



# Focus on Dementia Learning System event in partnership with NHS Lanarkshire

The use of psychological models to understand wellbeing and team function

Thursday 17 August 2023  
10:30 – 12:00

Supporting better quality health and social care for everyone in Scotland





# Welcome and introductions

Michelle Miller  
Portfolio Lead  
Healthcare Improvement Scotland

Supporting better quality health and social care for everyone in Scotland



# Agenda

TIME	TITLE	PRESENTER
10:30	Introduction and welcome	Michelle Miller Portfolio Lead Healthcare Improvement Scotland
10:35	Background context and how we think about staff wellbeing – from reactive individual supports to trauma informed workforce recovery	Dr Susan Ross Consultant Clinical Psychologist/Head of Specialties NHS Lanarkshire
10:50	Pause for personal reflection	Dr Susan Ross
10:55	Examples from Lanarkshire – focus on the Care Home System with reflections on what worked well, and why, along with barriers and changing needs.	Dr Phil Smith Consultant Clinical Psychologist NHS Lanarkshire
11:20	Introduction of a 3 phased approach to practical application of this approach, with examples from Lanarkshire	Dr Susan Ross and Dr Phil Smith
11:45	Questions from chat and ‘Call to Action’	Dr Susan Ross and Dr Phil Smith
12:00	Close and evaluation poll	Michelle Miller



Dr Susan Ross

Consultant Clinical Psychologist

Head of Psychological

Specialties: Older Adults, Neuropsychology, Staff Support

Dr Phil Smith

Consultant Clinical Psychologist

Psychological Therapies for Older People

NHS Lanarkshire

Supporting better quality health and social care for everyone in Scotland



## A poll will appear on the main screen

Please type one word into the poll to describe how you are feeling today?



# What is today about . . .

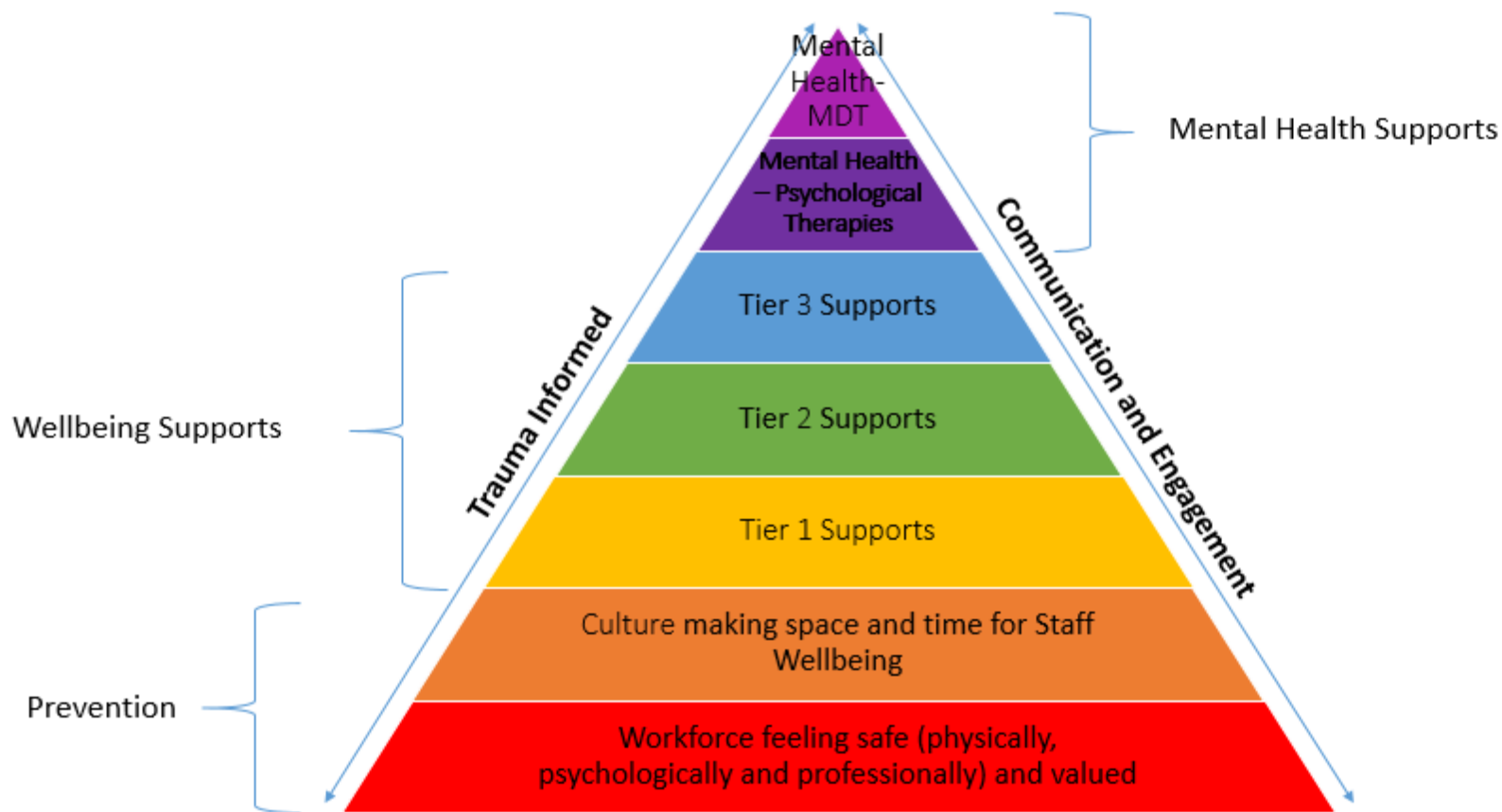
This is a time for you, as individuals, as leaders and as active participants in complex systems/teams – to check in with yourselves, to connect, to take stock and to reflect. Hopefully it will be nourishing, healing and inspiring.

Later on, we'll think more about 'doing stuff' but the focus, for now, is much more on the 'being stuff' – the psychological and human factors.

To begin focussing on the 'being stuff', we will provide a short history of the contexts in which we have learned and applied the ideas we cover today.

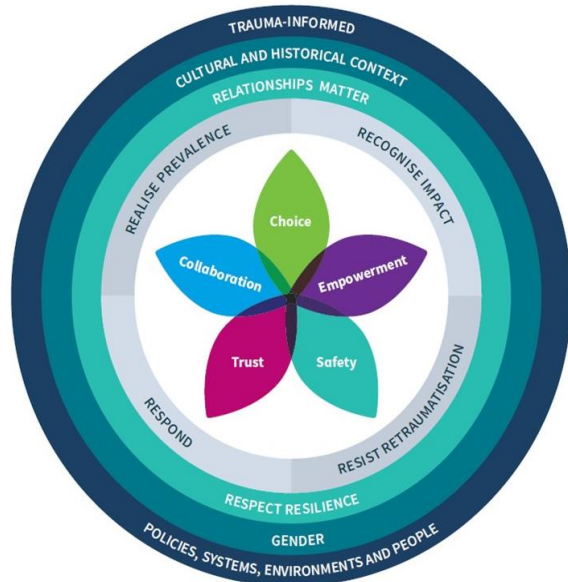
## Section 2: The Seven Components Of Psychological First Aid







## TRAUMA-INFORMED ORGANISATIONS



## Key principles

The key principles underlying TIP are listed below, adapted from Fallot and Harris (Fallot & Harris, 2006).

### Key principles of trauma-informed practice

#### 1. Safety

Efforts are made by an organisation to ensure the physical and emotional safety of clients and staff. This includes reasonable freedom from threat or harm, and attempts to prevent further retraumatisation.

#### 2. Trustworthiness

Transparency exists in an organisation's policies and procedures, with the objective of building trust among staff, clients and the wider community.

#### 3. Choice

Clients and staff have meaningful choice and a voice in the decision-making process of the organisation and its services.

#### 4. Collaboration

The organisation recognises the value of staff and clients' experience in overcoming challenges and improving the system as a whole. This is often operationalised through the formal or informal use of peer support and mutual self-help.

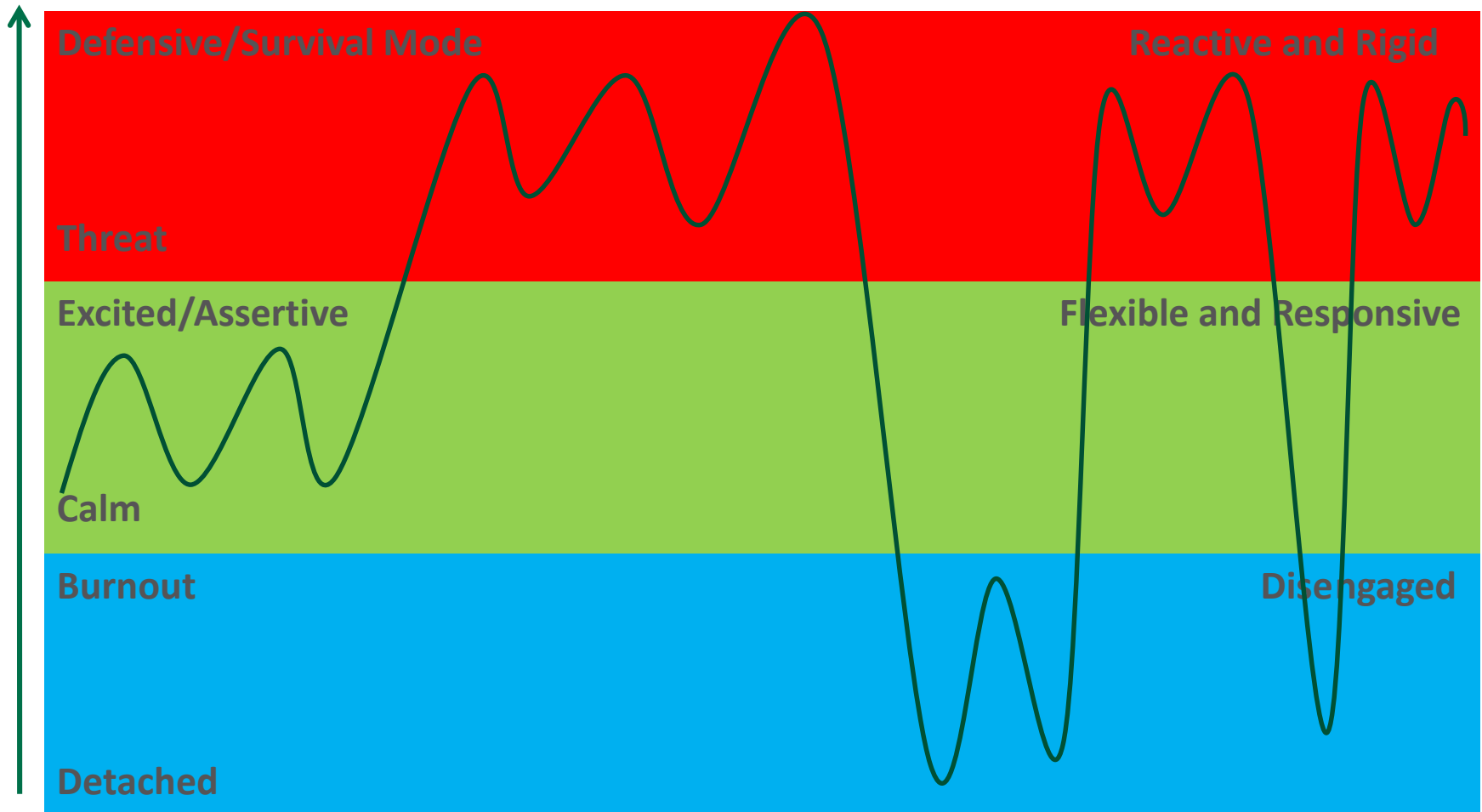
#### 5. Empowerment

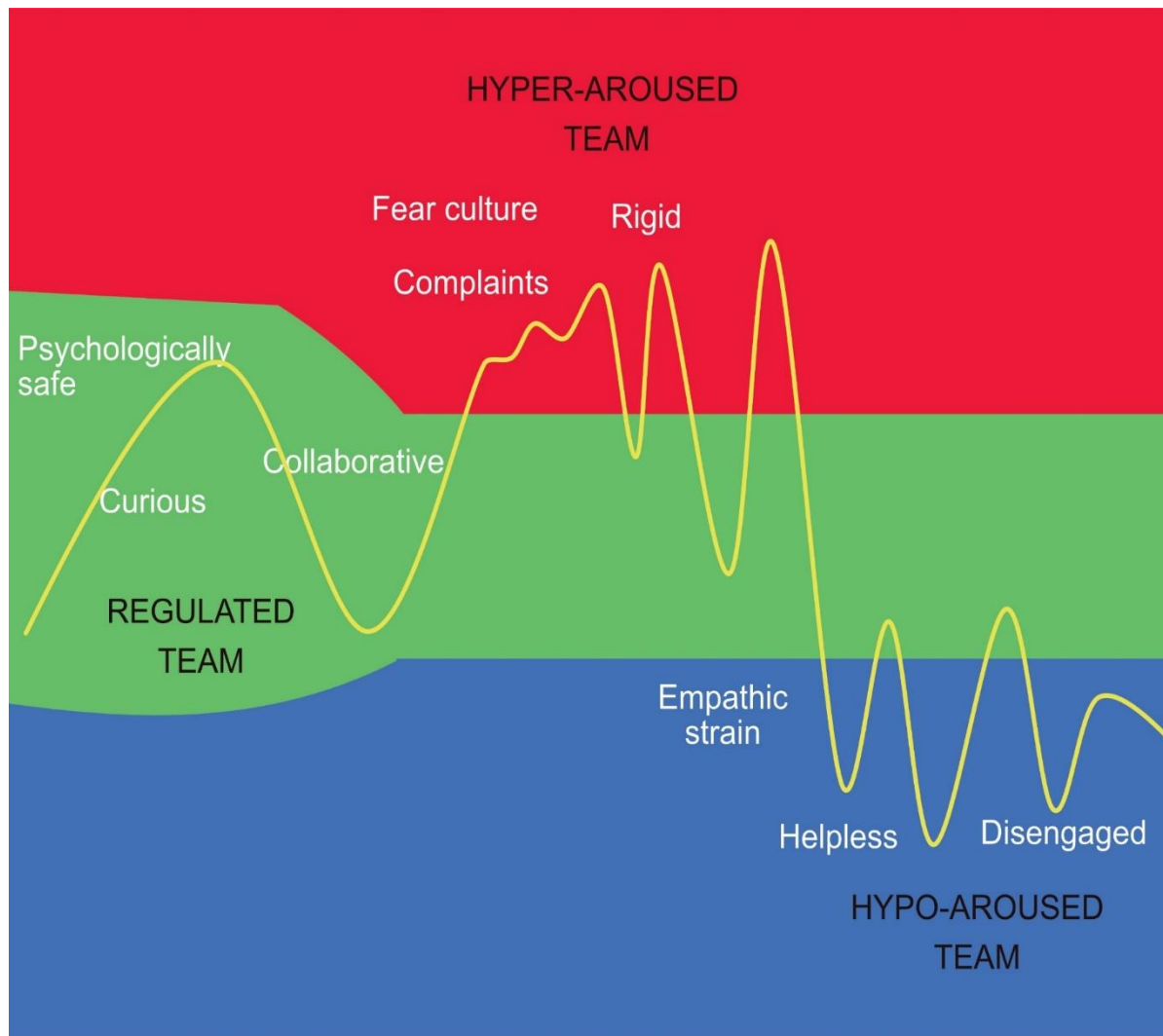
Efforts are made by the organisation to share power and give clients and staff a strong voice in decision-making, at both individual and organisational levels.

# **WINDOW OF TOLERANCE**

<https://www.youtube.com/watch?v=6nu3iqI8Idc>

# Window of Tolerance







Defensive/Survival Mode			Systemic Window of Tolerance			Reactive and Rigid	
Fear culture	Loss of voice		Disempowering	Othering	Exclusions	Blame Culture	Zero
Tolerance							
Autocratic/Authoritarian leadership			Use of 'othering' language – them, those people			'What do you want?' stance	
Lack of Cohesion			High Absence/Presenteeism		Exerting Power	Vicarious/Secondary Traumatic Stress	
Defensive Culture		Splitting	Rigidity	High Turnover	Reactivity	Lack of Trust	Lack of visible
Leadership	Disconnect from values		Intolerance		Recruitment		
Difficulties		Overcontrol/Micromanage					
Excited/Assertive					Flexible and Responsive		
Change welcome	Connection	Partnership	Good alignment with values and culture across organisation			Quality Improvement Culture	
Collaboration	Transparency	Empowerment	Trust	Safety	Compassion and Empathy	Passion	
Choice and control		Flexible Leadership		Visibility and accessibility of leaders		Highly engaged workforce	
Flexibility	Pride/Ownership		Curiosity	High Satisfaction/feedback from residents, families &			
staff							
Reflection	Innovation		Resilience	Low Absence		High Morale	Reflective Culture
Shared vision & Mission		Mind & Heart set	Responsiveness	Accountability		Creativity	Investment
Ease of recruitment		Active involvement/participation of service users, families & staff				'How can I help?' stance	
Burnout					Disengaged		
Complaints	Burnout	High Absence	Lack of purpose	Limited vision and mission		Low morale	
Low engagement		Loss of productivity		Poor alignment with values/principles		Shut down/disconnected	
Compassion Fatigue		Static/Stagnant		Empathic Strain	Low Leadership Presence		Poor vision of the future
High Attrition		Low Innovation	Low Responsiveness		Disconnected	Poor Participation	Hopelessness
Helplessness		Frustration	Poor Team performance/cohesion			Disinterest	Difficulty Recruiting
'Please go away' stance			Burnout			Autopilot	
Detached					( NES, 2019)		

# Reflecting together

What parts of the **RED ZONE** resonate with **YOU** in your role?

# Reflecting together

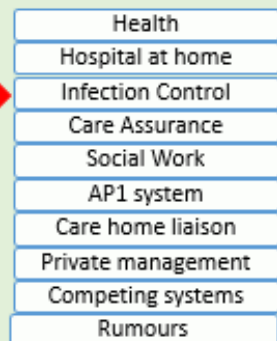
What parts of the **BLUE ZONE** resonate with **YOU** in your role?

# Care Homes - Systemic Complexity

## External systems variables/ influencers



## Local systems variables/ influencers



## Care Home System – Internal variables:

Staffing, business as usual, beds, LFTs, visitor plans, agency/ bank staff, outbreaks, personal life stress, in house consultation.

Resident /  
Family



# Applying the Stacey Matrix

Far from  
agreement

Agreement

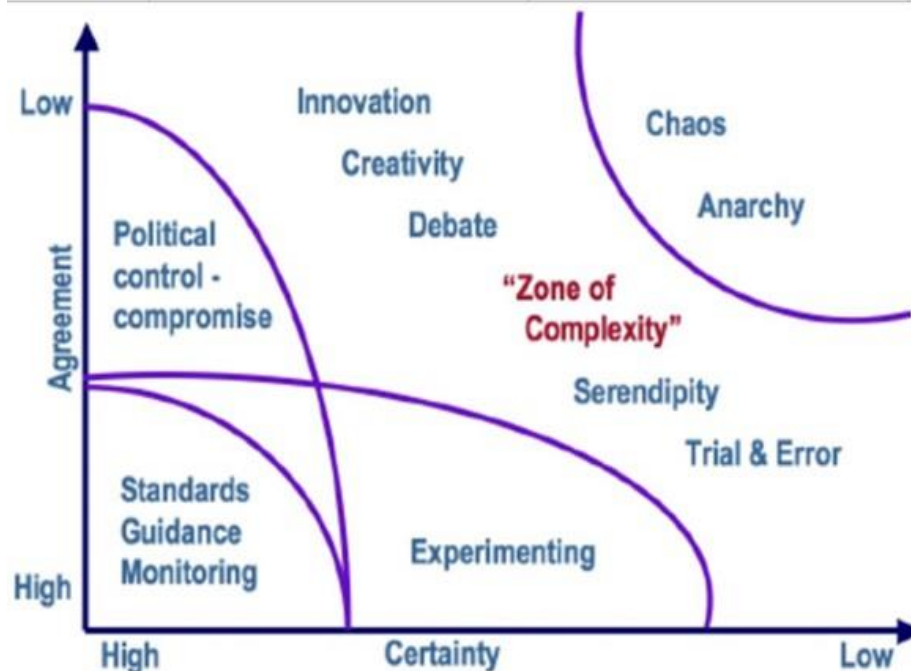
Close to  
agreement



Close to  
certainty

**Certainty**

Far from  
certainty

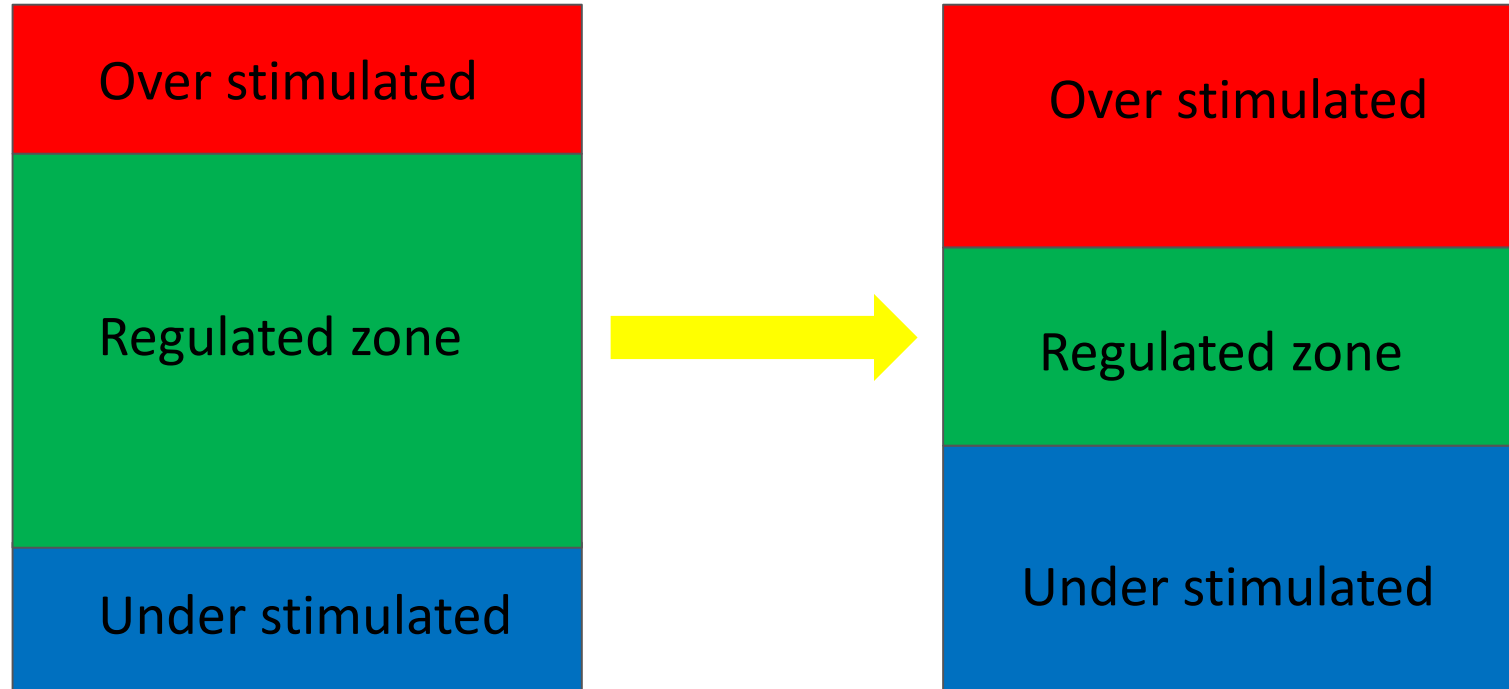


Images adapted from Stacey sourced:

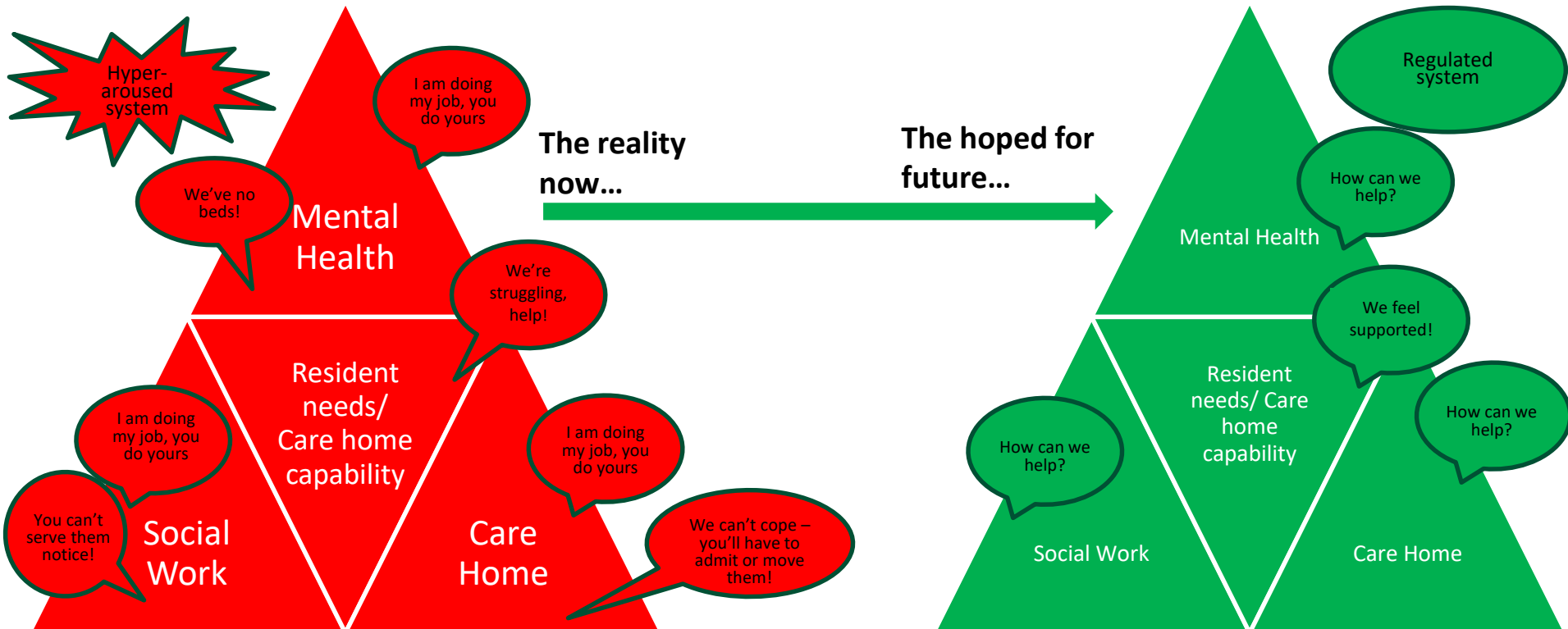
<https://www.praxisframework.org/en/library/stacey-matrix>

<https://www.erskine.org.uk/about-us/our-board-and-team/senior-management-team/derek-t-barron>

# Window of Tolerance



# Team work in systems – reflections



# Impact of pandemic on care home staff, residents and their families/ carers

- A systematic review of care home staff wellbeing during COVID-19 highlighted evidence of **anxiety, depression, exhaustion** and **PTSD** (Gray, et al 2021)
- A more recent qualitative review discussed the **negative impact on mental health for “everyone involved” in care homes**, and highlighted the strains that developed between families and staff (Giebel et al, 2022)
- Health and social care frontline staff are potentially at increased risk of outcomes such as moral distress, anxiety and substance use following the pandemic (Boden et al, 2021)

# Care Home Staff Wellbeing Group

- Comprised of local care home staff (managers and carers), representatives from North and South Lanarkshire HSCPs, NHS Lanarkshire (including communications, nursing and psychology) and Scottish Care
- Provided a safe and reflective space for members of the care home workforce, and those in roles supporting the sector, which nurtured peer-to-peer relationships
- Aim – ‘ears on the ground’ to listen and respond to the evolving wellbeing needs of care home staff
- Local Care Home Staff Survey 2020 and 2022



# Meeting the need

Proactive media strategy: some examples and phenomenal reach:

Mrs Rebecca Parker's piano 100 day challenge

Residents inspirational impact on their local communities via video link

Scotland's first care home resident

Resident couple's 70<sup>th</sup> anniversary marked in style.

Mrs Parker's piano challenge 21.9 million people reached on Facebook:



## Carving some Time and Space for You

This is a difficult time when we are experiencing more pressure than many of us have ever known. With some staff members doing more hours than normal, home working increasing and several areas being short staffed, it can be difficult to switch off from work when you are not on shift. We are all tired - it's been like this for a long time already and we have a bit further to go.

*We have been a long way to go" signed the boy*

You will be able to give the best of yourself at work if you have attended to your own needs at home. Part of this is about trying to protect your time off and, within that, giving yourself permission to do things that keep you well and bring you joy

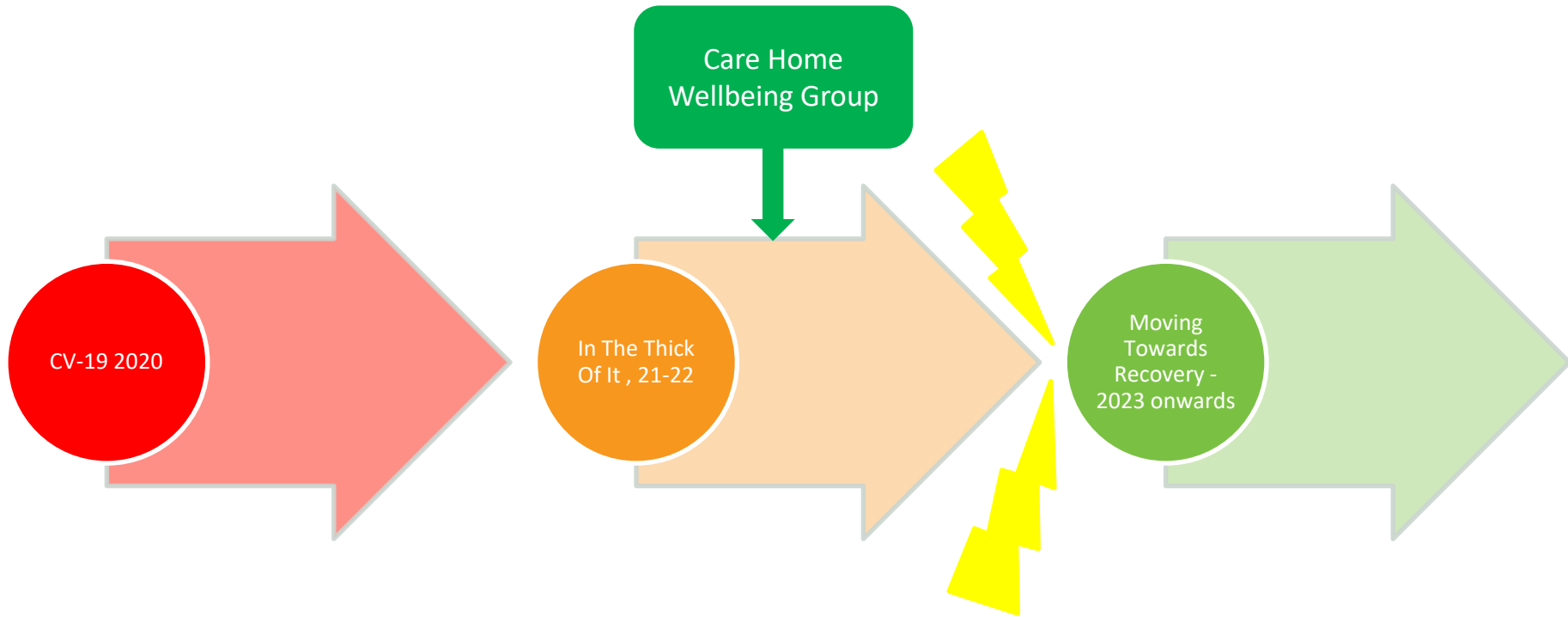


### Be gentle with yourself

Many people are finding everyday tasks a struggle at the moment. The household or admin tasks we once managed to keep on top of can pile up and quickly feel overwhelming.

It may be worth writing a list of these jobs and prioritising what has to be done and what can wait. Or perhaps seeing if any of these tasks can be shared more equally with others in your household. It can help to pick off a small task to complete rather than aiming to 'catch up' with everything, or to set the oven timer and see how far you get in 20 minutes!





# 3 phased model – Phase 1

## Phase 1 – Reconnecting

- Providing the conditions staff need for natural recovery, telling stories, allowing other 'parts' of themselves to connect as people, making sense
- Important that this is encouraged with team ownership, within the context of the overall 'long game' strategy with organisational buy in



# 3 phased model – Phase 2

## Phase 2 – Steadying the ship

- Educating about WoT as a framework and shared language to begin unpacking and exploring the protective red and blue traps. Highly tailored to each staff group – in peers or work based groups

# 3 phased model – Phase 3

## **Phase 3 – Rebuilding, from a Green Perspective**

- This phase includes collaborating to identify and proactively deal with strains, along with more traditional service development. Lends itself nicely to QI approaches. Interweave of Compassion, Psychological Safety, Joy at Work etc.

# What do we need when we're red?

Underlying need is...

**SAFETY!**

- Physical
- Professional
- Moral/Emotional

# What do we need when we're blue?

Underlying need is....

## HOPE

- Validation
- Feeling you matter
- Feeling you make a difference
- Shared vision and purpose

# What nurtures Green?

- Togetherness
- Compassion
- Psychological Safety
- Shared vision
- Feeling valued
- Playfulness ....

What one thing will you take away from today that might create a bit of **green** in you, or your team, or within the systems you are part of?

If you wish to share any ideas, please pop them into the chat box

## A poll will appear on the main screen

Please type one word into the poll to describe how you are feeling at the end of our time together today?



# Questions and feedback





# Thank you

Please take 2 minutes to complete the short  
Healthcare Improvement Scotland evaluation survey  
using the link in the chat box

<https://forms.office.com/e/Zu54up1dKg>

