

Transcript of Jo Stubleby on Key Workers

So I, sometime ago, saw a nurse who had had a really difficult experience on her ward. She'd had someone die in what had been a very traumatic way and she had felt that things were not managed as well she might have liked them to be and there were things that, if she'd had the opportunity again she might have done differently. Now, after that experience, she took some time off work and, then gradually tried to return to work, initially going to a more community setting.

But what she started finding was that whenever she was doing the household chores, if she was using strong disinfectants, that would prompt the memory of the traumatic experience and I think that's really interesting, because we do know that smell is a very powerful trigger, to make us remember things, and I think many of us have had that experience, of you know, for me it's things like sometimes smelling cut grass takes me right back to the experiences of childhood in a way that you can't often access otherwise.

Now for this young nurse, I think what was happening was, that everytime that strong disinfectant, that took her back to the ward, and in that way it stirred up memories, I think she was probably avoiding, and working very hard not to think about but hadn't really been processed. I think that's a great question, and I think there is something about being able to just notice when people look like they might be at the end of their tether I think we all have, what we might call, a kind of tipping point, at which, yeah, you know, we're under stress, we're struggling we're really giving it our all, but, at some point, something starts to give And we have to, sort of, first of all, be aware enough of what's going on ourselves to notice it, but to be looking out for it in our colleagues as well Now when I was talking about that nurse earlier, I thought there was also something in that story that might provide other clues to look out for.

Because one thing that I thought made it really difficult for her was to feel to feel that not everything was done that could have been. That she held some guilt around that, and I think more than that, and a lot of people are starting to talk about this, the kind of whole question of moral injury. So, when people feel that there is something about the situation that they're placed in that doesn't feel ethically right to them and I think this has been part of why it's been so important that there's been open discussions about how do doctors make decisions about who gets treated with ventilators and who might not be offered that treatment But as a community we need to hold that, as a society we need to hold it, and not just have it on one or two people because that is also likely to lead to their tipping point being much sooner So we need to look out for those sorts of things in our colleagues as well.

I also think there's just something about when people are
starting to shut down. I think that there is,
in that kind of connection that we all need to have
of people are beginning to avoid,
It's a really big sign
I think to be taken out of your usual setting
and your usual supportive container can be really difficult,
even if it feels like you have volunteered
I also think that trying to find your way into a new team
and, sometimes, for the team to feel it's alright for you to be there
and to be settled in a new team, can be really difficult
and that might put you a bit more at risk
And to feel that you're trying to learn how to do something new
when everything is so pressured, can also be problematic
so redeployed staff might just need a little bit of extra help too