

# COPING WITH A STRESSFUL INCIDENT AT WORK

## Introduction

State Hospital staff often have to deal with difficult and potentially violent situations at work. This is often seen as part and parcel of the job and staff do not normally experience difficulties coping. However, certain situations or incidents may result in stronger and more persistent psychological reactions.

Occupational Health has produced this information sheet to help staff cope with this and recognise when they may need further help.



## What do we mean by a stressful incident?

This can be any experience that invokes unusually strong emotions, overcoming normal coping abilities.

In the State Hospital environment some examples might be physical assault, the suicide or sudden death of a patient, verbal abuse or threats, hearing about disturbing events, or witnessing a violent incident.

Reactions to such situations are unpredictable and individual; one person may experience no difficulties whilst someone else in the same situation feels strong emotions. Having dealt with similar incidents in the past is no guarantee of coping; even experienced members of staff can have difficulties, and sometimes a relatively mild incident provokes strong memories.

That is why all staff should be aware of reactions that might occur, how to deal with them and when to seek further help.

# Normal feelings and emotions that can be experienced

The impact of a stressful incident is likely to be different for each person, but there are common feelings and emotions which people experience. For example:

### Fear of

- Damage to oneself or those we love.
- "Breaking down" or "losing control".
- A similar event happening again.



#### Guilt for not

- Having done more.
- Being injured or harmed (when someone else has).

## Anger at

- What has happened.
- Whoever has caused it.
- The injustice and senselessness of it all.
- Others' lack of understanding.
- Inefficiencies in the system.
- And why me?

#### Shame for

- Not having reacted as one might have wished.
- Being seen as helpless, emotional or in need of support.

## **Sadness**

For loss of any kind.

## **Memories of**

Loss or concern for other people in your

## Physical and mental reactions

You may feel body sensations with or without the feelings described. Sometimes they can happen a considerable time after the event.

Some common physical reactions include tiredness, sleeplessness, palpitations, nausea, headaches, muscular aches and pains, breathing difficulty, loss of sexual drive and changes in eating habits.

Mental reactions may be a loss of concentration or memory, feeling "fuzzy" in your thinking, nightmares, flashbacks (a vivid recall of the event as if you were there again), feeling you are always on your guard and being easily startled.

# Effects on family and friends

Sometimes new friendships and bonds arise out of difficult situations. However there can be a strain on relationships with family and friends.

They too may be suffering additional stress, may feel left out or be confused by your reactions and not know how best to support you.

You may find yourself withdrawing from contact with family and friends, unable to express your feelings or you may wish to protect them by not telling them of your experience.

# Ways of coping

**NUMBNESS**: Initially, your mind may guard against realising the impact of the event. At first it may seem unreal, like a dream and make you wonder if it really happened. This can appear to others like you are "strong" or even "uncaring" but it is neither.

**ACTIVITY**: Being active and helping others can make you feel better. However too much activity can sometimes work against you if it diverts attention from the help you need for yourself.

**REALITY**: Confronting the reality. For example, returning to the scene or attending a funeral, can help you come to terms with the event.

THINKING: As your mind allows itself to think more about the event it can go into overdrive, making it hard not to think about it, causing you to dream about it and creating a compulsion to talk about it.

**PRIVACY**: At times you may find it necessary to be alone to help you deal with the feelings, or just be with close family or friends.

**SUPPORT**: Sharing the experience with others can help. Sometimes talking to others who have had similar experiences is worthwhile. Barriers can break down and closer relationships may develop.

**ACTIVITY** and **NUMBNESS** can be overused and may delay recovery.

## What to do and not to do

#### Do

- Express your emotions.
- Take every opportunity to talk through the experience with others.
- Allow yourself to be part of a group of people who care.
- Take time out to sleep, rest, think and be with close family and friends.
- Express your needs clearly and honestly to family, friends and work colleagues.
- Try to keep your life as normal as possible.
- Be more careful driving and around the home accidents are common at this time.

## Don't

- Bottle up feelings.
- Avoid talking about what happened.
- Let your embarrassment stop you giving others the chance to talk.
- Expect the memories to go away immediately; the feelings may stay with you for some time.
- Overuse alcohol as a way of coping.

# When to seek professional help

## If:

- The intense feelings are too much to deal with or are not diminishing with time.
- After a month you still feel numb, detached and need to keep active in order not to feel.
- You continue to have nightmares and Disturbed sleep.
- You continue to have intrusive vivid memories (flashbacks) of the event through the day.
- You have no-one to share your emotions with and you feel the need to do so.
- Your relationships at home seem to be suffering or sexual problems develop.
- You are smoking or drinking to excess, or using drugs.

Remember, you are the same person that you were before the incident. If you need it, you can get help from:

- Occupational Health at the State Hospital on x2121 and x2120.
- TimeforTalking counselling and support service for employees on 0800 970 3980 or email <u>admin@timefortalking.co.uk</u>
- We also have access to clinical psychology help via our Occupational Health Service, and also outwith the Hospital. All consultations are in strict confidence.
- Your immediate Line Manager or Staff Representative.
- Alternatively, you may wish to consult with your own GP.

## **Incident follow-ups**

Occupational Health is notified of incidents such as assaults and will follow up staff directly involved in these a few days after the event and again two weeks later. During this time a standardised questionnaire (such as the Impact of Events Scale) will be completed with staff involved in such incidents to check if they may be experiencing difficulties.

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