



CAT NEWS

COVID-19 UPDATES FOR TRAINEES

April 2020



Editor's Note

Hello all,

Firstly, we would like to thank you all for the extraordinary efforts being made in all the hospitals around the country. Over the last number of weeks, we have seen a massive change to our daily work as we knew it, first preparing for and now beginning to manage the surge of COVID-19 patients requiring treatment. The dedication and commitment shown by anaesthesiology/ICM NCHDs in various aspects of dealing with this crisis has been inspiring and we are very proud to be part of this group with you.

We are very aware that you may all have questions regarding how the sweeping changes made during this pandemic will affect various aspects of your training. In this abridged version of the CAT News, we will try to update you on the plans that have been made so far by the College of Anaesthesiologists and by CAT. There will undoubtedly be questions that we fail to answer here, and we hope to have further answers for you shortly.

We have tried to maintain some semblance of CAT News normality where we could, and so we have included a fellowship piece from Dr. Aisling McMahon, fellow in Cardiothoracic Anaesthesia in MMUH. Thank you again Aisling for putting this great piece together for us at such a busy time.

We are also continuing with our elections for next year's CAT committee. Further information on the election and the nomination process is included within. Working with CAT over the past year has been a very rewarding process and we would encourage everyone to get involved if they can!

Finally, a reminder to look after yourselves and your colleagues during this time. The combination of dealing with the pandemic at work and then being unable to switch off and unwind in the usual ways outside the hospital presents a unique challenge for all of us. It is fully normal to feel overwhelmed, upset, a bit jaded or any emotion in between. As we are beginning to see the first COVID-19 patients successfully being discharged from our ICUs, do allow yourself to take pride in the incredible difference that your contribution is making during what will be one of the most difficult times in your career. We have included some wellbeing resources in this newsletter, and we are, as always, just a phone call/email/text away if you need us.

Thank you again, stay safe.

Patrick & Parvan.



CAI

SALUS DUM VIGILAMUS

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Letter to all CAI Trainees

13/03/2020

Dear all,

We are writing to you given the exceptional circumstances surrounding COVID-19 pandemic.

The Government has announced new measures in an effort to contain the spread of COVID-19. While this will present a challenge for us all, this is an unprecedented global situation and we all have a role to play in limiting the impact the virus has on our communities.

As a highly trained professionals you are at the front line of dealing with this virus and our thoughts are with you at this time. Our message to you is one of support, care for your wellbeing and a pledge that we are going to take a pragmatic approach to dealing with the situation that presents itself.

Firstly, we want to reassure you that your training time is not going to be lengthened by self-isolation or illness periods. We will also be pragmatic about mandatory courses and module sign offs during this period. We will be writing to all our Tutors and Fellows in this regard. More information will be made available over the next week on our website www.anaesthesia.ie about this.

We will postpone upcoming progression reviews and rearrange to a suitable time by teleconference. The Training department will be in contact with you regarding this.

We are conscious that examinations are a requirement for progression and that delaying them until later in the year may have an impact on trainees. However in light of the Government advice we have to postpone the planned MCAI and FCAI exams until a later date. The exams dept are contacting candidates and examiners in relation to this. We will be updating our website with more communication on this over the coming week. In addition, in the absence of a conferring ceremony, we will ensure that all those conferees for CSCST will receive their certificates.

With regard to upcoming courses and events, we understand you all have escalated clinical commitments, with that in mind we are cancelling all courses and events until end of May. This includes the careers evening scheduled for April 20th, but we will reconsider how best to deliver that. We have also taken the decision to defer this year's Annual Scientific Meeting until 2021.

As ever our primary concern remains your wellbeing, if you have any questions please contact us on training@coa.ie

Dr Brian Kinirons
President ,CAI

Martin Mc Cormack
CEO, CAI

Directors: Dr B Kinirons (President), Prof G Fitzpatrick, (Vice-President), Dr K Clarkson, Dr A Hennessy, Dr E Khan, Dr J O'Dea, Prof G Shorten, Prof D Honan, Dr P Sheeran, Dr M Langdon, Dr C Nanda Kumar, Dr B O'Brien, Dr R Page, Dr N Hayes, Prof M Griffin, Co-opted Members: Dr J Bates, Dr B Conroy, Dr W Jonker, Dr B Reidy, Dr C Power, Mr E Brazel, Dr L O'Hagan, Ex-Officio: Mr M McCormack, Ms M Jenkinson

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Current Updates

Here we will try to bring you the latest updates relating to the decisions being made due to the COVID-19 pandemic. As we have seen, this is a fluid situation and subject to change, so we will do our best to update you of changes as they arise.

Redeployment Plans

It is anticipated that the COVID-19 surge will hit some hospitals more severely than others at different times during the coming weeks. As such, to meet service needs across the board, the College has approved the formation of a 'rapid response team' of trainees to be taken from their current sites and redeployed to sites which are experiencing the most strain.

The college is dedicated to both supporting the health service to meet demand in hospitals in need and also to supporting you and your training requirements should you be redeployed. They are endeavouring to ensure the following recommendations are met:

- Those redeployed will be senior trainees.
- An assurance that adequate PPE must be available in all redeployment sites and that PPE training is available if needed.
- Appropriate induction should be available to all trainees who are redeployed, including being informed of who they are reporting to and who is providing clinical supervision during the time.
- All centres who receive redeployed trainees should have 24/7 supervision, including in-house consultants overnight.
- Trainees will be protected regarding salary, overtime and pension arrangement. It is currently the plan that trainees will continue to be paid by their current hospital and not the one which they are redeployed to, avoiding stressful new correspondence with payroll in a new site.

This is quite a fluid situation and further recommendations will be made in due course. Those trainees who are to be redeployed will be contacted as a matter of urgency and full information will be provided. We are hopeful that these redeployments will be short term measures.

If you are redeployed by your employer (independent of the College's redeployment plans), it is important that you contact the Training Department on training@coa.ie to update them of the change. As much support and assistance will be offered as possible, and there will be flexibility granted regarding meeting module and training requirements to anyone who is redeployed.

Rotations

As of Wednesday 8th of April, the HSE NDTP and the Forum of Postgraduate Medical Training Bodies have agreed that the July 13th 2020 handover for all current trainees (and the start for incoming SAT 1 Trainees) will go ahead as planned.

The allocation of training posts is complete, and all trainees and hospitals have already received communication from CAI of the July 2020 allocation.

Congratulations to the applicants who were successful in the recent SAT applications. CAI has been able to increase the recruitment numbers for Anaesthesiology from 40 to 44 annually, so this July we are looking forward to welcoming 44 SAT 1 trainees to the scheme!

As some of you may know, the structure of the final year of the scheme has been reviewed and has now been changed. The **Special Interest Year** which was taking place in SAT 6 has now been moved to an optional 7th year of training. There will be a limited number of SIY posts (currently 15) and appointment will be by the way of competition. Further information on the implementation of this plan will be communicated in due course.

College Examinations

Please see the latest exam schedule below.

Application Opening Date	Application Closing Date	Exam Date	Centres
Membership CAI MCQ			
19 June 2020	30 Jul 2020	02 Sep 2020	Dublin, Bahrain, Cairo, Jordan, Oman, Penang, Perdana
Membership CAI OSCE and SOE			
26 June 2020	12 Oct 2020	10, 11 & 12 Nov 2020	Dublin, Ireland
Final Fellowship CAI Written Exam			
26 Jun 2020	24 Aug 2020	23 Sep 2020	Dublin, Bahrain, Oman, Penang, Perdana
Final Fellowship CAI Clinical/SOE Exam			
03 July 2020	06 Nov 2020	01, 02 & 03 Dec 2020	Dublin, Ireland

The Membership MCQ scheduled for June is now cancelled, with the next opportunity to hold the exam being September 2nd 2020.

The ICM and Pain examinations are both postponed. As soon as new dates are confirmed, registered candidates will be informed.

The Membership OSCE and Final Clinical Exams in Autumn will have extra days added to allow for an expected increase in candidate numbers. There will be no issue with trainees getting places on these examinations.

Candidates who are registered on the cancelled Spring examinations can defer to Autumn with no administrative fee. They can email exams@coa.ie to have this processed. Candidates also have the option of receiving a full refund if they don't feel up to taking any of the exams in the Autumn.

Mandatory Training / Simulation Courses

All training and simulation courses have been postponed until the end of June 2020. The College is working hard to reschedule these course and will be in touch with all trainees once a new schedule is available.

Progression Reviews

Currently all progression/exit reviews are postponed. The College does still hope to hold the reviews this year and is monitoring the situation closely. Trainees who are due to complete their training in July 2020 will be prioritised to ensure they can complete their SAT programme and receive their CSST without obstruction. These will likely be virtual exit interviews and be held in June, further details will be communicated to these trainees in due course.

We want to emphasise again that your training time **will not** be lengthened by this pandemic. The College will work with trainees regarding mandatory training and module sign-offs in due course.

Leave from the Scheme

In 2019, the College introduced the option for trainees of applying for unaccredited leave from the SAT scheme at the end of SAT 2. This option will again be open to those starting SAT 2 in July 2020 and wishing to avail of this option from July 2021. Applications will open in due course and further correspondence will be sent to all of these trainees.

The option to apply for unaccredited leave has now been expanded to trainees who those starting SAT 4 in July 2020 and wish to take leave in July 2021, after SAT 4. Again, these trainees will be contacted with further details on the application process in due course.

Academia

As you are likely aware, the College has unfortunately had to cancel all events and courses until the end of May, including the 2020 Annual Congress.

Applications are still being accepted, however, for the following:

- The **2020 Anaesthetic Research Fellowship** will be awarded in May of this year. The Research Fellowship includes a scholarship to the value of €12,500 to support a research project or projects. The entries will be judged virtually by an expert advisory. Application forms and details of entry criteria are available by contacting Lucia Zelenska at 01-2650645, emailing lzelenska@coa.ie or by visiting: <https://www.anaesthesia.ie/wp-content/uploads/2020/02/Anaesthetic-Research-Fellowship-2020-Application-Form.pdf>
Deadline for applications is Friday 17th April 2020.
- Abstract submission are being accepted for the **2020 Delaney Medal Competition**. This medal, commemorating the late Dr. Edmund Delaney, will be awarded by the Council of the CAI for a presentation on a subject related to anaesthetic practice submitted by an anaesthesiology trainee. Applicants are required to submit two abstract forms (the nom de plume form and the standard abstract form).
Due to the cancellation of the Annual Congress, it has been decided that six trainees with the best abstracts will be invited for an online presentation via ZOOM, likely to be scheduled for late May/June, with a winner then to be announced online.
Further information can be found at: <https://www.anaesthesia.ie/wp-content/uploads/2019/11/Delaney-Medal-Competition-Regulations-2020.pdf>
Deadline for applications is Friday 24th April 2020.

New SAT Programme Curriculum

You may be aware that an in-depth review of the current Training Regulations has been undertaken and a new curriculum for the SAT programme is nearing completion. The curriculum's aim is to reflect current practice in Anaesthesiology and will define the learning outcomes, teaching and assessment processes for trainees. The curriculum will be available online and will be effective from the start of the next training year in July 2020.

Furthermore, the new e-Portfolio for Training which was rolled out to SAT 1 trainees last July in place of the logbook will be launched for all SAT trainees from July. The portfolio includes a new streamlined logbook and training diary for trainees along with online tutor assessments. The logbook entries are linked to recommended minimum volumes of practice (a certain number of cases to be achieved in each subspecialty for example) and can be tracked towards completion using a progress bar. There is also an ability to record activities on the mobile app while offline which has been extremely well received.

Dates for the Diary

- The College AGM has been rescheduled and will take place at 11.00am on Friday 28th August 2020.
- The 2021 Annual Congress of Anaesthesiology will take place on Thursday 20th and Friday 21st of May in UCD.

Miscellaneous (Independent of CAI)

Due to the impact of the pandemic, the terms of the **Training Support Scheme (TSS)** have been reviewed.

Usually, any balance left on an NCHD's TSS fund is reduced to zero at the July changeover, before a new allocation is awarded for the upcoming training year. This year however, due to the cancellation of conferences and training events, it may not be possible for NCHDs to spend this year's allocation before July. As such, any TSS balance remaining at the July changeover will automatically be rolled over into next year's fund and can be used, along with next year's allocation, at any time before the changeover of July 2021.

CAT will be meeting more frequently with the College during this ever-changing period. We will update you again if and when there are further plans implemented after our next meeting in May.



Fellowship Piece



Dr. Aisling McMahon - Fellow in Cardiothoracic Anaesthesia, Mater Misericordiae University Hospital

The Mater Cardiothoracic Anaesthesia Fellowship programme has been running since 2006 and provides exposure to a wide variety of cardiothoracic and cardiology procedures. I am fortunate to be the current fellow having taken up the post in July 2019 following completion of the anaesthetic training scheme. I have thoroughly enjoyed the year so far and the experience that I have gained is invaluable.

On a day to day basis my time is spent between the two cardiothoracic theatres in the Mater. Often the Fellow is assigned as a third NCHD between the two, providing the opportunity to be involved in all complex and interesting cases that are scheduled on a given day. The main focus is on cardiac surgery and TOE with cardiac surgery scheduled in both theatres 3 days a week. Over 450 open heart surgeries are performed in the Mater each year, including CABG, valve surgeries, combined CABG and valve procedures and thoracic aortic procedures. The hospital has an expanding VAD programme and I have had the opportunity to be involved in the anaesthetic management and performing TOE for implantation of paracorporeal and durable VADs. The Mater is the only hospital in the country to perform extracorporeal life support and a number of ECMO cannulations and decannulations are performed in theatre.

On two days a week one theatre is dedicated to thoracic surgery. The thoracic procedures performed include open and VATs biopsies, resections, lobectomies and pneumonectomies, mediastinoscopies, endobronchial and endotracheal work and open tracheal procedures. Providing anaesthesia for thoracic surgery has enabled me to perform and refine a number of skills including the use of double lumen tubes, one lung ventilation, bronchoscopy, jet ventilation, serratus anterior and erector spinae plane blocks and thoracic epidurals.

The hospital is also the national centre for heart and lung transplantation, with around 15 to 20 heart transplants and 30 to 40 lung transplants performed each year, some with ECMO support. Ireland has a large population of Cystic Fibrosis patients and providing anaesthesia for lung transplant in this group is challenging and complex and being involved in such procedures has provided me with the opportunity to enhance the skills and knowledge I have in delivering anaesthesia for high risk patients. Many transplants occur out of hours and as the Fellow, I participate in a transplant on call from home rota on a week on week off basis along with the cardiothoracic anaesthesia special interest (SIY) trainee. The working hours can be long and with transplants happening at unpredictable times, it can be tiring but being involved in transplant anaesthesia offers a unique experience and the ability to develop skills that can be used throughout the rest of your career. There is a weekly transplant MDT and being able to attend this provides an insight into how decisions are made regarding referral and listing of patients for heart and lung transplantation, and the input provided by the individuals involved including cardiothoracic surgeons, heart failure and respiratory physicians, anaesthesia, physiotherapy, pharmacists and social work. I find this meeting an excellent learning opportunity for anyone considering this fellow position in the future.

The Adult Congenital Heart Service is incorporated into the Mater hospital. The number of adults surviving with congenital heart disease has increased exponentially in recent times. A significant proportion of these will go on to develop heart failure which is complex and difficult to treat. As part of my Fellow role, I encounter this patient group in a number of settings. They present to the cardiac theatres for corrective and redo surgeries. Some with advanced heart failure will go on to require mechanical circulatory support and heart transplantation. I also encounter them in the cath lab, often for percutaneous pulmonary valve procedures with the Mater being the first adult centre to offer such a programme. There is also the chance to deliver anaesthesia for adults with congenital heart disease outside of the cardiac theatres, including women transferred to the hospital for caesarean section and patients undergoing a range of other procedures from general surgery, orthopaedics, urology, etc.

In addition to working in the cardiothoracic theatres, there are times when I am scheduled to work in the cath lab. In addition to the percutaneous pulmonary valve procedures mentioned above, I have been involved in delivering anaesthesia for TAVI's, ASD and LAA closure devices, EPS and ablation work. There have been a number of VT ablations with ECMO support carried out in the Mater, the first performed in the country.

Transoesophageal Echocardiography

All Fellows who have completed the Mater cardiothoracic anaesthesia fellowship have gained accreditation in TOE. The majority have gone through the European accreditation process, organised by the European Association for Cardiovascular Imaging (EACVI). Accreditation consists of a theoretical part, delivered in the form of MCQs twice a year in June and December at the EACTA Echo course and EuroEcho congress. The practical portion consists of a logbook of 125 cases and 6 perioperative lab cases with detailed reports, imaging and media. With the number of procedures performed each year in the Mater, there is ample opportunity for the fellow and SIY trainee to collect enough cases for their logbook. The department has recently purchased a new TOE machine in addition to the 2 existing machines and there are a number of consultants experienced in perioperative TOE to provide teaching in the clinical setting. There is TOE teaching every Monday and as the Fellow, I have given 2 to 3 of these lectures during each 6 month rotation. When time allows, myself and the SIY present interesting cases during the working day on a weekly basis as a learning opportunity for anyone interested in TOE in the department. The Mater also run a 2 day basic TOE course on which I taught at the end of last year. There is a TOE manikin available in the department which can be used for self-directed learning and courses.

Audit and Research

The job is primarily a clinical fellowship with a busy workload, however opportunities for research are plentiful. Getting involved in research activities is encouraged and well connected and supported by the department. The majority of fellows will get involved in departmental audit. The existence of the electronic anaesthesia record provides a wealth of data and makes the collection process much easier and less time consuming. There is also the chance to get involved in original clinical research with assistance from the department and UCD. There is also the possibility to write review articles and book chapters on topics of interest within cardiothoracic anaesthesia.

I am 9 months into the fellowship and have been able to learn and refine a number of new skills. I have been exposed to a complex case mix and feel competent to safely deliver anaesthesia for a high risk group of patients and I have the fortune of working with an experienced and supportive group of colleagues. For those contemplating this job, the role is advertised on the Mater website in March or September each year with 5 to 6 candidates shortlisted for interview, the majority of whom will have been in contact with the department prior to application. I would recommend this post to anyone considering applying.

Elections to the Committee of Anaesthesiology Trainees, 2020

CAT is the representative body for all Specialist Anaesthesiology Trainees in Ireland, and is a standing committee of the College of Anaesthesiologists of Ireland (CAI). We advocate for the interests of trainees and the speciality within the College, and we also represent your views to a number of external bodies including the Association of Anaesthetists, the National Clinical Programme for Anaesthesia, and the Trainee Subcommittee of the Forum of Irish Postgraduate Medical Training Bodies. The committee meets four to five times during the year at the College in Dublin, and arranges seminars for trainees on areas of special interest. It disseminates information relevant to trainees through the Lead Anaesthesiology Trainee network and the CAT News bulletin, and provides trainee input to the College's Council on relevant matters. Being part of CAT is an excellent way to gain medical management and leadership experience at a national level.

Roles on CAT include:

- Chair
- Vice-Chair
- Secretary
- Treasurer
- CAT Representatives to the College's Training, IT and Communications, Academic, Professional Development, Quality and Safety, Examinations, Education, Intensive Care, and Pain Committees; and a nominee to the Association of Anaesthetists Trainee Committee and Irish Standing Committee.

There are also co-opted trainee members from other bodies, such as the Association of Anaesthetists Trainee Committee and the Irish Medical Organisation, and committee meetings are additionally attended by the chair of the training, examinations and education committees, the director and deputy director of training, and other College staff.

This year there will be four vacant seats on CAT to be filled. Nominations are welcome from all trainees from SAT1 to SAT6 and representation from all year groups would be ideal, so please do not feel that you are either too junior or too senior to get involved!

Elections

- An eligible trainee who wishes to be nominated for membership to CAT must give his/her consent, and the trainee must be nominated and seconded by two other trainees on CAI training programmes, either in writing or by email.
- If the number of trainees nominated and seconded for membership of CAT exceeds the number of positions on that Committee, ballot lists shall be prepared with the names of nominees in alphabetical order. Trainees can be re-elected.
- When an election is necessary, there shall be a postal or electronic ballot held during May of all trainees on CAI training programmes. Voting must be for the same number of nominees as there are vacancies to be filled.
- Two seats on CAT will be reserved for CAI trainees who will be in the SAT1 or SAT2 years of training from July of that calendar year. If there are insufficient nominations from SAT1 or SAT2 trainees to fill these seats, they may be filled for that year by other duly nominated CAI trainees as previously outlined. Once these seats have been filled, the votes for any other duly nominated SAT1 or SAT2 trainees will be counted together with the votes for the remaining vacancies.
- The new CAT shall take office at the Annual General Meeting at the subsequent Irish Congress of Anaesthesiology.
- In the event of a postal ballot, the Chair of the National Training Committee shall appoint two scrutineers to count the votes. They shall notify the Chair of the National Training Committee of the number of votes cast for each nominee.

- Where there is a tied vote for two or more nominees of whom only one can be elected, the Chair of the National Training Committee shall exercise a casting vote.
- The names of the trainees so elected shall be forwarded to the President before the next meeting of the Council of the College.
- Elected members of CAT shall be appointed for a term of two years, but shall be eligible for re-appointment.
- Except with the approval of the Council of the College, no trainee shall serve on CAT for longer than 5 years, except as ex officio or co-opted members.
- CAT may co-opt trainees for a special purpose, examples including the committee's immediate past Chair, or the Irish representative on the Association of Anaesthetists Trainee Committee. Such co-opted members may attend committee meetings at the discretion of the Chair but shall have no voting rights.
- A trainee who ceases approved training in anaesthesiology and/or completes training shall retire from the CAT following the next meeting.
- Any vacancy occurring during the term of CAT may be filled at its discretion for the remainder of the time before elections.

Developments over the past 12 months

CAT has been closely involved in development of the new CAI curriculum, in particular for the inclusion of items on physician wellbeing and sustainability, and recognising the role of trainers and tutors. The committee successfully advocated for ICU on-call duties outside of formal intensive care modules to be recognised for the purposes of FJFICMI examination eligibility. CAT also represented trainees' interests in the proposed new structure of "special interest year fellowships" as part of the SAT programme. With the spread of the COVID-19 pandemic in recent weeks, CAT has constantly been in contact with the CAI council and training committee to improve our preparedness and support trainees throughout this time.

Other projects in progress by CAT include:

- Lead Anaesthesiology Trainee network
- Access to training in Pre-Hospital Care
- CAT News
- SATARN

Why stand for election to CAT?

It is an exciting and productive committee to be involved with. We have an expanding portfolio of projects, and we are developing good relationships with multiple organisations at home and abroad.

Committee members have the opportunity to develop leadership and management skills, join a network of prominent anaesthesiology trainees and consultants, and work in roles such as trainee advocate, editor, event organiser, or communications manager. Opportunities exist to present and chair at national meetings, engage in large audit projects, and most importantly, improve the future for SATs in Ireland.

If you want to get involved in the projects mentioned above or have other ideas on how CAT can best represent anaesthesiology trainees fill out the nomination form, stand for election and have your say!

The deadline for making nominations is **5pm on Monday 4 May 2020**. Access the nomination form here: https://secure.cesvotes.com/V3-0-0/Resources/Attachments/m1272_1/nomination_form.pdf

Wellbeing Resources

Included below are a number of wellbeing resources which you may find helpful as the pandemic continues. These are a combination of official and non-official resources which we thought might be helpful. New resources are popping up online all the time and we encourage you to share ones you think might be helpful with your colleagues.

The **HSE** has a specific Workplace Health and Wellbeing Unit with a number of resources, available at <https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/home>

Each of the Irish training bodies has resources available on their websites, accessible at:

- **CAI:** <https://www.anaesthesia.ie/covid-19/>
- **RCPI:** <https://www.rcpi.ie/news/releases/health-and-wellbeing-for-trainers-and-trainees-during-challenging-times/>
- **RCSI:** <https://www.rcsi.com/surgery/training/trainee-resources>
- **College of Psychiatrists of Ireland:** <https://www.irishpsychiatry.ie/covid-19-information-and-updates-from-cpsychi/covid-19-self-care-for-health-professionals>

The **Practitioner Health Matters Programme (PHMP)** in Ireland offers a strictly confidential service to doctors, including confidential phone line and email to an expert clinical advice service. To make an enquiry or seek support please email confidential@practitionerhealth.ie or call (01) 297-0356.

The **UK's Intensive Care Society** has shared an excellent poster series designed to improve our understanding of well-being at work and what we can do to improve it, especially in extraordinary situations such as during the COVID-19 pandemic. We have included some of these posters below this piece, and the rest of the resource can be viewed at:

<https://www.ics.ac.uk/ICS/Education/Wellbeing/ICS/Wellbeing.aspx>

Mind the Frontline - Available at mindthefrontline.com, we would recommend you check out this fantastic resource developed by three Dublin-based psychiatrists, Dr. Iolanda Tiedt, Dr. Lisa Connellan and Dr. Yvonne Hartnett. Includes workouts for the mind and body as well as exercises and techniques in crisis management, self-care and anxiety management.

SELF-CARE DURING COVID-19

Most importantly this is unprecedented: It is okay to not be okay

- Seek information updates at specific times during the day once or twice. The sudden and near-constant stream of news reports can cause anyone to feel worried. Get the facts. www.gov.uk
- Feeling stressed is an experience that you and many of your colleagues are likely going through. It is normal to be feeling this way in the current situation. Stress and the feelings associated with it are by no means a reflection that you cannot do your job or that you are weak.
- Managing your stress/psychosocial wellbeing during this time is as important as managing your physical health.
- Take care of your basic needs and ensure rest and respite during work or between shifts, eat sufficient and healthy food, engage in physical activity, and stay in contact with family and friends.
- This is an unprecedented scenario, don't try to learn new strategies, use the ones that you have used in the past to manage times of stress.
- This is likely to be a marathon - pace yourself
- Consider your psychological energy levels - you will need to "fill up" after "emptying the tank"
- Be aware of your "bandwidth"- it might take longer to think things through and make sense of things if you are feeling overwhelmed
- Beware dramatic language that might panic your colleagues.
- Avoid using unhelpful coping strategies such as tobacco, alcohol or other drugs.
- Some workers may unfortunately experience avoidance by their family or community due to stigma or fear. If possible, staying connected with your loved ones including through digital methods is one way to maintain contact. Turn to your colleagues or team leader for social support - your colleagues may be having similar experiences to you.

STOP, BREATHE, then THINK- slowing your breathing slows the stress cycle and re-engages your frontal lobes - then you can think.

ADVICE FOR SUSTAINING **STAFF WELLBEING** IN CRITICAL CARE DURING AND BEYOND **COVID-19**

The anticipated needs of staff will vary across each of the phases, consider the following support mechanisms:

Phases	Issues and likely impact	Needs and recommended approach
Pre-phase: No cases on unit	Anticipatory anxiety about what's on its way. Inability to think clearly, feeling overwhelmed, planning. Communication errors. Tension in working relationships. "Readiness" burnout.	Increase a sense of control - the team are in a safe pair of hands. Reassurance and planning. Communication updates are key (you may be thinking ahead, they are thinking now). Escalation plan. Support to managers who are making plans and holding the stresses.
Initial phase: Case 1	Starting to get going, lots of trying out, lost time, repetition and frustration. Further anticipatory anxiety	War room - planning central to allow centralised communication. Management are visible and available. Regular communication bulletins and open forums.
Core Phase: Full scale -Multiple cases	Biggest risk period. Fear infection and implications for families. Overwhelming workload. Full go mode- adrenalin and automatic pilot. Exhaustion. Moral distress as healthcare rationed. Distress linked to personal or family experience of COVID-19. Experience fear or stigma when out in public.	Have runners in PPE areas. Promote peer support. It's okay to say you are not okay - Senior staff to model this. Rotate workers from high-stress to lower-stress functions. Small pre-brief and debrief the day. Partner inexperienced workers with their more experienced colleagues. Psychological first aid - drop in sessions for staff with employee wellbeing if you have it. Ensure the basics: Breaks, Facilities (food trolley in staff room), Sleep, Days off. Manage visitors
End Phase: Immediate aftermath	Exhaustion and post trauma recovery / stress	Debriefing. Staff 1-1 and group sessions. Learning and preparation for the future. Organise thanks and reward. Look out for signs of PTSD in staff: <ul style="list-style-type: none"> • on edge and hyper arousal, poor sleep • flashbacks or re-experiencing • avoidance of reminders.
Long term	Some ongoing PTSD Reflection and learning	

HOW TO APPROACH SELF-CARE

Your health and wellbeing matter. In the context of working in a busy critical care unit the following may be helpful.



Self-awareness is important

There will always be that one case that has a greater impact, often because there is something that you connect to. Be aware of the things that may bother you, and your own warning signs of stress.

General self-care

Take time for the things that bring you rest and joy.



Self-compassion and embrace uncertainty

Beware your own critical eye. Working in healthcare is hard and there are times when you will feel there is nothing you can do, or you cannot control the situation. Be kind to yourself and your colleagues.



There are times when our psychological wellbeing is so challenged that self-care is not enough. If you are finding things difficult, consider talking to your line manager or someone you trust about the impact of your work.

You may want a referral to your local employee wellbeing service.



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Wellbeing Apps

Insighttimer



Winner of App of the Year from both TIME and Womens' Health magazine, Insighttimer is probably the most popular meditation app in the world at the moment, with the added advantage that the vast majority of the content is free. It has thousands of guided meditations and talks from the world's top meditation and mindfulness experts, neuroscientists and psychologists. There are over 80 free guided meditations added every day so there is an endless supply of new content.

Users can also browse a range of popular wellbeing topics - including dealing with anxiety, reducing stress, achieving deep sleep, improving leadership and maintaining self-compassion - all areas which may prove very useful for us over the coming weeks.

Headspace

Headspace is an extremely popular app worldwide and makes meditation and mindfulness simple. The premise involves taking ten minutes a day to clear your mind. Reported benefits include reduced anxiety levels and a greater sense of calm, along with increased alertness and attention span. It is very user friendly and is a fantastic idea for those of us new to the idea of meditation and mindfulness.



Headspace have also launched a free additional programme called '**Weathering the Storm**' since the pandemic began, designed to help users combat the unique additional stresses of this period.

Calm



Calm is an award-winning app for all things meditation, relaxation and sleep. It has a series of guided meditation sessions ranging from 3 to 25 minutes in length so you can choose the sessions to fit your schedule. A further feature called Sleep Stories contains short stories designed to lull the listener into a deep and restful sleep (these are told by the likes of Matthew McConaughey and Stephen Fry). Even the layout and design of the app is calming on the eye. Some of the content is locked unless you subscribe, but there is a good amount available for free also.

Sleep Cycle

Sleep, the very thing we need to restore and replenish ourselves in difficult periods, can unfortunately be one of the first things disrupted when times get tough. Changing roles, irregular shifts and increased stress levels will likely upset our already somewhat irregular sleeping patterns over the coming weeks. Sleep Cycle, one of the many sleep tracking apps available at the moment, uses movement and sound analysis to track your sleep throughout the night and aims to improve both the duration and quality of our much needed sleep.



Streaks



Streaks is a very simple and useful concept. It allows you to track up to twelve things you want to do each day and the goal is to build a streak of consecutive days. Whether it is going for a run, reading a chapter of a book, eating breakfast before work or having some time away from the phone screen each evening, Streaks helps you keep track.

Waterlogged

All of us who have been in the PPE in ICU or for a case in theatre knows how hot and uncomfortable it can get. It is difficult to adequately hydrate between cases or on breaks, so a reminder to do might be handy. With Waterlogged, you can enter a daily fluid intake goal before charting your progress towards it by entering all the fluids you are drinking. You can customise the app initially to include the different types of fluids you usually drink and the different sizes of cups/bottles you use, so updating it during the day takes seconds thereafter.



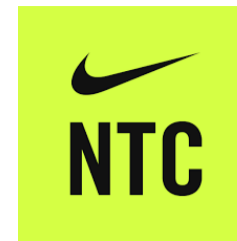
Yoga for Beginners



Easy to use, voice guided yoga workouts for beginners with clear illustrations on how to perform each pose. 100% free, with sixteen 10-15 minute sessions, it is definitely worth a look.

NTC

Nike Training Club comes with 356 workouts, the majority of which are free. They cover all areas of fitness – from yoga to cardio to strength & endurance – and range from 15 to 45 minutes in duration. The workouts cater for all goals and levels of experience and most can be done at home with no equipment. More free content than the majority of similar apps make it worth a look for those looking to start some exercise at home during the restrictions.



C25K



One of the few activities essentially unaffected by the social distancing restrictions is getting out for a run. Never-before runners can ease into running and train for a 5K with C25K's graduated programme. It consists of a simple plan of three 30-minute cardio workouts three times per week for eight weeks and will have you actually enjoying a 5km run by the summer!

Strava

Most of you have probably heard of Strava and many of you may use it already. For those who don't, it is an exercise app which tracks your GPS while running, cycling or swimming to compile lots of interesting data on your workout. It can be used on your phone or linked to an Apple Watch or Garmin. There is no better time than at the moment to get out to clear the head with some exercise and Strava really is a brilliant aid, their 'segment finder' will even allow you to find popular routes within the 2km radius from your home. Follow your friends and like their workouts for added encouragement and a little friendly competition.



SworKit



A phenomenon in the US, where the American College of Sports Medicine ranks it as the #1 fitness app out there, SworKit provides an at-home/on-the-go workout system. The majority of SworKit's adult features require a paid subscription, but there is a further feature which people might find useful - 'workouts' designed for children which are all free on the app. In this category, you'll find kid-friendly routines for building agility, flexibility, strength and exercise base, as well as warm up and cool down videos – perfect for occupying the kids for a bit with something fun and healthy!

**A final thank you again for the work you are putting in at the moment.
Happy Easter to everyone, stay safe, talk to you all soon!**

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