

Navigating Coronavirus Series

You and Your *Practice* Resiliency: "Protecting Your Practice's Human Capital" April 21, 2020

This webinar series brought to you by













Information, not legal advice

- Agency interpretations, guidance, and the regulations are evolving constantly. We have tried to include the latest information in this presentation, but some details could have changed while we were preparing it or could change later.
- We strongly suggest you review agency materials carefully and talk to your practice CPA and/or attorney prior to applying for aid under these federal options.

Today's Presenters

- L. Allen Dobson, Jr. M.D. CEO, Community Care of North Carolina
- Allan Chrisman, M.D.
 Chair, NCPA Disaster Committee
- Therese Garrett, M.D. Co-Chair, NCPA Disaster Committee
- Karen L. Melendez, M.D.
 Chair, NCPA Practice Transformation Committee

Goals for Tonight's Presentation

- 1. Update on recent developments in the federal aid programs available to medical practices
- 2. Review lessons learned from the psychological and behavioral health responses and consequences of disaster events.
- 3. Characterize health care workers' stress from COVID-19
- 4. Define factors to enhance resilience for the individual and medical practices

CARES Act follow up

Payroll Protection Plan (PPP)

Money has been fully allocated so no new loan/grants are available until Congress adds money – but this is expected very soon

- 1. If your application was already submitted/approved by SBA, then you may still get the money. Money generally flows within 10 days of SBA approval, so check with your bank.
- 2. If your bank has your complete application, but you're not sure that it's been submitted to SBA, go online when the new money becomes available to confirm that you are "in line" with a complete application.
- 3. If you haven't yet applied, get your info together ASAP and talk to your bank so you get in line when applications reopen.

CARES Act follow up

Accounting for PPP funds

- If you did get PPP money, we suggest you keep these funds separate and allocate as needed for approved expenses.
- Be sure you can document expenses for payroll, rent (or mortgage interest) and utilities.
- This will ensure that your practice will have the maximum amount forgiven!

Public Health & Social Services Emergency Fund

- You should have already received funds directly to your account based on your Medicare billings.
- Attestation is required on the CARES Act Provider Relief Fund Payment Attestation Portal. Here is the link: https://www.hhs.gov/provider-relief/index.html
- Still in development: there is continuing discussion about funding other providers through Medicaid. This may require using states. This is a work in progress with no definitive word yet.
- Other good news: NC is planning to increase the PMPM for medical homes under Carolina Access. Nothing you need do to draw down these funds – just stay tuned.

Economic Injury Disaster Loans

- The \$10k emergency advance grants have been distributed and those funds are now depleted. The program is awaiting additional appropriations expected in the next stimulus legislation.
- Disaster loans applications are no longer available online.
 Applications should resume very quickly once fund are appropriated by Congress.
- The State is still contemplating their specific response with CARES money received.
- There is continued advocacy at state and national levels for paying PCPs a retainer or pmpm based on average billing as an interim emergency measure.

Allan Chrisman, M.D. DLFAPA, DLFAACAP

Chair NCPA Disaster Committee
Associate Professor-Emeritus
Duke University School of Medicine

Lessons Learned of SARS to Pandemic Influenza

- Reducing pandemic-related stress may best be accomplished through interventions designed to enhance resilience in psychologically healthy people.
- Applicable models to improve adaptation in individuals include :
 - stress appraisal that coping through escape-avoidance and selfblame are maladaptive in healthcare workers responding to infectious disease (Greater chronic stress was reported by workers who coped using strategies of avoidance and self-blame)
 - Psychological First Aid

Applying the Lessons of SARS to Pandemic Influenza An Evidence-based Approach to Mitigating the Stress Experienced by Healthcare Workers, Canadian Journal of Public Health, November 2008.

Stress Experienced by Healthcare Workers

- Two aspects of these healthcare workers' experience distinguish the stress of an infectious disease from other disasters.
- First, Covid-19 contributes to social isolation for several reasons: infection control procedures increased interpersonal distance; stigma and interpersonal avoidance diminished social and community interaction
- Second, while family support usually buffers stress, healthcare workers
 with children experienced higher levels of distress during a pandemic,
 presumably due to the perceived risk of infecting loved ones and
 concerns about caring for children if the parent is ill.

Applying the Lessons of SARS to Pandemic Influenza An Evidence-based Approach to Mitigating the Stress Experienced by Healthcare Workers, Canadian Journal of Public Health, November 2008.

Seven Crucial Research Findings that Can Help People Deal with COVID-19

Lessons learned from the psychological and behavioral health responses and consequences of disaster events.

- Social media may escalate anxiety more than traditional media
- Too much media of any kind can undermine mental health
- Trustworthy information sinks in
- A lack of control fuels stress
- Managing stress ASAP can prevent long-term troubles
- Don't forget the needs of health-care workers
- Quarantines and isolation may increase the odds of negative outcomes

Source: Article from American Psychological Association

Five Key Principles for Physicians Concerned with the Psychological Welfare of their Practices

1. Promote a Sense of Safety

Physicians can help restore a sense of relative safety and help minimize psychological consequences

2. Promote a Sense of Self- and Community-Efficacy

Individuals, families, and organizations be empowered to take control of the situation to the extent possible

3. Promote a Sense of Connectedness

Social support is a crucial resource in dealing with all stressors.

4. Promote a Sense of Calming

Personal contacts and public messages can help make a stressful time feel less turbulent

5. Promote a Sense of Hope

Provide hopeful messages related to positive aspects of the large-scale response and inspirational stories of healing and transcending challenging circumstances.

National Center for PTSD www.ptsd.va.gov

Psychological First Aid (PFA) Core Actions

Contact and engagement

Safety and Comfort-physical/social, protect from trauma, media

Stabilization

Information Gathering: current needs and concerns

Practical Assistance

Connection with social supports

Information on distress reactions and coping

Linkage with collaborative services

NCTSN PFA Field Manual

Therese Garrett, M.D.

Co-Chair, NCPA Disaster Committee
NCCCAP President
Medical Director, Carolina Outreach
Corporate Medical Director, WellCare

Resilience

Resilience of the Individual

Resilience refers to an individual's ability to cope effectively and adapt well to difficult challenges such as tragedy, adversity, or significant stressful experiences.

Resilience

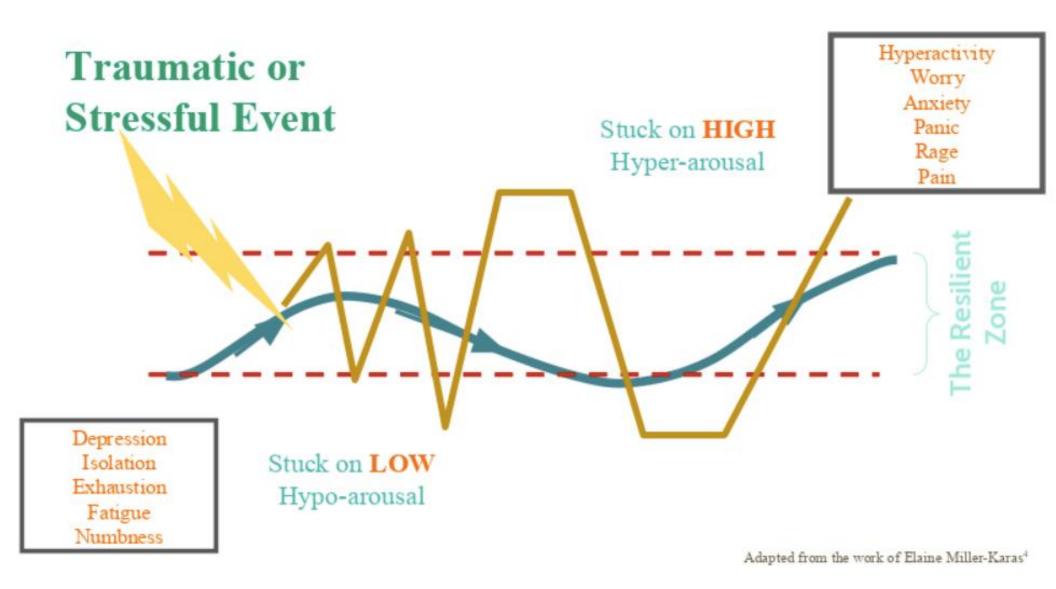
- The potential for resilience is not a unique trait that one has or does not have.
- The capacity for resilience is inherent in all people.
- Resilience is not a single dichotomous outcome measured at a point.
- We can simultaneously experience post-traumatic stress and growth, and these (and other) outcomes dynamically evolve throughout our lives.
- Resilience is neither lucky nor passive.
- It takes deliberate effort.

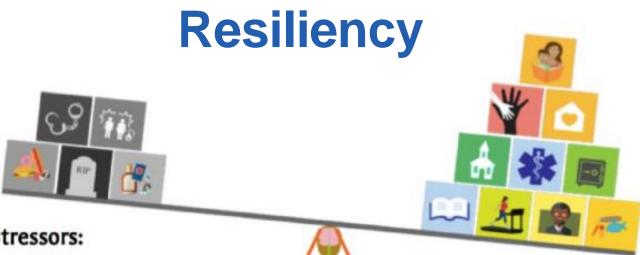
Resilience

Practice Resilience

- 1. Length of the Adverse Situation
 - Short-term, referred to as a "challenge"
 - Long-term, referred to as a "crisis"
- 2. Practice experience of individuals and group
 - Chronic stress is lower in workers with longer healthcare experience
- 3. Internal or External Sources of Support
 - Chronic stress is lower in those who felt effectively trained and supported by their practice

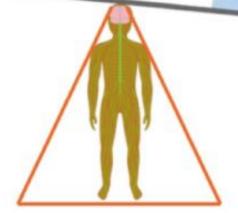
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Hard Things & Stressors:

- Not able to pay bills
- Not enough food to eat
- Violence
- Health problems
- Housing that does not feel safe



Things about You:

- Genetics and DNA
- Resiliency/ACE score
- Life story
- Personality

Good Things & Resources:

- People that you can count on
- Dependable transportation
- Safe housing
- A doctor you trust
- Having enough money

Resiliency is when the scale tips toward the good even when there are stressors and hard things

Karen L. Melendez, M.D.

Medical Director, Support Incorporated
CCPN Board Member
CCNC Network Psychiatrist

Distress Tolerance is Surviving Without Making the Situation Worse

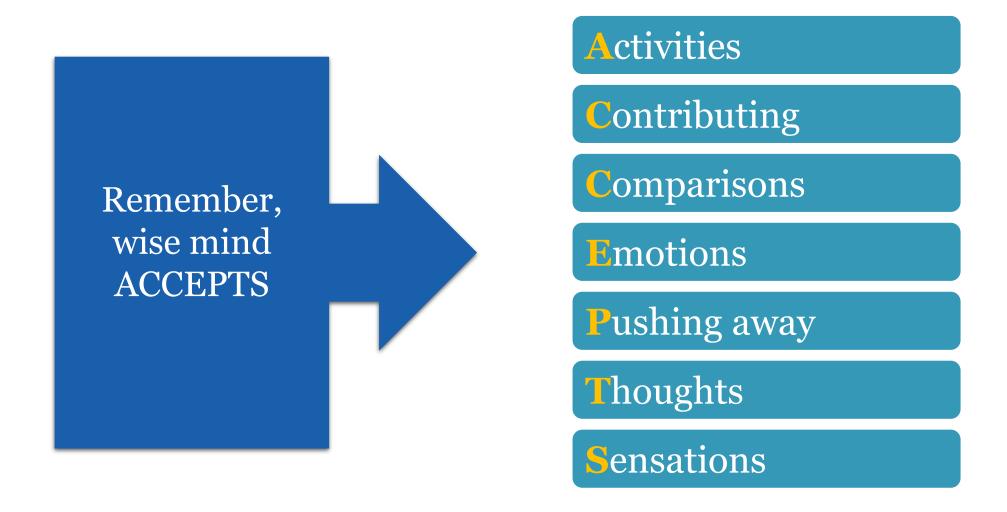
- Don't expect distress tolerance skills to make you "feel better."
- The fact is that you often may feel better, but that is not the purpose of the skill.
- The skills are so you won't make the situation worse.
- If the skills prevent the crisis getting worse but don't make you feel better, DON'T STOP – if you do, things may get worse.

What Can We Do For Our Staff?

- Acknowledge the stressors
- Provide information
- Remind staff of available resources EAP, PTO, Telehealth options available through medical insurer, etc.
- Encourage Self Care
- Keep celebrating the wins

What Can We Do For Ourselves?

Distraction is deliberately turning your attention away from the crisis



Self-Soothe with Five Senses

Decorate your space, go somewhere Vision inspiring Sound Music, soothing voices, nature sounds Smell Cooking, lavender, the beach Comfortable clothes, pet animal, foot Touch massage Favorite food, hard candy or mint, good Taste cup of coffee

IMPROVE the Moment

Imagery Meaning Prayer Skills to accept pain Relaxation and reduce One thing in the moment suffering Vacation/Pleasant Activities Encouragement

Online resource for medical practices

https://www.communitycarenc.org/newsroom/coronavirus-covid-19-information/resources-for-providers-and-practice-staff



WHO WE ARE ↓ WHAT WE DO ↓ STATEWIDE OPS KNOWLEDGE CENTER ↓

RESOURCES DURING COVID-19 FOR PROVIDERS AND PRACTICE STAFF

#HOME / CCNC NEWSROOM / CORONAVIRUS (COVID-19) INFORMATION / RESOURCES DURING COVID-19 FOR PROVIDERS AND PRACTICE STAFF

Resources During COVID-19 for Providers and Practice Staff

Taking care of yourself, so you can take care of others

Last revised March 25, 2020

Being ill is always stressful, but anxiety, sadness, and uncertainty are much more intense during a pandemic. Supporting patients in this environment can be exhausting for healthcare providers, so it's important that you don't neglect your own behavioral health. You have to take care of yourself first if you are to help others!

To help you be more proactive about your own health, the following resources were compiled by CCNC Behavioral Health specialists in coordination with CCNC Human Resources. We hope they help you and your practice staff cope with the challenges of COVID-19, both professionally and personally. Please feel free to share the link to this page with anyone.

Ways to take care of yourself include:

- · Reading the news from reliable sources (and taking breaks from the news)
- . Recognizing the things you can control, like good hygiene and exercise and the things you can't control like when the kids go back to school or your patient load
- · Taking measures as recommended by the CDC and other public health agencies
- · Practicing self-care
- · Seeking professional help from a licensed mental health professional if necessary

Questions?

