

	Reduce difficult situations/ morally injurious events	Reduce distress/ moral injury due to a difficult situation	Reduce impact of distress/moral injury on general wellbeing	Reduce long term ill health
National/ regional/ system/ community	<p>Ensure service models are based on good principles of staff wellbeing, that culture and wellbeing is monitored and that leaders are held to account for that culture. Allow first person accounts to shape policy and system wide accountability. Deliver independent system wide action research of the impact of systems and culture on individuals.</p> <p>Commission training and contracts based on peer support, coaching for leaders, mass casualty planning. Advocate and model being a good employer, sharing good practice and taking action on feedback.</p>	<p>Lead and negotiate with organisations/ partners at all levels to ensure a fair and collaborative provision of offers to address moral injury and reduce distress.</p> <p>Commission research and local data regarding what reduces moral injury, and deliver the learning from this in innovative ways. Provision of training (dealing with difficult situations, peer support and effective supervisor check-ins), sharing examples of good practice and challenges overcome.</p>	<p>Commission innovative ways of trying to prevent the impact of moral injury through innovation and research. Build on learning and examine return on investment. Utilise real time data alerts on moral injury and mental health indicators (escalating for attention and action as needed).</p> <p>Commission interventions to reduce the impact of moral injury on wellbeing (ensuring they are accessible to staff and promoted effectively). Education and communications around moral injury for mental health staff who may not yet know about the concept.</p>	<p>Commission specialist interventions for the range of complex outcomes from moral injury. Evaluate for effectiveness. Ensure a range of routes to recovery, including collective learning (in particular, 'bottom up' ideas) and operational learning from the themes picked up by clinical services.</p>
Organisation /department	<p>Ensure effective operational debriefs and management action on concerns. Take appropriate action on anticipatory anxieties of staff and services. Put in place fair rules regarding homeworking, redeployment, sharing workload or HR/ shielding policies. Ensure accountable operational managers. Display wise safe leadership, coproduce decisions where possible and demonstrate appreciation of staff.</p> <p>Ensure clear, timely communication of guidelines/rules (with rationale) and expectations of staff/managers e.g. self-care/taking breaks and enforcement of policies and rules (including social distancing & PPE use) with modelling by senior leaders. Share organisational plans/uncertainties.</p> <p>Provision of training for job role (with paid time and cover to allow staff to participate). Have responsive plans for difficult adverse events and large scale casualties.</p>	<p>Ensure empathic normalising messages about distress (it is okay to not be okay). Promotion of positive culture of support and no blame.</p> <p>Ensure access to training (e.g. paid time and staff cover). Training/briefings before role change.</p> <p>Acknowledge challenges for staff e.g. telephone vs face to face work. Work towards solving issues as they arise for staff and allowing bottom up ideas. Allow a range of reactions and narratives.</p>	<p>Create an organisation learning culture that is based on addressing issues quickly, systemic thinking, trauma informed ideas of distress, and compassionate leadership.</p> <p>Provide support and time for reflection and connection (to allow staff to find meaning and develop a constructive narrative). Provide for staff basic needs for food and rest.</p> <p>Modelling/sharing of personal reflections by senior leaders or organisational reflections. Share and promote a range of collective healing opportunities. Keep a focus on outcomes rather than process or outputs.</p>	<p>Facilitation of access to adequate support. Reduce stigma via senior leader/peer case studies and allow staff paid time to attend support.</p> <p>Have work policies and practices that are trauma informed and see mental health in a context of adversity. Allow adaptive work environments around the needs of people adversely impacted by their work.</p>
Supervisor	<p>Modelling of self care & taking annual leave. Ensure fair enforcement of rules/policies. Promoting kindness amongst staff & a positive culture. Ensure appropriateness of any job role change. Expression of thanks about something specific that was noticed.</p>	<p>Check in with staff regularly. Seek feedback and act on it. Escalate issues as they arise. Active listening and coaching staff to perform as well as they can. Take up offers of coaching for yourself.</p>	<p>Take concerns seriously. Signpost staff to sources of support early. Create a culture of safeness and peer support in team and facilitate shared understanding and learning from events.</p>	<p>Encouragement and facilitation of access to range of support. Aware of signs of long term impact and screening options. Normalisation of distress. Support around adaptations required at work to accommodate impact.</p>
Individuals (including colleagues, family, friends)	<p>Utilise available information/training to prepare for adversity or changes in the job role, develop adaptive skills and plan self-care activities.</p> <p>Model kindness, good teamwork and thank others. Model respect for organisational/government guidelines to help others feel safe.</p> <p>Feedback to seniors any needs or suggestions regarding situations that could be corrected or prevented in the future.</p>	<p>Use info/training on dealing with difficult situations (understanding the context in which people behave, reflecting, changing actions/thoughts now or next time, and feeding back to seniors concerns/issues and any possible solutions).</p> <p>Show kindness to yourself and others.</p> <p>Where possible, seek mutual understanding where other's views or actions differ from your own. Offer listening and support to others in distress. Consider training in supporting peers/others.</p>	<p>Use evidence informed interventions for moral injury.</p> <p>Use coping skills/ wellness recovery action plan. Connect with others and share understanding. Campaign to change things. Acceptance.</p> <p>Notice if others wellbeing dips and offer support, listen and signpost to sources of support.</p>	<p>Seek evidence informed interventions for moral injury and/or mental ill health even if this is some years later. Find new and meaningful roles/ activities. Give back time to communities you value. Lead on the change you want to see.</p>

