

Trauma-Informed End-of-Life Care

How Leaders can Measuring Success During a Pandemic



CMS As leaders we have had to guide our staff and organizations through economic crisis, natural disasters, and staffing shortages. For the first time we are leading our staff and organizations through a global pandemic. We have had to prepare for an increase in census, a decrease in census, and a decrease in staffing. Most importantly, we have needed to be acutely aware of how our staff are being affected by the pandemic.

How have you maintained your perspective through this crisis? How have you been present for your staff? How have you changed how you measure success?

The pandemic is traumatic for many individuals and a trigger for others. What tools do you have to assure that you are providing trauma informed care for your staff and community? Being trauma informed will allow you as a leader to care for the staff doing the work. It is difficult amid a crisis to think that you need to be trauma informed. However, a trauma informed organization saves resources; labor, time, unnecessary interventions, improves clinical outcomes, improves employee, patient, and family satisfaction, and decreases staff turnover and burnout.

Did you think you would ever realize a hospice visit was one that is a "window visit" or a telehealth visit? Staff are exhausted and feel traumatized by the COVID-19 pandemic. Along with the pandemic they have had to maneuver through political conversations and racial upheaval. They need their leadership to be there for them now more than ever.

Hospice staff are unique persons of caring. They measure their success as they provide 110% to their families. As leaders we have grown to accept this and set our standards high and expect that 110% will be achieved. During this time, your hospice may have experienced a significant decline or increase in census. Both scenarios demand a change of how care is delivered and how success is measured. As a leader you have had to manage staffing shortages. Staff may have tested positive for COVID-19 or needed to care for a loved one that tested positive or were too afraid of being exposed. Leaders had to assure patient coverage as their staff scheduled time off due to daycare and school closings. Staff were suddenly not only hospice employees but teachers as well.

Hospice teams are fascinating to observe. Dynamics vary widely as teams navigate through interdisciplinary care meetings. Staff are used to being in a room together, offering support and care to one another. Each team has their own level of trust, sharing styles, and issues they are facing. This is not as comfortable on a virtual platform. Some teams may be providing care to all COVID-19 positive patients. Others may be working in areas that are impacted by systemic racism and increased LGBTQ+ prejudice. They miss face to face interactions and need to find ways to adjust.

Staff members who are people of color experience prejudice and micro aggressions from patients and families. This may lead to trauma and feelings of isolation. Staff may be surprised and perhaps disappointed that their organization and leaders are not more vocal in expressing anti-racism values and question why protocols and processes are not in place. They may feel that they cannot report or voice their concerns and experiences.

Hospice staff are missing a valuable component of the care they provide patients and families. They like to hold their patient's hands and hug their patients and families. Now they are masked up, gowned up, and behind a shield of protection. While it is important to regularly thank staff, the words are no longer heard after months and months of what may now sound cliché. Small gestures of appreciation are nice, but months later staff

need to hear from leadership that it is OK and expected that they cannot give 110%. They need to know that a telehealth visit is JUST as important as being at the bedside. They need leadership to reinforce the importance of telehealth to deliver excellent end of life care. They need to be congratulated on helping a family member see their loved one through the lens of the phone or their tablet. Those families have not seen their loved one in months and your staff have made this important connection at end of life happen.

Being trauma informed will help you as a leader reconnect with the true concepts of hospice care and assure your staff are building good boundaries which often leads to resilience for the buildup of day-to-day trauma.

- Leaders should be communicating often with staff by keeping them updated with information from the CDC about potential vaccines and about how their co-workers are doing.
- Give staff words to end all political conversations with patients and their families. Guide them and let them know what to say before they would have to make guesses.
- If you are in an area where extreme racial unrest is occurring, be sure to let staff know what safety measures they should expect from you and how to maneuver through the streets they travel. Assure they understand that you are trying to provide a safe and healthy workplace even if that workplace is their car or virtual.
- Encourage self-care. Add mindfulness moments in your weekly update about the pandemic and express gratitude for all they are doing. This not only builds a foundation of encouragement and strength for your staff; it also forges the positive relationships with patients and caregivers.
- Have team members develop a mindfulness program to help them decrease their stress and anxiety.
- Hospice staff want to feel that they contribute to the success of their hospice program. Measure success by communicating stories from the field to them. The window visits on an anniversary. The face time with loved ones that cannot be together for health reasons. Know that each patient encounter is a success story,
- Measure success in bringing joy to a job that needs joy brought to the forefront.

Now, more than ever before, we need to be trauma informed. We need to assure that we are measuring success not only in numbers but in the resilience we help our staff achieve.

Resources

<https://www.nhpc.org/education/tools-and-resources/trauma-informed-end-of-life-care/>

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This resource was developed by the NHPCO Trauma Informed EOL Care Work Group, April 2021.