

enhance

Wellbeing Resource Guide





Wellbeing is personal and subjective but also universally relevant. It is a concept that is influenced by individual, cultural and systemic factors: people intuitively understand the value of wellbeing.

- ▶ The [NHS People Plan](#) prioritises wellbeing as part of “looking after our people – with quality health and wellbeing support for everyone”:

“Our NHS People Promise”

- ▶ The NHS achieves extraordinary things for patients, but safety and health and wellbeing matter just as much for our people. If we don’t look after ourselves, and each other, we cannot deliver safe, high quality care. COVID-19 has spurred the NHS on to put much greater focus on this, which we must continue and build on.

The pandemic has already had a significant physical, mental and psychological impact on our people – and this will continue for some time to come. Many people are tired and in need of rest and respite. Evidence tells us that those in caring roles often wait until they are very unwell before raising their hand. So we must all encourage each other to seek help – and seek it as soon as it is needed. Leaders, teams and employers must keep offering people support to stay well at work, and keep offering it consistently, across teams, organisations and sectors.

More information for organisations is summarised below.



Wellbeing can be considered within 8 broad dimensions:



The importance of wellbeing for clinicians across their personal and professional lives needs to be instilled and nurtured from the beginning and throughout their careers. Healthcare professionals face specific challenges which arise from their responsibility for the health and wellbeing of their patients – this can result in a negative impact on self-care.² To sustain high quality service, care of oneself and each other in the system must be integrated. Given the breadth and uniqueness of experience, how can we facilitate the promotion of wellbeing?

A diverse multi-professional group was established to explore these challenges. The group met regularly over the course of a year, sharing their own experiences and expertise as well as inviting colleagues from clinical and wider backgrounds to share their innovative work and development in the provision of wellbeing to clinicians. This document and the supporting resources summarise some of the group's key recommendations. However, the main message from this group is:

Wellbeing is a complex phenomenon; the design and delivery of any services to meet this need should be inclusive, proactive and empowering.

- ▶ Learners and educators need to have ready access to resources and a knowledge of what is available to them to ensure that when they wish to engage, they are able to do so easily.



Why is wellbeing a cross cutting theme in the enhance programme?

Wellbeing awareness must be considered as integral to the programme rather than considered as a separate entity, as it directly impacts on patient care.

Principles

Inclusive	Proactive	Empowering
<p>Support ‘whole person’ care – including healthcare professionals. Healthcare professionals often neglect their own health despite caring well for their patients. Furthermore, ‘Being a healthcare professional poses particular risks to health, as well as enhancing wellbeing in many respects.’ⁱⁱⁱ</p>	<p>Psychological problems are more common early on in doctors’ training^{iv}. Enhance has been designed to be delivered from the beginning of postgraduate training - an ideal time to incorporate self-care and health promotion both for the communities’ those learners serve and for themselves.</p>	<p>Clinicians are increasingly working as advocates, empowering for societal change - one outcome of this programme is to recognise and tackle the challenge of healthcare professionals’ ill health on the health service.^v</p>

What is our collective aim?

To enable healthcare professionals to maintain wellbeing and self-care of themselves and their colleagues whilst recognising that supporting wellbeing is unique to everyone. The offer is not prescriptive and embraces the fluid nature of facilitating wellbeing. As with other cross-cutting themes, the programme will continue to evolve with feedback from learners and educators.



What are the challenges we face?

- ▶ Instilling the importance of wellbeing as integral to sustaining healthcare professionals throughout their career
- ▶ Making space for wellbeing conversations at the right time and place
- ▶ Championing genuine promotion of wellbeing and self-care across the system as everybody's challenge
- ▶ Overcoming preconceptions – 'I won't need this'
- ▶ Allaying and not propagating misconceptions – "a waste of time", "weakness"
- ▶ Creating psychological safety across multi-professional teams
- ▶ Ensuring supervisor capacity and skill to facilitate wellbeing interventions for learners and educators.





Trailblazers have a unique opportunity to integrate wellbeing approaches within their programmes, due to:

1

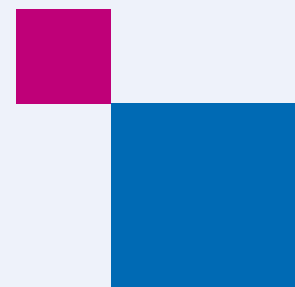
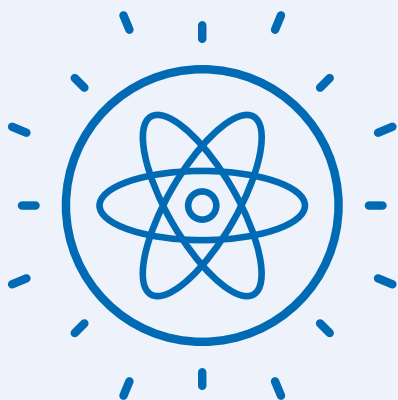
Defined, small groups of learners and educators who can work to promote cultural change and support their own and each other's wellbeing.

2

Trailblazer structure, which gives an excellent opportunity to gain structured feedback so that the offer can be developed and scaled up.

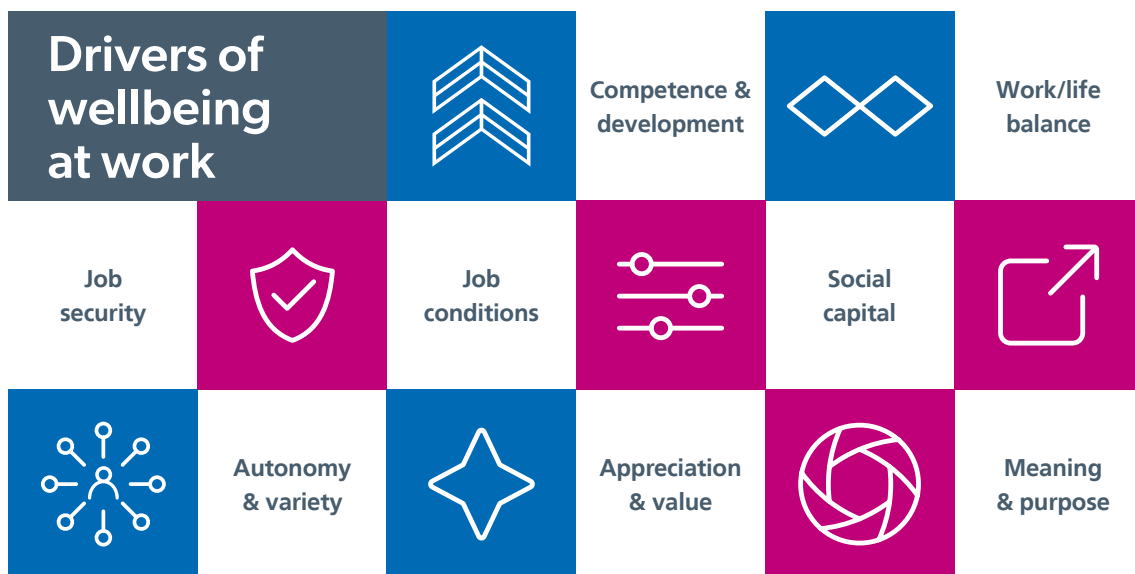
3

Co-mentoring relationship – clinicians as advocates, empowering learners and educators to implement societal change.





What can we do practically to improve wellbeing?



Induction

Recommendations:

- ▶ Deliver a well-structured session ensuring the approach to wellbeing is integrated, accessible and proactive, not a healthcare-led activity, available at point of need
- ▶ Raise awareness of the wellbeing section of the enhance website and learning hub. Discuss which resources might be most useful for learners to explore
- ▶ Highlight the existence and importance of HEE and employing organisation commitments to improve quality of working life
- ▶ Invite presentations from professional support and wellbeing units or other wellbeing leads to highlight availability of resources, including a positive user story.



Initiate the following:

- ▶ [Wellbeing Champion](#)
 - ▶ People at all levels of the NHS who promote, identify, and signpost ways to support the wellbeing of their colleagues as part of the [People plan](#) commitment
- ▶ [Peer to Peer support](#)
 - ▶ Set up regular meetings where colleagues can speak to one another in a supported environment. They need to have an appropriate facilitator and supervision
- ▶ [Facilitate Balint groups](#)
- ▶ NHS England
 - ▶ [Wellbeing conversations course](#) – a half day online course with resources offered to all trainers and educators
 - ▶ [REACT mental health conversations](#) – to enable managers to support staff through compassionate, caring conversations about mental health and emotional wellbeing. (Please check for local delivery within your NHS Networks)
- ▶ Mental health support:
 - ▶ [Mental health first aid-type courses](#)
 - ▶ [Suicide prevention and postvention training](#)
 - ▶ [Zero suicide alliance training modules](#)
 - ▶ [Psychological first aid](#)

These can be offered to educators to ensure they are equipped to manage resultant concerns.

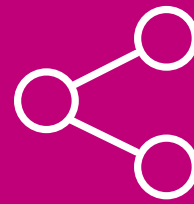


What can you do to ensure wellbeing is incorporated in the programme day to day?

- ▶ Encourage all faculty and learners to make time to engage with colleagues on a personal level. Pose a daily genuine question, for example;
 - ▶ How are you today?
 - ▶ What makes you say that?
- ▶ Multi-professional team culture – encourage the whole multi-disciplinary and professional team to engage. For example, incorporate wellbeing into theatres within the whole team brief at the start of the list. This brief is not only a clinical safety net but a psychological and physical one for staff. Using prompts such as ‘how full is my bucket,’ can enable the team to support each other effectively. When employed consistently within a group it will allow patterns to be identified, needs recognised, and more structured support put into place.

What can learners do?

- ▶ Be encouraged to advocate for one another – potentially becoming wellbeing champions or mental health first aiders themselves
- ▶ Arrange culturally inclusive social events – for example rotating social events where different people arrange the activity each time which results in a range of diverse experiences
- ▶ Champion wellbeing in the workplace and promote a cultural shift towards compassionate leadership within the NHS.



What can educators do?

- ▶ Ensure wellbeing champions are trained, developed and accessible in organisations
- ▶ Facilitate peer to peer support to create an environment of psychological safety
- ▶ Ensure equal access for all learners to support and resources. Provide a forum and a voice with a “you said, we did” approach to acting on feedback
- ▶ Hold leadership and organisations to account – any initiatives such as Champions also require executive or Board-level attention.

What can the system do?

The People Plan sets out a number of important interventions for NHS organisations and employers:

- ▶ **Health and wellbeing conversations:** From September 2020, line managers should discuss equality, diversity and inclusion as part of the health and wellbeing conversations, to empower people to reflect on their lived experience, support them to become better informed on the issues, and determine what they and their teams can do to make further progress



- ▶ **All staff supported to get to work:** NHS organisations should continue to give their people free car parking at their place of work for the duration of the pandemic. Organisations should also support staff to use other modes of transport, and hospitals should identify a cycle-to-work lead so that more staff can make use of this option
- ▶ **Safe spaces for staff to rest and recuperate:** Employers should make sure that staff have safe spaces to manage and process the physical and psychological demands of the work, on their own or with colleagues
- ▶ **Psychological support and treatment:** Employers should ensure that all staff have access to psychological support. NHS England will continue to provide and evaluate the national health and wellbeing programme developed throughout the COVID-19 response. NHS England will also pilot an approach to improving staff mental health by establishing resilience hubs working in partnership with Occupational Health programmes to undertake proactive outreach and assessment, and coordinate referrals to appropriate treatment and support for a range of needs
- ▶ **Support for people through sickness:** Employers should identify and proactively support staff when they go off sick and support their return to work. NHS England will pilot improved occupational health support, in line with the [SEQOHS](#). Working in selected pilot areas, in partnership with the resilience hub and local mental health services, occupational health services will provide a wider wellbeing offer, to ensure that staff are supported to stay well and in work
- ▶ **Physically healthy work environments:** Employers should ensure that workplaces offer opportunities to be physically active and that staff are able to access physical activity throughout their working day – especially where their roles are more sedentary
- ▶ **Support to switch off from work:** Employers must make sure line managers and teams actively encourage wellbeing to decrease work-related stress and burnout. To do this, they must ensure staff are expected and able to take breaks, manage their work demands together and take regular time away from the workplace. Leaders should role model this behaviour.



How can we measure wellbeing?

Traditional assessment of organisational wellbeing is based on quantitative data such as sickness rates, attrition, and retention. These metrics miss subjective perception, and the challenges of intersectionality and multisystemic facets of wellness.

Attempts at measuring doctor in training satisfaction have included wellbeing assessments such as in this publication: [Measuring the working experience of doctors in training \(rcpjournals.org\)](https://www.rcpjournals.org)

It is time to flip the responsibility for wellbeing to the following:

- ▶ A move from individual responsibility to collective belonging
- ▶ A recognition that each person will choose to measure their wellbeing differently
- ▶ Supporting supervisors so that they can in turn support their trainees
- ▶ Sharing good practice within teams, groups and organisations across different regions
- ▶ Ensuring organisations address challenges through capturing new metrics such as leave planning, ability to take breaks, managing sleep and access to 24-hour hot food – with Board level engagement
- ▶ Encouraging learners to provide feedback within national surveys such as HEE's National Education and Training Survey ([NETS](#)) and for doctors in training, the GMC's [National Training Survey](#).

The NHS health and wellbeing framework is an interactive document that sets out clear actionable steps, and provides guidance on how organisations can understand what good health and wellbeing looks like and what can be achieved. The framework can be found [here](#).

We hope that the enhance programme will have a 3 fold impact. To raise awareness of the critical importance of wellbeing, stimulate interest in its measurement and inspire innovation and improvement in this key theme of interest for all healthcare professionals.



Appendix 1 – Acknowledgements

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i <https://whatworkswellbeing.org/about-wellbeing/what-is-wellbeing/#:~:text=Wellbeing%20is%20personal%20and%20subjective,health%2C%20education%20and%20so%20on>

ii <https://www.wisconsin.edu/ohrwd/well-being/>

iii Doctors' health and wellbeing | The BMJ Last accessed 17/3/22

iv Roussow L. Burnout in doctors. *S Afr Med J* 2012;102:11-13

v Shanafelt TD, Bradley KA, Wipf JE, Back AL. Burnout and self-reported patient care in an internal medicine residency program. *Ann Intern Med* 2002;136:358-67

vi <https://haptivate.co.uk/>