##  University of Toronto Faculty of Medicine

##  Leadership Community of Practice

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##  This outlines some principles to guide leadership in the support of our colleagues

##  and trainees through these unprecedented times and beyond.

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| 1. | Crisis: mix of danger and opportunity. Staff are experiencing significant and possibly enduring psychological distress re: personal safety and risk, virus spread, PPE, ethical dilemmas, moral distress, overwhelming demands of health care, stigma, economic worry and concerns for family. They want and need the following: Hear me; Protect me; Prepare me, Support me; Care for me *(Lai et al, 2020; Wu et al, 2020; Shanafelt et al 2020; Leszcz et al 2020)*  |
| 2. | Confidence: value of leadership demonstrating competence, integrity and benevolence; notably re ethics of care, access to PPE, and staff redeployment/ placing staff in harm’s way. *(CMA 2020)* Organizational justice: relationship justice and decisional decision at all levels- attend to racism and discrimination. *(Ogunyemi et al 2019)*Organizational trust matters!! *(Costa, 2003)* |
| 3. | Connection: offsets social isolation and stigma; enormous benefit of social integration in all forms; check-ins and buddying up in formal and informal fashion. *(Gerada, 2018; Southwick et al, 2020)* |
| 4. | Capital: human capital is our chief resource and needs safeguards as much as every other hospital resource; pre-plan; education around managing stress and demands of pandemic care. *(Lowe, 2012)* |
| 5. | Caring and creative responsiveness: The measure of our valuing of our colleagues. |
| 6. | Coping strategies: Tri-partite model: emotion –, problem –, and meaning- focused, including moral purpose. Make implicit more explicit to increase reliable accessibility to principles and interventions. *(Maunder et al 2008; Yalom and Leszcz, 2020)* |
| 7. | Cohesion of groups: build cohesive and supportive staff group opportunities; normalize vulnerability and depathologize anxiety and psychological distress. *(Gerada, 2016)*Five key features: Safety, Calming, Self and Team-efficacy, Connectedness, and Hope. *(Hobfoll et al 2007)* |
| 8. | Confidentiality: protect individual confidentiality, but secure consent to utilize themes to maximize organization and leadership’s responsiveness. *(Leszcz et al, 2020)* |
| 9. | Communication: clarity, consistency, timeliness, relevance; and also, of great value to care providers’ family; recognize cultural diversity of our staff. Education re trauma and stress symptoms – describe normative responses and concerning ones.Recall: “If u can name it, u can tame it.” *(Siegel, 2012)* |
| 10. | Culture: organization/institution/department/unit; aim for congruence throughout the system. Needs buy-in throughout.Leadership sets the tone – remember: culture eats strategy for breakfast every day.Importance of psychological safety in the workplace. Every practical effort is made to avoid reasonably foreseeable injury to the mental health of our colleagues and employees. *(Shain 2010)*Psychological Safety is the result of the following dimension:Control + Reward – Demand and Effort mediated by relationships to one’s superiors*This is an ethical, legislative, clinical and economic imperative* |
| 11. | Conflict: system, unit and team regression may be evident in interpersonal communication and conflict/ dynamics; amplified by psychological reactions to traumatic stress.Aim for assertive and affiliative interpersonal communication rather than attack and blame.  *(Yalom and Leszcz, 2020)* |
| 12. | Compassion Fatigue and Burnout – exhaustion, futility, depersonalization. Doctors’ burnout shaped by organizational forces. *(Yates, 2019; Summers 2020)* It is a systemic issue by and large building atop doctors’ doubt, guilt, responsibility and perfectionism!! *(Hartzband and Groopman, 2020)*Lack of connection, lack of competence and lack of personal control.Better to prevent rather than to treat. Great value of social connection and building reflective capacity; mindfulness  |
| 13.14. | Clinicians with organizational focus: aim to be transparent, engaged, taking a deep dive into the experience of our colleagues; always caring and supportiveCollaboration and cooperation: All must work together and recognize our mutual interdependence  |
| 15. | Crisis: don’t waste a crisis, aim to be better after; beyond resilience to anti-fragility *(Park et al, 2020; Brooks et al, 2020)* |
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