

PATRICK TOMLINSON ASSOCIATES DEVELOPING PEOPLE AND ORGANIZATIONS



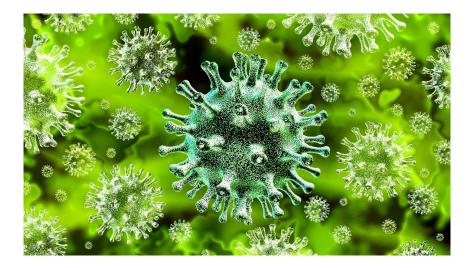
MANAGING THE CORONA VIRUS SITUATION

APRIL-JULY 2020

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Managing the Corona Virus Situation



I have put together various articles and responses from different people. Initially, this article started as something most relevant to those who work with 'traumatized' children in a therapeutic group care setting. Since then it has evolved to include perspectives that are more widely relevant. It began on April 1st and is ongoing, so it is like a journal of different perspectives as they arise.

As we are learning as we go along, the articles/parts are in reverse order, with the earliest, Part 1, being the last. There is so much outstanding practice taking place that it is a privilege to hear about, and a testament to what also goes on day-in-day-out in a quiet way. Organizations with strong cultures are well-prepared for dealing with the biggest challenges and some will grow even stronger through this. The same can be said of individuals.

PART 8 - Safe Uncertainty

In April once it was clear the Virus Pandemic was having a major impact, I decided to offer a free Zoom Meeting to connect and share experiences. The offer was made on my Facebook Group page. Through this, the aim was to improve our capacity for managing the situation as well as possible. As it was going to be a discussion group rather than a webinar, I thought that a group of up to 10 people would be ideal. It was quickly taken up, so we had our first meeting on 27th April. The meeting has had an open agenda, so it has been interesting to see what emerges.

I was not sure whether it would be a one-off meeting, but it became clear that it would be valuable to continue during the pandemic. We decided to have a weekly 1-hour meeting until the end of June and then review. In one of the meetings we were discussing risk and the concept of Safe Uncertainty was brought up. I had never heard of it before. One of our participants said that an organization he worked with had moved away from the concept of 'risk-management' to safe 'risk-taking'. Risk management tends to gravitate towards the idea

that risk can be eliminated. Whereas we know that healthy development depends upon taking risks. The question is how do we get the balance right? The movement between uncertainty and certainty is always a key struggle in work with traumatized children. The virus situation has just pushed it in front of us all in everyday life.

With so much uncertainty, how we can feel safe at the same time? There has been much good advice shared across the world throughout this time. The value of relationships and connection; healthy routines and living; keep active and productive; manage exposure to news and social media; create a structure with short time frames; to name a few. The aim is not to get rid of uncertainty but to make it manageable, and even productive. Uncertainty is with us all the time, mostly just not so obvious as it has been in this pandemic. The family therapist, Barry Mason (1993) created the concept of 'safe uncertainty'. We have the possibilities of safety and unsafety, and certainty and uncertainty. This gives us the 4 operating domains that Mason described in this diagram.

SAFE Safe | Safe | Uncertainty | UNCERTAINTY | Unsafe | Unsafe | Uncertainty | UNSAFE | UNSAFE | Uncertainty | UNSAFE | Uncertainty | UNCERTAINTY | UNSAFE | Uncertainty | UNCERTAINTY | UNSAFE | Uncertainty | Uncer

Towards Positions of Safe Uncertainty

If we think of the 3 positions, safe certainty, unsafe certainty, unsafe uncertainty – we can imagine the problems of each position. Safe certainty has the risk of becoming stagnant, of being too comfortable. Unsafe certainty is like being helpless in the face of a threat. Unsafe uncertainty is like being overwhelmed by fear in the face of a threat. Safe uncertainty is the most functional and healthy position to be in. Hence the position we should aim to move towards. It allows for the exploration of possibilities and adaptation. As Mason explains it encourages curiosity and enables authoritative doubt.

Rather than go into further detail, I will finish by saying that the concept of Safe Uncertainty seems especially relevant to this virus situation. And it was one of the useful and interesting things that arose out of our zoom group discussions. Re-affirming of the value of connecting and establishing a structured space for sharing and thinking together. Thank you everyone.

Reference

Mason, B. (1993) – Towards Positions of Safe Uncertainty, in *Human Systems*, 4 (3-4), pp.189-200

Further Reading

Mason, B. (2017) Unpacking Safe Uncertainty (Slide Presentation)
https://www.cfssw.org/sites/default/files/atoms/files/unpacking safe uncertainty by barry_mason.pdf

Mason, B. (2019) Re-Visiting Safe Uncertainty: Six Perspectives for Clinical Practice and Assessment of Risk, in *Journal of Family Therapy*, 41, pp. 343-356

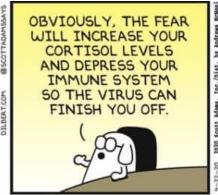
Porter, A. and Davis, J. (2017) Leading with Safe Uncertainty: Living and Leading with Ambiguity and Change, Moonstone Associates

http://moonstoneassociates.co.uk/wp-content/uploads/2017/10/Leading-with-Safe-Uncertainty-Taster.pdf

PART 7 – Anxiety and Unresolved Trauma Triggered by the Covid-19 Situation

I think this provides a clear example of how many issues are arising out of the Covid-19 situation. There are threats and risks but also an opportunity for learning and growth. Some of them are directly to do with the virus and others are triggered by association. I posted this cartoon and comment today on my Facebook page.







"Thanks for sharing this cartoon Tracey TC - made me smile, ironic humour - and not that far away from the truth:) Actually, I did deal with a situation recently where a person's anxiety re the virus was becoming life-threatening and also causing more risk of getting the virus. Once the anxiety was under control - the person's health was resilient."

In response to my post, someone sent me this message below, which I found very interesting and helpful. It is honest about the difficulties that can be experienced in this situation. It is also positive in that something can be done and learnt. I think the understanding of trauma and what helps is widely relevant. It is interesting how yoga, so highly endorsed by Bessel van der Kolk (2016) seems to have been so helpful.

It turned out that yoga was a more effective treatment for PTSD than any medication any of us had ever studied.

Thank you very much to the person who shared this.

"I read the cartoon and have been thinking about writing about my experience because in the first few weeks of Covid it really triggered some early body trauma responses in me. The breathing difficulties triggered anxiety responses on a body level. They were definitely from childhood and that i had consciously forgotten. Some of the symptoms turned into flashbacks from early trauma and the whole thing opened a whole can of worms. I have been working through it all and figuring out how to deal with the anxiety - what was actual symptoms from now, and what was my body and mind having flashbacks.

I had been wanting to do some type of body therapy for at least a year and Covid finally made me find out about it and start. I don't feel i had a choice with the reactions I was having to the illness. It was kind of confusing and scary for a while...but I do feel like I have learnt ways to manage the anxiety and the flashbacks, which are mostly on a body level. That has made the illness way more manageable and although I'm not better, at least i can tell what is what for now!

I started trauma-sensitive yoga about a month ago and it has been pretty amazing. I'm getting to know my body and trust it in ways that talking therapy just didn't get to. It is the positive for me, from the whole thing-without Covid. I wouldn't have started that and I wouldn't be learning to consciously notice my body and feel it and help it. I have had no choice but to learn how to not respond automatically, on a body level, from a trauma place. It is quite cool how it has worked out really. Although, I'd like to be properly well now!!

I think the yoga is going to become a long-term practice - it is very healing and long overdue. I thought you may be interested. It has been (and still is) kind of an awesome process, in terms of healing early trauma at a deeper level; and whilst I really want to be well, I don't think I'd swap the opportunity for healing that it has given me...easy to say because I haven't ended up staying in hospital so far! I haven't seen anything written about the crossover between Covid and anxiety and the impact that has on people who had/have early trauma and what Covid might trigger. So, I'm going to try and write about it...just not too sure where to start!

If you think it would help anyone, I'm happy for you to share it anonymously. I have been helped lots by reading about other people who have had Covid for weeks and weeks, so I know reading similar experiences can help."

Reference

Bessel van der Kolk (2016) - how to detoxify the body from trauma https://www.youtube.com/watch?v=GWEjnGsLN-0

PART 6 - Useful Articles, Videos and Resources - Managing the Covid-19 Situation

As well as living in the virus Pandemic it could also be said we have a pandemic of information available. How we manage and make use of that information can be vital to our well-being, mental health, learning and development.

These are a few sources of information that I have found most helpful during this time. Much of what is shared here is relevant and useful, whether we are in a pandemic or not. Please feel welcome to give feedback, share your experience, and/or add any resource that you have found especially helpful.

Nancy Williams - Psychotherapy in a Pandemic

https://www.facebook.com/1779582039025106/posts/nancy-ncwilliams-for-memories-for-earthpsychotherapy-in-a-pandemicnancy-mcwillia/2551941805122455/

I think she outlines some of the key issues in moving to online practice. One is that this is a major change. There will need to be a redefining of boundaries in the therapy process. For example, which room(s) does the therapy take place in? How is confidentiality maintained? What happens if the client, introduces a family member or friend? How are these type of issues responded to? Nancy refers to the tiredness of working online – staring at the screen for many hours. How do we manage this? Maybe more breaks are needed? Maybe some of the tiredness is related to changes taking place and may ease up over time?

Bessel van der Kolk - When the COVID-19 Pandemic Leaves us Feeling Helpless

https://www.nicabm.com/when-covid19-leaves-clients-feeling-helpless/?fbclid=IwAR0SKv2-UBZ5ya5mVpJf MBQHpu9Kvq0NqvlCOLA-h7otDxta34t8JUROiE

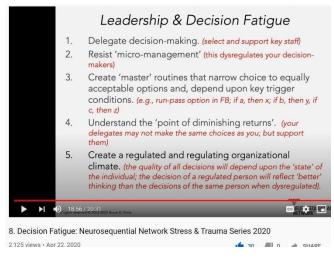
I like the way he makes numerous helpful points in a short video. He refers to the Pandemic as being pre-traumatic for many. The danger is potentially life-threatening. Whether we experience this as traumatic or not, will have much to do with our response to the threat. Trauma = a threat that overwhelms our ability to manage the experience. He does touch upon his view of President Trump. This meets with views re the appropriateness of psychologists, therapists, etc. taking a stand on political issues.

Beatriz Fontana, Coach, CA, says - Excellent comments from Bessel! In a nutshell: movement and rhythm. Movement in relationships (engagement). Body movement, movement through our days (structured tasks)

Bruce Perry – 8 (NN COVID-19 Stress, Distress & Trauma Series) - Decision Fatigue: Neurosequential Network Stress & Trauma Series 2020

https://www.neurosequential.com/covid-19-resources

Bruce Perry talks about decision-making, for individuals, leaders, and organizations. I like the following points he makes, among many others in the video. It is interesting that he is focusing on leadership and organization processes.



"Minimize group decision making. Because group decision-making leads to analysis paralysis and it leads to compromise. If you are in a group and you are the leaders in that group, delegate decision-making. Don't create collaborative decision-making – it's very destructive. Collaborative decision-making amongst 10 people leads to mush"

"Half the times, if you get comfortable with not making a decision, that's a decision. Because the next time you revisit that issue you realize it's already been resolved, it's

already gone. I think this is really important because people can over control this decision-making process and need to get really comfortable with, or more comfortable with ambiguity."

"You've got to resist micro-management. What this does, it basically dis-empowers the people you work with and it dysregulates them and it makes them make poor decisions. If they feel regulated by you, you make them feel safe, they're going to make better decisions. This is where a really high-quality coaching and reflective supervision can come in, where you help someone wade through their decision-making process. If you want to add content to that you can add it in a way that doesn't dysregulate them."

"Use groups to basically go through and think about decisions but not make the decisions. You use people to help you analyze what are the potential outcomes of decision 1, what are the potential outcomes of decision 2, what are we going to see with decision 3. You help the group have a voice, you hear what they have to say and then if it's a big decision you make the decision or you delegate to another person to take those things under advisement and make a decision."

Bruce Perry's next video in the series is also helpful in looking at the changes, which lay ahead and how to prepare for them.

NN COVID Series: 9 - Managing Transitions

https://www.youtube.com/watch?v=cA7UbKnM0RM&feature=youtu.be

Niall Kelly - 7 leadership lessons from a Public Health Crisis

https://www.linkedin.com/pulse/7-leadership-lessons-from-public-health-crisis-niall-kelly/?trackingId=O2zCbE7J68AI%2FYRTequ%2Fhg%3D%3D

Niall Kelly is Managing Director, at Young Foundations, a UK therapeutic residential service for children and young people. He discusses what has helped in leading an organization during this situation. The points he makes will help anyone in organizations think carefully about finding ways forward during this critical event. As he says, you may already be doing much of this and

more. I found the way he summarizes key points to under the 7 key areas below, to be very helpful.

Be there
Sense-making
Strong relationships
Prepare to be humbled
Embrace new solutions
Over-communicate values
Beginning, middle and end

Dr. Karen Treisman - Safe Hands Thinking Minds: Covid, Anxiety, Stress - Resources & Links http://www.safehandsthinkingminds.co.uk/covid-anxiety-stress-resources-links/ Useful resources to support children and adults around anxiety, worry, stress, and fears; including specific Covid issues.

The Cabin Fever Syndrome: Managing the Coronavirus

https://www.linkedin.com/pulse/cabin-fever-syndrome-managing-coronavirus-manfred-kets-devries/?trackingId=C4EXVG2Myng%2BxfoLLXSUNw%3D%3D

"Karl Jaspers, the German psychiatrist and philosopher, once wrote that "humans become aware of themselves in boundary situations." Given the present pandemic, the spatial and temporal restrictions placed on us will have an enormous effect on our psyche. Being restricted in the freedom of movement, plus having the perception that our limited time on earth is just ticking away, will have a massive psychological impact."

This is an interesting and practical article by Manfred Kets de Vries - Distinguished Clinical Professor of Leadership Development and Organizational Change, and Psychoanalyst. He describes why the following are so important. They are always helpful for well-being and not just in the virus situation.

- Maintain Social Contacts
- Avoid conflict
- Spend time outside
- Exercise
- Structure your day
- Maintain your normal eating patters
- Goal setting
- Be creative
- Altruistic activities
- Practice gratitude
- Start a diary
- Engage in self-reflection
- Visualize future activities

PART 5 - Update from a Residential Care Home for Young People in Portugal

Introduction This is a helpful reflection and learning piece on the management of the virus situation. I have had the pleasure to work with Livramento in Porto on the development of their therapeutic model since the beginning of 2019. The organization has the two key ingredients required for effective outcomes in its service to young people. Strong leadership and a clear model (though always evolving). These ingredients lead to a strong staff culture, which leads to a strong young person culture, which leads to good outcomes (Clough, et al., 2006). This finding is supported by Warner (1992) who found that positive outcomes were only correlated with leadership and clarity of purpose.

A culture such as this is already well-placed to respond to the situation we now have. There is a protective resilience. What stands out for me in this update is the thoughtfulness, the teamwork, adaptation and careful planning, and learning from the new situation. People in many places are doing the same kind of courageous work in a way they may never have imagined. A key point of learning for me in this Virus situation is that we do not need to just try and maintain the practices we had before, we need to improve and increase some of them. For example, increasing our points of contact.

What may have felt like a day in the pre virus situation can sometimes feel like a week now. It is not much use checking in with people on a weekly or fortnightly basis. So, as Maria has described, while we might be forced to be more distant in some ways, we can be closer in others. Probably, for all of us, the importance of meaningful connection has been highlighted. In work with young people who have suffered trauma and other adversities, it is vital.

Below is the update shared with me from Lar de Nossa Sr.^a do Livramento, a therapeutic residential service for girls, Porto, Portugal, by Maria João Cruz on behalf of the senior management team. We work on these things together, but it can also be helpful to write about and share. This piece helped me to see some things more clearly. Thank you very much for sharing.

Seeing the team forced to adapt to a new way of working, we also had to adapt some processes. At this moment we have two blocks of teams in rotation every 4 days that do not cross paths at any time. The team that enters, has a follow-up meeting that same day on what is happening and the particularities of the work that they are taking from the previous team. There is one member of the senior team that is fresh entering with the rest of the team and the remaining senior members are present on Skype.

- We see great advantages in promoting this regular moment of alignment, minimizing some difficulties in the information flow.
- We also didn't have this regularity of meetings with the staff before the pandemic. This
 makes me think that people may feel more supported in their task that refers to the
 general functioning of the house, common to every home, routines, promoting
 alignment.

Support for adults in our residential home is generally provided by the senior manager in the home on any day. However, the senior managers who are working from home give direct support to the educators (care workers) of whom they are responsible for in the usual line management way of work, either by video call or by regular phone call.

- This allows specifics of the girls to keep on being managed, and the senior team keeps tuned in with their needs.
- Supporting the educators on their task and ability to maintain a reflective, attuned
 presence, as we are working on a certain intensity that is not always favourable to
 reflective practice. (I think everyone feels that when they are at the house, as the young
 people are inside 24h a day and we are permanently managing things)

I felt the need to create a channel of communication with each girl. Not all of them have cell phones, at least not with sim cards. So, facetime Messenger, Skype, WhatsApp...

I realized that even being away for some time, some young people probably didn't feel me as close before as they feel I am now.

Giving support to the educators while they are working in Livramento is kind of demanding, and I felt for a couple of weeks that the internal consultancy process was not happening as before, and it was not going to. I was giving priority to the management and support to situations when it was possible for the educators and needed.

One day one of the educators called me when she was off duty. She felt the need to share in detail what happened the day before (when she was working). It turned out to be an especially important moment, where I had the opportunity to approach some of the issues that you and I had worked on, in our consultancy. She repeated several times how important this moment was and felt supported. I think we both felt relieved, as I was not having the opportunity to approach relevant issues. That moment revealed itself as the best circumstances possible, and I believe she felt the kind of support that we had before this all happened.

So, I shared this with the team and suggested that all of us started to do the same with everyone in the period that the staff are interrupting the work, and have better circumstances to talk about what happened when they were working, how they are managing things, and maybe even feel emotionally supported also. Being 'away' from work at home is not necessarily the easiest thing too.

We also increased the regularity of the senior team meetings: Which has been promoting alignment between all of us and the way we are all working with each group. I also think this improved the support we give to each other concerning the task and work.

Line management combined with the fact we strongly separated all the groups due to risks of contamination: I believe this raised some new issues, or at least they are more evident now, of

group identities, which were reflected on adult dynamics and identities too. A regularity of contact with families by the senior member was defined by our Director and is relevant,

- So that the monitoring remains consistent and we are also close to the way families are managing their anxieties.
- This also allows us to monitor the quality of family contact with our young people by "measuring the temperature of families".

Consultancy with you has been helpful, as I feel it is always created a context of reflection a possibility of discussion without rush, or pressure. I always feel that I got something useful out of it to the work. I also feel emotionally much supported, as it is a safe place to talk about feelings and how we are managing things.

I was going to write about time management, but that is an issue that I am still having difficulties to deal with. I feel, as I told you before, that days are extremely long, that I am always "on" and sometimes even when I am "off". I am trying to make better week plans, but have not succeeded yet, on making days shorter/normal. Making the structure of the day more predictable is challenging. I feel very tired because of that. It wouldn't be fair if I didn't say that at the same time, I feel driven/motivated.

I look back to what feels like months now in this situation and frequently remember you saying, "strong adult culture usually promotes strong young people culture". I strongly believe as I told you, that if the young people are managing things as they are it's largely because of that.

Not saying it hasn't been very challenging, but if in January someone had said: "Well this is going to happen, and you guys are going into a 'lockdown' with 35 young people." I would have imagined a much worse scenario.

Maria João Cruz, April, 2020

References

Clough, R., Bullock, R. and Ward, A. (2006) What Works in Residential Child Care, London: NCERCC and National Children's Bureau

Warner Report (1992) Choosing with Care - The Report of the Committee of Inquiry into the Selection, Development and Management of Staff in Children's Homes, HMSO

PART 4 - This is an insightful observation by Joana Cerdeira, Psicóloga, Supervisora em Acolhimento Residencial, Formadora, Porto Area, Portugal (13th April)

Some children who are usually very disorganized appear to have settled quite well. Almost as if physical containment that arises as a result of the pandemic, provides safety.

I think this is true and have heard similar from others. In some ways the challenging changes also have benefits to some children and young people. For example,

- Less change to deal with in daily life
- School at home
- In some cases, care workers around for longer periods
- More consistency and predictability
- The narrower field of daily life may be especially 'containing' for children whose needs relate to early provision.

Thank you Joana

PART 3 - This is one of the most pertinent observations i have experienced in relation to the management of the Covid-19 situation. It was made to me by Rui Lopes, Director of a Residential Service for Young People who have suffered trauma and other adversities.

It has never been so evident how the emotional state of the adults affects the state of the young people. When an adult is anxious, nervous, and sad, kids are reacting to that – mirroring the state of mind and the emotional states. I have never seen that so strongly before. (2020 04 15)

About a week later i was listening to Bruce Perry (2020) say the same thing,

You need to remember that children are little barometers of your emotions. So, they literally will feel what your feeling. So, if you are really anxious, they are going to start feeling anxious too.

And ...

The first thing you need to keep in mind when you talk with your children is that as long as you are able to stay a little bit regulated, if you are calm and you can talk about it in a sensible way, it's going to calm them down. The key to that is that if they are not calm, they are not going to hear what you say. They are not really going to process it.

This point about non-anxious presence reminded me of the work of leadership consultant, family therapist, and Rabbi, Edwin. H. Friedman's (1999, p.182) and his claim that,

Leadership begins with the management of one's own health" and "...a leader functions as the immune system of the institution or organization he or she 'heads'.

Friedman argued that an immune system's major purpose is to preserve the integrity of the organism and not only fighting off threats. It is fascinating how he wrote over 20 years ago about viruses in a literal and metaphorical sense. He explained how a virus or 'parasite' impacts on cells, individuals, families, organizations and societies. He claimed that the processes from cell to societal levels were universal and could only be dealt with at all levels by a healthy sense of self-differentiation. He also made the important point that a person can be a leader in situation, from families to presidents. So, the first vital thing we need to do is to manage our

self and do everything possible to be in a healthy state of mind and body. To be a calming self-differentiated presence.

Such a leader is able to be present in the midst of emotional turmoil, actively relating to key people while calmly maintaining a sense of his own direction. With this capacity, he or she can affect the whole system of relationships and reduce the level of anxiety in the organization network.

"Consultation for leaders (parents and presidents) can be viewed as biofeedback rather than a dispensing of cures. Successful medical biofeedback requires an information source. The person who is trying to regulate (become the leader of) his or her own body must have a way of knowing to what extent he or she is being successful. If, instead of anxiously providing data or offering advice and new techniques, a consultant can provide the kind of inquisitive, non-anxious climate that helps clients view the effects of their own thinking, those clients, whether parents or presidents, can often begin to develop more objectivity and self-regulation with regard to that relationship system." (Friedman, p.127)

References

Dr. Bruce Perry (2020) *The Impact CoVid19 has on Children, Families, and our Community,* https://www.youtube.com/watch?v=KLzti-KwNlc&t=31s

Friedman, E.H. (1999) A Failure of Nerve: Leadership in the Age of the Quick Fix, New York: Church Publishing, Inc.

PART 2 – Darlene Lyons who manages a children's residential care home in Northern Ireland asked me about this by email. She was wondering about the parallels of toxicity in the present virus situation for us as adults and the children's histories. This is my response.

The analogy of a toxic stress environment - that we are in as adults, and the similarity with the children's histories - makes sense. Adults can focus on the Virus news and social media, etc. It can be alarming for people who get hooked into it. The kids may not be so bothered. They have faced far greater threats. I expect they will be most bothered if the adults around them seem anxious. Therefore, the containment of anxiety is very important.

As well as anxiety being contagious, excessive anxiety for a prolonged period also contributes to the possibility of poor physical as well as mental health. A lot can fall on the shoulders of leaders during these times.

As well as all the planning and extra work, leaders have to do what they can to contain anxiety and manage their own. Wilfred Bion the British Psychoanalyst, who was involved in the rehabilitation of WW2 soldiers returning from battle, said that whether a soldier developed panic or not, depended not on the circumstances of the battle, but the quality of leadership. Reducing the comings and goings at work is important. If people can manage longer periods at work, with also longer periods away that may work well. In an extreme situation where there is

a significant risk of infection, staff have moved into a home to quarantine with the young people for up to 14 days.

Another organization I work with has 'care workers' in for a week and out for 2. Senior managers are doing 2 weeks in and 4 weeks out, and everyone is keeping in touch when they are not in, by Skype calls, etc. I have used the word out instead of off, as some work can still be done when not in the home. Even joining Skype/zoom calls with groups of kids. I think in your role, phone/Skype/Zoom calls to people in your team, done in a regular planned way will help them. We need to establish routines that are new as well as preserve as much of the ordinary routine as possible.

If I was working in a home, I would facilitate regular meetings, so adults and young people can talk about how they feel. I would suggest that people might write something about their day-to-day experience. Writing about difficult things has been shown to improve mental and physical health. The observation that you made in your email is excellent I think - If we can maintain a perspective of observing as well as being in it - that will be very helpful.

Another home I know of has adopted the view that we can learn from this experience and share with others, either now or in the future. It might help to create a structure with questions, such as - What is bad about this situation? What is good about it? (some young people have found positives:)), What kind of things help? What doesn't help? etc.

One of the problems will be turning back to normality at the end. We should try to maintain boundaries as well as possible. For example, some children may be getting more attention than normal and if reasonable boundaries and expectations are not maintained - the process of separation at the end could be very difficult. To caricature it, 'just because mum and dad are at home all day, doesn't mean we can spend all day playing together'. Establishing working from home routines are important for children and adults.

I am in touch with and working with people and organizations in different countries, who are striving to manage this extremely situation. Would be great if you have any feedback to share, about this and your own experience. Hope you are keeping well and managing as well as possible in all this.

This next section was sent to me 2 weeks ago by another in charge of a care home, in a different country.

PART 1 - Managing Corona Virus in a Therapeutic Group Care Setting

A senior manager sent me this update about the situation in a residential care home. I have permission to share. I felt it is an excellent example of good practice and leadership. This thoughtful and receptive, steady and clear focus is exactly what is needed in these circumstances. I know that this kind of thing is happening in many places.

Please feel welcome to share examples, it can only help. Very best wishes and good luck to you in your endeavors during this hard time.

Update

The conversation with the kids today went better than i expected. I guess they are understanding what is going on in our country and around the world. We have been investing a lot in explaining things to them, trying to balance between keeping them informed but at the same time containing their fears and anxieties. Let's see how they will process this information about having to suspend their contacts with family members.

I am really proud of my team. People are being outstanding in their responsibility and their solidarity. I have care workers that volunteered to stay in the home if we need to close down for quarantine in case anyone tests positive for COVID-19.

So far and as far as we know we have no one infected. It's being really challenging for people to contain their own anxiety and have to contain kids' anxiety as well. Today in our team meeting we spent quite some time talking about us, about our concerns with our families, about our views on what is going on in the world. It was a very good moment. We also adjusted the kids' routines, schedules, chores; our anchor-points, carers' work schedules; etc.

Among other things, we added one moment in the morning and another one in the afternoon to meet with kids to talk about how the day is going, how they are feeling and to decide what activities we will do together. Kids are responding well. They asked quite a few questions this evening about the adults who work there. What about if the country goes into emergency state and people cannot go to work? Who stays with them if we have to shut down in quarantine? etc.

I guess what they were trying to say were two things. One, that they need to be reassured that there will be adults to take care of them. Another, that they recognise our presence, our efforts to care for them continuously, our delivery to the cause.