

# COVID-19 and the provision of Wobble Rooms and Wellbeing Centres for healthcare workers

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It is well accepted that working in healthcare can be emotionally and physically demanding. The health and wellbeing of healthcare workers is associated with patient safety and experience, staff retention, and economic burden to the NHS from sickness absence (NHS England, 2018). Forward-thinking NHS trusts therefore invest routinely in staff health and wellbeing, and this reaps benefits in terms of improvements in health behaviours, reductions in sickness absence and improvements in job satisfaction and organisational commitment (Blake, 2013). The COVID-19 pandemic has and will continue to impact significantly on health and care workers (Blake, 2020), generating an increased sense of urgency to provide support and mobilise crisis-response provisions to protect staff wellbeing. Approaches to mitigating the impact of COVID-19 on the psychological wellbeing of health and care workers have already been described and guidance is available (e.g. see digital support package at: Blake and Bermingham, 2020; Blake et al, 2020).

Many hospital trusts have engaged teams to rapidly create respite spaces for their workforce (Ford, 2020; Bates, 2020), albeit the same concept has been labelled in many ways: 'wobble rooms', 'time-out rooms', 'chill-out rooms', 'safe rooms', 'rainbow rooms' and 'wellbeing centres'. These facilities are usually located in a non-COVID areas and for frontline workers they provide an opportunity for staff to remove themselves from the clinical environment and gain solace from the pressures of dealing with coronavirus. They are intended to provide an optimistic and positive atmosphere to help staff with the impact of the crisis – small enough to be perceived as 'homely' spaces but large enough to maintain privacy and appropriate social distancing. These rooms often provide quiet areas for rest and relaxation, somewhere to eat or drink, and for others a chance to talk with others to strengthen camaraderie and support. Staff can access pastoral support in terms of counselling or psychological support including psychological first aid, either face-to-face or by video link. Sensory items may be provided (e.g. low-level lighting, 'stress balls', aromatic oils and lava lamps) in addition to wellbeing resources and signposting. There are notable parallels between environments designed for staff wellbeing, and the preventative and de-escalating 'sensory rooms' and 'comfort rooms' that are already used with patients, in psychiatric inpatient environments (Lindberg et al, 2019; Cummings et al, 2010) and to support self-management in people with chronic conditions, such as long-term pain. In addition to physical spaces, some trusts are also offering virtual wobble rooms for healthcare workers, providing regular online group-based support focused on honest expression of feelings and self-care (Rimmer and Chatfield, 2020).

There is much to learn from the rapid implementation of these facilities for healthcare workers during the COVID-19 pandemic. An evaluation of wellbeing centres at an acute NHS trust in England is currently underway and will provide insights into the delivery and impacts of these COVID-19 responses, as well as lessons learned to help shape provisions as we return to the 'new normal'. This is being led by the University of Nottingham. Interview data is being collected to provide insights into the views of those who mobilised the service and support the operationalisation of the centres on a day-to-day basis, as well as the views and experiences of visitors to the centres including workers from clinical and non-clinical roles (Blake, COVID-Well Study).

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