Focusing on Emotional Well-being & Recovery

The importance of healing in 2021
Focusing on Emotional Well-being & Recovery

A constant in our communications over the past few months has been our need for emotional recovery from the COVID-19 pandemic and the social and political tumult of the past year.

This is not an entirely new area of focus. Staff wellness and burnout prevention were among our Strategic Goals & Initiatives going back to 2019—well before COVID—and they only have greater significance as we continue into 2021.

Just this month, we all were able to participate in two large wellness initiatives. All members of UI Health were invited to participate in the Staff Well-being Survey, which closed March 3. The survey was created to help us assess the needs and areas of concern for all members of the UI Health community, and the anonymous feedback will help us develop programs designed to be responsive to the emotional needs of everyone during this highly stressful time. Thank you to all who provided their open and honest feedback. More information on the survey results and actions derived from the feedback will be shared when it is available.

On March 10, we were proud to host an Emotional Wellness Town Hall, featuring UI Health’s Dr. Anand Kumar, head of Psychiatry; Rev. Mark Lones, director of Pastoral Care Services; Geri Biamonte, employee assistance coordinator; and guest Dr. Joshua Morganstein, director at the Center for the Study of Traumatic Stress (CSTS) in the Uniformed Services University. Our panelists provided expertise and guidance on how we can recover and heal from the pressures of the past year, and their guidance will support a number of wellness initiatives planned throughout the year, including organizational initiatives like updates to our Employee Assistance Program and leader-driven efforts like new wellness-focused rounding. If you were unable to attend the Town Hall, you can view a recording of the event by visiting the intranet.

Burnout prevention, including achieving the resiliency to help cope, requires significant organizational resetting. Our transition to Epic has improved the required digital communication transactions our clinicians experience, but for all its improvements to our clinical workflows, it’s important to recognize we all have opportunities for improvement. For ways to simplify your daily work, please view the Epic Tips & Tricks in this issue. In addition, the dynamic nature of patient service needs requires constant vigilance to ensure proper staffing is available, especially at peak volume periods. And finally, there is a growing recognition that our interpersonal communications habits are perhaps the highest cause for burnout symptoms among our staff.

It is vital that everyone within the delivery enterprise recognize that how we care for our patients and how we treat each other are not mutually exclusive. Constructive and respectful communication methods are a basic infrastructure for excellent and sustainable performance.

Thank you for your engagement, participation, and cooperation as we work to improve our individual and collective experiences working at UI Health. Just as our support of each other guided us through the past year, it also will lead us to healing throughout 2021.
A Time to Reflect

One year ago — March 12, 2020 — we admitted our first COVID-19 patient at UI Health. This is not an anniversary to celebrate, but it is important that all of us reflect on everything that has happened over the past year.

None of us has been spared from the sadness associated with this disease. We have lost friends, colleagues, and family members. Many have cared for people who ultimately succumbed to the disease, and those who are slowly recovering from its devastating impacts. Many of you also experienced the loneliness and isolation our patients felt as they struggled to survive, and you also devoted time to help family members who suffered from being isolated from, helping or consoling loved ones who were in our care.

This collective experience is profound, it will linger with us — especially with those who cared for patients in our COVID units.

Everyone has been impacted by the global pandemic — it’s been life changing. Everyone has lived lonelier and more isolated existences over the past 12 months. For some, it has been particularly cruel in how it has caused detachment from human activities and connections that are so vital to our well-being.

As you take some time to reflect, I would ask that you recognize the many things you did in the face of this situation. UI Health has been a leader in many activities related to the fight for us to survive COVID-19. These activities are too numerous to list here, a fact for which we all should be proud. Many have been tireless in their efforts to help others. This help takes many forms, from direct patient care to the myriad ways we all support patient care here at UI Health.

As of this writing, one in eight Chicagoans have been fully vaccinated for COVID-19. At UI Health, we have provided over 50,000 vaccinations, accounting for approximately 23,000 people being now fully vaccinated. And now we are reaching out into the communities we serve, supporting remote sites to continue to accelerate the number of people protected with COVID vaccination.

In closing, please take the time to reflect on the last year. We will physically get through this together, but we also need to tend to the emotional hardships we have experienced, so we can more completely recover from the impacts of COVID. We need to care for ourselves. This last part requires investing our personal time, both for ourselves and for the people with whom we spend our lives. But realizing this together — and helping each other with this final struggle — is vital to finishing humankind’s battle with this disease.

COVID-19: One-year Reflection

Friday, March 12, marks the one-year anniversary of the first COVID-19 patient arriving at UI Health. While this is not a celebratory milestone, it is important that we collectively recognize the scope and impact of the past year at UI Health.

Please join us for a virtual reflection event on Friday.

COVID-19 One-year Reflection
Friday, March 12 — Noon

Click here then provide passcode: nK71ZQQx
COVID-19 Vaccine at Mile Square–Englewood

The Mile Square Health Center–Englewood location began offering the COVID-19 vaccine to residents of the Englewood and West Englewood communities on March 1. The Englewood vaccine program is a part of the City of Chicago’s Protect Chicago Plus initiative. Local organizations are assisting the Chicago Department of Public Health to increase access to the COVID-19 vaccine in some of the City’s neighborhoods that have endured the pandemic the hardest. The program currently is planned to run for 8 weeks at the Englewood site. Mile Square is looking to expand the program to other locations in the coming weeks. For more information, visit vaccine.UIHealth.care.

Staff COVID-19 Vaccine Now at Credit Union 1 Arena

UI Health staff who still have not received the vaccine can schedule an appointment to receive the vaccine at Credit Union 1 Arena. To schedule your first dose of the vaccine at the Credit Union 1 Arena, log into your MyChart account (make sure to click “confirm”) or call the COVID-19 Scheduling Line at 312.996.6565.

Behavioral Health Intensive Outpatient Program

UI Health’s Behavioral Health Intensive Outpatient Program (IOP) is an intensive outpatient psychiatric program that provides support and services necessary for people to achieve their highest level of wellness. Formerly known as Reintegration Program, the program is led by an impressive team of mental health experts and serves people in their recovery by offering a supportive environment, daily structure, skill-building groups, psychotherapy, and more. To make a patient referral, please call the IOP at 312.996.1065, or complete the referral form.
GI Performs First Intragastric Balloon Procedure

The Division of Gastroenterology & Digestive Diseases completed its first endoscopic weight-loss procedure. Called “Intragastric balloon placement,” this procedure is a nonsurgical option to help patients achieve weight loss and improve their health. GI soon will be performing other endoscopic weight-loss procedures, including endoscopic sleeve gastroplasty and gastric outlet reduction. Additional benefits of endoscopic bariatric procedures include lowering risks for heart disease, high blood pressure, type 2 diabetes, and more.

3I PROJECT/EPIC

Epic Tips & Tricks

After six months working in Epic, it’s important to recognize we all have opportunities for improvement. Though some of us may struggle with Epic, the more time that we all spend learning to use the system, the brighter the future looks.

The training team continues to meet with groups to review common Epic difficulties, and we will continue to work with all of you to improve competency and efficiency using the Epic system. Please remember that our goal with the transition to Epic was not only to update our electronic health record system but also to improve our processes and workflows. Below are some common issues that we continue to struggle with.

Encounter Closure

Encounters cannot be closed when there is a medication/vaccine that has been ordered to be given but has not yet been documented. We continue to work with the clinic staff to make sure they are documenting these in real time. Encounters cannot be closed when there is a POCT ordered but results have not yet been documented and finalized. Encounters cannot be closed when notes include an Epic wild card in them (*** anywhere in the note). When you copy and paste Cerner Radiology info, *** is found in many Radiology results and needs to be deleted. When a telehealth encounter did not occur (no show), the recommended workflow is to error out the encounter. This involves entering “Error” in the reason for visit field and then signing the encounter.
In-Clinic Medications

When providers give medications in-clinic, such as during a procedure, the only way to charge for that medication is to make sure that the medication is marked in Epic as “Administered.” This drives the automatic charging for the medication. To make sure this happens, please be sure that you order the in-clinic medication, and then document administration of the in-clinic medication.

Procedure Consent

When you are in clinic doing a procedure that requires patient consent, use the e-signature pad, and have the patient sign the electronic consent that is built into Epic.