“THE FIRST WAVE is about many things to me but, at its core, it’s about how human beings come together in the face of crisis. I hope the film serves as an homage to the brave healthcare workers who have risked their lives on the frontlines of this ongoing pandemic. Now—and into the future—they deserve our gratitude and support more than ever.”

—Matthew Heineman, Oscar®-Nominated and Emmy®-Winning Director, THE FIRST WAVE

**A DISCUSSION GUIDE** For Hospitals

**SPARKING CONVERSATION**

**Check-In**

Given the emotional nature of the film - and the personal experiences of everyone watching - we encourage starting conversations with a few grounding questions that help build trust and provide a sense of safety. Some examples:

- How are you doing today as you come into this screening/conversation?
- How are you feeling after watching the film?
- What has it been like for you to grapple and process the experience of the COVID-19 pandemic while working in healthcare?
- Has the film brought up anything about your experience going through the pandemic that you now feel you need to speak up about?
- What has it been like for you to experience and process the racial violence & disparities within COVID-19 in our country while working in healthcare?
- What do you want film audiences to know about the experience and needs of healthcare workers after watching the film?
Reflect

From there, consider exploring how themes in the film might resonate on an individual or institutional level.

- Do you identify with a particular subject in the film? If so, who and why?
- Do you identify with a particular experience depicted in the film? If so, which and why?
- What is something that you would change about your day-to-day experience at work that would support your mental health and well-being?
- What gaps in the healthcare system highlighted in this film have you witnessed and/or experienced yourself?
- How have you seen similar scenarios related to equity and health outcomes play out in your hospital?
- How should healthcare professionals seek a balance between caring for their patients medically and emotionally, but at the same time keeping their emotions in check for themselves and other patients?

Care

Finally, discuss if and how individuals have protected their own mental health and well-being during this time of crisis, and how they can contribute to caring for their colleagues and making systemic changes that will help clinicians be well.

- What actions, tools, or strategies have you used to protect your own mental health and well-being during this crisis?
- What is the most impactful thing your workplace could do to better support your mental health and well-being?
- How might we commit to checking in on one another at work? How might we learn how to identify burnout in ourselves and our colleagues, and destigmatize seeking mental health support?
- Are there resources that your workplace has provided that you have found helpful?
- How might we actionably commit to dismantling systemic racism and embracing anti-racism in our hospital and the medical system at large?
- How might we build a healthcare system that centers the needs of healthcare workers alongside patients?
- What actions, tools, or strategies have you used to protect your own mental health and well-being during this crisis?

FROM DISCUSSION TO ACTION

Now that we’ve started to grapple with some of the themes in the film and how they relate to your own experiences together, you may be curious about how to start acting on changes or ideas that may have surfaced in the conversation. To help you do that, we’ve identified the following pathways to action to get you going.

- Visit the ALL IN website and learn more about the issues we care about.
- Join the ALL IN community and add your voice to the conversation.
- Sign the ALL IN Statement of Commitment or ask leaders in your organization to do so.
- Use and share the free tools and resources.
- Review the Healthcare Workforce Rescue Package to learn about the top five actions leaders should take to support team members now.
- Share your story to help normalize the conversation around mental health and well-being.
- Give to the ALL IN Fund through #FirstRespondersFirst.
Learn How Hospitals Can Support Their Workforces

Communicate Your Institution’s Policies and Practices Regarding Mental Health Care for Clinicians:
Beyond offering wellness programs, it is imperative that clinicians are made aware of their hospital's and state's policies and practices that affect how they might seek mental health care. In a recent survey, 43% of physicians said they had not sought mental health care because they didn't want to risk disclosure to their medical board. Ensuring that clinicians know their rights to seek care can make all the difference, but hospitals should also audit their credentialing applications, mental health support procedures, and clinicians' right to privacy. Upon doing so, and fixing policies or procedures that are outdated, hospitals should clearly communicate this information to their workforce as soon as possible.

Limit Credentialing Questions About Mental Health:
In May 2020, health care accrediting organization The Joint Commission strongly encouraged health care organizations not to ask about the past history of a clinician's “mental health conditions or treatment.” Instead, the commission backed recommendations of the Federation of State Medical Boards and the American Medical Association to limit questions to conditions that would impair a clinician's current abilities. Without implementing these guidelines, hospitals risk violating federal law: the Americans with Disabilities Act.

Ensure that Your Workforce Has a Full-Spectrum of Mental Health and Well-being Resources and Services:
It is imperative that hospitals offer the clinical and administrative workforce resources and services that they will actually use. This includes quality mental health counseling and in-demand programs such as peer support services. See the Healthcare Workforce Rescue Package to learn more.

Identify and Reduce/Remove Administrative Burdens on Clinicians:
The Healthcare Workforce Rescue Package recommends that admins partner with clinicians to identify and remove low-value work through a rapid improvement process, for example: reducing EHR clicks for common workflows, minimizing inbox notifications, and eliminating unnecessary mandatory training requirements.

Get Radical to Shore Up Staffing:
During the COVID-19 pandemic especially, nurses have been overloaded with more patients than is safe. Even outside of spikes in cases and extraordinary circumstances, “current staffing decisions made by hospital administrators – based on budgetary rather than clinical considerations – do not ensure patients are receiving optimal care.” See the proposed Federal RN-to-Patient Safe Staffing Ratios at nationalnursesunited.org/ratios and see the Healthcare Workforce Rescue Package to learn more.

Budget for Better Pay, Time Off, and Sick Leave:
As a critical part of the nation's workforce, healthcare workers should be fairly compensated, supported, and entitled to paid leave (both vacation and sick leave). When healthcare workers receive adequate compensation and feel valued and respected by their employer, they are likely to stay with that institution. While healthcare workers have often been left out of federal workforce protections, like FFCRA, hospitals have the power to support their own workforces and should make this a priority.

Designate a Well-Being Executive:
The Healthcare Workforce Rescue Package recommends that hospitals appoint one person with operational authority to oversee and align all clinician well-being efforts, for example: appointing a system chief wellness officer, assigning a senior leader on a short-term basis until long term resources are identified, and aligning well-being work with diversity, equity, and inclusion efforts.
A WORD FROM DR. DOUGÉ

At the height of the COVID-19 pandemic in New York City at the time, I didn’t see a person or hear a voice publicly that emulated my experience or thoughts.

So, I decided to take part in this film, with the hope that I could be that for someone else. It means a lot to share this film of hospital workers like you all. I know, even before the pandemic, our day-to-day stressors and challenges can often seem insurmountable, and now add on to the worry and stress related to this COVID-19 pandemic.

I do believe this all can negatively impact our mental health. Therefore, I hope you take away from the film that though we continue to serve our communities for the betterment of humanity, we too must remember that we are human. Trauma is often juxtaposed with triumph, and resilience can include moments of rest. Collectively, we can be vulnerable and yet strong enough to persevere. However, this involves processing our feelings and reaching out for help when we need it. On that note, I sincerely thank you for watching THE FIRST WAVE.

MENTAL HEALTH RESOURCES FOR HEALTHCARE WORKERS

Impact on Obtaining Mental Health Services on Your License & Credentials:
Clinicians often have concerns that obtaining mental health services may have an impact on their ability to obtain a license or credentials. The American Medical Association, Joint Commission, and Federation of State Medical Boards recommend that inquiries into a clinician's mental health be limited to “current impairment” and omit any questions about prior treatment, but every state and local hospital has different reporting rules on mental health services. A detailed overview of these issues was highlighted by the Dr. Lorna Breen Heroes’ Foundation and can be found here. We encourage every hospital/health system to publish the facts related to their institution/state on each of the potential structural barriers to obtaining mental health care for their workforce.

NAMI FRONTLINE WELLNESS
- Website: nami.org/frontlinehealthcare
- Instagram: @namicommunicate
- Text SCRUBS to 741741

CRISIS TEXT LINE
- Website: fortherfrontlines.org
- Instagram: @crisistextline
- Text FRONTLINE to 741741

THERAPY AID COALITION
- Website: therapyaid.org
- Instagram: @therapyaidcoalition

NATIONAL SUICIDE PREVENTION LIFELINE
- Website: suicidependventionlifeline.org
- Phone: 1-800-273-8255

PEER SUPPORT PROGRAMS
- PeerRxMed is a free peer-to-peer program for physicians and other healthcare professionals. PeerRxMed offers support, connection, encouragement, resources and skill building for optimal well-being.
- Nurse Groups is a free and confidential videoconference group service for nurses to connect and process issues related to COVID-19.
- Learn how you and your hospital can create your own peer support group with the AMA’s Steps Forward Toolkit.
SUPPORT RESOURCES FOR BIPOC HEALTHCARE WORKERS

NATIONAL BLACK NURSES ASSOCIATION (NBNA) RE:SET PROGRAM
• Website: nbnareset.com/counseling-services
• RE:SET provides NBNA members and their families instant access to a FREE comprehensive portfolio of counseling services and other resources to support your emotional well-being.

INCLUSIVE THERAPISTS
• Website: inclusivetherapists.com
• Inclusive Therapists centers the needs of Black, Indigenous, and People of Color (BIPOC) and the 2SLGBTQIA+ community.

THE LOVELAND FOUNDATION
• Website: thelovelandfoundation.org/loveland-therapy-fund
• With the barriers affecting access to treatment by members of diverse ethnic and racial groups, the Loveland Therapy Fund provides financial assistance to Black women and girls seeking therapy nationally.

THERAPY FOR BLACK GIRLS
• Website: providers.therapyforblackgirls.com
• Therapy for Black Girls is an online space dedicated to encouraging the mental wellness of Black women and girls.

APPENDIX

Tips For Organizing + Leading Conversations
If you’re taking on the role of organizing a screening and/or facilitating a conversation, we’re here to help you. We’ve crafted the following tips to help you guide a conversation around ways to identify and meaningfully support employees’ mental health and well-being and identify pathways to action.

Event Organizing Tips

FORMAT
• Discussions can take many forms (panel discussion, Q&A, etc.), but we suggest a more intimate group discussion as it fosters a more comfortable space to share personal reactions. As the pandemic is ongoing, you may need to convene your group virtually, using Zoom or other video platforms to host a discussion after screening the film. Many healthcare workers have reported that it has been cathartic to see and discuss the film together, so the more community you can create, the better.

• If your event is virtual, consider using break-out rooms and coming back together as a larger group to share. Think about your audience and what format would be most engaging for them.

AUDIENCE
• If possible, try to have someone with a mental healthcare background in the room (be it virtual or in person) to provide additional support to discussion participants. Additionally, the facilitator should ideally have some experience in leading group conversations.

• Identify (and invite) those who should be in the room, considering the appropriate mix of healthcare workers, administrators, and/or hospital support staff that makes the most sense for your context.

DISCUSSION PREPARATION
• Read through the discussion questions and resources and prepare a rough outline of what you want to cover. Reminder, once people get talking, the conversation will organically evolve, and you will just need to be a guide.

» When crafting the conversation:
  • Consider the audience, who will be part of the discussion, and what strengths they bring to the conversation.
  • If you want people to take a specific action, think about how the conversation can support that.
  • Consider incorporating an icebreaker or breathing exercise at the beginning to center the room and allow participants to reset before the screening and conversation.
We have provided tools to help construct your discussion around the film; however, what you discuss is ultimately up to you. It is important to acknowledge that audience members may continue to have strong feelings and responses to the film and discussion, so consider if it makes sense to offer more space to process / another opportunity to reconnect and continue the dialogue.

**Discussion Facilitation Tips**

- Set the stage for a good discussion by welcoming everyone and setting an intention for the conversation. If possible, communicate your intention before the screening begins. you can do this in the text of the invitation or in your opening remarks.
- Appreciate that everyone in the room has good intentions and also individual experiences.
- Stay aware of who is speaking and who is not. Ensure that no one dominates the conversation and welcome (but don’t demand) input from quieter participants.
- If the conversation escalates inappropriately, quiet the group and ask everyone to spend two minutes silently writing down their feelings and thoughts. Use your judgment to either move on to a different topic or share what everyone wrote.
- Gently remind participants of some best practices for group discussions:
  - Speak for yourself (“I feel… “I think…”), not on behalf of your identity (“we feel…” “we are…”)
  - or other identities (“they think…” “they act like…”).
  - Don’t be afraid to ask questions. Try not to make assumptions and listen to what people say instead.
  - Be open to feeling uncomfortable - remember that all growth comes with some discomfort.
  - Stay engaged. If you feel frustrated or misunderstood, take a moment, but don’t drop out.
  - Don’t dominate the conversation. Everyone gets a chance to speak and be heard.
  - This is a discussion, not a debate or a lesson.