Rapid Response:
Medical students' perspective on the need for practical solutions when managing mental health throughout a pandemic and beyond

I thank Greenberg et al. for their timely article and advice when it comes to 'managing mental health challenges faced by healthcare workers during covid-19 pandemic' [1]. As fourth year medical students, it is difficult to know what the best way to help is. Should we be providing support in the community? For example, by offering childcare to key workers or carrying out food shops for the elderly. Alternatively, do we take on a more clinical role that utilises our training?

My colleagues and I have opted to undertake training to work as bank healthcare assistants, and will be ready to start work within the next week (early April). Like many other medical students around the country, we are keen to play an active role in this national crisis. However, we must be mindful that moral injury is a real and potential threat. Resources are already overstretched, and we may need to accept not being able to give the high level of care that we would like to. As well as being exposed to potentially traumatic and upsetting cases in the hospital, healthcare workers will be experiencing increased responsibility, including potential cross-contamination between home and hospital. All measures to reduce this should be taken [2], however this is an example of the ways in which the emotional toll of working on the front line of a pandemic can come at us from all angles.

A spotlight on remote Schwartz rounds is a fantastic suggestion that could be vital to creating a support network for NHS workers [3]. Executing practical ways of putting these resources in place and incorporating them into ward, hospital or NHS routines is the next step, and it is important not to stall at this point. It may be particularly impactful to come at this from two levels, locally and nationally. Locally, by assigning clinicians within the hospital to conduct Schwartz rounds for staff on particular wards, and nationally, by embracing platforms such as the BMJ as a way of connecting healthcare workers. This national support network could be bolstered by featuring more articles on this important topic, as well as providing an online forum which allows professionals to find others with whom to conduct their regular remote Schwartz rounds. This may be beneficial to those who do not want to talk about potential emotional experiences with colleagues, and may also provide a greater diversity of advice or 'Schwartz round variants' for NHS workers to engage with.

This is an uncertain time for everyone, and it is extraordinary as medical students to have our training disrupted due to a pandemic. Although starting clinical work feels like jumping in at the deep end, we hope innovations and support networks created during this pandemic will help us in this sudden transition. The mental health of NHS workers in this difficult time must be everyone's priority, and it is

vital that we act with urgency to put practical solutions in place. Long term, these solutions could also transform the NHS for the better.

1. Greenberg N, Docherty M, Gnanapragasam S, Wessely S. Managing mental health challenges faced by healthcare workers during covid-19 pandemic. BMJ. 2020;368:m1211. doi: 10.1136/bmj.m1211
2. COVID-19: Guidance for infection prevention and control in healthcare settings. GOV.UK; 2020 Mar p. 20–1. Report No.: 1.
3. Flanagan E, Chadwick R, Goodrich J, Ford C, Wickens R. Reflec of Schwartz Rounds. J Interprof Care 2020;34:140-2. doi: 10.1080/13561820.2019.1636008

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