



IRELAND

Transforming primary health care during the pandemic

PROMOTING THE HEALTH AND WELL-BEING OF THE HEALTH AND CARE WORKFORCE

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MOTIVATION

The COVID-19 pandemic has immensely affected the mental health and well-being of populations across the globe. Specific groups (children, women and health-care workers) have experienced greater COVID-19-associated mental health effects. Healthcare workers, especially the professionals on the frontline and nurses, regardless of their age, showed many mental disorders, such as anxiety, depression and insomnia (1). Moreover, health-care workers reported having worse mental health disorders than before the pandemic started (2). Several reviews suggested that the COVID-19 pandemic caused an increased risk of depression, anxiety, stress and poor mental well-being (3–6).

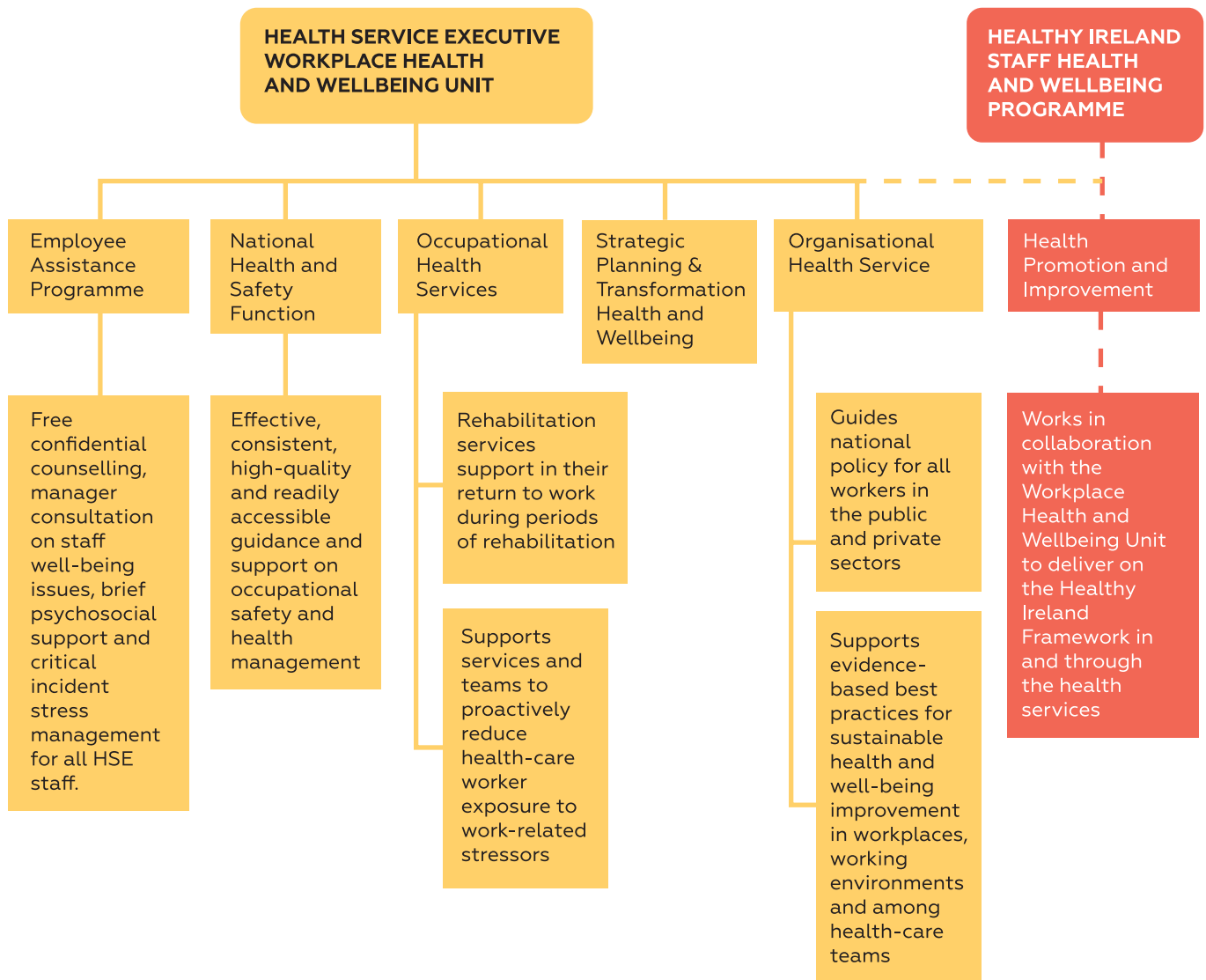
Communication and help from health-care system organizations, as well as social support and personal sense of control, may act as protective factors for health workers' mental health (7). Moreover, the provision of mental health support will contribute to building a robust health-care system more capable of dealing with future anticipated challenges, such as attrition, deconditioning or poor health stamina (7). Embedding mental health support in a safe and efficient working environment could help to mitigate the negative mental health effects of COVID-19 on health-care workers and maximize their resilience (8,9). In other words, safeguarding the mental health of health-care workers before, during and after infectious disease outbreaks is an essential element of the public health response and should not be treated as a separate mental health intervention.



REACHING THOSE MOST IN NEED THROUGH PHM IN IRELAND

In Ireland, the Workplace Health and Wellbeing Unit is a division of National Human Resources, which predates the COVID-19 pandemic. Its core responsibility is implementing employee safety, health and well-being governance, policies, standards and interventions for 94 575 HSE staff (82 828 full-time equivalents). Alongside this, the Workplace Health and Wellbeing Unit also takes a lead role on behalf of the HSE in supporting the safety, health and well-being of HSE workers. The HSE Workplace Health and Wellbeing Unit has several functions and programmes, working collaboratively (Fig. 1).

Fig. 1. Structure and functions of the HSE Workplace Health and Wellbeing Unit



HARNESSING PRE-EXISTING HSE WORKPLACE HEALTH AND WELLBEING UNIT PROGRAMMES FOR THE RESPONSE TO COVID-19

The mental health and well-being of health-care workers have been severely affected by COVID-19. An analysis of absence rates conducted by the HSE Workplace Health and Wellbeing Unit shows how the absence rate in 2020 (6.1%) was 1.4 percentage points higher than in 2019 (4.7%). Moreover, in 2021, COVID-19-related absence accounts for 2.8% of the total 2021 absence.

Since the pandemic began, the HSE Workplace Health and Wellbeing Unit has mobilized and adapted pre-existing structures and divisions to safeguard the mental health and well-being of the HSE health-care workers during the COVID-19 pandemic. These existing infrastructures have been essential for the response of the HSE to COVID-19.

1. EMPLOYEE ASSISTANCE PROGRAMME

The HSE Employee Assistance Programme is a free-of-charge, individualized, confidential and independent counselling service for all HSE workers. HSE workers can self-refer to the Programme at any time without permission or approval. It supports employees with psychosocial issues (psychological and social factors that influence mental health). These issues may be personal or work-related, affecting job performance or home life.

All services provided by the Employee Assistance Programme are needs-based, and the suite of services provided includes:

- Counselling;
- consultation with managers on staff well-being and psychosocial issues;
- critical incident stress management response — individual and other group supports for all HSE staff;
- psychoeducational workshops on staff well-being issues; and
- brief psychosocial support.

2. NATIONAL HEALTH AND SECURITY FUNCTION AND THE HSE WORK POSITIVE FRAMEWORK

The National Health and Safety Function provides effective, consistent, high-quality and readily accessible resources that motivate, enable and empower managers and staff to discharge their legal and moral duties with regard to occupational safety and health management.

In May 2017, the National Health and Security Function was tasked with developing and delivering an HSE-specific psychosocial risk management framework for managers to proactively identify measure, assess and manage potential job stressors to provide a safer and healthier workplace for workers. The approach was based on Work Positive critical incident (Work PositiveCI), a psychosocial risk management framework that helps organizations to identify ways to improve employee well-being. The HSE Work Positive Framework was created and validated by a national multidisciplinary Work PositiveCI working group. The Work PositiveCI group tailored the applications (website and online survey), reporting capabilities and information provision and added sections into the applications to measure the safety culture and health habits of health-care workers. As a result of the validation and review process conducted by the Work PositiveCI group, the HSE Work Positive Framework helps to cover all aspects of employee safety, health and well-being.

In September 2018, a pilot site was identified, with roll-out planned to start in February 2019. From the outset of the pilot, engaging managers and staff at all levels without causing information overload was a key priority. Implementing the pilot raised awareness of workplace stress and informed health-care workers about the support available to them. Moreover, it assisted managers with legislative compliance and provided them with guidance to manage workplace stress.

3. ORGANISATIONAL HEALTH SERVICE AND WHO HEALTHY WORKPLACE FRAMEWORK

The Organisational Health Service focuses on supporting and enabling the organization and services to implement and work towards evidence-based best practice to support sustainable health and well-being improvement in workplaces and working environments and among health-care teams. Its ultimate goal is to enhance the experience of patients, service users and clients. It provides direct support to managers and their teams in preventing and managing complex psychosocial risks in the workplace and working environment. The support available is both proactive and reactive and is based on the needs of the service and teams and groups that work in the HSE. One example of the types of needs-based support provided by the Organisational Health Service is applying evidence-based methods and best practices to support managers and teams in mitigating work and organizational risks that potentially contribute to worker ill-health in the psychosocial working environment.

Moreover, the Organisational Health Service also provides a strategic and advisory role in developing staff health and well-being policy within HSE. One of the Service's main focuses for 2020–2021 is to support the Workplace Health and Wellbeing Unit in adopting and implementing the WHO healthy workplace framework, which will provide health-care workplaces with direction, support and resources on how to create a healthy workplace that focuses on safety, health and well-being. Moreover, this framework goes beyond the health-care setting. The HSE Healthy Workplace Framework will support an important component of the government-led Healthy Ireland agenda, which "aims to create an Irish society where everyone can enjoy physical and mental health and well-being to their full potential, and where well-being is valued and supported at every level of society". Workplaces directly influence the physical, mental, economic and social well-being of workers and in turn, the health of their families, communities and society. With more than 2 million people employed in Ireland, the workplace offers an ideal setting and infrastructure to support the promotion of health to a large audience.

4. OCCUPATIONAL HEALTH SERVICES

Occupational health services provide support to services and teams to proactively reduce health-care worker exposure to work-related stressors, which is critical to employee safety, health and well-being; and building working environments in which health-care workers feel mentally safe too. Work and organizational psychology interventions will continue in support of and in response to complex psychosocial workplace risks, including:

- work-related stress risk assessment; work demands, change, role, control, support and relationships (Management Standards and HSE work-related stress policy framework);
- working in a challenging working environment – established workshop for teams;
- interpersonal conflict;
- low morale;
- support on returning to work for teams; and
- team burnout and self-care.

Moreover, occupational health services provide rehabilitation services support for employees in returning to work. Rehabilitation policy and processes have been in place since 2011 and include: a referral process for employees on long-term absence and occupational health services with links to speciality services, such as physiotherapy, occupational therapy or psychological support through the HSE Employee Assistance Programme.

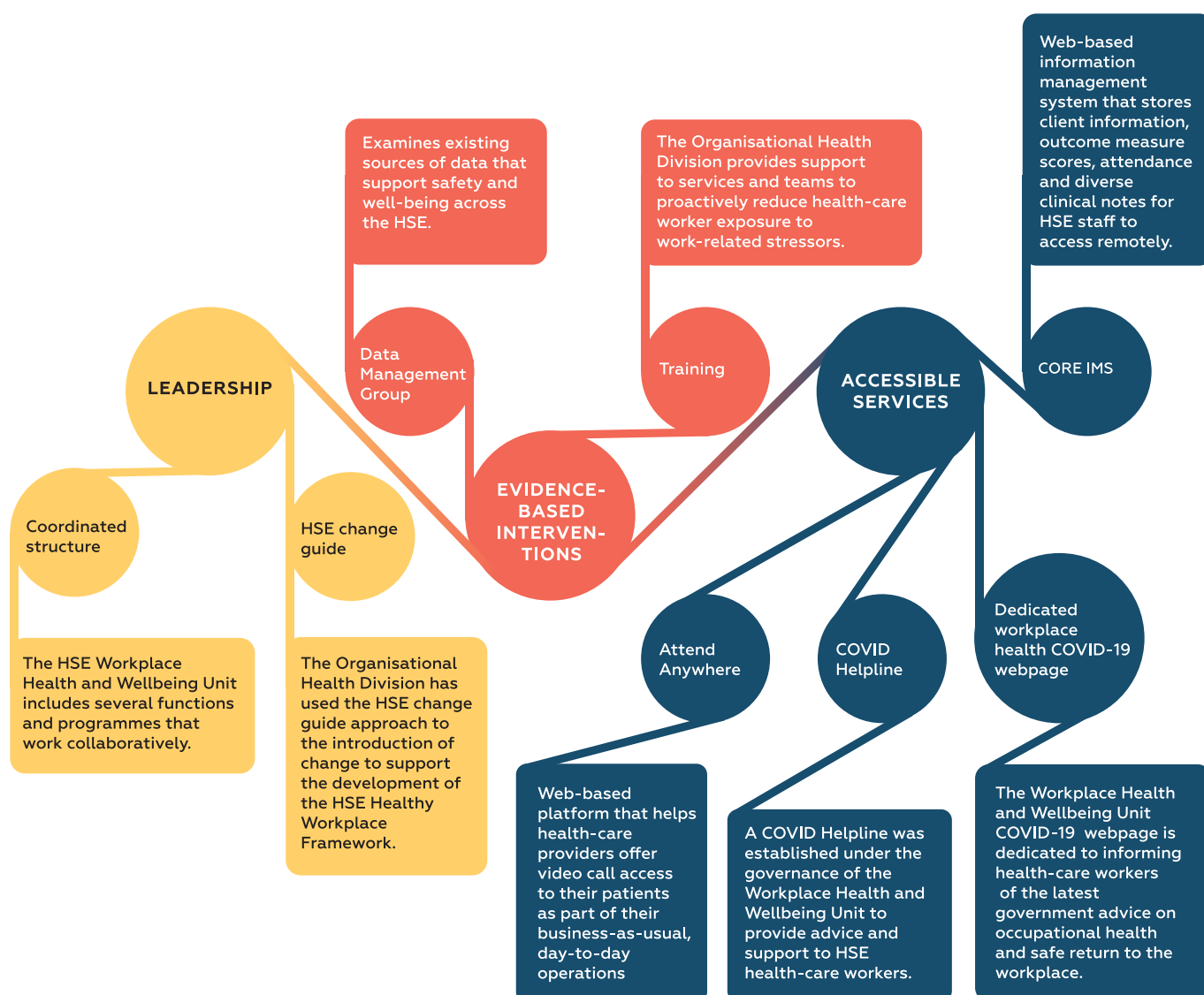
"IMPLEMENTING THE PILOT RAISED AWARENESS OF WORKPLACE STRESS AND INFORMED HEALTH-CARE WORKERS ABOUT THE SUPPORT AVAILABLE TO THEM."

EARLY ACHIEVEMENTS

The COVID-19 pandemic presented significant challenges for the delivery of health services, both in the continuity of standard care and in providing services specifically tailored to address the pandemic. The HSE Workplace Health and Wellbeing Unit has mobilized available tools and infrastructure and adapted them to offer an appropriate response to the pandemic (Fig. 2).

At the onset of the pandemic, the focus of the unit was adapted to manage health-care workers and provide COVID-19-specific medical advice and guidance. In addition, the HSE Workplace Health and Wellbeing Unit updated existing guidance (such as contact tracing and testing and guidance on returning to work) and issued new recommendations aligned with the public health advice of the Government of Ireland.

Fig. 2. Coordinated structure of the HSE Workplace Health and Wellbeing Unit



Robust leadership: coordinated structure and HSE change guide

- **Coordinated structure.** Thanks to its coordinated and collaborative structure, the HSE Workplace Health and Wellbeing Unit has been able to improve the accessibility of mental health support services for health-care workers, ensure that the system is adapted to the new circumstances and provide evidence-based guidance for shaping mental health and well-being strategies during COVID-19.
- **HSE health services change guide.** The Organisational Health Service has used the HSE change guide (10) approach to introducing change to support the development of the HSE Healthy Workplace Framework. The design and develop phases are now complete, and there is now a requirement to define the way forward to deliver on the proposed change. Moreover, following a scoping exercise, the Healthy Workplace Framework will include a specific focus on COVID-19 within the deliver phase to support a recovery programme in a post-pandemic environment.

Evidence-based guidance and interventions: training and establishing the Data Management Group

- **Training.** The Organisational Health Service has provided support to services and teams to proactively reduce health-care worker exposure to work-related stressors, which is critical to employee safety, health and well-being; and building working environments in which health-care workers feel mentally safe too. Online webinars on such topics as working in challenging working environments and managing stress at work during COVID-19 have been delivered to health-care teams and services.

The Organisational Health Service also provides support on returning to work, focusing on the psychosocial needs of the organization by developing guidance and best practice material for managers and workplaces. Moreover, the HSE National Health and Safety Function has developed various online training modules on HSeLanD (the online learning and education platform), including COVID-19-related webinars, such as COVID-19 — Induction/Return to Work Webinar and COVID-19 — Lead Worker Representative Webinar. Other training modules available include Risk Assessment Training Workshop and HSE's statutory occupational safety and health training modules.

- **Data Management Group.** A group has been established to examine existing sources of data that support safety and well-being across the HSE to develop sound information practices; identify potential for improving the quality of that data; provide organizational intelligence to inform workplace health and well-being decisions; and to establish structured uses of the data in driving work plans. The Data Management Group will contribute to developing key performance indicators and metrics under the HSE Healthy Workplace Framework.

ACCESSIBLE MENTAL HEALTH AND WELL-BEING SUPPORT: CORE IMS, ATTEND ANYWHERE, COVID-19 WEBSITES AND COVID HELPLINE

- **CORE IMS.** Over the last 9 months, the HSE Employee Assistance Programme implemented CORE IMS, a client and information management system. This is a secure web-based platform used in the day-to-day activity of the Employee Assistance Programme workers. The platform stores client information, outcome measure scores, attendance and diverse clinical notes, which can be accessed remotely (such as by health-care workers working from home because of COVID-19 restrictions). Thus, CORE IMS has facilitated clinically robust delivery of specialist workplace mental health services remotely during the COVID-19 pandemic.
- **Attend Anywhere.** To further support the delivery of services during COVID-19 and the communication and collaboration across the Health Service, Attend Anywhere was introduced as part of the HSE virtual health effort. It is a web-based platform that helps health-care providers to offer video call access to their service users as part of their business-as-usual day-to-day operations.
- **COVID Helpline.** During the COVID-19 pandemic, the National Health and Safety Function established a national helpline under the governance of the Workplace Health and Wellbeing Unit to provide advice and support to health-care workers from the HSE, agencies funded under Sections 38 and 39 of the Health Act and private health-care services. Helpline agents have direct access to professional advice and support from all the divisions of the Workplace Health and Wellbeing Unit, including the Employee Assistance Programme and the National Health and Safety Function.
- **Dedicated workplace health and well-being COVID-19 webpage.** The COVID-19 webpage of the Workplace Health and Wellbeing Unit is dedicated to informing health-care workers of the latest government advice on occupational health and safe return to the workplace. The webpage aims to inform workers of the possible risks of returning to work and to provide guidance on how to safely return to their workplaces.

“WORKPLACES DIRECTLY INFLUENCE THE PHYSICAL, MENTAL, ECONOMIC AND SOCIAL WELL-BEING OF WORKERS AND IN TURN, THE HEALTH OF THEIR FAMILIES, COMMUNITIES AND SOCIETY.”

SUSTAINABILITY AND FUTURE STEPS

- Since the beginning of the pandemic, the Workplace Health and Wellbeing Unit has worked on strengthening and improving its infrastructure for providing mental health and well-being services to HSE workers. This has been achieved by adapting existing services and interventions to the current context based on robust evidence and has been underpinned by integrated workforce planning. For this reason, ensuring the sustainability of the adapted services and tools is a priority for the HSE Workplace Health and Wellbeing Unit.
- A steering group will be established to work on developing an implementation and action plan to successfully conclude the delivery of the adapted HSE Healthy Workplace Framework. The Framework model will enable workplaces and services, by providing evidence-based approaches, to support their health-care workers in the acute and recovery phases of the COVID-19 pandemic.
- All working groups and activities implemented during the pandemic will be adapted to the current needs. An example of this is the COVID Helpline. This line operated 24/7 when it was first implemented. However, based on demand, it is now operating Monday to Friday from 8:00 to 20:00 and Saturday and Sunday from 9:00 to 17:00.
- All workstreams, interventions and projects presented above will be combined and integrated under the HSE Healthy Workplace Framework. This includes the physical working environment; psychosocial working environment; personal health; and community involvement. For example, work has now resumed to further advance the implementation of the HSE Work PositiveCI framework as part of the HSE Healthy Workplace Framework. These activities will cumulatively inform and contribute to developing the HSE recovery programme for working in a post-pandemic environment.
- The Workplace Health and Wellbeing Unit is planning for a future of mixed delivery of online and face-to-face services to improve the accessibility of the provided services.

LESSONS LEARNED FOR OTHER COUNTRIES

1. Accessible mental health support for health-care workers will help them cope with mental health conditions. Early and easy access to mental health services can help to improve mental health literacy and reduce stigma when delivered to people with or at risk of mental health conditions, such as health-care workers during a pandemic.

2. Data-driven tools and online technologies provide an alternative to the conventional provision of mental health care. Delivery needs to be integrated into existing structures and facilitated by national approaches, including appropriate investment, clinical supervision and evaluation and training. It must also consider people without access to digital technology to prevent the widening of inequalities.

3. Public mental health training is required because of how mental health conditions and well-being affect the workplace. COVID-19 has highlighted the importance of developing appropriate training for health-care workers and of making it available online. Training resources and other similar guidance can help health-care workers to self-manage mental health and well-being issues that may arise in their daily work.

4. Evidence-based public mental health practice can improve the implementation and effectiveness of public mental health interventions, which will support the achievement of wide-ranging policy objectives. Tools for assessing public mental health needs can be used to estimate the size, impact and cost of unmet public mental health needs at the national and regional levels. Data collection and using evidence-based policy need to be strongly emphasized to inform strategies, guidance and plans.

5. Sustainable mental health interventions support not only help to mitigate the mental health impacts of COVID-19. Sustainable mental health and well-being systems and services will also help address the longstanding public mental health implementation gap and support the achievement of wide-ranging policy objectives.

6. Developing solid but flexible infrastructures will enable health-care systems to respond to future challenges, such as the COVID-19 pandemic, fast and effectively. Health and well-being systems well-nested within bigger government health-care systems and programmes are capable of effectively dealing with unexpected problems and challenges.



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