**Leading with Influence and Resilience Training Workshops**

**Pan-London Core Anaesthetic and ACCS (all stem) Trainees**

**What are you trying to improve and why?**

In recognition of low morale and dissatisfaction at work which was impacting upon trainees' work/life balance and occasionally on educational attainment, the London Academy of Anaesthesia commissioned expert training in personal resilience and influencing skills, to be delivered as free workshops available to any Core or ACCS trainee in London, in Spring 2017.

The frequent rotations and high intensity acute work particular to ACCS and Anaesthetics training requires doctors with excellent communication skills, who can positively influence colleagues over short time periods to gain the maximum benefit from each placement. At a broader level, regular re-organisations in care delivery and educational pathways mean that today's doctors must also be equipped to effectively manage change and transition.

The term ‘resilience’ refers to the complex interrelationships between personal, organisational and social factors which allow an individual to thrive in their environment. Whilst a significant proportion of the pressures reported by junior doctors are outside their personal control, interventions which promote resilience techniques can help individuals to better cope with the stresses of working and training in the NHS. Personal resilience teaching therefore may benefit trainees, when combined with initiatives to address the systemic and organisational factors which prevent effective working practices.

The relevance of this to Junior Doctors' Morale comes from the NHS Constitution's 3rd Principle: 'Respect, dignity, compassion and care should be at the core of how patients and staff are treated - not only because that is the right thing to do - but because patient safety, experience and outcomes are all improved when staff are valued, empowered and supported'.

Health Education England's 2016 listening exercise on improving working conditions for Junior Doctors identified opportunities that fall broadly into three themes:

1. Being supported: for training, service provision and individual career aspirations
2. Feeling valued: by clinical and non-clinical staff
3. Having autonomy: through greater involvement in decisions relating to their working and personal lives

Health Education England collected this case example and we believe it addresses themes 2 & 3 above.

**Specific aims and objectives**

**What are you going to measure?**

- Trainee satisfaction immediately post-workshop
- Intention to use what has been learnt at t=0 and t= 3 months
- Barriers to using what has been learnt at t=3 months
- Improved ability to cope with work and life stressors

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<tr>
<th>Process</th>
<th>What did you do? How did you do it? How were junior doctors involved? How did you measure it?</th>
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<td>An expert faculty was enlisted to provide a series of workshops aimed at improving personal resilience, and influencing skills. The trainers were identified based on previous workshop delivery with high level NHS Trust leadership, with excellent feedback.</td>
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<td>During delivery of this session to the first cohort of anaesthetic and ACCS trainees, a Medical Education Fellow was tasked with improving the applicability of the content for the medical trainee audience. This information, along with the participants’ feedback, was incorporated to an amended course structure, terminology and content, with the aim of improving its impact.</td>
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<td>A subsequent session was delivered, with improved participant engagement and feedback.</td>
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<th>Challenges</th>
<th>What challenges did you encounter and how did you overcome these? E.g. Financial/HR/junior doctors/management/other stakeholders</th>
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<td>Resilience workshops can be negatively perceived amongst clinicians, who may see such training as lacking recognition for the organisational and sociocultural factors which impair their ability to excel and thrive in their work. In considering this, discussions were held between the workshop and PGME faculty, leading to an agreement on a future re-naming of the training as ‘resourcefulness’ training rather than ‘resilience’.</td>
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<td>However, the workshops were well attended, and the post-course feedback reflected the great value gained from personal resilience techniques.</td>
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<th>Outcome, impact and learning</th>
<th>What has the result been – on an individual level for junior doctors and other staff? / on an organisational level?</th>
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<td>The course ensures that participants practice and walk away with the essential techniques they need to strengthen their resilience, expand their personal resourcefulness and discover new ways to influence others.</td>
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<td>Individual feedback from the course was highly positive, and well above the National Industry Standard Score on all four quantitative measures: quality of content, relevance of content, excellence of trainer, intention to apply in 0-6 months.</td>
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<td>Specifically, doctors reported that they generally don’t have access to ‘soft skills’ training such as resourcefulness and/or business skills, and that the skills acquired were of enormous value to their non-clinical working patterns, as well as at work.</td>
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Accompanying free text comments:

‘Absolutely excellent course, should be available to all trainees regardless of specialty’

‘Made everything relevant to us and applicable to everyday work’

‘I would recommend this course to all junior doctors – we do not get enough training in this area’.

The resilience workshop initiative was presented as part of Health Education England south London’s Trainee morale and wellbeing work stream at the National Association of Clinical Tutors’ meeting in January 2017. Feedback from this informed the instigation of routine ‘follow-up feedback’ from participants at 3 months post course, with the aim of better understanding the barriers and enablers to applying their learning in their clinical and home lives.

3 month follow-up feedback was gathered in May 2017, and will be used to further improve the applicability of content for the Medical audience. There was a 91% return rate on this, which is therefore representative. A summary of the feedback is presented below.
Have the techniques you learnt on the course been of benefit in your working and/or home life?

- Not beneficial at all
- Slightly beneficial
- Really beneficial
- Extremely beneficial

Which aspects of the course stand out as the most useful to your practice, 3 months on?

- Saying No
- Communication styles
- Proposing ideas...
- Stating your expectations
- Strategies to reduce the...
- Raising your profile
- Stress triggers and...
- Developing your resilience...
- Developing your emotions...

Have there been any barriers to implementing what you learnt in your working life?

- Other higher priorities
- Being too busy
- Lack of managerial...
- The course was not relevant...
The 3 month feedback revealed that 52% of attendees found the techniques learnt really or extremely beneficial 3 months on. The most useful aspects were found to be communication skills: saying 'no', stating expectations and styles practice. The major barrier to implementing what was taught was other higher priorities, though business and lack of senior clinical or managerial support was also reported. 90% of delegates would recommend the course to colleagues.

**Next-steps & sustainability**

**What are the next steps (if any)? How measures are in place to ensure that these changes are sustainable?**

We believe that there is value in expanding the availability of personal resilience and resourcefulness techniques training to the wider medical and non-clinical workforce.

This will be most effective when combined with interventions to address organisational and social factors which impact upon an individual’s resilience, but there is clearly value in supporting trainees with their own coping strategies, to promote a happy and health workforce.

**Further information**

**Who can be contacted for further information?**

**Title, email and telephone number**

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