

4 steps health systems can take to boost pandemic resiliency

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Throughout the COVID-19 pandemic, physicians and other health professionals have faced concern about safety, overworking and feelings of loss. However, building a resilient organization can help physicians and other health professionals find ways to cope and recover from the ongoing crisis.

“It’s natural to feel anxiety, have trouble concentrating, fatigue, difficulty sleeping, even feeling guilty,” said Christine Sinsky, MD, vice president of practice satisfaction at the AMA, during the recent meeting of the AMA Integrated Care Consortium. This event provided a chance for AMA Health System Program partners to gather virtually to discuss successes and challenges from the past year with peers and leadership.

Learn more about how the AMA is helping health systems face 2021’s biggest challenges.

“If there’s no intervention, a substantial portion of the workforce will move on to developing chronic stress reactions, dysfunctional reactions of burnout, depression, substance abuse, suicide, PTSD, anger—all of those things we’ve seen with COVID,” said Dr. Sinsky. “The fact that so many of our workers have experienced a chronic stress reaction, has implications for the mental well-being of our workforce and, even the viability of that workforce.

“But it’s not inevitable that the workforce will go on to develop these dysfunctional chronic stress reactions,” she added. “In fact, we can move toward coping and recovery—and even thriving—after a period of stress.”

“What’s unique about this particular crisis is that there’s no clear endpoint,” Dr. Sinsky explained. “It is an ongoing crisis for people, but there are things that an organization can do that will decrease the number of workers who go on to develop a dysfunctional chronic stress reaction, and increase the number who will move on to coping and thriving.”

1 **Establish a well-being program**

“There are some things that you can put in place before a crisis,” said Dr. Sinsky, noting that this includes “some preexisting institutional supports like a well-being program,” which would be led by a chief wellness officer.

It is also important to include a “communication plan, possibly even an ethics program. By having a preexisting plan for how to care for the caregiver during crisis,” it can help organizations prepare “for the next crisis.”

2 **Provide stress first aid**

Adapted from the military, “stress first aid can be given during that time of acute stress injury that increases the likelihood of moving on to coping and recovery,” said Dr. Sinsky. This might include “basic needs for transportation, food, safe housing, psychological and mental health support.”

It is “particularly important that this support be confidential and low stakes in terms of any implication for one's credentials,” she said. “Another aspect of stress first aid has been regulatory relief, such as the CMS [the Centers for Medicare & Medicaid Services] waivers providing regulatory relief around telemedicine and around verbal orders.”

“At the institutional level, you can ask: what are some of the compliance and regulatory policies that we can actually scale back on during this time.”

Learn more about the AMA’s work to debunk regulatory myths to help physicians and care teams in their day-to-day practice environment.

3 **Offer recovery aid**

While it is vital that health systems provide stress relief for physicians in the moment, it is also important to provide “recovery aid because stress has its reverberations for six to 12 months, even after the crisis has passed,” said Dr. Sinsky. “It’s important to schedule in rest time ... to make counseling available for individuals who may not surface some of the chronic stress until further down the line.

“An interesting approach is creating opportunities for people to reflect and reconsider how they interpret what happened and help them find meaning in the role that they played during that time,” she said.

4 Distribute AMA’s coping with COVID-19 survey

Measurement of stress levels and the contributors and alleviators of stress is “one of the things that an organization can do to help their workforce,” said Dr. Sinsky. “Early in the spring, we made a rapid pivot, building on the burnout assessment work that we’d been doing, and developed a coping with COVID survey.”

“We have deployed the survey to over 75 health systems across the country” and “now have over 55,000 respondents in our database with representation from 29 different states,” she said, noting that what was important to the survey was it was relevant for both physicians and nonclinical staff.

The AMA offers resources to help physicians manage their own mental health and well-being during the COVID-19 pandemic. The AMA also provides resources for health care leaders on caring for our caregivers during COVID-19.