

Feasibility of Implementing the STEADY Wellness Program to Support Hospital Staff During the COVID-19 Pandemic

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Introduction: The COVID-19 Pandemic negatively impacted the mental wellbeing of healthcare workers worldwide. Many organizations responded reactively to their staff needs. The novel, evidence-informed Social Support, Tracking Distress, Education and Discussion Community (STEADY) program was implemented, with senior leadership support across a large hospital. STEADY is a multi-pronged program developed to mitigate occupational stress injury in healthcare workers and first responders. This project examined the feasibility of implementing STEADY across hospital units during a pandemic.

Method: STEADY was implemented in five acute care units and across the rehab site of a large hospital. Data was collected on the five program components (drop-in peer support groups and critical incident debriefs, psychoeducation workshops, wellness assessments, peer partnering, community-building initiatives). Most peer support groups were facilitated by the program manager trained in peer support and one of six clinical staff.

Results: The program was iteratively adapted to meet the needs of target units/groups. More than 300 sessions were run in ~one year, for an average of ~1.15 sessions per unit per week. With flexible adaptation to the mode of facilitation, ~75% of planned workshops and ~85% of peer support sessions were run. Three critical incident stress debriefs were held. The formal partnering program was offered via e-mail with minimal uptake. Ninety-five wellness assessments were completed by target end-users, with 36 personalized responses sent. Gratitude trees were posted in each unit for community-building. Eight target unit staff completed formal peer support facilitation training. Twenty additional groups across the organization requested STEADY programming support and ten requested gratitude trees.

Conclusion: Results indicate that most components of the STEADY program were feasible to implement in hospital units during the pandemic. On-site, interactive programming was most engaging for end-users. Leadership support and flexible, continuous adaption by program leaders were identified as facilitators to program implementation and uptake.

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Returning to Normal Life after Deployment: What Can Emergency Response Organizations Learn from the Military?

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Introduction: Emergency service workers are confronted with serious risks for their health, well-being and functioning. In order to prevent consequences to them and their families, emergency organizations should provide optimal support after an intensive period of employment. In many countries, the military pays special attention to the transition of their personnel from deployment to home via post-deployment adaptation programs (PDAPs). The objective of this presentation is to provide a structured analysis of the military approach to post-deployment adaptation and to identify potential lessons for emergency services.

Method: A systematic literature search was performed to find original peer-reviewed studies on PDAP in six databases (MEDLINE, Embase, PsycINFO, Cochrane Central Register of Controlled Trials, PTSDPubs, and OpenGrey). The overall risk of bias of the articles was assessed using GRADE guidelines. The literature was analyzed guided by a program evaluation framework entailing different domains.

Results: The search resulted in 1535 unique records that were screened for eligibility; 16 articles were included, of which only three showed low risk of bias. Most articles describe some form of third location decompression (N = 10) and also some agreement exists on how to adapt skills and cognitions after deployment (Battlemind; N = 4). The results suggest positive mental health effects and satisfaction of these elements.

Conclusion: Empirical, high-quality evidence for PDAP is scarce. In addition, the existing literature reveals a lack of systematic method in describing the goals of PDAP and the ways of achieving these. Nevertheless, this study reveals promising elements that are in line with international guidelines, such as minimizing the level of exposure, intervention delivery and adjustment issues. We discuss how future research should incorporate these elements using a systematic approach.

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Veterinary Behavioral Health Issues Associated with Disaster Response-Results of Global Survey

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Introduction: Veterinarians have been identified as a professional group at elevated risk for behavioral health issues associated with an emergency response. Prior studies demonstrate the significant and long-lasting mental health effects experienced by veterinary responders. To examine the scale and scope of behavioral health issues exhibited by veterinary responders, an online anonymous survey was conducted.

