





Frontline Connect: Mental Health for the Healthcare Workforce is made possible by the Brave of Heart Fund, founded by the Foundations of New York Life and Cigna and administered by E4E Relief. Established to provide charitable grants and emotional support services to families of frontline healthcare workers whose lives were lost in the fight against COVID-19, the Brave of Heart Fund also partnered with nonprofits aligned with the spirit and intent of the fund's core purposes. APAF received a grant through the Fund's focus on supporting the emotional well-being of healthcare workers. The APAF Center for Workplace Mental Health (CWMH) provides employers with high-impact tools and resources to effectively address the mental health and well-being of employees and their families and provide actionable steps in creating a mentally healthy workplace. Through the Brave of Heart Fund, the Center was able to create Frontline Connect: Mental Health for the Healthcare Workforce.

Frontline Connect is focused on improving access to mental health care for frontline healthcare workers. The high-impact video toolkit highlights effective strategies for healthcare leaders to improve access to timely and effective mental health care and to eradicate stigma and other barriers. The goals of this project were achieved through the following four components:



- 1. Convening Experts for Roundtable Discussions: The Center leveraged its extensive network of experts to convene small groups of leaders from diverse healthcare systems to discuss the impact of the pandemic on the healthcare workforce, including burnout, excessive stress, trauma, depression, anxiety, suicide, and substance use. When it comes to the frontline healthcare workforce accessing mental health care, the following issues will be addressed:
  - $\bigcirc$  What barriers exist to accessing mental health care?
  - $(\rightarrow)$  What tactics, programs, and initiatives are being implemented to effectively improve access to mental health care?
  - (>) Who are the healthcare system leaders implementing innovative practices when it comes to improving access to mental health care?
- Leveraging the Power of Innovation: Through the initiative, the Center interviewed leaders from across the country to learn best practices and innovation. Once the top innovators were identified, the Center interviewed those healthcare leaders doing the work to effectively address the mental health and well-being of the frontline healthcare workforce.
- 3. Developing High-Impact Resources on Implementing Effective Practices: The Center developed a high-impact, action-focused video toolkit that identifies proven strategies to address frontline healthcare workers' mental health and well-being. The toolkit features the following:
  - $(\rightarrow)$  The scope of the issues and barriers that impact healthcare providers' access to mental health care;
  - → Video vignettes highlighting effective and innovative strategies to improve access to care; and
  - $(\rightarrow)$  Steps to implement to improve frontline healthcare workers mental health and well-being.
- Engaging national partners on dissemination: Following the toolkit launch, the Center will engage strategic national partners for broad dissemination of the project assets. Strategic partners include organizations representing hospitals, physicians, nurses, and other healthcare providers. Marketing and dissemination of resources will be done through multiple channels, including live panel discussions, targeted social media campaigns, and promoting the frontlineconnect.org website which carries all toolkit content and partner resources.





FRONTLINE CONNECT

Frontline Connect was led by Well-being Consultant Gaurava Agarwal, M.D., Chief Wellness Executive, VP at Northwestern Medicine. Dr. Agarwal serves as the Director of Faculty Wellness at Northwestern University and as an Associate Professor in the Departments of Medical Education and Psychiatry and Behavioral Services at Northwestern University's Feinberg School of Medicine. Dr. Agarwal specializes in occupational and organizational psychiatry with an emphasis on workplace mental health. In addition, Dr. Agarwal is a member of the Center for Workplace Mental Health Advisory Council.



Gaurava Agarwal, M.D., Chief Wellness Executive. VP at Northwestern Medicine

Dr. Agarwal led the initial expert roundtable, facilitated a Frontline Connect session at the American Psychiatric Association Annual Meeting, and conducted each of the interviews found in the Frontline Connect Toolkit.

Concern for healthcare workers' mental health and well-being was building long before the COVID-19 pandemic. For years physicians have been at a higher risk for suicide and suicidal ideation than the general public. The occupational risk of burnout is high among all healthcare workers, and if it is not handled in a timely manner, it may evolve into depression or anxiety. In addition to burnout, there are other factors that may contribute to a decline in the mental health of a clinician such as fatigue, moral injury, PTSD, and sometimes even substance misuse<sup>2</sup>.

Hospital and health system leaders are aware of the issues affecting employee mental health, and know that quality of life, patient care, and outcomes would greatly improve with intervention. However, it is not always clear where to start. Through expert convenings and many interviews Frontline Connect was able to pinpoint the most prominent barriers to care, and the innovative practices already in place to address each.

- $(\rightarrow)$  Fear and Shame
- → Licensure & Credentialing
- → Suicide Prevention, Intervention, Postvention
- $(\rightarrow)$  Internal EAP
- $(\rightarrow)$  External EAP and Coaching
- $(\rightarrow)$  Provider Health Programs (PHPs)

- O Peer Support
- Clinician Culture Competency Training
- → Manager Training
- → Employee Resource Groups
- → C-Suite

The purpose of the Frontline Connect Toolkit is to highlight the programs and professionals leading the charge in increasing access to mental health care for frontline healthcare workers. Each program that is showcased in this toolkit is in operation and yielding successful results. The goal is to help other healthcare professionals move their own mental health initiatives from ideas to action. This toolkit will serve as a road map to the video library of expert interviews covering each of these barriers and beyond. All interviews can be found at frontlineconnect.org/toolkit.





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# **Fear and Shame**

Stigma remains high in the healthcare workforce and remains the biggest barrier in access to care. Licensed and certified professionals fear retribution against their credentials, their job, and how colleagues may view them. Through many of the interviews in this toolkit, you will hear about the success of those in positions of leadership sharing their own personal stories, in order to start the conversation organization-wide. Kirk Brower, M.D., the inaugural Chief Wellness Officer at Michigan Medicine, discusses his own lived experience with mental health, and the positive response he received when disclosing his story to his institution and peers nationwide. Dr. Brower is an example of a leader who used his position to influence change for his entire institution.



### **Related videos:**

The Importance of Sharing: Personal Stories

## **Suicide Prevention**

Prior to the pandemic, a national study found that 1 in 15 physicians had thoughts of suicide in the last year<sup>1</sup>. The trauma and moral injury brought on by COVID-19 has only exacerbated those numbers. Healthcare professionals tend to face stigma in two forms, internally and externally. Identifying the need to seek help can be delayed by feelings of dread, fear, or embarrassment. Those feelings may then be compounded by external stigma, which still presides heavily over the medical field. Michael Myers, M.D. has spent much of his career addressing physician and healthcare worker suicide, authoring the book Why Physicians Die By Suicide and serving as the President of the NYC chapter of the American Foundation for Suicide Prevention. Dr. Myers discusses his experience treating his fellow healthcare workers and how the healthcare field can increase awareness and suicide prevention efforts.

### **Related videos:**

Michael Myers, SUNY Down State



# Licensure & Credentialing

For decades, fear of losing one's license or credentials has greatly restricted clinicians from seeking mental health care. The use of invasive questions like 'Have you ever received treatment for psychiatric difficulties' barred many from seeking help. Frontline Connect interviewed the Dr. Lorna Breen Heroes Foundation CEO and Co-Founder, J. Corey Feist, J.D., M.B.A., to learn more about how the Foundation has been able to accomplish a great deal addressing the issue of intrusive questions in its short tenure. Hear from Corey about the success he has witnessed through both top-down and bottom-up approaches, and his emphasis on how anyone can be the catalyst for change.

### **Related videos:**

Addressing Licensure and Credentialing



WORKPLACE MENTAL HEALTH

### **Internal EAP**

Oregon Health and Sciences University has been leading the charge with the Resident and Faculty Wellness Program for 20 years. Mary Moffit, Ph.D. and George Keepers, M.D. speak about how their program has grown from its inception, and remained successful in providing free, confidential professional mental health services to residents, fellows, and faculty in the School of Medicine and School of Dentistry. Dr. Moffit and Dr. Keepers address concerns about confidentiality, diversifying their provider workforce, and more.

#### **Related videos:**

( Building a Successful Internal EAP

## **External EAP and Coaching**

VITAL WorkLife is an Employee Assistance Program Provider that provides external support to employers, specializing in healthcare worker and physician care since 2007. Sarah Prom, the Senior Director of Clinical Services, sat down with Frontline Connect to talk about their robust peercoaching program. Clinicians are matched with a peer clinician to talk about issues like burnout, mental health, fear of seeking help, and other matters specific to healthcare. The peer coaching program creates a safe space for clinicians to speak with someone outside of their professional and personal life, but who understands the challenges they face, and who can support them through tough times. Sarah shared that 92% of the physicians they have supported said that their peer coach helped them make the decision to stay in medicine. Something that is incredibly significant as many systems are struggling with workforce shortages.



### **Related videos:**

ITAL WorkLife Healthcare-Centric Employee Assistance Programs and the Power of Peer Coaching

## **Physician Health Programs**

Physician Health Programs (PHPs) are available in all 50 states, and as of October 2023, 47 state PHPs are accredited by the Federation of State Physician Health Programs. PHPs offer a model of care for physicians and in some states other licensed healthcare professionals who are at risk of behavioral health conditions, which include substance use disorders and other potentially impairing conditions. Frontline Connect spoke with Linda Bresnahan, MS, Executive Director of the Federation of State Physician Health Programs (FSPHP), to break down the many services available through PHPs. Linda addresses the stigma associated with seeking help from PHPs, provides details on the different services available and introduces their new accreditation program for ensuring that clinicians always see a provider who has been trained in healthcare cultural competency.

#### **Related videos:**

Innovative Partnerships on Specialized Mental Health & SUD Care for Clinicians: A Look at Provider Health Programs





### **Peer Support Programs**

Peer support programs are powerful intervention tools that help reduce workplace stress and promote a healthy and safe culture for employees. Within medicine, peer supporters can serve many roles, but at both Oregon Health Sciences University and ChristianaCare, peer supporters are trained in recognizing, responding, and supporting peers after an adverse event. Peer supporters are also trained in how to refer their peers to appropriate support services.

### **Related videos:**

Building a Successful Internal EAP

VITAL WorkLife Healthcare-Centric Employee Assistance Programs and the Power of Peer Coaching

# **Clinician Culture Competency Training**

Many healthcare workers wish to see a mental health provider who understands medical culture. For a population that faces so many barriers in the search for care, the lack of availability can further drive healthcare workers away from care. In 2020, ChristianaCare's Center for WorkLife Wellbeing, Nemours Children's Health, and the University of Utah's Resiliency Center received a \$50,000 grant from the Delaware Health Sciences Alliance to conduct a study of frontline caregivers and licensed mental health professionals who specialize in treating them. With the results of their study, the group was able to develop a course for mental health providers to learn the nuances of healthcare culture. The training is free and qualifies for continuing education credits through the American Psychological Association. The co-developers, Megan Call Ph.D., and Vanessa Downing Ph.D., share how they developed this training and how it prepares providers to better treat healthcare workers.

### **Related videos:**

(b) Healthcare Cultural Competency Training for Mental Health Clinicians

# **Manager Training**

Frontline Connect spoke with ChristanaCare's Center for WorkLife Wellbeing team about their Psychological First Aid (PFA) Program, which blends components of Stress First Aid and Psychological First Aid. The program model incorporates self-care, leadership, and peer support and aims to intervene to remove a stressor when needed, prevent further harm, and promote recovery. The program operates on three R's: recognize, recover, and refer. Learn how the team built the training to ensure engagement and has added continuing education sessions to keep participants engaged. Notably, the ChristianaCare leadership buy-in for this program was so strong that the training was included in the annual operating plan and included a bonus allocation to incentivize managers to be trained.

#### **Related videos:**

ChristianaCare's Center for WorkLife Wellbeing Training Managers to Recognize, Recover, and Refer





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## **Employee Resource Groups**

Employee Resource Groups are voluntary, employee-led groups formed to bring employees together based on a common identity, interest, or purpose. Mental health ERGs are becoming more and more common, providing a safe space for employees to come together and talk about how they are impacted by mental health. Chief Wellness Officer, Nigel Girgrah and Morgan Lewis, Associate Program in the Office of Professional Well-being, share how Ochsner Health has implemented their Mental Health ERG in service of their overall goal of "education, normalization, and rolling out services and supports." The Mental Health Diplomats program includes both educational resources and peer support. Ochsner prides itself on anonymity, the growth of their program, and collaboration with the DEIB team. Hear more about their success in the first year of operation, and how sharing the load with other employee groups contributed to their success.

#### **Related videos:**

Ochsner Health System Building Mental Health Employee Resource Groups: A High-Impact, Low-Energy Resource

# A Call to Action for the C-suite

Howard Chrisman, M.D., currently serves as the President and CEO at Northwestern Memorial Healthcare. Dr. Chrisman shares how important it is to listen to employees when he is out on the floor, stating they often have the best ideas for change. He recommends creating a welcoming C-suite environment so that employees feel comfortable coming to leadership and advocating for themselves and their colleagues. With the help of the Chief Wellness Executive, Gaurava Agarwal, M.D., the leadership team rolled out a mental health campaign, incorporating many of the practices found in this toolkit. They covered peer support and coaching, expanded their EAP services, removed questions from their credentialing process, and created suicide postvention resources. The interview highlights the leadership style of Dr. Chrisman and why he bought into such a robust program. You will hear similar insight in the Michigan Medical School interview where Marschall Runge, M.D. explains why there was little hesitation from leadership to support the free medical student mental health program.



#### **Related videos:**

Innovative Ideas: Medical Student Mental Health

Dr. Chrisman, Northwestern





# **Key Learnings**

- 1. Suicide prevention, intervention, and postvention should be worked into the policies and procedures of each healthcare institution. Shedding light on the topic prevents the isolation of those struggling, and mental health training like Mental Health First Aid equips fellow clinicians on how to support their colleagues when there is cause for concern.
- 2. Hospitals, healthcare systems, and other organizations must continue to push for the removal of intrusive mental health questions on licensure and credentialing applications. The leaders of these organizations must also be prepared to communicate clearly and consistently to their workforce when these changes are made. Positive change means nothing if those benefiting are unaware of the change, which is why communication cannot be undervalued.
- 3. Healthcare workers want to see mental health professionals who understand the culture of healthcare and are flexible to the specific needs of healthcare patients. Training clinicians in healthcare cultural competency is imperative for the continuation of care.
- 4. "If you build it, they will come." The OHSU internal well-being program has been in action for 20 years, the free therapy for medical students at Michigan Medicine saw an increase in participation in the first six months, at Ochsner Health they trained more than 50 mental health diplomats in the pilot year, and finally, at ChristianaCare more than 50% of managers were trained in Psych First Aid in year one.
- 5. Change happens top-down and bottom-up. Leaders can carry the torch by supporting mental well-being efforts, sharing their own stories, and prioritizing their health so others feel like they can do the same. However, you do not need to be a leader to spark change. Medical students achieved free therapy for all medical students at Michigan, and one ERG at Ochsner championed a system-wide Suicide Awareness Alliance that is now working to destigmatize mental health and promote suicide awareness for all 35,000 employees.
- 6. While resources are always important to help solve problems, it is important to note that many of the innovations and interventions in this toolkit, required very few to even no additional financial resources to execute so we believe that no matter what financial position your organization is in today, there is the opportunity to make progress and demonstrate your commitment to improving the mental health of your workforce.



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