

Dr. Zainab Al Lawati, MD, MEd, FRCPC, FAAPMR. Dr. Tyler Roskos, PhD
Beaumont Medical Group. Michigan USA

INTRODUCTION

The coronavirus infection originated as unexplained pneumonia in Wuhan, China, and as 2020 started, it was officially labeled “COVID-19” by the World Health Organization affecting millions across the globe. Physical Medicine and Rehabilitation physician’s role comes after the intense ICU stay is over, leaving the patient with significant deconditioning hence requiring in-patient rehabilitation care. The role of residents in physical medicine and rehabilitation (PM&R) has been more important than ever in dealing with post-COVID-19 rehabilitation issues during their in-patient stay. The uncertainty of this deadly virus, shortages of personal protective equipment (PPE) and lack of timely testing facilities and treatments play a major role in the mental stress and burnout among medical workers including the residents.

OBJECTIVE

The aim of my quality improvement project is to explore the challenges that PM&R residents encounter while caring for patients in post-COVID-19 rehabilitation care units.

METHODOLOGY

A qualitative study using a semi-structured interview approach was employed to address the phenomenology towards residents and institutional factors that affects the mental health status during these difficult times.

RESULTS

The themes identified in the focus groups mostly covered the following three areas: (1) concerns and key stressors, (2) how the residents addressed these concerns and what was the institutional response to these concerns, and (3) coping strategies that helped them overcome the stress.

CONCLUSION

Stress management is an important aspect in the care and wellbeing of residents, especially during this pandemic. Further plans to implement resident’s well being programs in a non-judgmental manner is recommended.

REFERENCE

- Abbasi J. Prioritizing Physician Mental Health as COVID-19 Marches On. *JAMA*. Published online May 20, 2020. doi:10.1001/jama.2020.5205
- Bakker, A. B., & Demerouti, E. (2007). The Job Demands-Resources model: state of the art. *Journal of Managerial Psychology*, 22(3), 309–328. doi: 10.1108/02683940710733115
- Barker-Davies RM, O'Sullivan O, Senaratne KPP, et al The Stanford Hall consensus statement for post-COVID-19 rehabilitation *British Journal of Sports Medicine* Published Online First: 31 May 2020. doi: 10.1136/bjsports-2020-102596
(further references can be provided upon request).

Semi-structured interview questions:

1. How long did you work at post COVID-19 rehabilitation care unit?
2. What were your concerns while caring for post COVID-19 patients? elaboration on signs/ symptoms of anxiety, depression, PTSD, imposter syndrome or survivor’s guilt.
3. What were key stressors during this crisis?
4. Did you had concerns around safety?
5. Did you encounter any fatalities while caring for post COVID-19 patients? What did you feel about that?
6. How did you address your concerns? To whom? How was that perceived?
7. What were your coping strategies?

THEME 1 Concerns and key stressors

The residents raised concerns about the uncertainty of the disease and the fear of contracting the virus while taking care of the patients in the rehabilitation unit. Although the residents used appropriate personal protective equipment (PPE), direct interaction with the patients was stressful, as residents were worried that they might contract the virus and spread it to their families and friends. Furthermore, the residents noted that the complications associated with this virus can involve multiple body systems and require multiple medical interventions at the same time.

Example: “...I had COVID-19, so I was not concerned about myself but about others. I was worried that I would be affecting other people ... I had concerns about the increased risk of contracting COVID-19 with my premonitory asthma while caring for this population. Interacting with COVID-19 patients and spreading it to family members was the main concern.”.

THEME 2 Addressing concerns and the institutional response to these concerns:

The residents stated that they were vocal in addressing their concerns while caring for post-COVID-19 patients in the rehabilitation units. They conveyed to the faculty their concerns about the scheduling of logistics, minimizing their interactions with patients, and the lack of PPE during the early stages of fighting the virus. Their worries were taken into consideration, and the residency program faculty acted promptly to address these issues.

One resident expressed how he minimized the risks: washing hands, using PPE, and ensuring adequate precautions was my way to minimize the risk ... Safety was not a concern once PPE was provided, which took a bit of time.

THEME 3 Coping strategies of the residents

The residents had different coping strategies to overcome the stress related to this pandemic and from caring for these patients. Two residents followed healthy lifestyle strategies, with adequate sleep, healthy diets, and outdoor running. One resident found family and friends support helped to decrease the stress. One resident found that being busier and directing his energy to patient care was an effective way to deal with stress and ensure the quality of his patient care. All residents found that team dynamics played an important role in combatting stress and supporting one another.

Appreciating good things in my life was a motive to give more to my patients so they can get back to their lives ... Talking to a friend worked like cognitive behavioral therapy and minimized my stress.