

Pastoral Care

7 May 2020

Main points from this webinar

- These are unprecedented times- it's normal and understandable for this to affect your mental health
- While we can't change what we don't have control over, we can adapt our emotional response to help cope
- Take time to look after your wellbeing- you can't help others if you're not taking care of yourself

Resources

[NHS wellbeing support website](#)

[Intensive Care Society website](#)

[British Psychological Society wellbeing resources](#)

For resources specific to pregnancy and COVID, see below (within S Hendrickson's presentation)

Faculty

Professor A Hart, Editor JPRAS, Consultant Plastic Surgeon, Glasgow

Mr S Eccles, BAPRAS Honorary Secretary, Consultant Plastic Surgeon, London

Dr L Dalton, Clinical Psychologist, University of Oxford

Mr T E E Goodacre, BAPRAS Past President, Consultant Plastic Surgeon, Oxford

Mr A G B Perks, BAPRAS Past President, Consultant Plastic Surgeon, Nottingham

Miss K Lindsay, ST6, Canniesburn, Glasgow, JPRAS Social Media Editor

Miss S Hendrickson, Plastic Surgery Trainee, South West, PLASTA Vice President

Miss R Shirley, Consultant Plastic Surgeon, Stoke Mandeville

Mr N K James, BAPRAS Past Treasurer, Consultant Plastic Surgeon, Hertfordshire

Points from each speaker

Background (A Hart/S Eccles) [Link to video](#)

- Call for easing lockdown is growing, as case numbers are levelling out.
- In the general public, happiness is plummeting, anxiety is rising and people are feeling less satisfied with life- this is particularly prevalent in key worker groups
- Important for healthcare professionals to develop the resources to protect our mental health during this crisis.
- An article in the BMJ mapped the effects of social distancing measures on health and the effects on morbidity and mortality- [click to view](#)

Coping strategies specific to the COVID-19 experience (L Dalton) [Link to video](#)

- We are all facing same threat of COVID, but our personal context will inform how we deal with this.
- The human brain is designed to focus on threats more than neutral or positive information. When we sense threat, emotions take over, and even when a threat isn't present, our brain holds onto this

- Be mindful of what you have control over- while you can lessen anxiety by planning if a situation is controllable, less controllable problems (such as the COVID crisis can't be planned for, and emotion-focused coping strategies are more useful
- Ways to take care of yourself.
 - Recognise that while partially grounded in reality, thoughts are not facts.
 - When we're anxious, it's normal to over-estimate threats, and underestimate our ability to cope.
 - Dealing with negative thoughts is not just about positive thinking, but maintaining a balanced perspective
 - Don't push feelings away- acknowledge them and don't pass judgement how you are feeling.
 - In terms of looking after colleagues, there's power in listening and understanding, rather than rushing in with a solution.
 - The busier we are, nourishing and restorative activities are the things to disappear first- be sure to prioritise the basics- food, breaks, days off, time away from news. Then prioritise the things that are important to you and give you pleasure.
 - Grounding techniques- useful after a difficult situation: Stop; notice 5 things you can see/hear/points of contact between your body and something else; breathe!- take five breaths, paying full attention to the sensation of the breath

Coping with the pressure of COVID as a surgeon (T Goodacre) [Link to video](#)

- COVID is not a surgical disease- surgeons are far from the place of control.
- Response from surgeons has been magnificent across the board in work rate, changes in decision making process, but this has come at a cost: many are overworked and exhausted, practical training has collapsed, administrative failings have led to anger and frustration
- Equally some surgeons have not been engaged in front line duties, feeling disenfranchised, valueless
- How can we react positively?
 - Acknowledge these times are unprecedented, and accept the imperfect.
 - Acknowledge what you can't control as well as looking for what you can
 - Be part of the solution- be that by getting behind new ways of teaching, leading, managing, researching, or simply by bringing a positive attitude to an uncontrollable situation.

Maintaining common purpose and professional cohesion (G Perks) [Link to video](#)

- Communication and collaboration is key- in Nottingham, have been running twice-daily zoom meetings including everyone in the department from core trainees to consultants, as well as secretaries, in order to allow all team members to feel engaged and involved

Personal perspective on shielding (K Lindsay) [Link to video](#)

- Is shielding due to a chronic condition
- While grateful to be in the shielding group, it is challenging for people in the medical profession to accept putting yourself first rather than your work.
- Has spent time while shielding and not being able to undertake any clinical work finding new ways to create a sense of purpose.

Pregnancy and COVID-19 (S Hendrickson) [Link to video](#)

- The evidence available is limited, based mainly on Chinese experience, or from previous pandemics
- Roughly speaking- across all trimesters, 'probably' no more likely to get it, but if you do, you 'may' get sicker.
- Vertical transmission is probable- unclear what impact this may have on the baby, but there is 'probably' no increased risk of foetal abnormality or miscarriage
- In the 1st and 2nd trimester- Guidance from, eg RCOG/midwives is also vague- but 'normal' guidelines pertain- should undertake a risk assessment- does being at work put you at an increased risk compared to not being at work- work pattern or workplace should be modified accordingly.
- In the 3rd trimester: higher risk of serious maternal illness, but same is true in non-COVID times. Advice is to work from home/for your work to be suspended with full pay (NB this may mean your maternity leave may have to commence at 36 weeks)

Resources

- [Coronavirus in Pregnancy and Delivery: Rapid Review \(Mullins et al\)](#)
- [Clinical manifestations and outcome of SARS-CoV-2 infection during pregnancy \(Liu et al\)](#)
- [Critical illness due to 2009 A/H1N1 influenza in pregnant and postpartum women: population-based cohort study \(BMJ\)](#)
- [RCOG guidelines- occupational health advice for employers and pregnancy women during COVID-19](#)
- Facebook group for pregnant doctors- contact Susan – vicepresident.plasta@gmail.com

Less than full time working, research and COVID-19 (A Hart) [Link to video](#)

- There is information about the practicalities of research and LTFT working available in our [webinar on education and training](#)
- Your decision for being LTFT is still valid, though all departments should be open to further discussion should you choose to change this, particularly during COVID
- Regarding research, there are practical issues which may affect your research- many people may have to change project/focus as lab access is restricted, supervisory interactions reduced, funding restrictions may arise.

International Support (G Perks) [Link to video](#)

- ICOPLAST trainee group has been invaluable for sharing information world-wide- all trainees are encouraged to join- <http://www.icoplast.eu/about/>

Mentoring and Support- a personal experience (R Shirley) [Link to video](#)

- Talk focused on support and mentoring in general, not just within the COVID crisis
- Importance of being 'mindful'- Mayo and Stanford have appointed 'chief wellness officers'
- Coaching- helped to develop skills in leadership, compassionate resilience, mindfulness and emotional intelligence. Was a service offered to Rebecca at trainee level as part of training

(not something that was offered across the board to all trainees). Big difference in teaching someone and helping them to learn.

- Controlling the amygdala (fight or flight response)- while challenging to do, allows individuals to perform in stressful times
- Technical performance is impaired by stress and cognitive distraction- [Determining the effect of external stressors and cognitive distraction on microsurgical skills and performance](#) (Carr et al)
- Ability to access pastoral care has helped her to get where she is and it is important to ensure that this is available to others.

Managing loss of income/financial pressures (N James, S Eccles) [Link to video](#)

- On pre-webinar survey, issues surrounding loss of income was flagged as something that was concerning participants. Again, this is another example of a situation that is in many respects, beyond your control
- One of the few professions, as doctors, that are still working, albeit under intense pressure- in that respect job stability is available where for others it isn't
- Important not to rely on private practice income- opportunities within the private practice sector will likely be reduced going forward
- Some practical ideas:
 - Treat your family finances like a business- create profit and loss accounts, budgets etc;
 - Speak to your medical defence organisation as there may be reductions available in your indemnity payment
 - British Business Bank is providing loans to companies who may be in financial difficulty
 - Take advice from as many avenues as possible- colleagues (both junior and senior!), mortgage companies, banks, indemnity providers etc.

Questions and discussion ([link to discussion](#))

The panel discussed difficulties in protecting shielded groups, and in particular, those from black and minority ethnic groups

AH- It's important to strike a balance between over protecting and therefore unduly stigmatising shielded groups and ensuring that those at increased risk are protected- Communication with other colleagues is important in ensuring understanding.

NJ- Senior managers in his hospital has been mandated to risk assess all staff and to put appropriate measures in place to protect staff in vulnerable groups

SH- From a personal perspective, shielded staff have been mentioned and included in staff newsletters, which has helped her with feeling included and a part of the team.