



Psyc.E.In. MOOC 2

Unit 6

Chapter 3

Case study/Good practice

3.1 a Internal Coordination

Coordinating an Emergency Psychology Team from the Local Health Care Service during the Coronavirus pandemic period

Instructions for the learners

Working in groups, read the case study and answer the questions to complete the activity. It is not necessary to describe the whole process in detail.

In the following case study, you will be provided with a scenario to use in your classroom for an exercise that will last 30-40 minutes:

- 5 minutes to read the instructions and the information about the scenario individually.
- 10 minutes for subgroup discussion.
- 20 minutes to answer the questions.

Background Scenario Description

The Emergency Psychology Team of the National Health System of Central Italy has a 15-year experience in offering qualified psychological support to people who suffered a traumatic event. There are more than 500.000 residents in the area, in more than 100 municipalities. The Team is made up of a group of psychotherapists that work according to guidelines of intervention defined by an Early Psychological Intervention Care Process. Usually, the Team is activated when exceptional situations (situations with a strong emotional impact) occur.

The intervention is structured on two levels: an immediate intervention, provided by a group of 6-7 psychologists ready to reach the site of the accident right after it occurs (if requested), and an intervention provided by the whole Team (almost 30 psychologists) in the 48 hours following the accident. The members of the Team are not used to working together, since they are engaged in different locations to assist different targets : children (0-15 years old), adolescent and young adults (16-26 years old), adults (27-65 years old), seniors (over 66) with cognitive impairments, fragile targets (mental health impairment, social impairment, substance abuse). The Team usually addresses an average number of 20-30 cases a year. The targets are victims of traumatic experiences like car or domestic accidents where minors are involved, suicides, family murders, etc.

In the period between February 2020 and August 2021, more than 500 people have been assisted by the Emergency Psychology Team. They are orphans, parents with young children, widows and widowers, adults with health or economic problems caused by the pandemic, senior and fragile population, but also health care workers involved in the Covid-19 emergency.

Methods, resources and obstacles:

The Emergency Psychology Team is composed by a group of 30 psychologists employed by the National Health System, with specific training in trauma treatment. All of them work for the Psychology Department. The population can access the service through a toll-free number active 8 hours a day, 5 days a week, managed by the coordinator of the Team. The service is free of charge and is activated within 48 hours after the call. After a previous need assessment made by the coordinator, the person is referred to one of the Team members who will make contact with him/her in the following 24-48 hours. The Emergency Psychology Team has got its own protocol of intervention that is known by the members of the Team; the interventions provided are mainly two: a psychological first aid aimed at offering psychological support to the victims, and psychoeducation and trauma-focused psychotherapy to provide to trauma treatment in the very early stages after the event. All the interventions can be provided in presence, by video call or by phone. Each session lasts 30-60 minutes.

Objectives:

During the Covid-19 pandemic, the members of the Emergency Psychology Team went from rare interventions to frequent ones; in some cases, during the lockdown, those interventions were their main clinical activity. Therefore, the coordinator had to make sure that a team made of members with a low sense of belonging could guarantee a consistent support to the population and articulated interventions in complex situations in which different family members/health care workers are involved. To do so, in the period between February 2020 and June 2020, the coordinator proposed weekly online meetings to the team that became monthly in the period between July 2020 and August 2021.

Answer the following questions:

1. Which coordination tools/methods would you propose as the coordinator of an Emergency Psychology Team during a pandemic?

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2. How would you organize the meeting?

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3. How would you present/share the Emergency Psychology Team protocols?

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4. How would you improve your sense of belonging?

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5. How would you increase homogeneity in the interventions of the Team?

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6. How would you monitor and evaluate the coordination?

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