

A Guide for NIH Staff: Recognizing *the Distressed Trainee*

NATIONAL INSTITUTES OF HEALTH



As a supervisor or training director, you are responsible for the productivity and well-being of your trainees. Wellness is an active practice of living a healthy and fulfilling life and aims to promote well-being in all facets of life. The state of our wellness is reflective of multiple components of our lives, such as, professional/academic wellbeing, social well-being, psychological and emotional wellbeing, and environmental well-being. Given that each of us are unique, relationships with wellness and wellness practices can look different for individuals in your research group. As a supervisor or training director, it is your responsibility to model and promote wellness amongst your trainees. The impact of modeling and promoting wellness for trainees includes greater levels of productivity, lessened absenteeism, and the feeling of a supportive work environment. The NIH OITE offers a comprehensive wellness and resilience program for trainees and many NIH Institutes also offer resources; trainees who engage in this program, and in other community building events at NIH, tend to feel more connected and supported, leading to better interactions in their research group. PIs and supervisors who want to learn more about the NIH OITE wellness resources can email oite-wellness@nih.gov

One of the hardest parts of supervision is providing guidance when there is evidence of mental health or substance use issues that are affecting your trainee's performance or relationships with other team members. These issues can create stress not only for the trainee, but for the supervisor and other staff as well, and they can adversely impact the productivity and morale of the larger work unit. Supervisors facing a trainee with behavioral health or substance abuse issues may feel unprepared or lack the knowledge of the procedures needed to manage these situations. This can lead to feelings of discomfort, avoidance and a range of personal reactions. Navigating the joint responsibilities of getting help for the trainee and directing their professional trajectory can be challenging.

For example, you may notice changes in a trainee's behavior on the job. These changes may be subtle, such as a trainee who does not "seem himself" or looks unkempt. Or there may be more overt signs of a problem such as a marked decline in performance, irregular attendance, or inappropriate behavior. These symptoms can be signs of a transient stressor or an underlying mental health condition. Your observations and guidance can help a trainee access resources that can improve their personal and work-related performance.

We want trainees to seek and receive assistance before concerning behaviors escalate. While it is not your role to make a health assessment of the trainee, it is important to "trust your gut" in these situations and to take action. You can play an instrumental role in your trainees' success by directing them to appropriate resources, thus reducing the risk of potentially serious consequences. Your

reassuring words, expression of concern, and engagement of appropriate resources can make a significant difference in the life of a trainee and the larger NIH community.

Ideally, if a trainee's need for additional support is recognized early, a timely referral to the relevant resources can help prevent further escalation. More complex situations may require multiple professionals to act in concert to inform clinical and administrative interventions.

This document and the supporting materials in the attached *Toolkit for Helping the Supervisor Recognize the Distressed Trainee* will help to promote a climate of awareness and support so that you can better observe and recognize concerning symptoms that may indicate trainee distress. These will also help you to: access services, identify referral resources thereby enhancing your trainee's well-being. An additional goal for these materials is to prevent less acute behavioral problems from escalating and to help you manage emergency situations.

Recognizing a Trainee in Distress

A wide array of medical conditions may alter a person's mental and emotional state. *Recognizing* the need for intervention and *referring* the person in distress to the right resources are the two most important steps that you can take to initiate help. A referral can help determine an appropriate care plan for a distressed trainee. Reassurance from the supervisor and a supportive work environment are also key to an effective intervention.

Behavioral conditions can sometimes impact performance at work. These consequences can include decreased productivity, problematic interactions with team members, and poor rapport with others. In extreme cases, behavioral conditions can lead to workplace violence or self-destructive behaviors such as suicide. A variety of medical conditions including, for example, endocrine, metabolic, inflammatory, infectious, sleep disorders, psychiatric and other processes can be implicated where distress is noted, thus warranting a referral for further evaluation.

It is important to observe changes from a trainee's usual behavior as these may signal distress. Noticing that a trainee is habitually late, leaving late or requesting an alternative work schedule that is not driven by the nature of the work itself can signal that the trainee is experiencing distress that may warrant further discussion and intervention. If this behavior is occurring specifically in order to avoid others, this could also be cause for concern. These signs of distress may be especially important for a trainee with a history of mental illness. The greater the number of symptoms observed, the more likely it is that the individual is truly distressed.

Additional signs of distress may include disheveled appearance; chronic sadness or tension; abrupt changes in mood; irritability/agitation; problematic interactions with other staff; bizarre behaviors; excessive sleepiness; or sustained difficulty with concentration. The supervisor should be particularly attuned to increases in frequency, intensity, or duration of these symptoms as this can be a sign that further evaluation is needed.

It is important to note that cultural factors may influence the manifestations of distress. For example, some international trainees may be more likely to describe distress in physical rather than emotional terms, such as headaches or stomachaches.

When further evaluation of a trainee's behavioral status is indicated, it is important to refer the trainee to an individual who is **not** in the trainee's chain of command. This is important not only to safeguard the trainee's protected health information (PHI), but also to insulate the mentor or supervisor from potential conflicts or discomfort where sensitive issues are involved. The supervisor or mentor should endeavor to address behavioral issues with the trainee professionally and with respect to minimize additional stress.

Most acutely ill individuals will agree to an evaluation and comply with recommended treatment. However, sometimes a person's judgment is too clouded to accept help. In this case, emergency measures may be necessary to protect the trainee or others from imminent harm.

Recognizing the Need for Immediate Action

All supervisors and Training Directors have an obligation to report allegations of harassment (sexual and non-sexual) to the NIH Civil Program as soon as possible and for coordinating closely with them to promptly address concerns. Trainees who come forward with a harassment allegation should be informed that you have an obligation to report the alleged harassment. This obligation is required even if the individual coming forward wishes to remain anonymous, requests confidentiality, or does not wish the complaint to be addressed with the alleged harasser. Retaliatory treatment towards any trainee for reporting allegations of inappropriate conduct or harassment is prohibited.

Occasionally a trainee in extreme distress may pose an imminent threat to themselves or others requiring quick and thoughtful intervention. NIH professional staff, including, the Employee Assistance Program (EAP), the Occupational Medical Service (OMS), the NIH Civil Program, and the NIH Division of Police are prepared to handle such emergencies directly. If you perceive a threat as imminent, contact the NIH Police immediately. If the threat is not imminent, you should contact the appropriate **supervisors** or **training director** for the trainee and consult other NIH resources as appropriate.

In addition to OMS, EAP and Civil, the Office of Intramural Training and Education (OITE) and the Office of the Ombudsman, Center for Cooperative Resolution (OO/CCR) can play an important role in helping the distressed trainee as well. These offices can provide information on warning signs and risk factors to the supervisor. In addition, they can assist with workplace policies and communication between the trainee and mentor.

Violence in the workplace may occur in any organization. You should activate campus emergency services immediately when a distressed trainee appears to be an imminent threat to self or others. If you are concerned about a trainee who has not shown up for work without an explanation and feel that the trainee's well-being or the well-being of others is at risk, you should contact the police and ask for a "wellness check." This allows the police to check on the trainee's well-being and to determine if there are any unmet acute psychiatric needs.

TIPS FOR Helping a Trainee in Distress

Talk to the trainee. A situation may be diffused if you convey your concern for the trainee's well-being and continued success. Explain to him/her that in your role as a mentor you are expected to direct a trainee to NIH professionals who can provide expert care. Encourage the trainee to follow up with the services that may help even if the critical moment has subsided.

If the trainee confides in you, reassure the trainee and encourage him to follow your recommendations to consult with the appropriate designated service providers.

Know your limits as a helper. It is important that you indicate in a gentle but direct manner that professional assistance is available at the NIH free of cost, and that you will assist the trainee in finding the appropriate services. Some of these are fully confidential except in cases of life-threatening injury to the trainee or others.

Ensure that the trainee receives the services you recommend. Once you determine which services may benefit the trainee the most, it can be helpful to escort the trainee to the point of service, for example, in case of emergency to OMS or EAP. If an extremely distressed trainee is unwilling to accept help and there is imminent risk of harm to the trainee or others, you should activate campus emergency services so that the trainee can be safely transferred to an appropriate treatment setting. Consultation with NIH resources, including Civil, OMS and EAP, regarding limits of confidentiality may be warranted.

What to do if the trainee does not follow-up with your recommendations

Sometimes a trainee will deny that a problem exists and may not accept intervention, including a referral to the OMS or EAP. If the trainee refuses to meet with an NIH resource to address the behavioral concerns and the behaviors are sustained and concerning to you, there are several offices within the NIH that can offer guidance and act as a resource to you. The NIH Employee Assistance Program (EAP) can provide information on how to proceed in these cases. In addition, the Office of Intramural Training and Education (OITE) and the Civil Program can offer guidance specific to your trainee's workplace performance and recommend appropriate administrative action. Prior to meeting with these resources, it is important that you document the behaviors of concern in detail, including how you observe them impacting the trainee and/or others in the workplace.

In addition to all of the resources made available within each IC (the IC Training Director, Clinical Director, and Scientific Director), the following NIH resources are also available. These resources can be used by both the supervisor for consultation on specific situations and by the trainees themselves. They are available at no charge.

Note: you can locate your IC Training Director at: https://www.training.nih.gov/ic_contacts

NIH Resources

NIH Employee Assistance Program (EAP) – 301-496-3164

<http://www.ors.od.nih.gov/sr/dohs/EAP>

EAP is an organizational support resource staffed by licensed mental health professionals who provide consultation, assessment, short-term counseling, crisis management, triage, referral to the community and follow-up services to enhance personal and professional well-being. EAP offers face-to-face and phone consultations. They also offer training, Critical Incident Stress Management and support to workgroups. Contact EAP when you seek: 1) a supervisory consultation regarding intervention strategies for trainees who might experience absenteeism, conduct and/or emotional and behavioral concerns; 2) guidance on various EAP referral methods for your trainee; 3) onsite individual and group support services for workgroups impacted by a traumatic event, including death of a coworker, problematic termination, threatening behavior, and workplace violence; 4) a presentation for your workgroup with topics such as emotional intelligence, stress management, or workplace communication as well as supervisory workshops.

NIH Occupational Medical Service (OMS) - 301-496-4411

<https://go.usa.gov/xnhG3>

OMS supports the health and safety of the NIH workforce with preventive and responsive services and procedures. OMS provides critical support in cases of an injured or acutely ill worker, including medical emergencies. Over a dozen experienced clinicians tailor expert, confidential and efficient patient care to each individual's unique circumstances. Contact OMS when you: 1) find yourself dealing with a medical emergency (your own or a colleague's); 2) want to refer a trainee for an urgent evaluation such as suspected intoxication; 3) suspect a medical basis for changes in your trainee's behavior, performance, or attendance. OMS is available 24/7 for emergency clinical evaluations.

NIH Office of Intramural Training and Education (OITE) - 301-496-2427

<https://www.training.nih.gov/>

OITE's mission is to enhance the training experience of intramural students and fellows. Trainees are encouraged to visit OITE at any time to talk confidentially about the issues they may be facing. OITE offers comprehensive career / professional / personal development activities for trainees across the NIH and at all educational levels. All programs and services are free of charge to trainees in the NIH Intramural Research Program. The staff includes career counselors, wellness counselors, and others trained in dealing with science careers and training. Contact OITE if your trainee: 1) would like to explore career direction or options and dealing with the stress and discomfort of the job search process; 2) is experiencing imposter fears or other issues that impact a successful fellowship and training experience; 3) wants to learn strategies for improving mentor-mentee issues and managing stresses inherent in the process of doing science; 4) wants to develop approaches for positive self-care.

NIH Office of the Ombudsman, Center for Cooperative Resolution (OO/CCR) –301-594-7231
<https://ombudsman.nih.gov>

An Ombudsman is an independent and neutral person who can help you resolve workplace conflict in a confidential setting. The OO/CCR focuses on addressing professional disputes. Contact the Ombudsman's Office when you: 1) want to discuss your work concerns / organizational life; 2) feel that you have been unfairly treated by a peer or supervisor; 3) have concerns about issues specific to the scientific community such as mentoring, collaboration, authorship or scientific misconduct; 4) are uncertain where to take a work problem; 5) are unclear about NIH policies, procedures and how they apply to you.

NIH Civil Program – 301-402-4845

<https://civilworkplace.nih.gov>, Anti-Harassment Hotline 833-224-3829, Anonymous Reports

The Civil Program promotes civility in the workplace and provides consultation to mitigate workplace difficulties, including all forms of harassment, uncivil, inappropriate, and other disruptive behavior. This also includes behaviors of concern such as bullying, intimidation, threats, suicidal ideation, and domestic violence. Call the NIH Civil Program if: 1) you feel you are being harassed or you are a manager or supervisor and you receive an allegation of harassment; 2) you need help assessing the potential seriousness of a concerning situation; 3) you are experiencing an inappropriate, concerning, or threatening situation at work and need intervention from trained staff; 4) you become aware of a workplace situation involving behaviors of concern, such as harassment based on race, color, religion, sex (including pregnancy, gender identity, transgender status, or sexual orientation), national origin, age, disability, or genetic information; intimidation: bullying; or other unproductive, disruptive, and/or dangerous behaviors; or 5) a situation involving concerning behavior already has occurred and you need assistance managing the aftermath and its effect on staff; or 6) you need help in addressing your own behavior and/or reactions to a workplace situation.

Division of Police - 301-496-5685

Emergency On Campus - 911, Off Campus - 9-911

www.ors.od.nih.gov/ser/dp

The NIH Police provide 24 hours a day, 7 days a week police services on campus, including: emergency response, liaison with outside law enforcement, 24 hour escorts, and training on preventing and responding to workplace violence. In case of a serious threat of harm to self or others call the emergency number immediately.

NIMH educational resources – for more information about mental health and illness

<http://www.nimh.nih.gov/health/index.shtml>

Additional Resources

National Suicide Prevention Lifeline - 1-800-273-TALK (-8255)

<http://www.suicidepreventionlifeline.org/>

The National Suicide Prevention Lifeline provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. The caller will be referred to local suicide prevention and crisis resources.

Montgomery County 24-Hour Crisis Center – 240-777-4000

<http://www.montgomerycountymd.gov/HHS-Program/Program.aspx?id=BHCS/BHCS24hrcrisiscenter-p204.html>

Suburban Hospital Emergency Room – 301-896-7315

http://www.hopkinsmedicine.org/suburban_hospital/medical_services/emergency_trauma_care/