HEALTHCARE HIGHLIGHTS

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Reengaging the Workforce

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All of us have been touched in some manner by the COVID-19 pandemic. We all look forward to recovery and a return to work, but for many of us that will be the beginning of recovery and not the end. Recovery will be a process, not an event, that will last well beyond the burnout of the virus for a number of years.

Quarantined in our homes for months; worried for our friends, loved ones, even ourselves; constantly at risk for infection or worse, faced with unemployment and possible financial ruin; all with no end in sight to the endless pressure, no intermission, no break, no relief. This is the trauma we bring back to the workplace with us, both as major events and as constant worry in the back of our minds dripping like a leaky roof. Even watching other people go through this grinder when we may be healthy and still have work takes its toll as vicarious trauma.

Serious study of mass disasters in the United States and their affect on communities began after 9/11 and expanded over the following years due to school shootings.¹ Soon, other natural disasters became a focus, first with major hurricanes followed by earthquakes and other phenomenon. Several patterns began to emerge from this expanding research: longterm interventions following mass disaster of any kind will be needed for years; these interventions would largely be focused on mental health, and building resilience into the community will be an ongoing and renewing effort indefinitely.²

¹ Interventions Following Mass Disasters and Violence, Ritchie et al, Editors; Disaster Mental HealthTraining, 54-79; Guilford Press, 2006, 2014

² Ibid, Improving Resilience Trajectories Following Mass Violence and Disaster, 37-53

By 2012 many were advocating for employees to be trained in techniques that can help prevent workforce trauma.³ Especially, since there can be a six to eight month lag before some people even begin to process what has happened to them.⁴ When that processing takes place there will be other stress-related problems emerging in the workplace.

Collateral Stress-Related Injury Due to COVID-19

Stress is cumulative whether the result of good experiences or bad ones. Our body and mind respond the same to too much of either type of stress. Constant worry and anxiety produces unhealthy stress and sometimes can go unnoticed as stress fatigue begins to set in. There are seven basic causes for stress fatigue.⁵

- 1. Worry of any sort, and we do have a lot more to be worried about during these times.
- 2. Hurry out of impatience for answers, for things to move on, to get things done, or get to where we want to be in life.
- 3. Crowds and the press of urbanization. 83% of America lives in large cities.
- 4. More choices than ever before, undermining commitment to any one choice and creating indecision regarding multiple possibilities.
- 5. Loss of privacy of any kind in light of constantly being monitored.
- 6. Pluralism and the misunderstandings attending multiple cultures, values, beliefs, and attitudes.
- 7. Fear of the future when the future is at risk and we must live with uncertainty.

Stress fatigue sets in when we begin to adapt poorly to life events. Eventually, if this continues in the absence of shedding stress and working on flexibility responding to life events, our perspective begins to sour. We develop a predominately negative mindset: stubborn, cynical, critical, and disbelieving. Soon, we become unmotivated and lethargic. Hopelessness begins to creep into our thoughts and behaviors. This can be turned around at any moment if you, or someone who knows you, is observant and knows what to do. It is not rocket science. In the final stage, depression becomes physically painful and the individual seeks any form of escape or release available to them up to and including suicide.⁶

During the pandemic there is a great deal of collateral injury due to stress which won't go away the minute people go back to work. Some have been infected with the virus and survived, some will know people who succumbed to the disease, many will have lost jobs and some will have lost their businesses. These incidents classify as Trauma 1: a traumatic stressor occurring as an event or cluster of events. Most of us have had to put up with the unending risk of contracting the disease, losing our jobs, being cooped up at home, and worried about finances for unending days. These qualify for Trauma 2: a relentless, persistent, ongoing amount of stress that can have the same impact as a Trauma 1 event. Then there is Vicarious Trauma. This is stress created by witnessing how others cope and fail dealing with their

³ Workforce Magazine, After Workplace Violence Incident Mental Health Resources a Must, Harrison; Human Capital Media, May 2012

⁴ Ibid

⁵ Self-Directed Violence Prevention: PTSD, Depression and Anxiety, Keynote Address, Jernigan; Military Psychiatric Conference, Ministry of Defense, Chisinau, Moldova; May 2017

⁶ Ibid; Burnout as a Spectrum Disorder, Jernigan, Military Psychiatric Conference physician seminar

stressful experiences. Their stress stresses us out. All of these types of trauma can be injurious to our physical and mental health.

What We Can Expect When the Workforce Returns

Due to COVID-19 25% of Americans will have experienced some level of trauma due to loss of financial security, loss of friends and loved ones, and loss of trust in systems and governance.⁷ This will change workforce expectations of employers and the new business realities employers must adapt to as part of a new workplace culture. Employers can expect higher levels of acting out in the workplace which will not respond well to disciplinary action because they are an expression of need for help with collateral stress-related injury due to the pandemic.

Some may turn to self-medicating during this period through psychoactive substance use.⁸ Prescription or non-prescription use of medicines that impair cognitive functioning, motor skills, speech and language, or mood and affect can cause serious problems in the work place. Someone seriously burned-out is at great risk of harming themselves or others. As burnout progresses, things move exponentially faster if an intervention is not provided. The workplace needs to become a community with a built-in safety net that responds before things escalate to the need for clinic intervention. This, too, will shift workplace culture.

Under enough stress personality traits can become exaggerated and begin to look and act like personality disorders.⁹ Fun-loving optimists can act like self-centered narcissists. Detail-oriented people can suddenly appear to be obsessive-compulsive. Fearful people can become clearly paranoid, and so on. This is because under stress over time our brains do not process anxiety, emotion, and interpersonal relationships like a normal person.¹⁰ Environmental factors are often a cause: raised amidst family trauma, learned culture through social learning, or behaviors resulting from living or working in a persistently stressful environment. When we observe a colleague experiencing this downward spiral some simple deescalating techniques can turn the situation around. Looking out for each other will add a new dimension to teamwork, especially in competitive environments.

Businesses will go through a period of resizing and reorganization to adapt more effectively to the potential continuation or reemergence of the crisis. Businesses wounded financially will become targets for acquisition or merger, creating organizational culture shifts as well. We need to reimagine a more resilient corporate culture during these times. Peter Drucker used to say that culture east strategy for breakfast. It is not that strategy is unimportant. If culture and strategy are not aligned (which will require change), culture will win out.

There will be administrative changes to consider as well. If employers require employees to pass a COVID-19 screening before returning to work the American with Disabilities Act will have to be adjusted. This is also true if it is discovered the Coronavirus may reemerge in the future and is considered a disability if you become infected. HIPPA statutes may have to be changed related to how health

⁷ Wellness Council of America, March 2020

⁸ Psychoactive Substance Use: the misuse of psychoactive substances for recreation or special circumstances; Pharmacology of Psychoactive Substance Use, Abuse, and Dependance, Desk Reference; NAADAC, 2009

⁹ Effective Therapy for Personality Disorders, Diblasio; Geneva Series GSCO 503, University of Maryland, 2013, 2017

¹⁰ Thoughts Toward Understanding the Neurobiology of Personality Disorders, Diblasio; Christian Counseling Today, Vol 21, No 3; 2016

information specifically involving the Coronavirus is handled. Related workplace safety rules may need to be revised by OSHA. Where Medicare is involved, there may be new requirements passed on by CMS.

We simply don't know yet what regulatory compliance requirements may change or what these changes may impose upon the workplace. Time will tell, and employers will work out what needs to be done to remain in compliance. You can count on those changes, no matter how small, changing the way we work and having an impact on workplace culture. What we can prepare for is people coming back to work.

Whether it is reimagining the workforce by designing recovery solutions largely focused on mental health which builds in resilience for the future, or assessing and mapping in changes that align culture with strategy, change is coming. Stanton Chase can help you with these changes.

Individual and Organizational Solutions

The secrets of developing and sustaining personal resilience while living alongside COVID-19 are good nutrition, sufficient exercise, adequate sleep, meaningful relationships, and purposeful work.¹¹ These are classic antidotes for stress fatigue, stress disorders, and burnout. Keep yourself healthy: eat healthy foods, and drink lots of water. Avoid excessive amounts of caffeine and alcohol. Do not use tobacco or illegal drugs. Get enough sleep and rest. Get physical exercise.

In addition, keep things in perspective: set limits on how much time you spend reading or watching news about the outbreak. You will want to stay up to date on news of the outbreak, particularly if you have loved ones in places where many people have gotten sick. But make sure to take time away from the news to focus on things in your life that are going well and that you can control.

Get the facts: find people and resources you can depend on for accurate health information. Learn from them about the outbreak and how you can protect yourself against illness, if you are at risk. You may turn to your family doctor, a state or local health department, government agencies, or an international organization.

Organizationally¹², there will be a period through recovery when culture and strategy will need realignment. A cultural assessment of "now" alongside a reimagined culture will reveal the difference and enable mapping a new culture into place. A culture shift that helps ensure the organization remains flexible and agile well into the future. In larger organizations, a Chief Recovery Officer, or its equivalent, will need to be brought on board to oversee an overarching recovery plan as well as business unit progress. This role serves to guide and direct workplace recovery.

Leaders throughout the organization should be equipped with the skills and techniques to manage adaptation well around two critical changes: developing a culture of respectful care in order to be mindful of helping others move forward through the period of workplace recovery, and developing an understanding of collaboration with others in managing stress in the workplace as a team effort.

Our humanitarian work has taken us to places of mass disaster including Ebola, famine, economic collapse, tsunamis, genocide, and civil war. We teach these principals internationally. And, we experience together returning to a place of joy and peace in life and work. May our journey together bring recovery quickly.

¹¹Executive Wellness in 2020: Missing Resilience, Jernigan, Stanton Chase Healthcare Highlights, April 2020

¹² Ask for our Reimagining Workforce Culture: Aligning Culture and Strategy resource list