

# COVID-19 and the Voluntary Sector

Developing a safe and evidence-based wellbeing support offer for staff and volunteers

# **Covid-19 and the Voluntary Sector - Support to develop a safe and evidence-based wellbeing support offer for staff/volunteers**

## **Overview**

This document is intended to support voluntary agencies through the Covid-19 pandemic. It has been written by psychologists working across the Joined Up Care Derbyshire network at this time, based on available evidence and best practice guidance issued by relevant national and international organisations and professional bodies.

Individual organisations may draw on this content in the development of their own staff/volunteer wellbeing support offer, during the Covid-19 pandemic period.

## **Contents**

- Evidence for staff/volunteer support
- Core principles of evidence-based staff/volunteer support
- Example stepped care model of staff/volunteer support



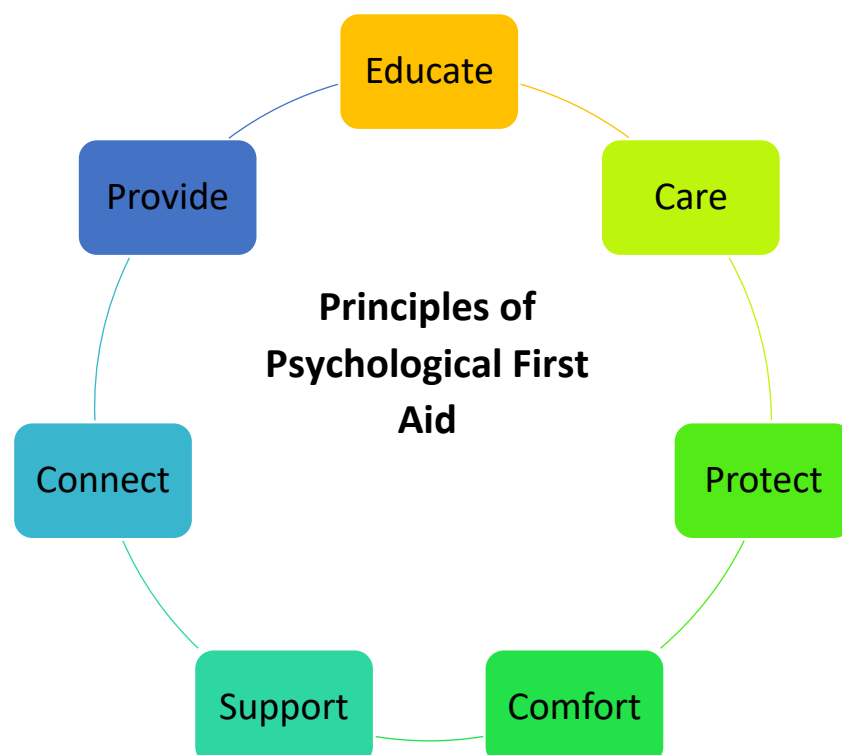
## What's the evidence for staff/volunteer support at this time?

- **Psychological First Aid is recommended during the 'active' phases of the pandemic**

Research evidence indicates that structured or 'deep' psychological debriefing that asks someone to systematically recount their perceptions, thoughts and emotional reactions *during* a recent stressful event is unhelpful. Although well intentioned, intervening in people's natural coping mechanisms too early can be detrimental. Single session 'Psychological Debriefing' is not indicated immediately after or during a traumatic incident.

In general it is important to remember that staff/volunteers are likely to be in a high state of arousal during a crisis ("fight or flight mode"). This is not usually the time for new learning, reflection, or emotional processing.

At this time, during and in the immediate aftermath of a crisis, the principles of 'Psychological First Aid' may be most useful: care, protect, comfort, support, provide, connect, and educate.



- **Supporting staff through the ‘recovery’ period**

It is important not to return to ‘normal’ within organisations, without considering the long term emotional wellbeing needs of staff/volunteers. It is recommended to allow safe space for reflection and processing of experiences; organising active learning events; offering thanks and rewards for everyday going above and beyond; spaces for peers support and a needs assessment to identify support needs.

If offering specific support to staff and volunteers, remember that you, yourself, are (and have been) impacted in by these same events. Is it appropriate for you to be offering support to your colleagues/teams, or better to view yourself as part of the team needing support? Use Psychological First Aid principles with yourself: be aware of your own responses and needs; maintain balance in your own life and work; and connect with valued others.

- **Access to evidence-based support for those that need it, when they need it**

Most staff and volunteers will experience a natural recovery. Social support is key and organisations should not ‘rush in’ with psychological interventions. Where there are ongoing wellbeing difficulties, staff/volunteers should be signposted to evidence-based psychological therapies by appropriately trained practitioners (see below for how this can be accessed).

We know that BAME staff have been disproportionately affected by the pandemic and therefore are likely to have greater support needs than white colleagues (staff/volunteers), but may also be less likely to access psychological support. Thus particular attention should be paid to support and signposting for BAME staff.

## Principles of support for staff and volunteers during Covid-19

The principles below are synthesised from guidance available from the NHS, professional and specialist trauma bodies including Psychological First Aid. Full details for these sources can be found at the end of this document.

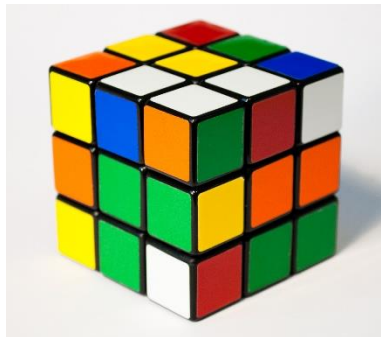
- **Support basic needs.**

This includes access to food and drinks, breaks, spaces to relax, and adequate equipment and training.

- **Have a communication strategy and keep information simple.**

Communicate regularly with staff and volunteers using simple messages. May involve passing on communications to those not regularly accessing intranet via text, post or phone.

Be visible, available and supportive. You do not need to have all the solutions all the time!



- **Normalise responses.**

It is important that staff and volunteers know that feelings such as anxiety, fear and exhaustion are common during a situation such as Covid-19. 'Normal human responses to abnormal events'.

Most of our own and our staff/volunteers reactions will be healthy and normal responses to high levels of stress and uncertainty. Thus we must be cautious in thinking through our responses at organisational, team and individual levels and be mindful of not stigmatising normal human reactions as 'lack of resilience'.

- **Stay connected.**

Providing and encouraging opportunities to connect with peers helps people remember that they are not alone. Consider regular “check-ins”, remotely if staff/volunteers are home-based.

- **Provide information on further support.**

Be clear on what support is available and how it can be accessed, so you can provide this information when necessary. See below.

- **Acknowledge difficulties – and successes.**

It is important to acknowledge the pressures that your staff and volunteers are under, and to appreciate the commitment and care staff are showing during this difficult time.

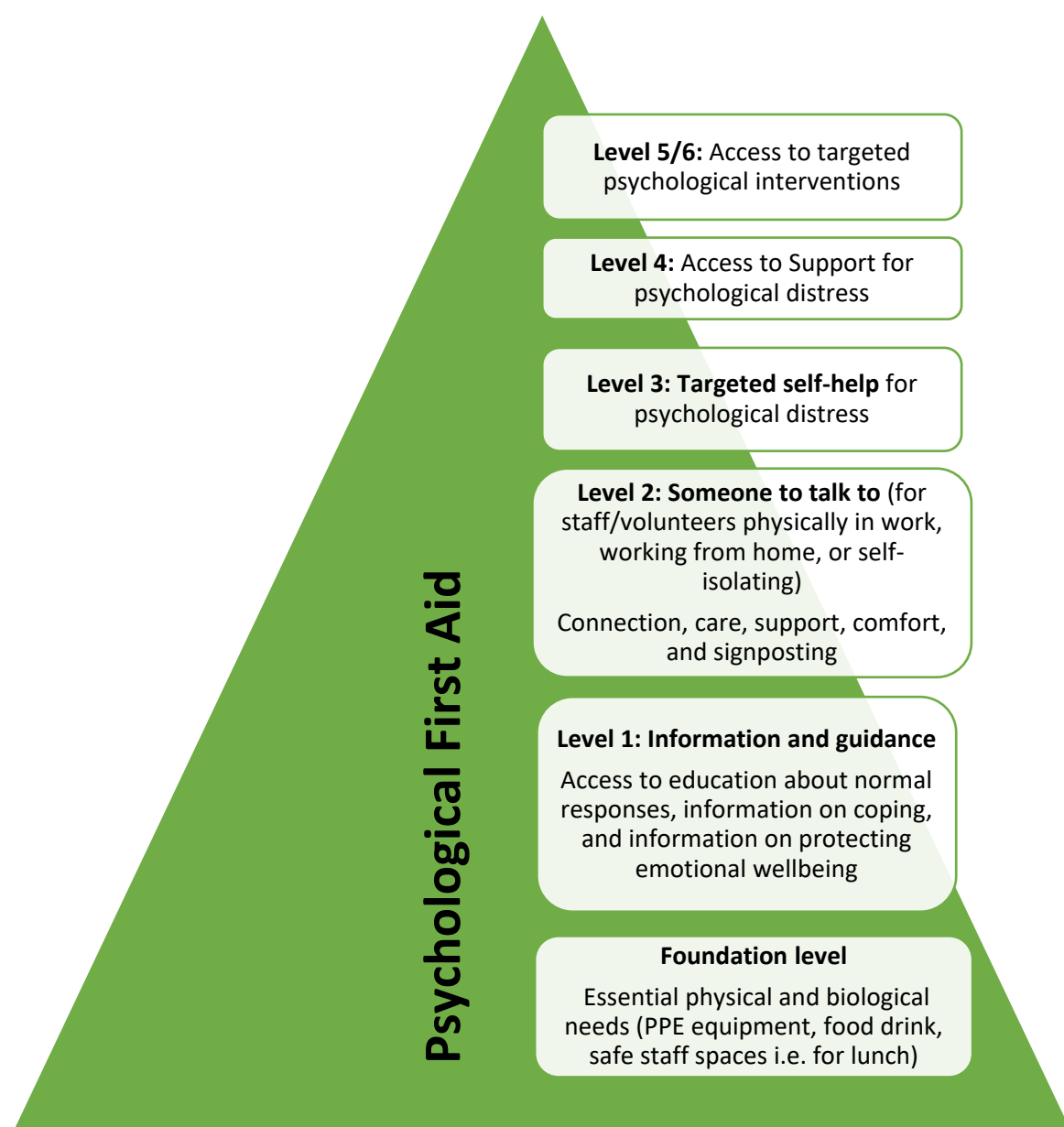
- **And, take care of yourself and pace yourself.**

This is a marathon, not a sprint!



## A stepped care support offer

A stepped care response is considered most appropriate, see **Fig 1** below for an example. Physical needs, information and peer support are first line, with more intensive interventions being available for those who require it, and for whom it is the appropriate.



**Figure 1.** An example stepped care model of staff/volunteer wellbeing support during Covid-19

## **The levels of the stepped care model explained, with examples**

- **Foundation level**

Support for staff to meet their basic physical and biological needs (PPE equipment, food drink, safe staff spaces i.e. for lunch). Time and support for staff and volunteers to take breaks, and rest.

Support to connect with colleagues i.e. informal virtual tea breaks, team catch-ups.

- **Level 1 – Information and guidance**

<https://joinedupcarederbyshire.co.uk/staff-support> is a local hub of information, advice and support for staff. There is education about normal responses at this time, information on coping techniques, and ways to protect their emotional wellbeing at this time.

Also locally tailored resources, and posters with support offers and key messages on this website, including a tab for volunteer support at this time, and general support that all staff within Derbyshire can access.

Some core messages, repeated, can be helpful for staff and volunteers, for example:

- It's okay not to be okay
- Experiencing distress doesn't mean you are not able to do your role, it means you are human
- There's help there for you, if you need it
- It's a marathon, not a sprint
- Time connecting with one another is important for our wellbeing

- **Level 2 – Someone to talk to, for support and sign-posting**

Maximising opportunities for staff to speak with line managers/supervisors – team meetings, 1:1's. Over the phone or by video call, depending on staff/volunteer preference.

This level of support is not for counselling or therapy, but for a supportive conversations (reassurance, comfort, connection) and sign-posting on (as appropriate).

- **Level 3 – Targeted Self-Help for psychological distress**

Access to apps and self-help resources for individuals to learn ways to manage and promote their wellbeing, tailored to their concerns i.e. sleep problems, heightened anxiety or low mood.

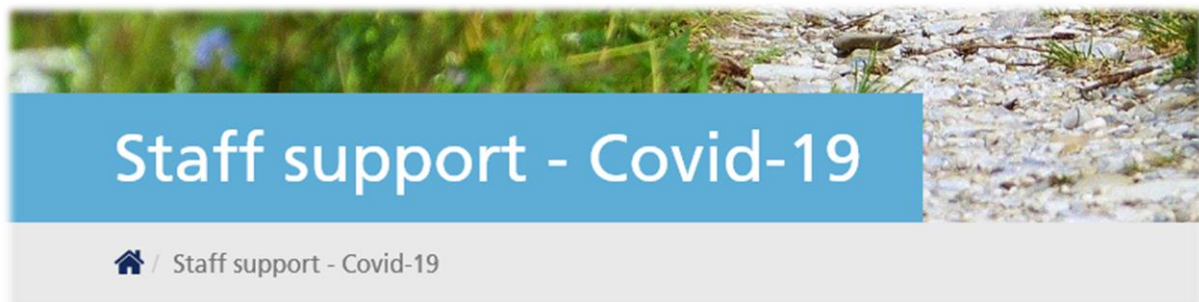
There are lots of self-help resources for promoting mental wellbeing on the Joined up Care Derbyshire website.

<https://joinedupcarederbyshire.co.uk/staff-support>

There are a range of recommended and free apps to support mental wellbeing.

<https://www.nhs.uk/apps-library/category/mental-health/>

The Joined Up Care Derbyshire Staff support web area:



- **Level 4 – Support for psychological distress**

Staff and volunteers can access support for their psychological wellbeing via a number of locally based support offers.

Mental Health Support line, open 7 days a week, 9am to midnight. Staffed by mental health professionals, and able to offer support to those experiencing increased distress during this period. Tel: **0300 790 0596**.

<https://www.derbyshirehealthcareft.nhs.uk/getting-help/coronavirus-covid-19/mental-health-support-line>

Derbyshire Recovery and Peer Support Service emotional care helpline. Phone **01773 734 989** (open Monday to Friday, 9am – 5pm).

If bereavement support is required, there are a number of options – including, the NHS Bereavement support line **0800 2600 400** to speak with a trained nurse. There is also Cruse tel **0808 808 1677** or Marie Curie support support

line **0800 090 2309**. If in South Derbyshire, Tree Tops Hospice are offering support to people affected by bereavement tel **0115 949 6944**.

For talking therapy, at no charge, staff/volunteers can self-refer to local Talking Therapy services (also known as Improving Access to Psychological Therapies (IAPT) services) for support to manage depression, low mood, stress or panic.

- **Level 5– Targeted psychological interventions**

Staff/volunteers can access a range of support if they require more intensive intervention, including a) A range of higher intensity therapies for common psychological difficulties (i.e. trauma) through IAPT providers Talking Therapy Talking Therapy services; b) Bereavement counselling through IAPT providers Talking Therapy services, or CRUSE tel **0808 808 1677**. If in South Derbyshire, Tree Tops Hospice are offering support to people affected by bereavement tel 0115 949 6944.

- **Level 6 – Highly specialised psychological wellbeing intervention and support**

Staff or volunteers, with more complex presentations, whose needs are not addressed by the above, may require treatment within secondary care services, particularly Community Mental Health Teams (CMHTs). Appropriate support may include:

- Assessment and treatment offered by Community Psychiatric Nurses, Occupational Therapists and Psychiatrists.
- Psychological therapies provided by CMHT Clinical Psychologists or psychotherapy services (eg. CBT or Psychodynamic Psychotherapy).

Assessment and psychological therapies provided by one of the Clinical Psychologists in the Health Psychology Service may also be considered appropriate, for complex physical health and mental health presentations.

Specific services available at this level may vary slightly between different geographical areas. To access these services it is recommended that the staff/volunteer member is encouraged to speak with their GP for a referral.

## Further Resources

- This NHS Scotland Guidance for Psychological First Aid is an accessible resource outlining practical application of PFA at this time, almost like a brief e-learning package. [Psychological first aid](#)
- Guidance in supporting staff wellbeing at this time has been produced by the British Psychological Society: BPS Covid19 Staff Wellbeing Group guidance - 'The psychological needs of healthcare staff as a result of the Coronavirus pandemic'. [BPS guidance - Psychological needs of staff](#)
- The COVID Trauma Response Working Group have produced Guidance for planners of the psychological response to stress experienced by hospital staff associated with COVID: Early Interventions. This has a great list of "Do's and Don'ts" for planners, managers and leaders. [do's and don'ts - supporting staff](#)
- Intensive Care Society. Wellbeing resource library. <https://www.ics.ac.uk/ICS/Education/Wellbeing/ICS/Wellbeing.aspx>
- Centers for Disease Control and Prevention. Psychology of a crisis. [https://emergency.cdc.gov/cerc/ppt/CERC Psychology of a Crisis.pdf](https://emergency.cdc.gov/cerc/ppt/CERC_Psychology_of_a_Crisis.pdf)