Keep Calm

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Why did we do it?

- Mentorship groups
- Safemed
- Resilience programmes could be of benefit
- UHS can be a stressful place to work
- Working with doctors in difficulty
- Work pattern challenges
Keep Calm

• to acknowledge the stresses of clinical work
• to recognise the impact clinician stress has on patients and colleagues
• to look at quick and simple ways to manage our own stress
• to set ourselves goals to take care of ourselves
What happens in Keep Calm?

• Awareness – all about stress
• Moan zone
• 5 part check up and new skills
• Action plan – set goals and change practice
Five systems: model for self care

- Environment
- Body
- Mind
- Spirit
- Behaviour
Mindful or Mind Full

Mind Full, or Mindful?
Evaluation

• Winchester University
• 56 participants attended workshops
• 22 FY1s completed an online survey
• 26 submitted written reflections
• 15 participated in two focus groups
Main stressors for respondents

- Systems/ processes at work
- Lack of experience
- Workload
- Lack of knowledge
- Lack of support
- Dealing with work colleagues
- Poor team/ department leadership
- Circumstances at home
- Dealing with patients
- % of responses
Ratings of statements

As a result of the workshop I ...

1. I would like more teaching on this.
2. I continue to find managing stress a challenge.
3. I have integrated new ways to manage stress.
4. I am more aware of ways to manage stress.
5. I am better able to recognise stress in others.
6. I am better able to recognise stress in myself.

[Graph showing ratings of statements with strongly disagree, disagree, neutral, agree, and strongly agree categories.]
Outcomes

• 73% of respondents had not previously received stress management training.

• 80% of respondents thought that the workshop was relevant; 70% believed it was ‘useful’ or ‘somewhat useful.’

• The majority of respondents reported that they agreed positively that the programme of education had improved awareness, recognition and management of stress.
Reflections
Recommendations

• Workshops should run as close to the start of the FY1 as possible

• Working with facilitators who are not in an educational/clinical supervisory relationship with trainees is more likely to allow the FY1s to speak openly

• Hearing senior colleagues’ experiences was reassuring and sharing their own was useful but this should be in a constructive way

• Reinforcement of their awareness of well-being in the workplace and adopting positive, practical strategies to observe it should be emphasised
Next steps

• Roll out to all Foundation doctors
• Train the trainers in August 2014 and another in February 2015
• Faculty
• Handbook
• O&G/Paediatric trainees at ST1
• Overhaul of content
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