Managing trauma in your staff



Working in Intensive Care involves a lot of exposure to psychological distress and trauma of patients, as well as the potential for critical and traumatic incidents at work

The busy, heightened nature of the environment means that in some units stress runs high and there is potential for staff to be on edge, reactive, and possibly tearful.

However, stress and anxiety are natural responses, and anxiety right now can be adaptive as it allows staff to stay alert.

Following exposure to difficult circumstances, it can be tempting to rush to rescue and provide a "debrief".

If enforced or led by untrained people, it can actually be damaging.

However, there are ways to enable staff to "process" the trauma:

COMMUNICATE: Lines of communication are key, and a lack of information or honesty can sometimes exacerbate problems.

TIME OUT: Ensure breaks, and allow people to take their days off. Offer the opportunity to rotate from areas of high to low stress (but beware for some people this will be experienced as a failure on their part, so does not suit everyone).

CHECK-IN: Make use of natural ways people process- conversations, checking in on each other. Try huddles at the start and end of the shift.

ALLOW TIME: Remember that although this is stressful and many may initially react with stress, most will recover using their own natural resources, which can take up to one month. Do not run a "debrief" with untrained staff.

WATCH AND WAIT: Don't rush to refer to psychological therapies- this can pathologise someone's natural response. Watch out for staff still struggling with the incident one month later, who may benefit from occupational health or GP based psychological services. The red flags to look out for one month post incident are:

- Feeling upset and fearful most of the time
- Acting very differently to before the trauma
- Not being able to function such as work or look after the home and family & not enjoying life.
- Feeling very jumpy and having many nightmares
- Still not being able to stop thinking about the incident