

# TEAM AUDIT: How is YOUR team & what is YOUR plan to help keep everyone going?





#### **HELLO!**

- Kerry Appleton, MAN, RN, CCRN-K, Clinical Education Specialist
- Who am I?
  - I'm a nurse, a mom, a friend, a colleague, a wife, a sister & a nature bather.
- I am here with you today...
  - because I have experienced the value of being supported by my team, but have also felt the devastating effects of self isolating & trying to pretend that the stress was not impacting me.





## Children's Minnesota Disclaimers and Confidentiality Protections

- Children's Minnesota makes no representations or warranties about the accuracy, reliability, or completeness of the
  content. Content is provided "as is" and is for informational use only. It is not a substitute for professional medical advice,
  diagnosis, or treatment. Children's disclaims all warranties, express or implied, statutory or otherwise, including without
  limitation the implied warranties of merchantability, non-infringement of third parties' rights, and fitness for a particular
  purpose.
- This content was developed for use in Children's patient care environment and may not be suitable for use in other patient
  care environments. Children's does not endorse, certify, or assess third parties' competency. You hold all responsibility for
  your use or nonuse of the content. Children's shall not be liable for claims, losses, or damages arising from or related to any
  use or misuse of the content.
- This content and its related discussions are privileged and confidential under Minnesota's peer review statute (Minn. Stat. § 145.61 et. seq.). Do not disclose unless appropriately authorized. Notwithstanding the foregoing, content may be subject to copyright or trademark law; use of such information requires Children's permission.
- This content may include patient protected health information. You agree to comply with all applicable state and federal laws
  protecting patient privacy and security including the Minnesota Health Records Act and the Health Insurance Portability and
  Accountability Act and its implementing regulations as amended from time to time.
- Please ask if you have any questions about these disclaimers and/or confidentiality protections.

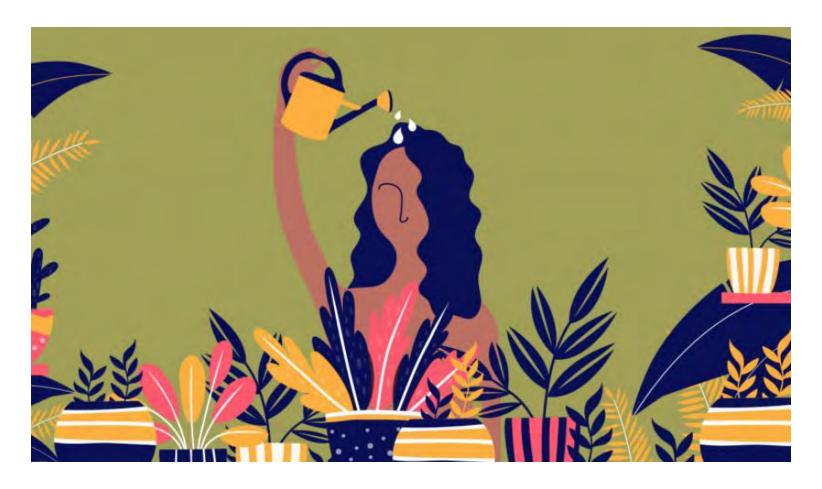




#### No disclosures



#### How have you defined self care?













A critical incident or traumatic event is any event that causes unusual normally. The signs and symptoms of a stress reaction may last a few understanding and support of loved ones usually cause the stress real assistance may be necessary. This does not imply mental instability or on their own. Individuals should then seek professional assistance.

Common signs and signals of a stress reaction:

Physical*	Cognitive
Chills	Confusion
Thirst	Nightmares
Fatigue	Uncertainty
Nausea	Hypervigilance
Fainting	Suspiciousness
Twitches	Intrusive images
Vomiting	Blaming someone
Dizziness	Poor problem solving
Weakness	Poor abstract thinking
Chest pain	Poor attention/ decisions
Headaches	Poor concentration/memory
Elevated blood pressure	Disorientation of time/person/place
Rapid heart rate	Difficulty identifying objects or peop
Muscle tremors	Heightened or lowered alertness
Shock symptoms	Increase/ decrease awareness of sur
Grinding of teeth	
Visual difficulties	
Profuse sweating	
Difficulty breathing	

\*Any of these symptoms may indicate the need for medical evaluation. When in doubt,

My S.E.L.F. care Plan | A proactive strategy to attend to yourself when experiencing stress reactions

PART #1. Identify your common stress reactions and list below:

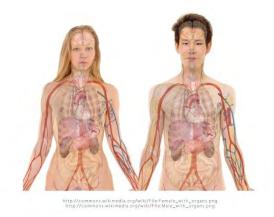
PART #2. Create a menu of options to be utilized when experiencing stress reactions at work and at home:

MY S.E.L.F. CARE PLANS	
WORK	HUME
During the shift or workday, ask yourself. "Is there anything I can do or change right now to make this situation better?"	After your shift or workday has ended, <i>identify activities</i> that can help you to <i>reduce</i> stress reactions and not amplify them.
My S.E.L.F. care options to consider are:	My S.E.L.F. care options to consider are:









#### Reactions to stress

come in many shapes and forms:













Treatment ideas for your Reactions





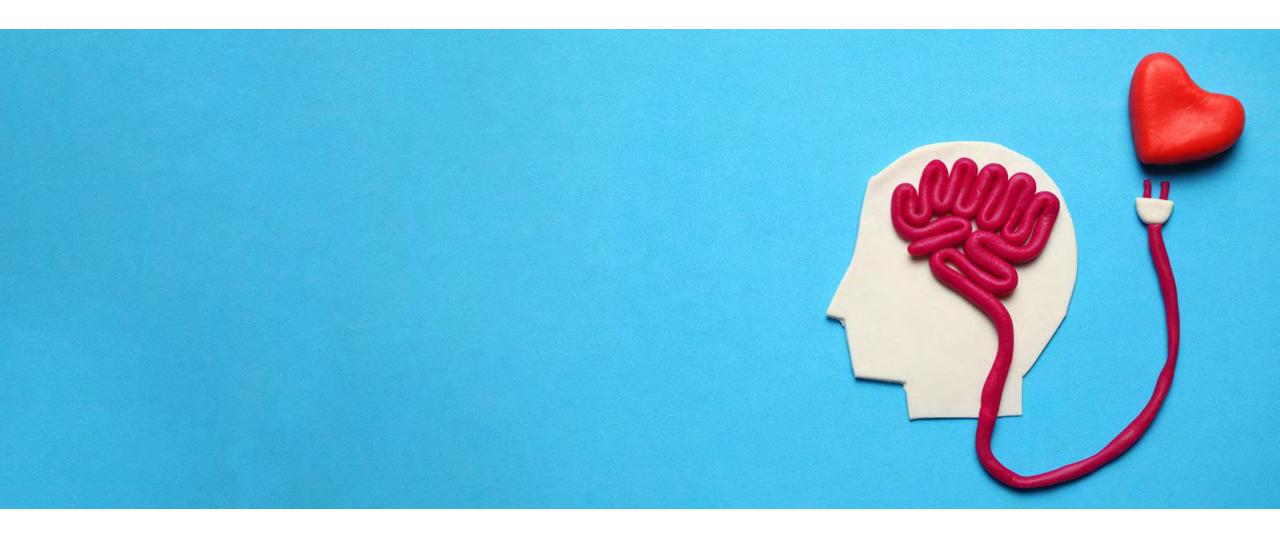




© 2019

Children's

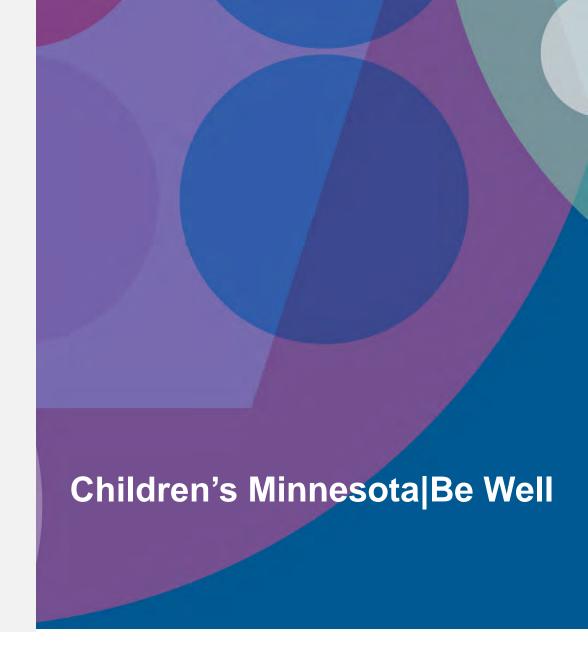




Pause (n.d) https://dailyrindblog.com/prioritizing-your-mental-health-wellness-during-covid-19-and-beyond/

# MENTAL & EMOTIONAL support for employees during COVID-19







## Looking for someone to *LISTEN*... call PEER SUPPORT

#### **Peer Support team members:**

- Are employees who understand daily challenges
- Are trained to provide emotional first aid
- Can provide suggestions for additional support services
- Provide confidential conversations





#### Children's Minnesota Be Well Live

- In April, peer volunteers supported
   42 call-in support sessions
- In May, Be Well Live sessions available upon request for teams looking to come together, to support one another and feel heard.



Support Group. (n.d.). https://namiwheeling.org/wp-content/uploads/sites/186/2018/01/support-group-2.jpg



## Creating a moment to *PAUSE*

 Going Home Checklist, is a concrete tool intended to help ALL staff reflect and re-center before changing gears for life at home.





#### Employee Resource Support Center

- A dedicated space for employees to relax & recharge
- Open 24/7, staffed by members of the Child & Family Services department
- Provides services, resources and amenities in a calm and soothing environment
- To-go resources also available





# MYSELF IS NOT SELF INDULGENT. CARING FOR MYSELF IS AN ACT OF SURVIVAL... AUDRE LORDE







#### References

- Appleton, K., Nelson, S & Wedlund, S. (2018). Distress debriefings after critical incidents: a pilot project. AACN Advanced Critical Care, 29 (2). DOI:http://dx.doi.org/10.4037/aaccnacc2017
- Clark, P.R., Polivka B., Zwart, M. & Sanders, R. (2018). Pediatric emergency staff preferences for a critical incident stress debriefing. *Journal of Emergency Nursing*, 1 (8). doi.org/10.1016/j.jen.2018.11.009
- Critical incident definition: www.criticalincidentstress.com/critical incidents. Accessed 9/10/2019
- Engelhardt, H. (1985). Physicians, patients, health care institutions and the people in between: Nurses. In Bishop, A. & Scudder, J. (eds.). Caring, curing, coping. Alabama: The University of Alabama Press.
- Hamric, A.B. (2001). Reflections on being in the middle. Nursing Outlook, 49, 254-257.
- Hamric, A.B., Borchers, C.T., & Epstein, E.G. (2012). Development and testing of an instrument to measure moral distress in healthcare professionals. *American Journal of Bioethics Primary Research*, *3*(2). 1-9. doi: 10.1080/21507716.2011.652337
- Jinkerson, J. D. (2016). Defining and assessing moral injury. Traumatology, 22 (2), 122-130. https://psycnet.apa.org/doilanding?doi=10.1037%2Ftrm0000069
- Maslach, C., Leiter, M.P. (1997). The truth about burnout. San Francisco, CA: Jossey-Bass Publishers.
- Moss, M., Good, V., Gozal, D., Kleinpell, R., & Sessler, C. (2016). An official critical care societies collaborative statement: Burnout syndrome in critical care health professionals: a call for action. American journal of critical care, 25(4), 368-376. doi:http://dx.doi.org/10.4037/ajcc2016133
- Mitchell, J.T. (2015). Group crisis intervention (5<sup>th</sup> ed.) Ellicott City, MD: International critical incident stress foundation, inc.
- Shay, J (2016). Moral Injury. Intertexts, 16 (1). Texas Tech University Press
- Scott, S. D., Hirschinger, L. E., Cox, K. R., McCoig, M. M., Brandt, J., & Hall, L. W. (2009). The natural history of recovery for the healthcare provider second victim after adverse patient events. Journal of Quality and Safety in Health Care, 18, 325-330.
- Ulrich, B.T., Lavandero, R., Woods, D., & Early, S. (2014). Critical care nurse work environments 2013: A status report. *Critical Care Nurse*, 34(4), 64-79. doi:10.4037/ccn2014731



### Questions:

Kerry.Appleton@childrensmn.org





© 2020 Page 18

