morbidity and Mortality Weekly Report (MMWR)

CDC

### Transmission of COVID-19 to Health Care Personnel During Exposures to a Hospitalized Patient — Solano County, California, February 2020

Weekly / April 17, 2020 / 69(15);472-476

On April 14, 2020, this report was posted online as an MMWR Early Release.

Amy Heinzerling, MD<sup>1,2</sup>; Matthew J. Stuckey, PhD<sup>3</sup>; Tara Scheuer, MPH<sup>4</sup>; Kerui Xu, PhD<sup>2,3</sup>; Kiran M. Perkins, MD<sup>3</sup>; Heather Resseger, MSN<sup>5</sup>; Shelley Magill, MD, PhD<sup>3</sup>; Jennifer R. Verani, MD<sup>3</sup>; Seema Jain, MD<sup>1</sup>; Meileen Acosta, MPH<sup>4</sup>; Erin Epton, MD<sup>1</sup> ([View author affiliations](#))

[View suggested citation](#)

#### Summary

**What is already known about this topic?**

Health care personnel (HCP) are at heightened risk of acquiring COVID-19 infection, but limited information exists about transmission in health care settings.

**What is added by this report?**

Among 121 HCP exposed to a patient with unrecognized COVID-19, 43 became symptomatic and were tested for SARS-CoV-2, of whom three had positive test results; all three had unprotected patient contact. Exposures while performing physical examinations or during nebulizer treatments were more common among HCP with COVID-19.

**What are the implications for public health practice?**

Unprotected, prolonged patient contact, as well as certain exposures, including some aerosol-generating procedures, were associated with SARS-CoV-2 infection in HCP. Early recognition and isolation of patients with possible infection and recommended PPE use can help minimize unprotected, high-risk HCP exposures and protect the health care workforce.

#### Article Metrics

Altmetric:



Platform	Count
News	34
Blogs	2
Twitter	355
Facebook	1
Reddit	3

Citations:

Views:  
Views equals page views plus PDF downloads

[Metric Details](#)

Tables

FDA

March 30, 2020

FDA issues Emergency Use Authorization for hydroxychloroquine and chloroquine phosphate products.

Outlines guidance to expand the availability and capability of sterilizers, disinfectant devices and air purifiers.

Expanded appropriate PPE guidelines.

The screenshot shows the FDA News Release page for 'Coronavirus (COVID-19) Update: Daily Roundup March 30, 2020'. The page features a blue header with the FDA logo and navigation links. The main content area includes a 'For Immediate Release' section dated March 30, 2020, and a list of updates. The updates include: 1) On March 28, 2020, the FDA issued an Emergency Use Authorization (EUA) to allow hydroxychloroquine sulfate and chloroquine phosphate products donated to the Strategic National Stockpile (SNS) to be distributed and used for certain hospitalized patients with COVID-19. 2) On March 29, 2020, the FDA issued an immediately in effect guidance that outlines an enforcement policy to help expand the availability and capability of sterilizers, disinfectant devices and air purifiers. The page also includes social media sharing options, a 'More Press Announcements' link, and a 'Follow FDA' section with social media handles.

FDA NEWS RELEASE

## Coronavirus (COVID-19) Update: Daily Roundup (No Title) March 30, 2020

Share Tweet LinkedIn Email Print

More Press Announcements

Press Announcements

**For Immediate Release:** March 30, 2020

The U.S. Food and Drug Administration today announced the following actions taken in its ongoing response effort to the COVID-19 pandemic:

- On March 28, 2020, the FDA issued an [Emergency Use Authorization \(EUA\)](#) to allow hydroxychloroquine sulfate and chloroquine phosphate products donated to the [Strategic National Stockpile \(SNS\)](#) to be distributed and used for certain hospitalized patients with COVID-19. These drugs will be distributed from the SNS to states for doctors to prescribe to adolescent and adult patients hospitalized with COVID-19, as appropriate, when a clinical trial is not available or feasible. The EUA requires that fact sheets that provide important information about using chloroquine phosphate and hydroxychloroquine sulfate in treating COVID-19 be made available to health care providers and patients, including the known risks and drug interactions. The SNS, managed by ASPR, will work with the Federal Emergency Management Agency (FEMA) to ship donated doses to states.
- On March 29, 2020, the FDA issued an [immediately in effect guidance](#) that outlines an enforcement policy to help expand the availability and capability of sterilizers, disinfectant devices and air purifiers. The devices include those intended to make

Content current as of: 03/30/2020

**Health Topic(s)**  
Infectious Disease  
Coronavirus

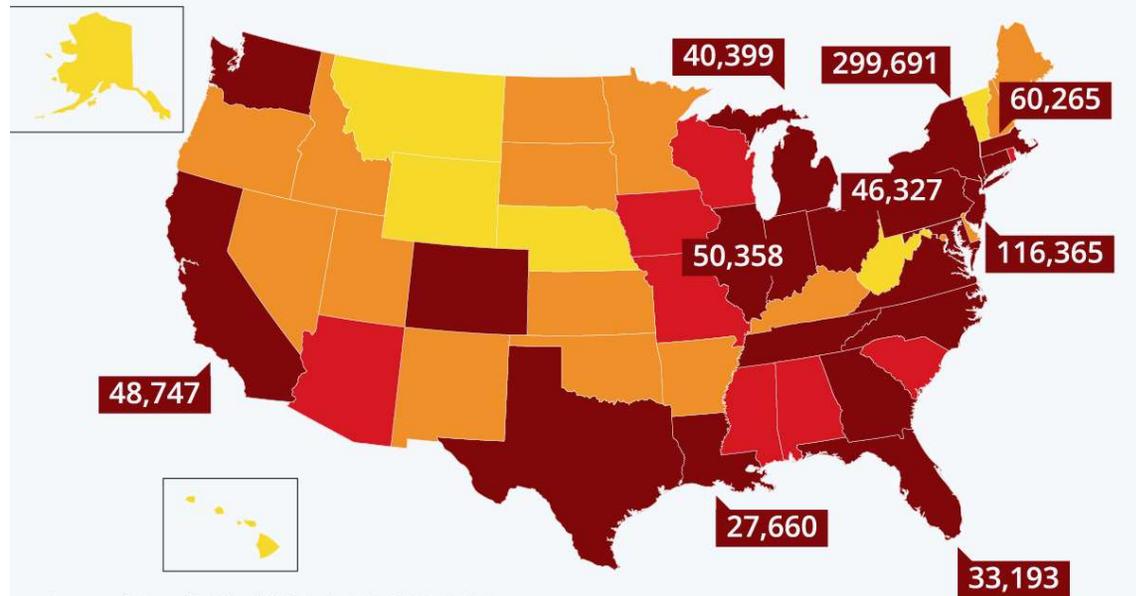
**Follow FDA**  
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# The First Surge

## the U.S.

Number of confirmed COVID-19 cases, by U.S. state\*

0-1,000   1,001-5,000   5,001-10,000   10,001+



\* as of April 30, 2020 2:30 AM EDT

Sources: Johns Hopkins University, CDC

# The Second Surge



## National Alliance on Mental Illness

- 1 in 5 US adults experience mental illness.
- At least 8.4 million Americans provide care to a person with emotional or mental illness.
- Depression and anxiety cost the global economy an estimated \$1 trillion each year in lost productivity.



# Global Mental Health Crisis

Surveyed 2700 people from US, France, Germany, Singapore, Australia, and New Zealand.

67% of people report higher levels of stress since the outbreak of COVID-19.  
57% say they have greater anxiety since the outbreak.  
54% say they are more emotionally exhausted.

53% say they feel sadness day-to-day.  
50% feel they are more irritable.  
42% report their overall mental health has declined.

# Medical Team Health

Mental health of medical team has suffered during COVID-19.

Recent study in the Journal of the American Medical Association quantifies this problem.

Surveyed more than 1,250 health care workers in China who worked in hospitals with Covid-19 patients.

Nurses, frontline workers, women, and those working in Wuhan -- the epicenter of the outbreak in China -- reported more severe symptoms

Significant proportion reported symptoms:

Depression (50.4%)

Anxiety (44.6%)

Insomnia (34.0%)

Distress (71.5%)

# Impact in the US

Worsening mental health affecting the general population.

A poll in late March showed that 22% of Americans reported that their mental health has gotten worse during this pandemic, and that increased to 35% one week later.

A Lancet article published in March noted expected psychological effects as a result of quarantine: PTSD, confusion, increased anger.

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30460-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30460-8/fulltext)

<https://www.cnn.com/2020/04/04/opinions/mental-health-crisis-coronavirus-faraz>

# We are not immune

- Burnout statistics in medical professionals remain high.
- Suicide rates among physicians were high before COVID-19.
- This is not from a lack of resilience.

The Washington Post  
Democracy Dies in Darkness

Get 1 year for

National

## NYC emergency doctor dies by suicide, underscoring a secondary danger of the pandemic

By [Marisa Iati](#) and [Kim Bellware](#)

April 28, 2020 at 10:55 p.m. EDT

A New York City emergency room director died by suicide on Sunday after treating [coronavirus](#) patients and contracting the illness, according to police and the hospital where she worked.

Lorna Breen, chair of the emergency medicine department at NewYork-Presbyterian Allen Hospital, died of self-inflicted injuries Sunday after being transported to UVA Hospital in Charlottesville, police said.



Breen's father, Philip C. Breen, [told the New York Times](#) that she had described coronavirus patients flooding her hospital and sometimes dying before they could be removed from the ambulances. She had no history of mental illness but seemed detached before she died, the Times reported.

"She tried to do her job, and it killed her," Breen told the newspaper.

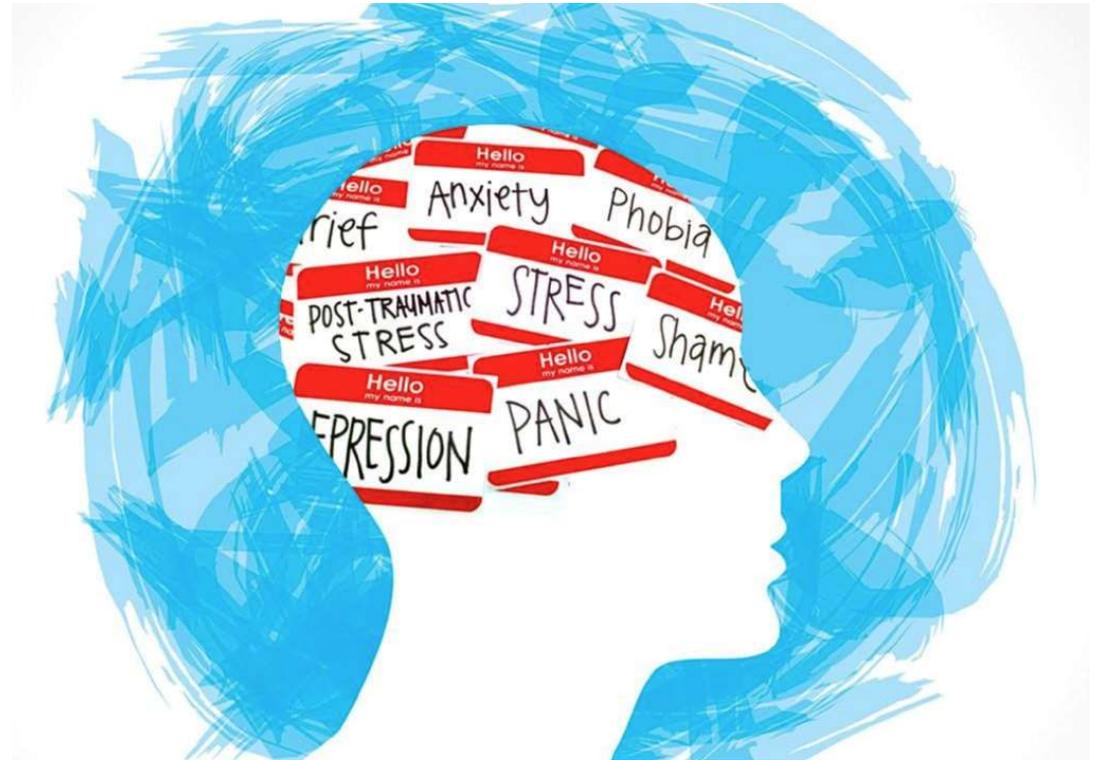
Access The Post's coronavirus coverage for free through our newsletter. [Sign Up](#)

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## Mental Health Disorders

- Anxiety
- Depression
- Panic Disorder
- Post Traumatic Stress Disorder
- Acute Stress Response
- Psychotic Disorders (First break events)



# Other Factors Impacting Mental Health



Unemployment rates rising



Financial insecurity



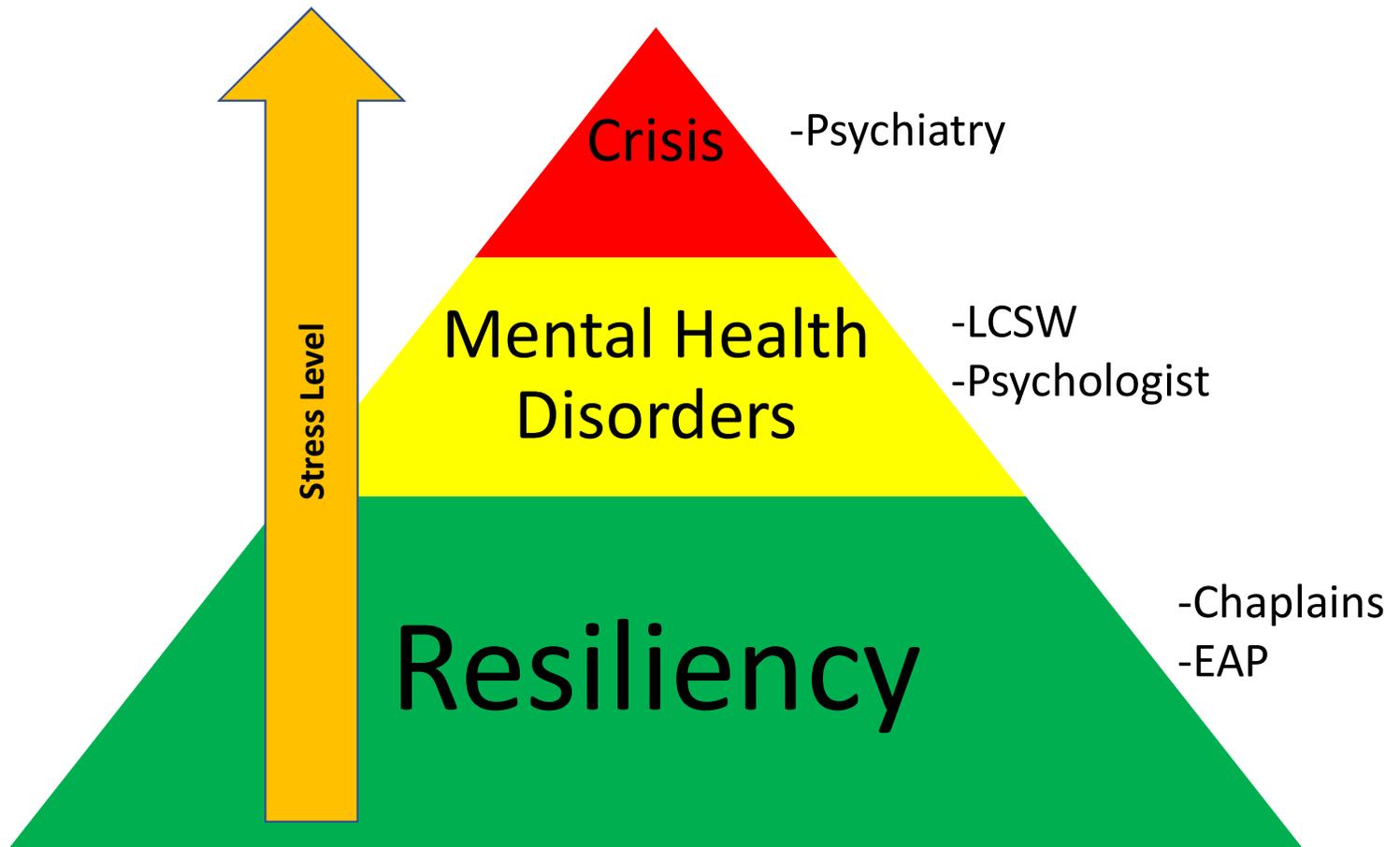
Social anxiety



Uncertainty of the future

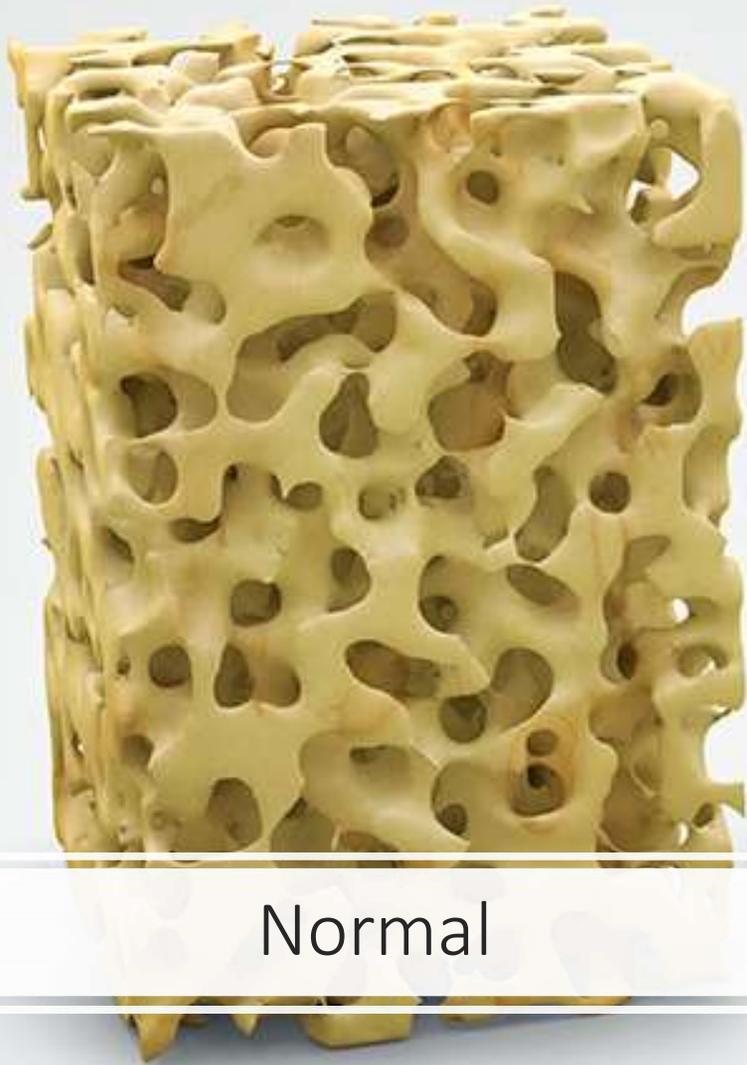


Fear of a second surge in infection rates



Adapted from Dr. David Buxton

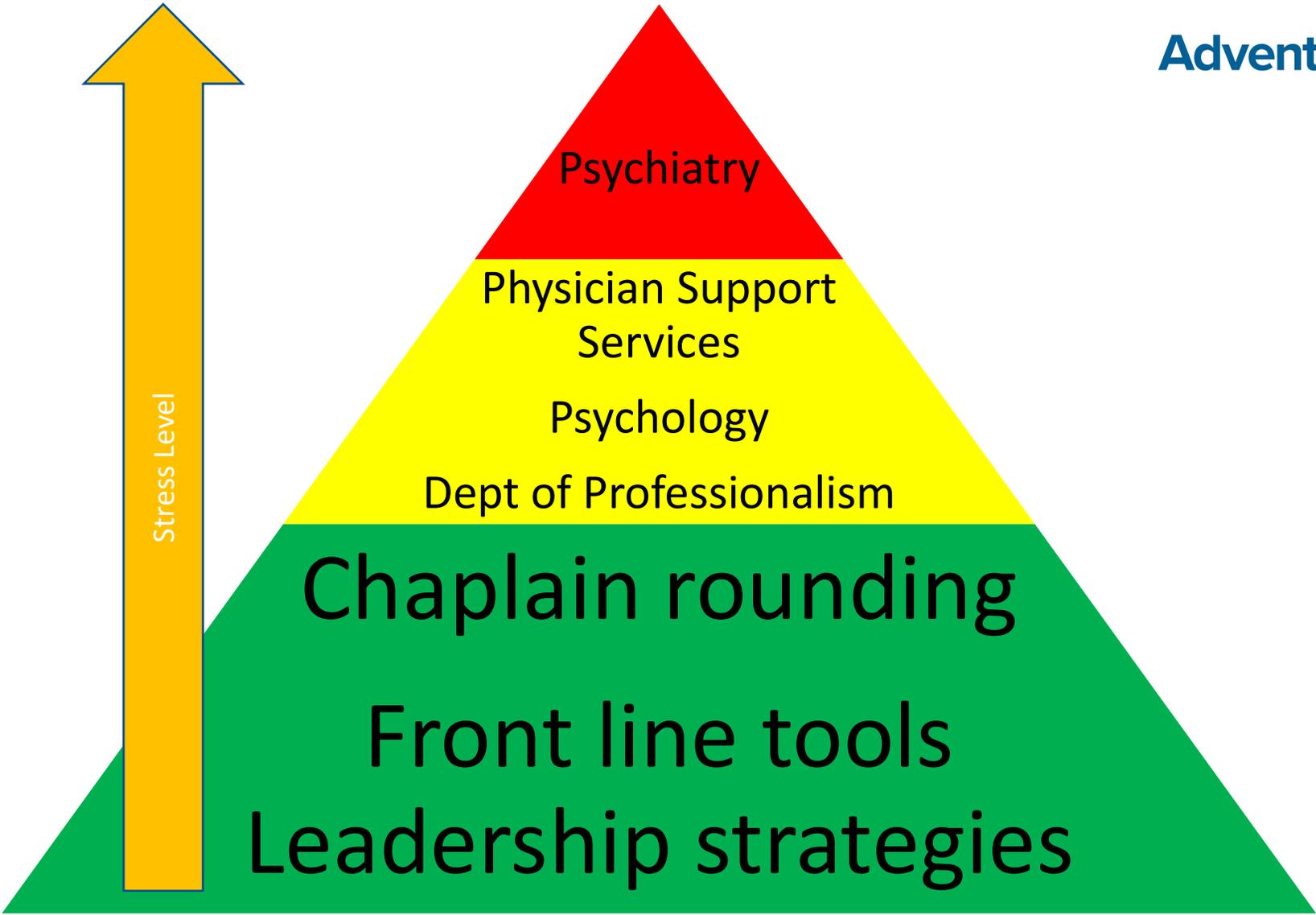
The capacity to recover quickly from difficulties;  
toughness;  
the ability of a substance or object to spring back into  
shape;  
elasticity



Normal



Osteoporosis



## Frontline Tools

- **Identify battle buddies at all levels of the organization.** In the military a battle buddy is a partner assigned to a soldier who is expected to assist his or her partner both in and out of combat.
- Our battle buddy will be a colleague who checks in, and who we are responsible for checking on as well. We need someone with an internal perspective who can tap us on the shoulder when we are getting too close to the edge.



## Frontline Tools

- ***Create moments that bring joy and meaning.*** Pose the challenge to the team at the local campus level.
- Identify something collectively we can do that when we think back on this experience, there is something we remember as a positive moment among the chaos.



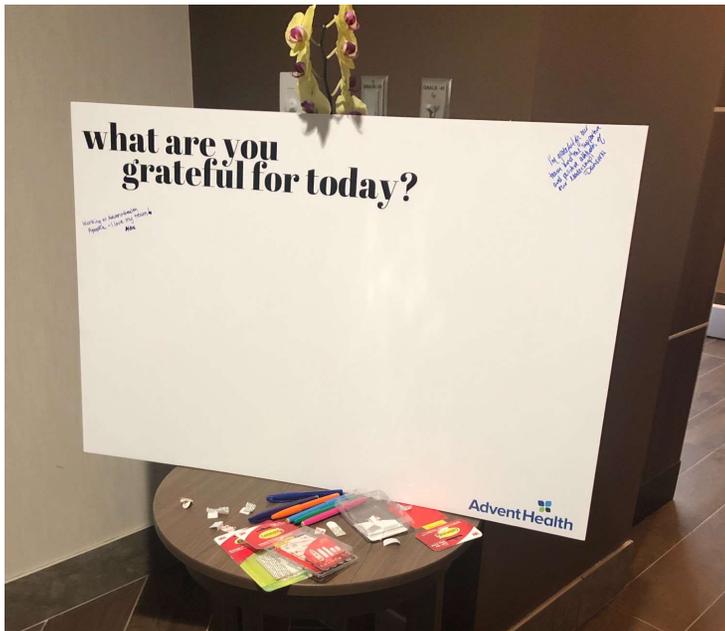
## Frontline Tools

- **Identify and use positive coping mechanisms.** It is easy to turn to negative habits (eating, drinking, withdrawing). What are our positive coping habits (exercise, music, yoga, meditating)?
- Solicit this information directly with leadership and front line staff and encourage it regularly. Add this to part of the conversation with leader rounding.

## TYPES OF COPING SKILLS

<p><b>Self-Soothing</b> (Comforting yourself through your five senses)</p> <ol style="list-style-type: none"><li>1. <u>Something to touch</u> (ex: stuffed animal, stress ball)</li><li>2. <u>Something to hear</u> (ex: music, meditation guides)</li><li>3. <u>Something to see</u> (ex: snowglobe, happy pictures)</li><li>4. <u>Something to taste</u> (ex: mints, tea, sour candy)</li><li>5. <u>Something to smell</u> (ex: lotion, candles, perfume)</li></ol>	<p><b>Distraction</b> (Taking your mind off the problem for a while)</p> <p><b>Examples:</b> Puzzles, books, artwork, crafts, knitting, crocheting, sewing, crossword puzzles, sudoku, positive websites, music, movies, etc.</p>	<p><b>Opposite Action</b> (Doing something the opposite of your impulse that's consistent with a more positive emotion)</p> <ol style="list-style-type: none"><li>1. <b>Affirmations and Inspiration</b> (ex: looking at or drawing motivational statements or images)</li><li>2. <b>Something funny or cheering</b> (ex: funny movies / TV / books)</li></ol>
<p><b>Emotional Awareness</b> (Tools for identifying and expressing your feelings)</p> <p><b>Examples:</b> A list or chart of emotions, a journal, writing supplies, drawing / art supplies</p>	<p><b>Mindfulness</b> (Tools for centering and grounding yourself in the present moment)</p> <p><b>Examples:</b> Meditation or relaxation recordings, grounding objects (like a rock or paperweight), yoga mat, breathing exercises.</p>	<p><b>Crisis Plan</b> (Contact info of supports and resources, for when coping skills aren't enough.)</p> <p>Family / Friends Therapist Psychiatrist Hotline Crisis Team / ER 911</p>

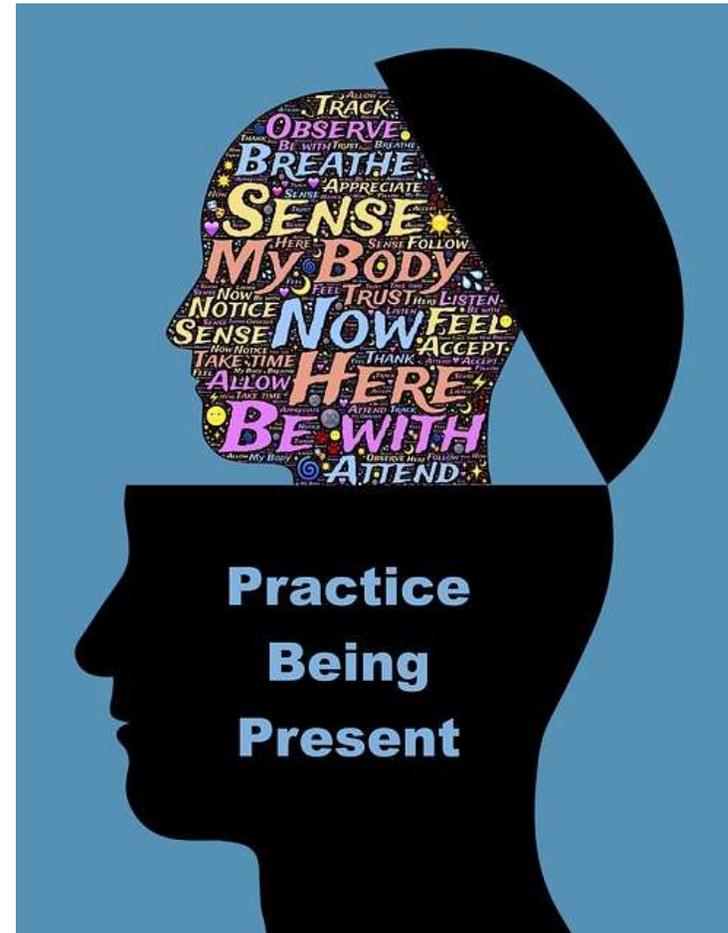
# Frontline Tools



***Create a safe space at your campus.*** Our team needs a place where they can decompress and reflect.

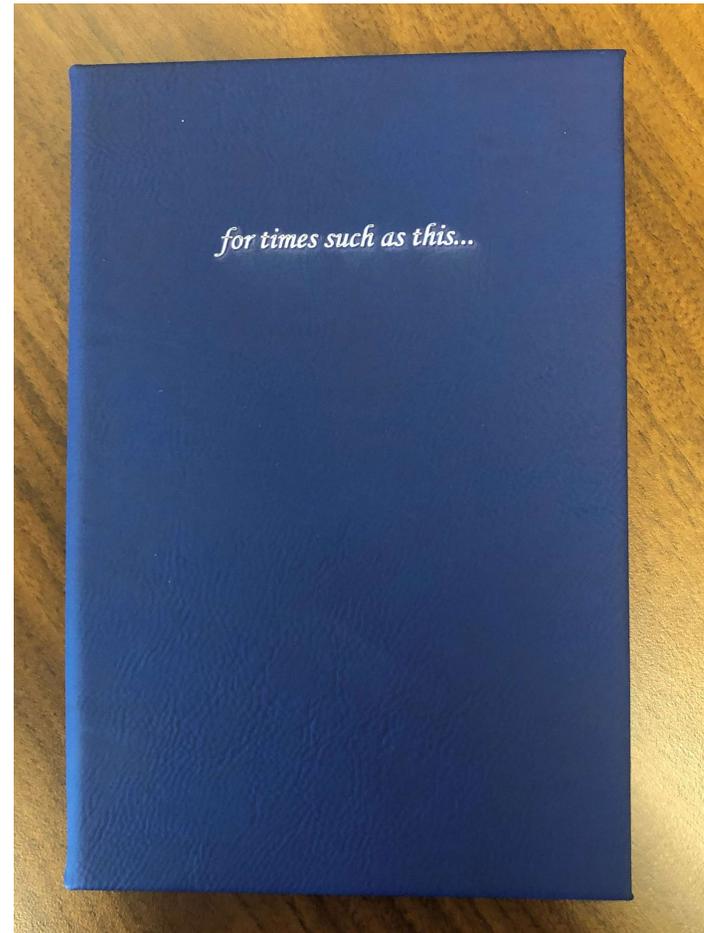
## Leadership Strategies

- *Be present.* Round consistently. Consider starting gratitude rounds.



## Leadership Strategies

- ***We will need to debrief.*** Journaling is another positive coping mechanism and a way to make the debrief process, once it occurs, more effective.



## Leadership Strategies

- ***Be dogmatic in insisting our team members rest and recover.*** We will face a time of physical and emotional exhaustion. Plan now for how we will allow our teams appropriate time for rest and recovery.
- Strategically develop contingency plans for who will back leaders up when they need to step away and recover.

**RESTDAY**

It's part of the program

## Chaplains to “tap us on the shoulder”

- **Leverage the work of our chaplains who can provide an external perspective.** When we are in the thick of things, feeling as if wading through mud, sometimes our battle buddy may also lose insight. We have a highly trained group of spiritual leaders within our organization. Prepare and engage our chaplains. Deploy them to do more frequent touchpoints with our teams in a systematic manner, and empower them to tap a team member on the shoulder if they are concerned.



EMOTIONAL INTELLIGENCE

# That Discomfort You're Feeling Is Grief

by Scott Berinato

March 23, 2020

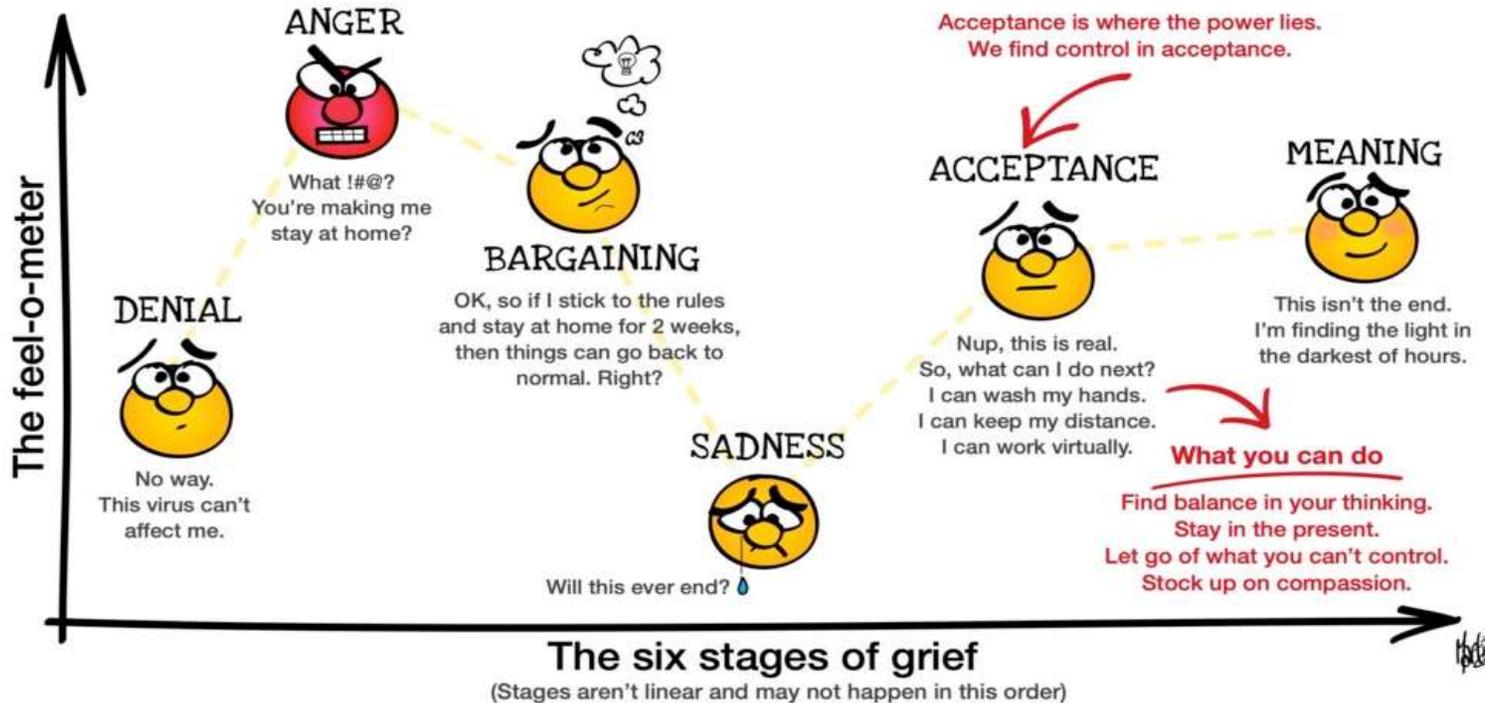
 Summary  Save  Share  <sup>88</sup> Comment  Print  PDF **\$8.95** Buy Copies



# Meaning – The Sixth Stage of Grief

## The discomfort you're feeling is grief

Fighting it doesn't help because your body is producing the feeling.  
If we allow the feelings to happen, they'll happen in an orderly way, and it empowers us.



Finding  
Meaning in  
Medicine

## Whole Care Rounds

- Opportunity to debrief on various topics
  - Personal Life Impact
  - Professional Life Impact
  - Team Impact
  - Community Impact
  - How to go back to normal

# Next Steps

Create

Create a mental health / crisis team, or if already in place, review who is on this team



Be

Be intentional and consistent with your strategies



Design

Design a plan for assisting individuals

- Create a network of assistance that makes it easy to seek and navigate getting help



Triage

Triage at risk individuals, and escalate levels of care as needed

# Physician Support Services



There is a [nationwide physician support line](#) available for free. It is confidential and needs no [appointment](#). They are open 7 days/week 8am – 12am EST.

1-888-409-0141 [www.physiciansupportline.com](http://www.physiciansupportline.com)



[www.forphysicianwellbeing.org/resources](http://www.forphysicianwellbeing.org/resources)

Questions?  
Reflections?

