

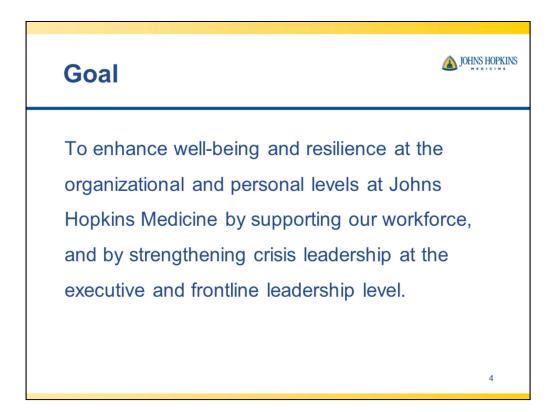
Research tells us that psychological "casualties" always exceed physical casualties in the wake of disaster.

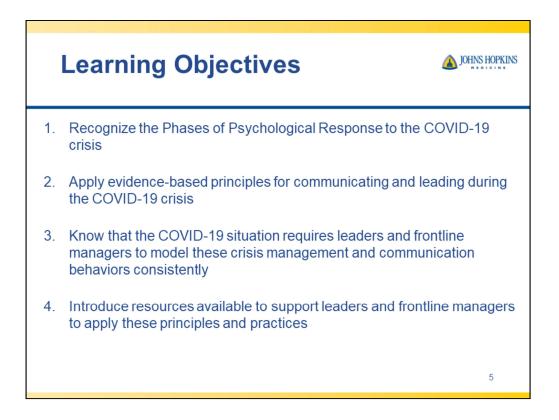
Observations range 4 - 50:1

Research indicates 25-30% of those directly affected by an event could benefit from acute psychological support.

KEY POINTS:

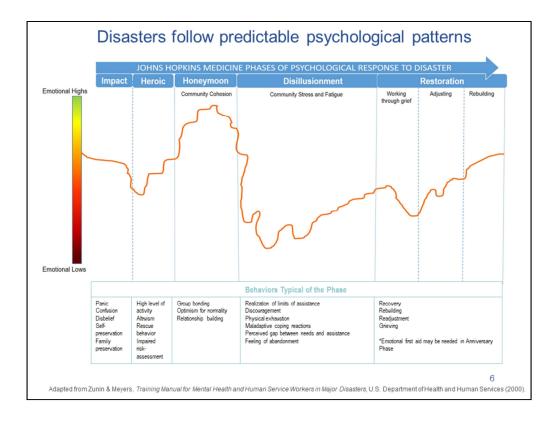
- Recognize that psychological distress is expected and will be more prevalent than generally anticipated.
- Understand that stress at work may carry over to home.
- Don't assume that people are doing well simply because they are not complaining.
- Don't assume that home life is going well because work is going well.





KEY POINTS:

- Effective leadership during crisis situations requires specific and structured communications.
- Do not underestimate the range of psychological distress that may compromise:
 - your team's ability to function effectively
 - patient and staff safety
 - this organization's mission.



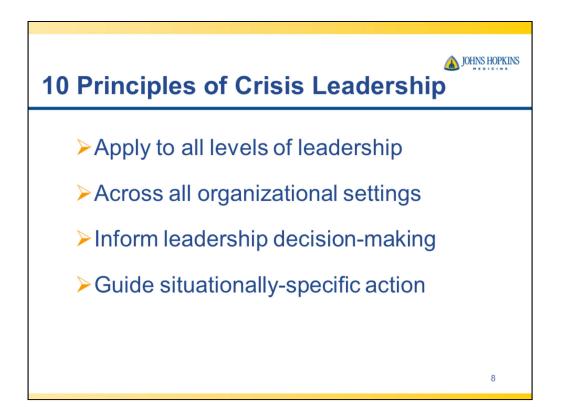
KEY POINTS:

- Remember, even though disasters seem chaotic, they follow a predictable psychological response trajectory.
- Recognize that knowing this empowers leaders to anticipate adverse psychological and behavioral reactions and assure staff receive timely and appropriate psychological support.
- Listen to and observe staff behaviors as these signal their progression through the phases of disaster.
- Recognize that staff may be in different phases of psychological response.



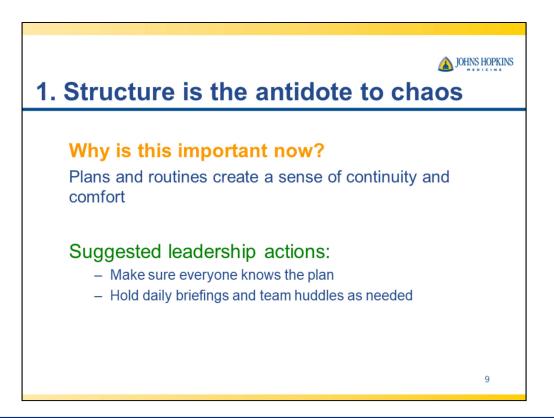
KEY POINTS:

- Practice tenacious optimism. Have a vision, develop a plan, and share it
- Act decisively. As Patton noted the only failure in leadership is the failure to lead.
- Use focused messages that are clear and concise.
- Fostering and preserving trust is essential: *Trust builds the bridge between the business need for results and the human need for connection.* Drs. Dennis and Michelle Reina



KEY POINTS:

- Ask leaders and managers who report to you to suggest how they will apply the principle in their leadership roles and setting.
- Remember you may already be implementing many of these recommendations in your setting.
- Ask: "How do we sustain what we're doing well?
- Ask: "How can we harness what we do well to enhance areas where we need improvement?



DO:

- · Present the plan and expectations for the positive outcomes that will result
- Include a "huddle" (small group discussion) at the beginning or end of each shift to discuss the most significant events of the shift.
- Include these four questions in conversations:
 - 1. What went well?
 - 2. What were the challenges, the worst part?
 - 3. What did you learn?
 - 4. How can we take what we do well and apply it to solve current problems?
- Maintain as many existing routines as possible.

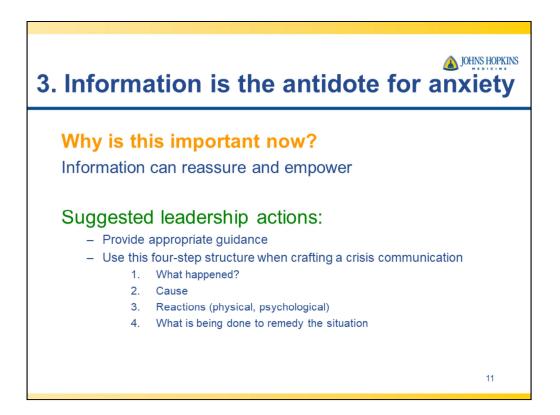


DO:

- Listen with the intent to understand, not with the intent to reply.
- Notice if other people's stress, fear and anxiety is compromising your ability to listen. Use mindfulness techniques to stay grounded and focused.
- Allow people to vent. This helps them re-establish more deliberative thinking and increases adherence to direction.
- Listen with curiosity to what is said and not said.
- Ask open-ended question (what do you think is happening?)
- Validate and redirect respectfully when necessary if comments become counterproductive.

DON'T:

• Let the conversation spiral out of control.



DO:

- Provide three types of guidance, as appropriate:
 - 1. What may happen (anticipatory guidance)
 - 2. What happened and why it happened (explanatory guidance)
 - 3. Recommendations or mandates for action (prescriptive guidance)
- Provide information on resources that will support people to take the action.

DON'T:

• Assume all staff are equally well-informed.



DO:

- Make sure your people know how to access resources to support them to:
 - Have their questions answered
 - Work safely and effectively
 - Promote and preserve their physical and psychological wellbeing
- Share your strategies for maintaining or improving your wellbeing

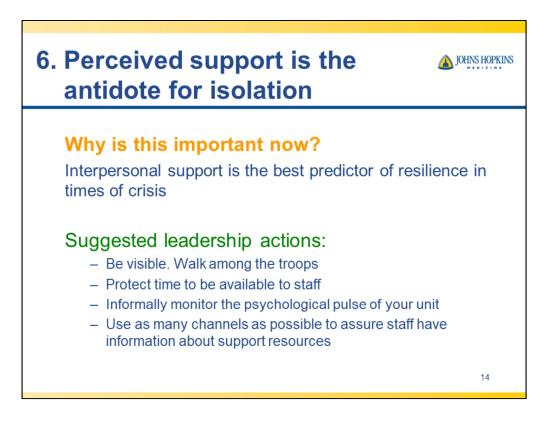


DO:

- Practice what you preach (or "walk your talk").
- Share bad news as well as good.
- Explain when a new directive contradicts an older one.
- Model self-care behaviors.
 - Take breaks without guilt.
- Be kind and constructive in your feedback

DON'T:

- Shame anyone
- Criticize publicly



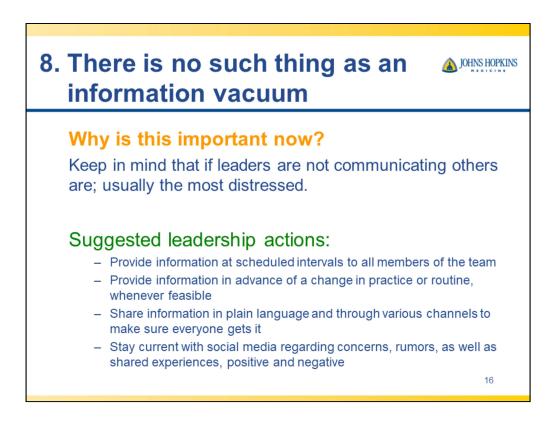
DO:

- Encourage the use of available resources.
- Defuse conflict quickly.
- Remember fear and fatigue erode usual coping mechanisms, so people are more likely to over react to otherwise minor challenges.
- Encourage staff to reach out to others to create mutual support plans.



DO:

- Remind people they are part of an institutional legacy of excellence and compassion.
- Provide opportunity to connect and share thoughts about strengths as well as challenges (use four questions from Principle 1).
- Challenge "us vs them" thinking.



DO:

- Ask "what are you hearing?"
- Understand there will always be distortions, catastrophizing, and counterproductive rumors.
- Do you best to monitor informal communication networks.
- Recognize that there are many competing sources of information.

DON'T:

 Assume that because you have provided information, people have received it or accepted it.

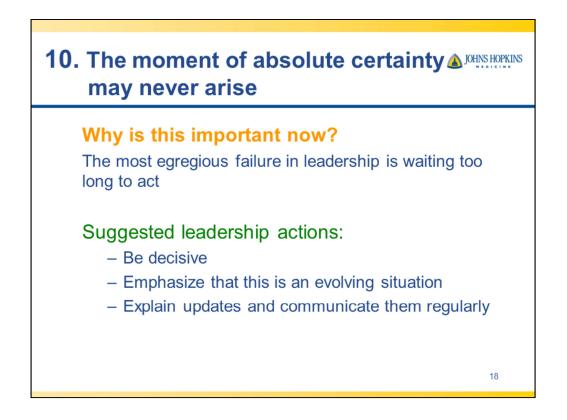


DO:

- Recognize that trust takes years to build, moments to destroy, and a lifetime to repair.
- Remember people remember what they hear first and what they hear last.
- Admit what you don't know and also say when you can provide the information.
- Be transparent about the information you use to inform decisions.
- Invite questions in advance of briefings, townhalls, etc.
- Provide recordings of important meetings so everyone has access to the same information.

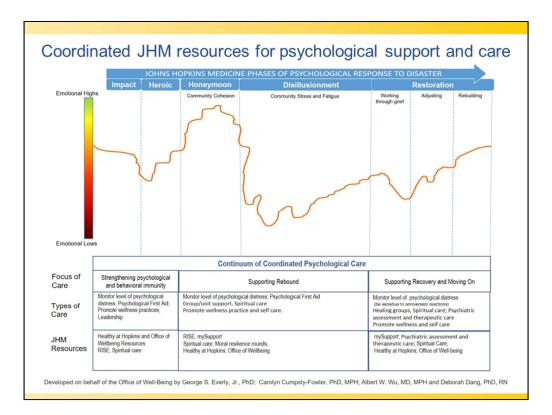
DON'T:

• Repeat messages too many times. You may sound pedantic or annoying and people stop listening.



DO:

- Plan for the "long haul."
- Recognize that decisive action needs to be calm, thoughtful and values-based.
- Remember that when fearful, confused, and angry, people look to leadership for guidance.
 - Absent leadership, they impulsively strive for acute self-preservation without consideration of long-term consequences. This can be detrimental in the long-run.



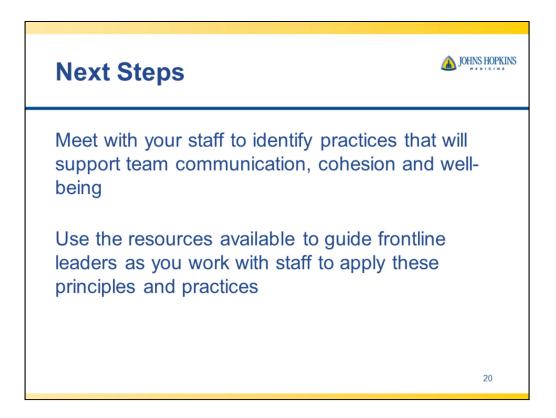
Resource links:

1. Supporting Health and Well-Being resources on the JHM internal COVID-19 internal resources portal

https://covid19.insidehopkinsmedicine.org/#faculty-support

2. JHM Office of Well-Being website

https://www.hopkinsmedicine.org/office-of-well-being



DO:

- Involve staff to identify practices that will fit well in their practice setting. This is important to foster team empowerment, connections and cohesion.
- Encourage staff to access the resources available through the Office of Well-Being: <u>https://www.hopkinsmedicine.org/office-of-well-being</u> or to submit a question about crisis leadership to <u>owb@jhmi.edu</u>

