



## AHA Team Training

# Suicide and Mental Health in Healthcare Teams

September 13, 2023

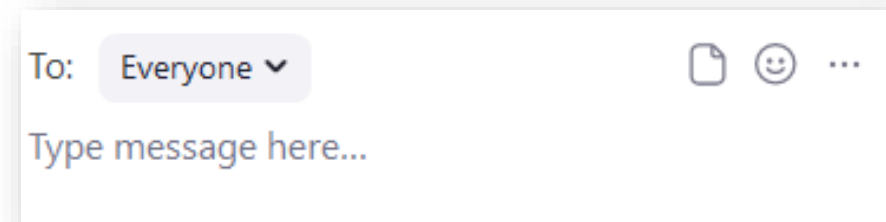


AHA CENTER FOR HEALTH  
**INNOVATION**

# Rules of Engagement

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In support of improving patient care, the Duke University Health System Department of Clinical Education and Professional Development is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing education for the health care team.



# Upcoming Team Training Events

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## ***Courses & Workshops***

- [Virtual TeamSTEPPS Refresher](#) – October 3-24
- [In-person TeamSTEPPS Master Training](#)
  - Northwell – October 23-24
  - Houston Methodist – October 31- November 1
  - Tulane – December 4-5
  - UCLA – December 11-12

## ***Webinars***

- [Beyond the Bucket Brigade: Strategies for Behavioral Health Management Across the Continuum of Care](#) – September 20, sponsored by Array

# Upcoming Team Training Events Cont.

## Custom TeamSTEPPS Advisory Services at Your Organization

### TeamSTEPPS Master Training Course

Using a train-the-trainer model, **we give you the foundational tools** and concepts, and train your staff through this **two-day training** program. You will gain a team of Master Trainers ready to teach others in your organization.

### Comprehensive TeamSTEPPS Programs

**We help you along the way.** After delivery of the two-day Master Training course, we continue to work with your team for **3-6 months**, building the internal capacity to hardwire TeamSTEPPS throughout your organization.

[Learn More »](#)

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“Our relationship with the TeamSTEPPS faculty and the on-site trainings were both phenomenal. **They did a great job of meeting us where we were** and customized a program that really helped us gain clarity about the problem we’re trying to solve.”

– **Melissa Riffe-Guyer**  
Executive Director,  
Culture Cone Health

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# Today's Presenter

**Dr. Sanne Henninger, LCSW**

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# Today's Objectives

*Learn to:*



## Support those at risk

- Identification
- Response
- Resources

## Foster Coping Abilities

- Education on coping
- Foster connections
- Manage stress as a team
- Second victim debriefs

## Build Team Safety Culture

- Huddles
- Brief, Debriefs
- SBAR
- Team norms

# Poll Questions

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- Do you know someone in your workplace right now that you are concerned about? Y/N
- On a scale of 0-5 (0 is low) how comfortable would you be if a colleague shared that they had suicidal ideation?
- How likely do you think your staff would personally share their burnout or suicidal ideation right now? 0-5





# Suicide Trends

In 2020, there were [45,979 deaths by suicide](#) in the United States, which is about 1 suicide every 11 minutes.

## Suicidal behavior also has far-reaching impact:

There were 46,412 suicides among adults in 2021. But suicides are just the tip of the iceberg. For every suicide death\*, there were about:

- 3 hospitalizations for self-harm\*\*
- 8 emergency department visits related to suicide\*\*\*
- 38 self-reported suicide attempts in the past year\*\*\*\*
- 265 people who seriously considered suicide in the past year\*\*\*\*

\*Based on the latest year of available data for adults ages 18 and older.

\*\*Source: [HCUP National Inpatient Sample \(2020\)](#) [↗](#)

\*\*\*Source: [CDC WISQARS \(2020\)](#)

\*\*\*\*Source: [SAMHSA National Survey on Drug Use and Health \(2021\)](#) [↗](#)



Additional findings are featured in a new report, “[Provisional Numbers and Rates of Suicide by Month and Demographic Characteristics: United States, 2021](#).”

” The new provisional data show the number of suicides increased from 45,979 in 2020 to 47,646 in 2021. The number of suicides in 2021 was still lower than the all-time high of 48,344 in 2018.

The largest increase in the rate of suicide occurred among males ages 15-24 – an 8% increase. Suicide rates also increased for males ages 25-34, 35-44, and 65-74.

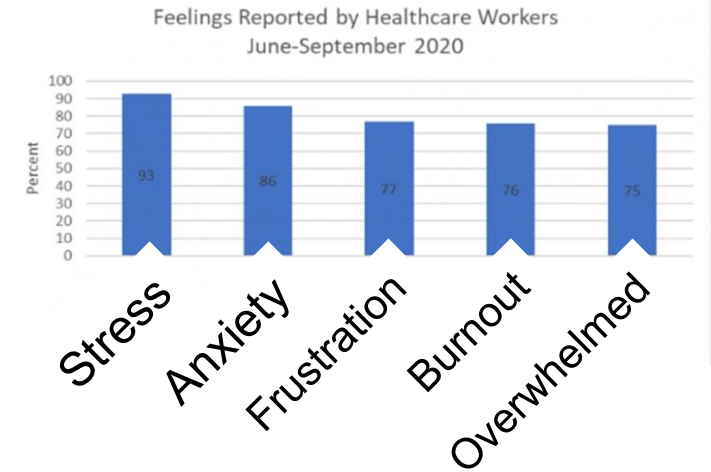
# Suicide in Healthcare

Physicians and providers have the highest suicide rate among all professionals and that the majority, if not all, face extreme levels of stress and burnout.

Paradoxically, providers are the least likely to seek mental health treatment.

Females providers are at higher risk with nearly half of female physicians believing they fulfilled the criteria for a mental health disorder and did not seek treatment.

[Suicide in Healthcare Workers: Determinants, Challenges, and the Impact of COVID-19 - PMC \(nih.gov\)](#)



One study revealed that 36% of healthcare professionals had thoughts of suicide at some point in their careers with 14% in the last 12 months.

79% lacked professional fulfillment and only 1 in 5 feeling happy, in control and worthwhile at work.

Additionally, 78% experienced intimidation, bullying, harassment and microaggressions with 40% frequently or often. HRD Dexter Tilo 29 Aug 2022

Video

<https://www.youtube.com/watch?v=4WJwCkDL0o>

# Suicide Prevention Resources

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Substance Abuse and Mental Health Services Administration

[Suicide prevention](#)

The Suicide Prevention Resource Center

[SPRC](#)

Adult Outpatient

[Adult Outpatient Medical Settings Toolkit](#)

**Mental Health America** [offers screening tools](#) to help self-identify symptoms of mental health conditions such as depression, anxiety, and PTSD.

OSHA [Emergency Preparedness and Response](#)

# First Responders

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## First Responders

- Safe Call Now: Call 1-206-459-3020 for a 24/7 hotline staffed by first responders.
- Fire/EMS Helpline: Call 1-888-731-3473 to reach this help line run by the National Volunteer Fire Council.
- Frontline Helpline: Call 1-866-676-7500 for a 24/7 line staffed by first responders and run by Frontline Responder Services.
- [Healing Our Own](#)
- [Blue H.E.L.P. - Honoring the Service of Police Officers Who Died by Suicide \(bluehelp.org\)](#)
- [Contact Us – The Code Green Campaign](#)
- [First Responder Center for Excellence - First Responder Center for Excellence](#)
- [First Responders Outreach | Gary Sinise Foundation](#)

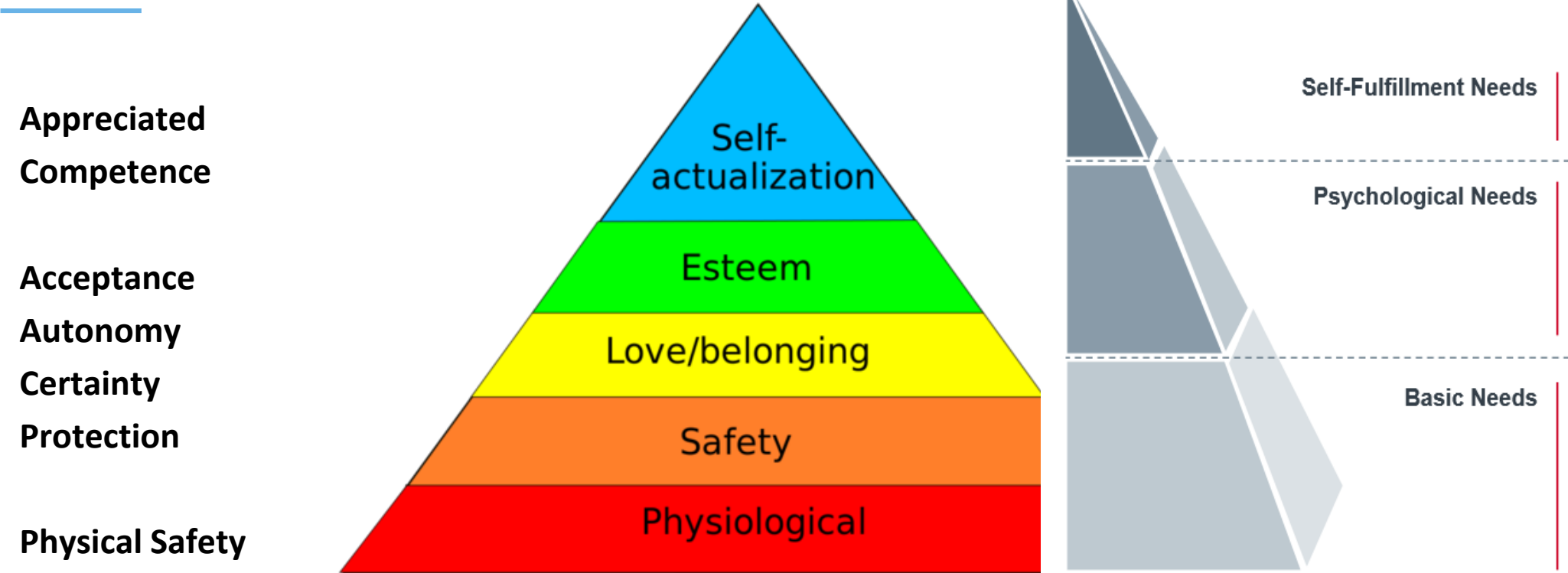
# Chat

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- What are the human emotional needs that most protect against suicide?



# Protection against suicide



# Supporting Your Team

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## Support individuals at risk

- Identification
- Response
- Resources

## Foster Coping Abilities

- Education on coping
- Foster connections
- Manage stress as a team
- Rounding

## Build Team Safety Culture

- Role Clarity
- Brief, Debriefs
- SBAR
- Team norms

# 1. Support individuals at Risk

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- Identification
- Response
- Resources

It is a leader's duty to protect the safety of staff and Patients. If you suspect suicidal ideation, with all good intention and words that show you care, ask.



[Make the Difference: Preventing Medical Trainee Suicide - YouTube](#)



# Identification

## Do you know the warning signs for suicide?

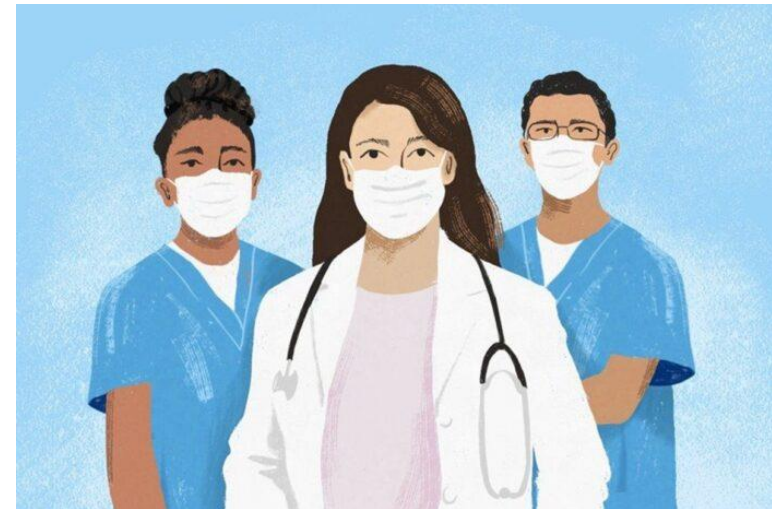
If someone is at risk for suicide, you can watch for warning signs, including:

- Talking about being a burden
- Being isolated
- Increased anxiety
- Talking about feeling trapped or in unbearable pain
- Increased substance use
- Looking for a way to access lethal means
- Increased anger or rage
- Extreme mood swings
- Expressing hopelessness
- Sleeping too little or too much
- Talking or posting about wanting to die
- Making plans for suicide

Read CDC's Feature, [#BeThere to Help Prevent Suicide](#), and CDC's [VitalSigns](#) [PDF - 4 pages] to learn more about the warning signs and how to help someone at risk.

- Have you wished you were dead or wished you could go to sleep and not wake up?
- Have you actually had any thoughts of killing yourself?
- Have you been thinking about how you might kill yourself?
- Have you had these thoughts and had some intention of acting on them?
- Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?
- Have you ever done anything, started to do anything, or prepared to do anything to end your life? How long ago did you do any of these?

(Questions are from the Columbia-Suicide Severity Rating Scale)



# Response and Resources

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1. **Inquire** (share your concerns/ask)
  - Be direct, unafraid to ask
  - I have noticed, I am worried
2. **Acknowledge** (being heard)
  - Be comfortable in direct conversation
  - Continue inquiry, listening
3. **Support** (connection to others, not alone)
  - Empathy
  - \*Offer resources for Therapy
  - Validation
4. **Transition** (sense of control)
  - Having a plan
  - Next steps



## Immediate Response and Resources

- Get help from a trained professional as soon as possible
- Do not leave the person alone
- Call 911 or if possible take them to the nearest emergency room
- Contact a family member
- Offer a suicide hotline number (National Suicide Prevention Lifeline 800-273-TALK or 988)

## 2. Foster Coping Abilities

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- Education on coping
- Foster connections
- Manage stress as a team
- Rounding



# EQ for Education Assessment

<b>Self Awareness</b>		<b>Self-Management</b>	
<p><b>Are they aware of their behaviors?</b>            How self-aware are these employees?            What are their problem-solving styles and how does this contribute to conflict?            What are their triggers?</p>		<p><b>How well do each manage emotions?</b>            Do these staff members manage their stress or does it effect their responses to others?</p>	
<b>Relationship Awareness</b>		<b>Relationship Awareness</b>	
<p><b>Do the employees understand the needs of the other?</b>            Do they understand the needs of the others? Do they understand their own needs clearly?            Use TeamSTEPPS tool</p>		<p><b>Are the employees able to put their needs and expressions into appropriate words?</b>            What interpersonal skills need development or coaching?            What practical next steps can be taken between professions?            What communication plans can be put into place?            What education classes?</p>	

# An Education Curriculum

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1. Coping skills for stress
2. Managing anxiety and uncertainty
3. Change management
4. Conflict resolution
5. Building and sustaining relationships
6. Emotional Intelligence



# Help Individuals Cope

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- Create a personal debrief
- 4,7,8 Breathing
- Connect with someone
- Talk to a colleague
- Balance focus on the stressor with distraction
- Move - walk, ride, run, dance
- 10-20 minutes a day of meditation
- Deep relaxation during flashbacks
- Journal - what happened, meaning, any gains at all (even if tiny), what next



# The Longer List

## Cognitive

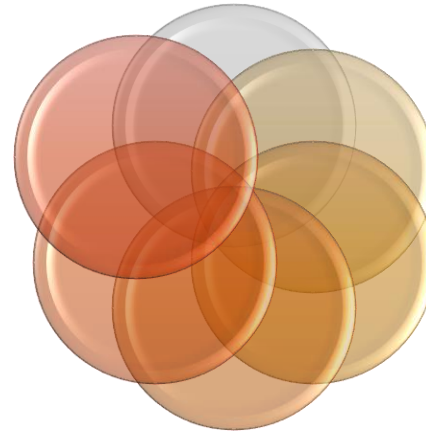
Cognitive distortions  
Sense of purpose  
Degree of control  
Beliefs and Values out of alignment  
Learning  
Work environment  
Workplace efficiency  
Evaluate MEANING and purpose  
Restructure your brain  
Be organized

## Positivity

Outlook  
Joyful moments  
Eliciting good memories  
Workplace aesthetics  
Be inspired  
Three good things  
Cultivating gratitude  
Signature strengths  
Perspective  
Social Support  
Kindness  
Awe

## Social

Healthy relationships  
Conflict management  
Confidants  
Patient Communication  
Workplace relations



## Emotional

Feelings management  
Change management  
Grief management  
Coping skills  
Unresolved life issues/triggers  
Journaling  
Can cant control activity  
Daily routines  
Organizing feelings  
Humor

## Physical

Self-care  
Health  
Sleep  
Relaxation  
Meditation  
Deep breathing  
Visualization  
Guided relaxation  
10 minute walk  
Exercise

# Therapy Can Help

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## 1.Cognitive Behavioural Therapy

A talk therapy with a mental health professional who helps in identifying unhealthy thinking patterns and modify them in a structured way.

## 2.Problem solving Therapy

A therapy to learn and reactivate the problem solving capacity that may help in dealing with managing/solving the problems encountered in life.

## 3.Interpersonal therapy

A therapy that focuses on improving you and your relationship with other people .

## 4.Anti-depressants medications

The medications prescribed by the doctor to correct the chemical imbalances in the brain.





# Help the team manage stress

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## Encourage teams to:

- Brief relaxation/stress management breaks
- Regularly seeking out accurate information
- Self-monitor and utilize stress strategies
- Foster a spirit of fortitude, patience, tolerance and hope
- Accept situations that they cannot change



# Help identify what can/can't be controlled.

## What to do:

1. Identify what you can and can't control.
2. Make a plan for what you can control and how you will tolerate what you can't.
3. Do everything on your lists.

What I Can Control:	What I Can't Control:
So this is what I will do about it:	So this is how I will tolerate it:



# Continue to Teach Conflict Resolution

## Connect Care Collaborate Close communication

Goal	Words
<p><b>Connect</b></p> <p><i>I want you to feel safe.</i></p> <ul style="list-style-type: none"> <li>• Establish comfort</li> <li>• Ask questions</li> <li>• Share appreciation</li> <li>• Open with a safe opening sentence</li> </ul>	<ul style="list-style-type: none"> <li>• Reveal a mutual goal</li> <li>• Pause</li> <li>• Nod, non-verbals</li> <li>• Share what you do/don't intend</li> <li>• Encourage them to talk</li> <li>• Connect with their needs</li> <li>• Share your EQ handout notes</li> </ul>
<p><b>Care</b></p> <p><i>You matter.</i></p> <ul style="list-style-type: none"> <li>• Show empathy</li> <li>• Paraphrase</li> <li>• Acknowledge discomfort</li> <li>• Offer affirmations</li> </ul>	<ul style="list-style-type: none"> <li>• Agree with what you can</li> <li>• Stay assertive (not aggressive or passive)</li> <li>• Pause to show appreciation</li> <li>• Own something</li> <li>• Clarify and Paraphrase</li> <li>• Prime for concerns</li> </ul>
<p><b>Collaborate</b></p> <p><i>Let's share and understand.</i></p> <ul style="list-style-type: none"> <li>• Predict and plan for what may go wrong (ie defensiveness etc)</li> <li>• Ask specific questions about their needs</li> <li>• Share your needs factually</li> <li>• Gently challenge discrepancy</li> </ul>	<ul style="list-style-type: none"> <li>• Share an interest in their needs</li> <li>• Validate portions of their concerns</li> <li>• Balance the focus of needs and the relationship</li> <li>• If the conversation gets unsafe, what can you say to settle it</li> <li>• Share more deeply on triggers, personal efforts</li> </ul>
<p><b>Close</b></p> <p><i>Let's make a plan.</i></p> <ul style="list-style-type: none"> <li>• Offer to do something on their behalf</li> <li>• Create some next steps</li> </ul>	<ul style="list-style-type: none"> <li>• Schedule the next time to meet (before leaving one another)</li> <li>• Create plans together for when communication does not go well.</li> </ul>

# Sustaining Relationships

## ■ CONNECT

### Brief for greetings and clarity

Brief with co-workers to prepare for the day, the next patient using this format:

- What I can do for you
- What I need
- What I appreciate
  
- What went well
- Any misunderstandings
- Personal learning moments or self-reflections to share

## ■ CARE

### Be Emotionally Intelligent

- Acknowledge and manage your stress
- Be aware of others stress.
- Admit mistakes/poor responses to others: "I am so sorry. I was stressed and didn't handle that well."
- Take care of your first sentences in a challenging conversation.
- Manage conflict early

## ■ CLOSE

### Closing the loop

- End the day on a positive note
- Say Thank you often
- Clarify for understanding
- End difficult conversations in an effective way

# Foster Connections and Peer Support

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- Huddle positivity
- Affirmations and appreciations activities
- Buddy systems
- Model and encourage sharing of feelings
- Share positive staff stories related to purpose
- Relationship assistance
- Check-in with one another



# Rounding on Individuals

*Agenda for Each Staff Member (remember Maslow?):*

- Stressors/stress level
- Relationships
- Feeling of protection
- Sense of purpose
- Need for support
- Use of stress strategies
- Recent events
- Sense of connection



# 3. Build Team Safety Culture

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- Role Clarity
- Brief, Debriefs
- SBAR
- Team norms (prevent conflict and bullying)



# Role Clarity for Relationships

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	Provider	Clinical	Office
What we can offer you			
What we need			
What we appreciate			



# Relationship Management

# BRIEF

## IDEAS...

Can Briefs be used with your clinical support team?

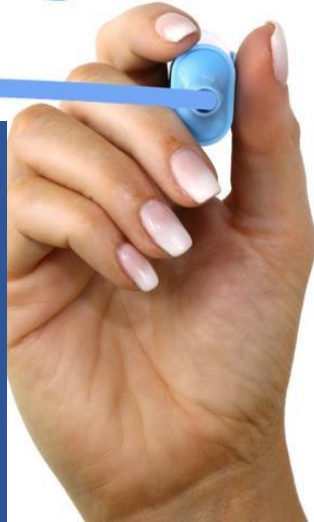
Between provider and staff the day before?

Provider with a nurse in the morning?

To notify providers of staff changes?

Just before meeting with a challenging patient?

As an electronic huddle?



## Successful Briefs:

- Keep it short 3-5 minutes
- Have a timer and a standard agenda

## Agenda Examples:

- The day ahead
- Unresolved from yesterday
- What would help me
- What I appreciate

# Debriefs

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- Build a culture of communication and Learning
- Team support displayed
- Prevents conflict



What went well?

Something positive to end on

Share of appreciations this week

Any “learning moments” (“What was confusing this week?”)

Issues that were resolved  
(so others can learn)

Good catches

# CHAT

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- How many of you have conducted a Debrief for an emotional event? If so, how did you do it?



# Emotional Debriefs

- Two kinds: regular well-being meetings without agenda, event focused
- Engage a professional for guidance
- Offer but don't make mandatory
- Set expectations: confidentiality, no obligation to talk but a safe place
- Allow for sharing of their experiences of the event
- Validate and normalize feelings
- Guide them to the here and now
- Help them to predict problems in the days to come with supporting resources, ideas
- Close on a sense of community



Mount Sinai Hospital  
Department of Medicine

## Debrief Tool

### Stage

Set uninterrupted time  
Create a safe space

### Expectations

Minimize interruptions  
Thank everyone

### Emotions and events

Facilitate questions  
Recognize guilt

### Knowledge

Provide resources  
Set a check in time

### Questions:

- ◇ Have you ever experience anything like this before?
- ◇ What were you thinking at that moment and why?
- ◇ What bothered you the most and why?
- ◇ How did you feel right after the event? And now?
- ◇ Is there more that we could have done to help the patient?
- ◇ What was your relationship with the patient/family?
- ◇ What did you do when you got home from the shift?
- ◇ What coping techniques are you using?
- ◇ What did you learn from this experience?
- ◇ What advice on how to cope would you give someone else who has a similar experience?
- ◇ What did we do well in this case?

### Resources:

- ⇒ Chief residents, APDs, PD
- ⇒ Student Mental Health Clinic: *phone or email*
- ⇒ Hospital Peer Support Program: *phone or email*
- ⇒ Hospital Employee Assistance Program: *phone or email*
- ⇒ Psychiatry ER: *phone or email*
- ⇒ Mental Health Association of NYC: *phone or email*

# Facilitate development of Team Norms

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- Develop with each team. Set the stage of the importance of respectful and
- supportive communication on mental health and well-being. Remind them of the
- effects of bullying, exclusion, not welcoming new people, engaging in gossip or
- blame. Remind them of the effects of kindness, warmth and team support.
- Ask, “What is important to us?” and translate those responses into statements.

Tie these to the team’s mission and purpose.

# Key Takeaways

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## Takeaway 1

Don't make it too complicated. People need meaning, purpose, and connection.

## Takeaway 2

Get people to connect in a safe environment. Watch for conflict, keep roles and tasks clear and generate spaces for sharing appreciation.

## Takeaway 3

Know and share more detail on signs and symptoms, ways to approach and resources.

# More from Sanne

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[1. Psychological Safety and Building Strength in Teams | AHA Events](#)

[2. Building Strength in Teams Using TeamSTEPPS | AHA Events](#)

[3. The Relationship Between Nurses' Environmental Empowerment and Psychological Empowerment and Psychological Strain in Critical Care Work Environments \(ncsu.edu\)](#)

[4. Build Your Emotional Intelligence to Strengthen Resilience | Duke Today](#)

# Thank you

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*Please Contact Me*

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# Final Reminders

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- **Evaluation**

- Please complete the evaluation form that appears on your screen once the webinar ends

- **Continuing Education**

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**Questions? Stay in Touch!**

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