

2017-21 EVALUATION SUMMARY OF WELLBEING AT WORK





EXECUTIVE SUMMARY

Doctors are facing unprecedented pressure and mental strain due to surging patient numbers and increased levels of disruption and uncertainty as we face a global pandemic. This is not a new issue for the medical profession but COVID-19 has certainly exacerbated the problem. The 2013 *BeyondBlue¹* National Mental Health Survey of Doctors and Medical Students, revealed substantially higher rates of psychological distress and suicidal thoughts amongst medical practitioners than the Australian population. It has never been more important to equip doctors with the right skills to care for their personal wellbeing so they can take better care of the health of their patients.

First-year interns, at the start of their careers, are also particularly vulnerable as they are experiencing significant change. They experience complex, compounding challenges that places their mental health at high risk. They face many pressures such as entering the workforce for the first time, increased responsibilities, getting to know different colleagues and hospitals and moving away from their support systems including their families, social networks and a trusted GP. They are in new, unfamiliar towns, working long hours and treating patients with conditions they have only ever read about during their studies. They may also encounter bullying and harassment as shown in the annual *Resident Hospital Health Check* (RHHC)survey. qld.ama.com.au/advocacy/resident-hospital-health-check

AMA Queensland and its Council of Doctors in Training collaborated with psychiatrist and Life Coach, Dr Ira van der Steenstraten to develop an Australian-first program to equip interns with the skills needed to survive and thrive in medicine. In October 2015, a pilot program called Resilience on the Run, was delivered to 20 interns at the Rockhampton Base Hospital. To enable one of very few evaluations of a workplace intervention delivered to interns within an Australian setting, a control group was established at Cairns Based Hospital². Shortly afterwards, the program was provided to 270 young doctors at a range of hospitals in the Metro South Hospital and Health Service. The program was so successful and positively received by interns and hospitals alike, the State Government funded AMA Queensland to further expand Resilience on the Run to all medical interns in public hospitals from 2017-19. In 2020, the program continued to evolve and respond to interns' needs changing name to become Wellbeing at Work. Queensland Health extended the funding for AMA Queensland to deliver Wellbeing at Work to all Queensland medical interns from 2020-21.

In addition to delivering *Wellbeing at Work*, AMA Queensland also fosters vital peer connections, provides resources and information to help doctors and raises awareness of the pressures facing the medical profession through advocacy and media engagement.

¹ beyondblue, National Mental Health Survey of Doctors and Medical Students. Melbourne, Victoria: beyondblue; Oct 2013. Available at: https://www.beyondblue.org.au/docs/default-source/research-project-files/bl1132-report---nmhdmss-full-report web

² Forbes, M., Byrom, L., van der Steenstraten, I., Markwell, A., Bretherton, H., Kay, M. (2019) Resilience on the Run – an evaluation of a wellbeing program for medical interns. Internal Medicine Journal, RACP.



Initially with the *Resilience on the Run* from 2015-19 and then *Wellbeing at Work* from 2020-21, AMA Queensland has helped and supported 4,188 interns develop robust resilience, healthier coping, and a range of self-care skills, amongst others mindfulness so they can better look after themselves and be able to deliver exemplary care for Queenslanders. These programs have constructively impacted the lives of young doctors in Queensland

with an outstanding 90% of participants rating the programs as positive. Also, 83% of participants rated the experience as good or excellent, a clear testament to the strength of the content.

This report is an evaluation of the five-year initiative, including the findings of two surveys, completed by those who attended the program.

2020-21 RATING OF WELLBEING AT WORK

STAR RATING OUT OF 6

EXCELLENT	418 people	***
	2 people	会会会会会
	621 people	会会会会会
	5 people	会会会会
	178 people	会会会会
	3 people	会会会企
NEUTRAL	32 people	会会会
	0 people	★★ ①
	7 people	會會
	1 person	
NOT GOOD AT ALL	8 people	
	11 people	Blank Blank

It is noted that in 2020 the rating of *Wellbeing* at *Work* changed from 1-5 to 1-6 to really differentiate between the negative (1-3) and positive (4-6) comments. Overall in 2020-21, 95% of respondents rated the *Wellbeing at Work* program positively (scored between 4-6).

95% of respondents rated the Wellbeing at Work program positively (scored between 4-6)



AIMS AND OBJECTIVES

Presented by wellbeing expert and Life Coach Dr Ira van der Steenstraten, who is a trained psychiatrist, psychotherapist and systems therapist, the Resilience on the Run and the Wellbeing at Work programs focus on developing practical, evidence-based resilience techniques. These techniques are based on strategies developed in Positive Psychology, (Cognitive) Behavioural Techniques, Acceptance and Commitment, Compassion Focused and Trauma Informed Stress Management theories, including practical mindfulness strategies. There is a focus on managing interpersonal relationships, navigating difficult scenarios, identifying common and/or personal barriers for self-care and asking for help, and overcoming these barriers. A variety of resources, specifically designed for doctors are presented and discussed. It is well documented that a high level of wellbeing can enhance a person's leadership and improve their engagement with peers and other professionals, ultimately enhancing the quality of patient care.

Resilience on the Run and Wellbeing at Work target junior doctors as they are entering the medical workforce, a time when many can experience vulnerability. Psychiatry registrar Dr Malcom Forbes, who contributed to research for the Resilience on the Run project, explains, "The transition from university to workplace and an increase in professional responsibilities is inherently challenging. The reality of being personally responsible for the lives of patients can induce stress and burnout. Building the resilience of interns will allow them to cope with the stress of internship, resulting in healthier doctors and healthier patients."

PROGRAM FORMAT AND DELIVERY MODE

The program is delivered in-person via 2×90 -minute workshops with a week or two between each session to allow for practicing of strategies that were covered in the first session. Some groups requested 3×90 -minute sessions or a single three-hour session that was tailored to suit their hospital's needs, and the needs of their interns. In 2020, some sessions were delivered via videoconference due to the pandemic. Topics included:

- various self-care strategies, such as mindfulness and how it can be included in the working environment and improve well-being and resilience for doctors in training;
- communication techniques for more effective engagement with others;
- strategies for identifying and addressing Burnout and Compassion Fatigue;
- skills for managing challenging scenarios in the workplace e.g. caring for the dying patient or dealing with adverse feedback from a supervisor;
- overcoming common and/or personal barriers to self-care;
- practical self-care strategies; and
- practical tips on asking and getting help.

AMA Queensland doctors in training members introduce the workshops, immediately engaging attendees with peer-to-peer communication and connection. The direct feedback at the end of each session helps shaping future sessions.

ATTENDANCE

There were 3,989 interns who attended 137 *Resilience on the Run* and *Wellbeing at Work* workshops from July 2017 to December 2021, held at various hospitals across the state.

Hospitals nominated dates and times to stage the program with most including the Resilience on the Run and Wellbeing at Work sessions into regular lunchtime teaching schedules. High attendance and participation occurred when the hospital's Medical Education Unit (MEU) was engaged and assisted in ensuring protected teaching time when young doctors were freed up on the wards and supported to take part. From 2020 onwards, lunch was provided to enable interns to save time and come to the teaching directly from the ward.

Attendance lists were sent to the hospitals and, in most cases, these were completed with the names of doctors who took part. In cases where privacy was an issue, hospitals provided numbers of attendees instead of names. Roster changes. leave arrangements, ward commitments and other issues affected attendance for some individuals. During COVID in 2020, there were higher attendances in some sessions offering videoconferencing options. In some hospitals, some senior doctors also attended these sessions.

Due to the sharing of personal experiences, external parties including non-medical professionals were discouraged from attending the workshops as program feedback had identified this to discourage interns from sharing their experiences. The exception to this was MEU staff. Their attendance encouraged interns to view MEU staff as accessible and helpful but also

enabled MEU personnel to hear first-hand of the struggles experienced by young doctors. This helped create an environment conducive to sharing individual experiences and insecurities. During the course of the program, senior doctors, especially those in Medical Administration and Directors of Clinical Training have been encouraged to attend and share personal experiences. This allowed for positive role modelling and feeling of support by seniors.

TABLE 1: NUMBER OF ATTENDEES AT EITHER SESSION 1 OR SESSION 2 OF *RESILIENCE ON THE RUN* OR *WELLBEING AT WORK* BY HOSPITAL

Hospital	2017 attendees	2018 attendees	2019 attendees	2020 attendees	2021 attendees
Bundaberg	14	14	33	24	21
Caboolture	19	11	17	23	32
Cairns	20	37	51	38	33
Gold Coast/ Robina	92	93	109	161	146
Hervey Bay	13	6	12	17	35
lpswich	35	77	49	56	60
Logan	40	19	47	43	62
Mackay Base	33	35	40	24	49
Mater	11	18	15	18	23
Mt Isa	15	13	12	17	23
PA	90	70	110	99	62
QEII	0	0	0	20	23
Redcliffe	22	17	30	29	40
Redland	8	23	23	24	30
Rockhampton Base	34	37	29	51	28
RBWH	30	94	62	63	30
Sunshine Coast/ Nambour	54	83	43	0	0
Prince Charles	19	16	2	0	7
Toowoomba	39	49	61	67	88
Townsville	45	78	56	96	103
TOTAL	633	790	801	870	895

SURVEY FORMS

Appendix A includes a copy of the survey forms distributed to the MEUs prior to each session for inclusion in the workshops. The survey was updated in 2018-19 and 2020-21 to include additional questions. Some hospitals used their own survey and evaluation forms.

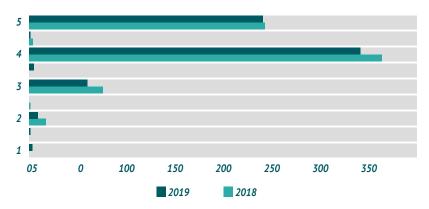


EVALUATION OF SURVEY FORMS

QUESTION 1

Of the 2018-19 survey asked: "How do you rate this session of *Resilience on the Run?*" Rating was 1-5, where 1 = not good at all and 5 = excellent. This question was not included in the 2017 survey. The following chart summarises responses received for 2018 and 2019:

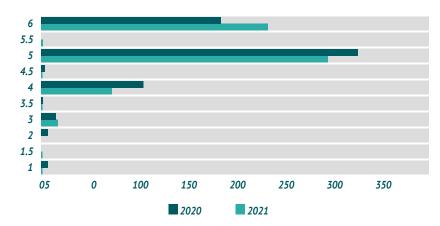
RATING OF RESILIENCE ON THE RUN SESSIONS (1-5, WHERE 1 = NOT GOOD, 5 = EXCELLENT)



A total 85% or 1,195 of the 1,399 respondents from 2018 and 2019 rated *Resilience on the Run* between 4 and 5 out of 5 (very) good. A total of 141 or 10% rated the sessions either 3 or 3.5 (neutral), and 27 of the 1,399 (1.9%) gave the session a score of 2 or 2.5 (negative).

The following chart summaries responses received for 2020 and 2021 as the scale was revised as follows: "How do you rate this session of *Wellbeing at Work*". Rating was 1-6 where 1 = not good at all, 2 = not good, 3 = neutral/bad, 4 = neutral/good, 5 = good and 6 = excellent.

RATING OF WELLBEING AT WORK SESSIONS (1-6, WHERE 1 = NOT GOOD AT ALL, 6 = EXCELLENT)



A total of 81% or 1,041 of the 1,286 respondents from 2020 and 2021 rated *Wellbeing at Work* between 5 and 6 out of 6. A total of 95% of respondents rated the program as positive (score of 4-6).

A total of 183 or 14% rated the sessions either a 4 or 4.5 out of 6, 35 or 2.7% gave the session a score of 3 or 3.5. Seven respondents gave the session a score of 2 out of 6.

How likely are you to recommend this program to your colleagues?

	2020	2021
Extremely likely	153 (23.3%)	192 (30.6%)
Likely	365 (55.5%)	357 (56.8%)
Neutral	113 (17.2%)	68 (10.8%)
Unlikely	15 (2.3%)	4 (0.64%)
Extremely unlikely	6 (0.9%)	3 (0.48%)
Nil	6 (0.9%)	4 (0.64%)
TOTAL	658	628

This question was introduced in the 2020-21 survey. The results indicate that 79% of respondents in 2020 and 87.4% of respondents in 2021 were either likely or extremely likely to recommend the *Wellbeing at*

Work program to their colleagues. Therefore, there has been a significant increase in the likelihood of recommending the program in 2021.

QUESTION 3

Responses for 2020

	Nil	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
The content was relevant/useful	1	8	10	44	391	204
	(0.15%)	(1.2%)	(1.5%)	(6.7%)	(59.4%)	(31%)
Learning objectives were clearly met	4	7	8	74	376	189
	(0.6%)	(1.1%)	(1.2%)	(11.2%)	(57.1%)	(28.7%)
This session encouraged me to reflect upon my knowledge and skills	0	7 (1.1%)	6 (0.9%)	50 (7.6%)	362 (55%)	233 (35.4%)

Responses for 2021

	Nil	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
The content was relevant/useful	1	3	3	23	369	239
	(0.16%)	(0.47%)	(0.47%)	(3.6%)	(57.8%)	(37.5%)
Learning objectives were clearly met	1	3	3	41	346	241
	(0.16%)	(0.47%)	(0.47%)	(6.46%)	(54.49%)	(37.95%)
This session encouraged me to reflect upon my knowledge and skills	1	3	4	28	321	278
	(0.16%)	(0.47%)	(0.63%)	(4.41%)	(50.55%)	(43.78%)

Question 3 asked respondents whether the content was relevant/useful, whether learning objectives were clearly met, and whether the session encouraged the participant to reflect upon their knowledge and skills. This question was introduced in the 2020-21 survey.

In 2020, 90.4% of participants either agreed or strongly agreed that the content of the *Wellbeing at Work* session was relevant/useful. This figure increased to 95.3% in 2021.

Similarly, in 2020 85.8% of participants agreed or strongly agreed that the learning objectives for *Wellbeing at Work* were clearly met. This increased to 92.44% of participants in 2021.

In 2020, 90.4% of participants thought the session encouraged them to reflect upon their knowledge and skills. This figure again improved in 2021 with 94.33% of participants agreeing or strongly agreeing.



Responses for 2020

	Nil	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
The presenter engaged well with the audience	4	1	2	15	260	376
	(0.6%)	(0.15%)	(0.3%)	(2.3%)	(39.5%)	(57.1%)
The presenter created an open environment for learning and discussion	4	1	1	14	251	387
	(0.6%)	(0.15%)	(0.15%)	(2.1%)	(38.1%)	(58.8%)
The presenter was knowledgeable	6 (0.9%)	1 (90.15%)	0	9 (1.4%)	239 (36.3%)	403 (61.2%)

Responses for 2021

	Nil	Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
The presenter engaged well with the audience	1	2	1	9	182	440
	(0.16%)	(0.31%)	(0.16%)	(1.42%)	(28.66%)	(69.29%)
The presenter created an open environment for learning and discussion	1	2	1	8	185	437
	(0.16%)	(0.32%)	(0.16%)	(1.26%)	(29.18%)	(68.93%)
The presenter was knowledgeable	1 (0.16%)	2 (0.32%)	0	6 (0.95%)	183 (28.91%)	441 (69.67%)

Question 4 examined whether the presenter engaged well with the audience, created an open environment for learning and discussion and whether the presenter was knowledgeable. In 2020, 96.6% of participants thought the presenter engaged well with the audience and this rose to 97.95% in 2021. Similarly the majority of participants in both 2020 (96.9%) and 2021 (98.11%) thought the presenter created an open environment for learning and discussion. In 2020, 97.5% of participants thought the presenter was knowledgeable compared to 98.58% in 2021. There have been strong increases in the results between 2020 and 2021. The interns have

often commented on how important it is for such a program to have a presenter with clinical experience that understands their situation. This allows for a safer environment where they can share their experiences, insecurities, vulnerabilities and learn from each other, feeling peer support and enabling positive role modelling by seniors. The interns found it very reassuring to hear that their peers were going through similar situations and thoughts. This was often the first time they admitted to having these experiences, thoughts or feelings and it was very important for them these were normalised.

What were the three things you found most useful about the session/s you attended?

Putting mindfulness into practice in their current everyday life, peer-to-peer engagement and self-awareness were common responses to this question. The top ten responses from each year are detailed in the tables below. The sessions have evolved through implementing feedback received from interns. In response to the feedback, other resilience, wellbeing and self-care techniques than mindfulness

have been added to the program which is reflected in a broader distribution of what was found useful. The program has also become more interactive and focused on practical strategies. Lunch was provided from 2020 which greatly improved the concentration and engagement of interns and the interactivity of the sessions.

SUMMARY OF COMMON RESPONSES TO WHAT WERE THE THREE THINGS ATTENDEES FOUND MOST USEFUL ABOUT THE SESSIONS/S.

Responses	2017	2018	2019	2020	2021
Mindfulness	105	197	133	55	42
Self-care/wellbeing/self-reflection/self-awareness	21	145	89	176	178
Interactive/validation of feelings/sharing with colleagues/similar experiences	16	137	194	143	133
Recognising Compassion Fatigue and Burnout	17	62	158	65	48
Resources, where to get help, help is available	38	83	87	67	31
Meditation and breathing exercises	50	107	52	18	17
Practical skills and exercises	26	65	35	50	26
Communication techniques	5	37	32	17	10
Engaging and informative presenter	13	46	30	30	43
Food/lunch being provided	1	1	4	47	62

QUESTION 6

What is your main personal 'take away' from the session/s?

Common responses included the fact that mindfulness was a simple, quick and easy self-care measure. Others included the need to look after yourself and to be more self-aware. Some respondents specifically mentioned the need to notice compassion fatigue. There was

also mention of the usefulness of resources provided, knowing where to get help and to get your own GP. The most common responses over the five-year evaluation period are included below.

Responses	2017	2018	2019	2020	2021
Self-care/look after yourself	13	122	68	94	107
Mindfulness is quick easy and useful/breathing exercises/meditation	35	115	72	32	62
Be more self aware, practice self awareness	12	36	68	26	34
Being aware of compassion fatigue	0	40	22	26	11
Resources/where to get help/get a GP	4	22	38	27	29
Empathy and validation are important	2	16	14	20	31
How to deal with stressful situations	11	26	17	8	9

What do you think should be added to improve the session/s? and

QUESTION 8

What do you think was not useful and could be left out of the session/s?

Interns were most commonly seeking additional ways to practice mindfulness, meditation and breathing. However, this feedback was commonly provided after the first session, before interns attended the second session where extra practical exercises were provided. Other responses included access to the program's resources including PowerPoint presentations, handouts and a list of GPs who are willing to see doctors as patients. In response to these requests, a handout was included in the program containing the resources that were discussed during the program. Some respondents asked for more discussion and more real-life case studies. The duration of the sessions, 90 minutes rather than the usual 60-minute teaching sessions was often hard to attend for interns as they were required back on the ward or clinic after one hour. This resulted in some interns asking for shorter sessions. In contrast, however, more interns asked for longer or more frequent sessions. Both these requests proved to be problematic to facilitate.

Between 2018-19, four respondents rated the session either a 1 or 1.5 (0.29%) with feedback including:

- the program should be optional;
- some of the workshop material is repetitive; and
- ▶ the program is too long.



Low responses were found to be usually a sign of a personal frustrations towards systemic issues as voiced on the feedback forms or in person during the sessions. Often the MEU were aware of interns that were struggling and were able to follow up accordingly. In cases where MEUs were present and the intern identified, these issues could be discussed in more depth outside of the sessions.

Between 2020 and 2021, 9 respondents rated the session either a 1 or 1.5 (0.70%) with 7 of these occurring in 2020. The following feedback was provided with these scores.

- ▶ Please make session optional x 2.
- ► The radical okayness doesn't deal with systemic issues.
- Personally, I got no more out of this than I would have by reading a pamphlet – except this took over an hour out of my busy day.
- ▶ Been told since med school how to 'self-care'. This lecture just repeated that. Took too long whilst stressed about work I needed to complete on the ward.
- Very long winded.

The top responses from the program duration to questions 7 and 8 are listed below.

Responses	2017	2018	2019	2020	2021
More practical techniques would be good (examples: mindfulness, meditation, coaching, case scenarios, improving concentration)	29	62	59	36	16
Sessions are too long/needs to be condensed	22	48	58	20	22
Too much background/theory/wordy	7	17	7	1	1
Provide food/more food/coffee break	5	30	16	4	22
More examples/personal stories and practical examples/resources	33	18	12	14	7
Sessions should be longer/more of them	3	13	11	8	9



QUESTIONS 6 TO 9

Of the survey from 2018-19 received few responses and were mainly for administrative purposes only (e.g. which session they attended, whether attending in person or via videoconference, quality of videoconference, any other feedback).

QUESTION 10 AND 11

Of the survey from 2018-19 asked respondents what time of the year they attended and whether they believed the program was presented at the appropriate time of their intern year. This question was initially added to evaluate the best moment during the intern

year to receive the program. As the vast majority (77%) was content with the timing during the year versus 8% not content, the timing was deemed appropriate, and the question was removed from the 2020-21 survey. The following responses were received in 2018-19:

DO YOU THINK THIS PROGRAM WAS PRESENTED TO YOU AT THE APPROPRIATE TIME OF YOUR INTERN YEAR (2018 AND 2019)?

Response	2018	2019	TOTAL	% of total
No	47	61	108	7.7
Nil response	101	113	214	15.3
Pros/cons to either	1	0	1	0.1
Yes	579	497	1076	76.9
GRAND TOTAL	728	671	1399	100



44

Essential component of any junior doctor training program.

77

<u>ZZ</u>

I honestly loved this, it was a great session that gave me so much insight and information into self-care that I have been over looking.

77

/{/

I wish this was presented to doctors of all levels.

77

TESTIMONIALS

Question 9 of the 2020-2021 survey and Question 12 of the 2018-19 survey asked respondents to provide an optional testimonial for the *Resilience on the Run/Wellbeing at Work* program. The following is a selection of responses that were received, with the overwhelming majority being positive:

2018

Any knowledge or skill we can learn that is able to contribute to junior doctor wellbeing is brilliant. *Resilience on the run* is delivered in a practical and relevant way and can't help but improve awareness and resilience.

Essential component of any junior doctor training program.

Great program with very helpful and practical information. Will be of great value to anyone wanting to succeed emotionally in their junior doctor years.

I had never really considered the reality/relevance of compassion fatigue but Resilience on the Run made me realise that I myself show signs and need to consider self-care

I think all doctors should have the opportunity to undertake this presentation.

ROR helped normalise a lot of my thoughts and feelings. It was reassuring to hear my whole cohort were having similar experiences.

This was an excellent program which was straight to the point. I can take a lot away from this and hope to share some of these strategies and resources with my colleagues.

2019

A great opportunity to discuss important issues to help strengthen the approach junior doctors take when confronted with challenges in their day-to-day roles.

Elaborates more on the benefits of self-care and mindfulness. It's helpful later on in the year after you have some clinical experience to put your experiences in perspective.

I appreciate the time and effort that has clearly gone into this presentation. It was clearly thought out and well planned, very helpful.

I don't usually like or listen to courses like this but the honest and practical advice given presents the usefulness and practicality of information of the course.

I feel the interns at least at this hospital are very well supported with minimal expectations. Do you do this course with regs/pho? They seem much unhealthier.

I honestly loved this, it was a great session that gave me so much insight and information into self-care that I have been over looking.

I wish this was presented to doctors of all levels.

The program was very needed for me during my medicine rotation especially as a reminder of the importance of self care, taking breaks and being thankful for at least 3 things every day no matter what. This will build my resilience during a very hectic and often stressful rotation.

The resilience on the run program really helped to identify difficult and challenging scenarios that commonly arise in the workplace, and provided effective and achievable approaches to enable interns to manage them.



44

Thank you for a great and well run program. I'm glad hospitals are taking mental health seriously.

77

44

Amazing. This could save my life one day.

22

<u>ZZ</u>

These sessions were invaluable! As a junior doctor, it is incredibly easy to feel overwhelmed with work and neglect ourselves. I think they re-iterate the old saying "you can't pour from an empty cup". Everybody should attend them.

2020

A fantastic program that highlights some of the complexities faced by junior doctors. Ira delivered this in a safe and open environment.

Awesome work AMA. It's great to see AMA taking an initiative to actively promote positive/healthy approach amongst healthcare workers! Thanks for the food too!

Being an IMG, we many times don't get these training tips. Thank you.

Many times I internalise that I'm a fool and not good enough but just someone saying it's okay and your not a fool has really helped. Especially because I've had my toughest week so far. Thank you.

Thank you for a great and well run program. I'm glad hospitals are taking mental health seriously.

This program equips us with tools to navigate the unique stressors of life as a junior doctor. Whilst a lot of hospitals/medical education units allude to the importance of wellbeing, this program helps walk the walk and teaches us the ability to manage! Best intern teaching this year!

Very useful and thought provoking. Very friendly and approachable presenter, with personal experiences/case scenarios to share.

2021

Amazing. This could save my life one day.

An easy way to commit to something we always benefit from: self reflection. The provided lunch went a long way too.

Engaging session substantiated by a profession doctor with evidence. It was better than I expected and I definitely took home a few points.

I had many of the thoughts touched on during this session. I feel more at peace now knowing that others feel the same way.

It was well done, made me aware of my inner thoughts that I never knew I felt before. It was good to dig deeper than superficial conversation.

The session helped me to identify that I had a few things that I need to work on to minimise the risk of further burnout, improve my performance at work and build a better relationship with my colleagues. Thank you.

These sessions were invaluable! As a junior doctor, it is incredibly easy to feel overwhelmed with work and neglect ourselves. I think they re-iterate the old saying "you can't pour from an empty cup". Everybody should attend them.



RESULTS OF SURVEY 2 - QUEENSLAND HEALTH LONGITUDINAL SURVEY

This component of the evaluation was undertaken by Queensland Health and the results have been forwarded to AMA Queensland to include in this review (see Appendix B).

Survey 2 aimed at evaluating the immediate and long-term efficacy of the *Resilience on the Run* and the *Wellbeing at Work* program. The survey was distributed to junior doctors via Hospital and Health Services who may have attended the program. Unfortunately, only 16 survey responses were received out of a possible 3,800 participants emailed which is a response rate of 0.4%. Therefore, the results of the survey are not representative and therefore cannot be generalised to the population of attendees and should not be relied upon in future consideration of the program.

In general, it is noted that the responses were both positive and negative. When asked how the respondents would rate the quality of program materials and resources the average response was 3.13 out of a possible 5, which was good to very good. The majority of respondents were happy with the format of the program (69%). It was clear from the open-ended responses that participants appreciated the fact that the program was delivered by a doctor which is a common theme in the feedback across both surveys. The average response to the question of "how likely are you to recommend this program to a colleague" was 2.5 out of a possible 5. However, when asked how well the program was presented, the score was much higher at 3.38 which was good to very good.

A common theme in the feedback was that systemic and cultural issues need to be fixed rather than making doctors more resilient. A common misconception was, mostly about the *Resilience on the Run* program, that the program was presented in order to replace structural changes needed for systemic issues by 'fixing' the mindset of doctors to simply make them work harder. Changing the program to *Wellbeing at Work* ensured that the name covered the content better and there was less initial resistance from the interns to overcome. Many interns commented that they had hesitations before attending the program but found it much better and useful than they had feared.

Even though careful planning of this survey tried to help respondents to distinguish the program from resolving systemic issues, this seemed hard for the respondents and many open ended answers referred to systemic problems they had encountered which the program could not solve.



ONGOING ADVOCACY

At AMA Queensland, we recognise the importance of increasing public awareness of the pressures that doctors face and are proud to lead the conversation on doctors' health and wellbeing. We regularly discuss these issues in the media and advocate for positive change as evidenced by media articles included in Appendix C.

We know that doctors in training continue to be particularly vulnerable to workplace issues such as bullying, harassment, stress and fatigue. The 2021 *Resident Hospital Health Check* survey results clearly outlined these issues, see Appendix D, which are also reflected in media articles included in Appendix C.

Doctors at every stage of their careers, in both the public and private sectors, experience high levels of stress in the workplace. We provide doctors with information, resources and (peer) support to discuss the challenges they face as well as advice on how to care for their own health and wellbeing. Two campaigns including Self-Care September (qld.ama. com.au/SelfCareSeptember2021) and Every Dr needs a GP (qld.ama.com.au/everydrneedsaGP) demonstrate our commitment and expertise in helping and supporting doctors. We also ran an *In Conversation With* webinar with Dr Ira van der Steenstraten during one of the COVID lockdowns in 2021 to connect with junior doctors in a time of great uncertainty (youtu.be/P-LfQsoBoBg).

We believe the *Wellbeing at Work* program could build on its strong foundation of helping interns. It would be preferable to expand the a wellbeing program to support public and private doctors with an additional \$1.97 million of funding.

CONCLUSION

The Wellbeing at Work program has proven to be successful in assisting interns to develop:

- various self-care strategies and practical tools, such as mindfulness and how it can be included in the working environment and improve well-being and resilience for doctors in training;
- communication techniques for more effective engagement with others;
- strategies for identifying and addressing Burnout and Compassion Fatigue;
- skills for managing challenging scenarios in the workplace e.g. caring for the dying patient or dealing with adverse feedback from a supervisor;
- overcoming common and/or personal barriers to self-care; and
- practical tips on asking and getting help.

Many facets of the *Wellbeing at Work* program contribute to its success including the:

- use of medically-trained presenter with expertise in clinical psychiatry and psychotherapy;
- attendance of MEU staff in workshops;
- inviting more senior doctors to attend and share their personal experiences with the interns as positive role models;
- creating a safe environment for interns to discuss and show vulnerabilities by discussing experiences, thoughts and emotions;
- lowering concerns by normalising many of the experiences junior doctors are going through;
- lowering barriers to self-care; and
- reducing barriers to seeking support and finding a GP.



The program helps attendees understand the value of self-awareness and self-care and provides an opportunity to develop a healthy mindset and practical skills they can put into action in their daily lives to help manage stress at work.

The positive overall rating of the program demonstrates it relevance to interns and impact. An overwhelming 90% of interns who attended *Wellbeing at Work* (also *Resilience on the Run*) rated the experience as positive.

Not only does the program improve the wellbeing of interns, it also enhances the operation of our hospitals and help doctors to be able to deliver exemplary health care to Queenslanders. When doctors' health and wellbeing is addressed, they can better able to manage workplace stress and deliver improved levels of patient care³.

Wellbeing at Work is a cost effective program that delivers outstanding results to support new doctors dealing with the demands of the health system and helps them continue their careers and care for Queenslanders. It teaches them healthier habits

early on in their career and opening up to enable peer support. In addition to supporting interns, we recommend expanding *Wellbeing at Work* to all public doctors from PGY2 and up as well as medical practitioners in the private sector. Continuing and expanding the program as part of bigger systemic changes would ensure doctors can survive and thrive in the Queensland Health system and patients would receive ongoing high quality health care.

Appendix E includes examples of surveys that some hospitals undertook of the *Resilience on the Run* also *Wellbeing at Work* program separate to the AMA Queensland survey distributed. These have been included to demonstrate the positive results received via different survey formats, with the majority of respondents stating the sessions learning objectives, content and session format was excellent or good.

Appendix F includes a copy of two references including a self reflection from an attendee at the *Wellbeing at Work* program as well as a formal letter from another attendee reflecting on the program.

REFERENCES

- beyondblue, National Mental Health Survey of Doctors and Medical Students. Melbourne, Victoria: beyondblue; Oct 2013. Available at: https://www.beyondblue.org.au/docs/default-source/research-project-files/bl1132-report---nmhdmss-full-report web
- 2. Forbes, M., Byrom, L., van der Steenstraten, I., Markwell, A., Bretherton, H., Kay, M. (2019) *Resilience on the Run an evaluation of a wellbeing program for medical interns.*Internal Medicine Journal, RACP.
- 3. Wallace, J., Lemaire, J., Ghali, W. (2009) *Physician Wellness: a missing quality indicator,* Lancet; 374; 1714-21.

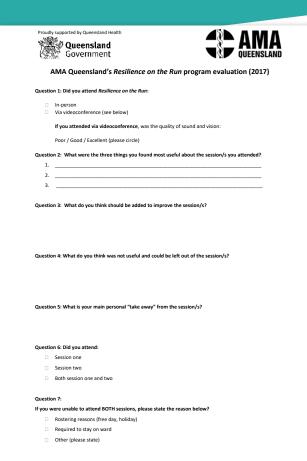
APPENDICES

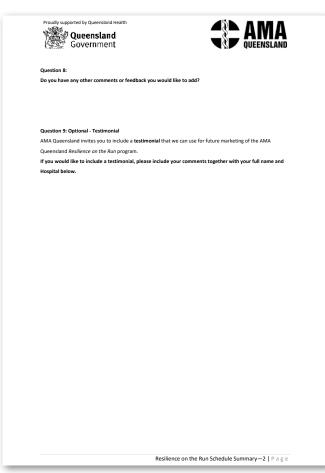
- **A** Copies of the survey forms
- **B** Results of Survey 2
- **C** Examples of Media Articles
- **D** RHHC results
- **E** Copies of evaluations from hospitals who used different surveys
- **F** Letter of recommendation and self reflection

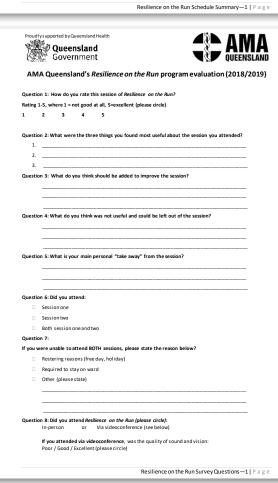
³ Wallace, J., Lemaire, J., Ghali, W. (2009) Physician Wellness: a missing quality indicator, Lancet; 374; 1714-21.

APPENDIX A

COPIES OF THE SURVEY FORMS







Question Do you h	.9: ave any other comments or feedback you would like to add?	
Question	10: At what time of the year did you attend the presentation of Resilience on the Run?	
	11: Do you think this program was presented to you at the appropriate time of your inte	rn year?
0 '		
O	13. Ontional Testimonial	
	12: Optional - Testimonial	
AMA Que	eensland invites you to include a testimonial that we can use for future marketing of the AN	ЛΑ
AMA Que		
AMA Que Queensla If you wo	eensland invites you to include a testimonial that we can use for future marketing of the AN and Resilience on the Run program. Juld like to include a testimonial, please include your comments together with your full na	
AMA Que	eensland invites you to include a testimonial that we can use for future marketing of the AN and Resilience on the Run program. Juld like to include a testimonial, please include your comments together with your full na	
AMA Que Queensla If you wo	eensland invites you to include a testimonial that we can use for future marketing of the AN and Resilience on the Run program. Juld like to include a testimonial, please include your comments together with your full na	
AMA Que Queensla If you wo	eensland invites you to include a testimonial that we can use for future marketing of the AN and Resilience on the Run program. Juld like to include a testimonial, please include your comments together with your full na	
AMA Que Queensla If you wo	eensland invites you to include a testimonial that we can use for future marketing of the AN and Resilience on the Run program. Juld like to include a testimonial, please include your comments together with your full na	
AMA Que Queensla If you wo	eensland invites you to include a testimonial that we can use for future marketing of the AN and Resilience on the Run program. Juld like to include a testimonial, please include your comments together with your full na	
AMA Que Queensla If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the Ah and <i>Resilience on the Run</i> program. Judel like to include a testimonial, please include your comments together with your full na below.	
AMA Que Queensla If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the Ah and <i>Resilience on the Run</i> program. Judé like to include a testimonial, please include your comments together with your full na below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the AA and <i>Resilience on the Run</i> program. Jould like to include a testimonial, please include your comments together with your full ni below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the Ah and <i>Resilience on the Run</i> program. Judel like to include a testimonial, please include your comments together with your full na below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the AA and <i>Resilience on the Run</i> program. Jould like to include a testimonial, please include your comments together with your full ni below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the AA and <i>Resilience on the Run</i> program. Jould like to include a testimonial, please include your comments together with your full ni below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the AA and <i>Resilience on the Run</i> program. Jould like to include a testimonial, please include your comments together with your full ni below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the AA and <i>Resilience on the Run</i> program. Jould like to include a testimonial, please include your comments together with your full ni below.	
AMA Queenslad If you wo Hospital	eensland invites you to include a testimonial that we can use for future marketing of the AA and <i>Resilience on the Run</i> program. Jould like to include a testimonial, please include your comments together with your full ni below.	

Resilience on the Run Survey Questions—2 | P a g e

APPENDIX A (CONT.) COPIES OF THE SURVEY FORMS

		3	4		5	6
Question 2: How likel	v are you to recon	mend this pro	gram to your	colleagues? (p	lease circle)	
Extremely unlikely	Unlikely		ıtral	Likely		mely li
Question 3: The follo	wing questions ref	er to the inforr	nation provid	led in the sessi	on:	
		Strongly disagree	Disagree	Neither agree or disagree	Agree	Stro
The content was rel	evant/useful			2.029.00		
Learning objectives	were clearly met					
		1				1
This session encoura upon my knowledge		<u> </u>		<u> </u>		
	-					
Question 4: The follo	wing questions ref					
		Strongly disagree	Disagree	Neither agree or disagree	Agree	Stro
The presenter engagaudience	ged well with the					
The presenter creat						
environment for lea discussion	rning and					
The presenter was k	nowledgeable					
		1	l	I		1
Question 5: What we	re the three things	vou found mo	st useful aho	ut the session	vou attender	17
		,			,	
Quarties & What is a		"take away" f	the cocc			
Question 6: What is y	our main personal	"take away" f	rom the sessi	on?		

Question	8: What do you think was not useful and co	ould be left out of the session?	
	9: Optional - Testimonial eensland invites you to include a testimonial	that we can use for future promot	ion of the AMA
	and Wellbeing at Work program.	that we can use for future promot	ion of the AWA
If you w	ould like to include a testimonial, please incl	lude your comments below.	

Oueensland Health

Wellbeing at Work Online survey of past participants

This survey relates to the delivery of the Wellbeing at Work program (formerly known as Resilience on the Run) which has been offered to all medical interns across Queensland since 2017.

This survey is intended to examine the long-term efficacy of the program and to seek feedback from past participants to help guide future decisions about wellbeing training programs and the type and range of products that may be considered in the future.

The Department of Health is required to provide a copy of the collated survey results to the Australian Medical Association Queensland for inclusion in their final evaluation report of the program which is due by 31 December 2021.

Response rate

- Due to privacy restrictions, this survey was disseminated to junior doctors via Hospital and Health Services that currently offer (or have previously offered) the Wellbeing at Work program to medical interns.
- In particular, Medical Education Units were asked to circulate the survey directly to junior doctors who may have completed the training at some stage over the past five years (i.e. PGY 1 5 doctors).
- . Approximately 3,800 junior doctors have been eligible to undertake this training since 2017 (as medical interns).

 A total of 16 survey responses were received.
- The survey was open for a period of one month and was conducted using Microsoft Forms with access limited to only those within Queensland Health. The survey was anonymous and optional.

Key survey results

1. When did you attend the Wellbeing at Work program?

	Number of respondents	Percentage of total respondents
2018	2	12.5%
2019	1	6.25%
2020	5	31.25%
2020	2	12.5%
2021	6	37.5%





5. How likely are you to recommend this program to a colleague?

1 = extremely unlikely, 2 = unlikely, 3 = neutral, 4 = likely, 5 = extremely likely

Average response 2.5

6. How well do you think the program was presented?

1 = poor, 2 = fair, 3 = good, 4 = very good, 5 = excellent

7. How important was it for the presenter to be a trained doctor with medical

experience?

Likert scale from 1 = it was not important to me at all to 5 = it was very important to me

8. How would you rate the quality of program materials and resources (e.g.

1 = poor, 2 = fair, 3 = good, 4 = very good, 5 = excellent

9. Were you happy with the format of the program (i.e. two 90-minute sessions

	Number of respondents	Percentage of total respondents
Yes, I was happy with the format	11	69%
No, I was not happy with the format	5	31%

10. Please indicate if you agree with the following statements in relation to the

program. Likert scale from 1 = l do not agree with the statement to 5 = l strongly agree with the

	Average response
The content of the program was relevant / useful to me as a junior doctor	3.0
The learning objectives were clearly identified and met	3.1
The sessions encouraged me to reflect upon my	2.9

Queensland Health

2. Did you attend both the initial and follow-up session?

	Number of respondents	Percentage of total respondents
Both sessions	8	50.0%
Initial session only	6	37.5%
Follow-up session only	2	12.5%

3. At which hospital did you attend this program?

	Number of respondents	Percentage of total respondents
Bundaberg Hospital	2	12.5%
Caboolture Hospital	2	12.5%
Cairns Hospital	1	6.25%
Gold Coast University Hospital	0	-
Hervey Bay Hospital	0	-
Ipswich Hospital	1	6.25%
Logan Hospital	0	-
Mackay Hospital	0	-
Mater Health Services	0	-
Mount Isa Hospital	0	-
Princess Alexandra Hospital	0	-
QEII Jubilee Hospital	0	-
Redcliffe Hospital	0	-
Redland Hospital	0	
Rockhampton Hospital	3	18.75%
Royal Brisbane and Women's Hospital	1	6.25%
Sunshine Coast University Hospital	2	12.5%
The Prince Charles Hospital	e Charles 0 -	
Toowoomba Hospital	3	18.75%
Townsville University Hospital	1	6.25%

4. Overall, how would you rate this program?

= poor, 2 = fair, 3 = good, 4 = very good, 5 = excellent

Average response 2.56

Queensland Health

I have embedded the learnings from this training into my practice	2.6
I realised the importance of connectedness with peers and peer-support from this program	3.1
The program increased my awareness of how important self-care is	3.1
The program helped me to reflect on how to practice wellbeing strategies (e.g. mindfulness)	2.9
The program increased my knowledge about where junior doctors can seek help and support	3.1
l integrate wellbeing support strategies (e.g. mindfulness or other) in my work practices as a junior doctor	2.4
I integrate self-care in my work practices as a junior doctor as a result of this program	2.3

11. What were the top three most valuable aspects of the program?

Good that a program exists.
Free lunch, time off wards, social time with colleagues.
None.
Learning about support available for doctors.
It was valuable when the presenter encouraged us to share our own
stories with the group. It was valuable to hear about the experiences of my
peers. It was valuable for our work as juniors to be recognised and
appreciated.
Informative relevant friendly approach.
The fact that it was delivered by a doctor who knows what it is like (rather
than someone from another field), that it was spread over two sessions
(one session isn't enough), that we all did it with our colleagues (reduces
stigma).
Personal stories, helpful tips and strategies, great presenter.
Food provided during sessions. Ability to socialise with peers and discuss
wellbeing / self-care. Time away from clinical work.

12. What do you think could be added to improve the program?

The program actually made me feel more stressed at work. It made me feel guilty and pressured that only I am looking out for me. It made me feel

It was condescending and gave really poor advice. I found it harmful and

chose not to attend the second session.

Unfortunately, the presentation was via Zoom. I think it would have been better and more conducive if it was in person.

APPENDIX B (CONT.) RESULTS OF SURVEY 2

Queensland Health

Programs that tell residents to fix the problems themselves are counterintuitive. The determinants of resident mental health are systemic and require structural changes from employers, NOT more blaming of junior doctors.

The whole program feels like an exercise in victim blaming. Junior doctors are stressed and burnt out largely due to system factors and failings. Fix the cause, don't just patch it and make people who struggle feel like they're failures.

Basically the whole program, and all of the ten weekly lectures on not killing yourself, were a huge stap in the face. It demonstrated that Oueensland Health was aware that the job was hortfile to the point of suicide, but had no intention of addressing the actual problem. They instead chose to just tell people to basically suck it up.

One of my terms was particularly awful and took me to the point of a mental break down. Taking the advice from this session, I told the term assessors I was having a hard time. There was no support or alternatives offered. Instead they decided that if I didn't fix my mental health by the end of term I would have to repeat it. Needless to say, this made an already terrible term excruciating and I was forced to repeat the term that made me feel suicidal. On repeating the term, the senior doctors already had preconceived ideas of my abilities which of course led to a bullying issue perpetrated by one of the presenters of this program.

Instead of this program, things that might actually make a difference include more staff so we're less overworked. No double / triple shifts unless the staff member specifically requests it (like nursing) because it is

unless the staff member specifically requests it (like nursing) because it is inhumane. This is again a staffing issue. Admin departments that treat their doctors like people rather than equipment. For senior doctors to not bully the juniors (thankfully bullies tend to be in the minority and department / hospital dependent these days).

I hope that this program continues! It was a session I looked forward to

I hope that this program continues! It was a session I looked forward to and enjoyed. I think it brough the intern cohort closer together that year because we got a chance to pause and share our experiences in a non-judgemental environment. Our presenter was enthusiastic and had warm energy. Also, I remember the catering being quite good.

Well intended and presented, I think there are more concepts that can be explored, more situation specific, and essentially all that was mentioned was 'toughen up' which is true in a sense but needs to be elaborated more maybe?

Would have been more useful if it was a practical program with strategies that could be applied to work or to general life. But it was still good to see that Queensland Health care about the wellbeing of their staff.

Queensland Health

More strategies / practical approach, I found that we just talked about mindfulness and that was it. We need to be taught some strategies about how to handle different stressors at work

how to handle different stressors at work.

Possibly a follow-up session in 3 - 4 weeks just 10 - 30 minutes to remind people of the key aspects of the program and how everyone is going. Felt that the advice / discussion was often generic and not always very obvious how to implement the suggestions in practice. No discussion regarding the role of structural workplace change (or how to drive structural change) to promote wellbeing of our junior staff. Wellbeing and self-care are inherently personal issues and will only be effective if the activities are meaningful to any given individual (which is at odds to the group approach used by the program).

Perhaps an increased focus on one-on-one coaching or a series of highly goal-directed reflection exercises - e.g. each individual evaluates their wn work-life balance / frequency and quality of use of time outside work then decides on possible strategies to improve wellbeing, then thinks about possible barriers / challenges to implementing the strategies, then decides upon solutions to the barriers, then makes a commitment to make the change. In the second session, there would be an evaluation as to whether the individual was able to make the change, the impact the change has had on the individual, whether the change is sustainable, any barriers the individual has faced when implementing and sustaining the change, and considering the reasons for any relapses. Essentially taking a nighly personalised stages of change approach to drive and analys behaviour change to make a single positive change to improve wellbeing.

13. What do you think could be left out of the program?

Blaming residents for poor mental health.

Meditation. Mindfulness. Presenter spending ages talking about how good and experienced they are. It all felt like an empty attempt to build rapport. Victim blaming. Suggesting that we cry in the toliet when stressed.

We had an activity about tone of voice. I didn't find this very helpful. I think we can identify when someone is being rude to us, that's not really the issue. It is coming up with strategies to deal with this in the workplace. I would have liked a more practical approach.

14. Any other comments or feedback in relation to the program?

The continued systemic impetus placed upon doctors themselves to be 'resilient' in the midst of problematic hospital systems and cultures is offensive. Doctor wellbeing is indeed a real issue but passing the buck to doctors to just learn resilience while continuing to condone unhealthy systems, rosters, supervision failings etc is the wrong approach.

APPENDIX C **EXAMPLES OF MEDIA ARTICLES**

Weary young doctors

689 words • ASR N/A • Wellbeing at Work • ID: 1548049877

Rising numbers of pandemic weary junior doctors at Ipswich Hospital fear exhaustion on the job will lead to making medical mistakes, according to results from AMA Queensland's 2021 Resident Hospital Health Check.
The issue was highlighted in the lates...

N/A UNIQUE DAILY VISITORS, N/A AVERAGE STORY AUDIENCE

Mackay Base Hospital doctors report unsafe workplace in new report

nba Chronicle by Tara Miko

02 Dec 2021 6:31 AM

620 words • ASR AUD 23 • Wellbeing at Work • ID: 1547952609

Almost a quarter of under-siege Mackay Base Hospital junior doctors say they are fatigued, have experienced bullying in the workplace or not been paid for overtime, a new report has revealed. Almost a quarter of Mackay Base Hospital junior doctors are...

4,115 UNIQUE DAILY VISITORS, 26 AVERAGE STORY AUDIENCE

Local News Ipswich Junior Doctors afraid of making fatal mistakes while tired

715 words • ASR AUD 20,439 • Wellbeing at Work • ID: 1547334874

Rising numbers of pandemic weary junior doctors at Ipswich Hospital fear exhaustion on the job will lead to making medical mistakes, according to results from AMA Queensland's 2021 Resident Hospital Health Check (RHHC). The issue was highlighted in the...

N/A UNIQUE DAILY VISITORS, N/A AVERAGE STORY AUDIENCE

Staff at Gold Coast University Hospital and Robina Hospital are concerned they'll make an error due to fatigue, new AMA survey reveals

876 words • ASR AUD 3,168 • Wellbeing at Work • ID: 1546837706

Herald Sun Pandemic weary doctors are at breaking point across Gold Coast hospitals, with fears exhaustion on the job will lead to them making medical mistakes.

105,857 UNIQUE DAILY VISITORS, 948 AVERAGE STORY AUDIENCE

Batigued, overworked doctors demand overhaul to working conditions fearing patient safety

ABC Online by Antonia O'Flaherty ords • ASR AUD 305,599 • Wellbeing at Work • ID: 1546762777 30 Nov 2021 9:52 AM

Growing numbers of overworked, exhausted training doctors fear they will make fatigue-related mistakes if public hospitals do not overhaul working conditions. Key points:

808 junior doctors were surveyed as part of the AMAQ's annual hospital...

729,320 UNIQUE DAILY VISITORS, 37,430 AVERAGE STORY AUDIENCE

Qld hospitals graded as exhausted doctors reveal biggest fear

Toowoomba Chronicle by Jackie Sinnertor 455 words • ASR AUD 28 • Wellbeing at Work • ID: 1546514913

A new survey that paints a shocking picture of doctors working unbearable extra hours that leave them in constant fear of making fatal mistakes, has been used to grade local hospitals. More than half of the state's junt

4,701 UNIQUE DAILY VISITORS, 36 AVERAGE STORY AUDIENCE

Surge in doctors seeking help for own mental and physical health concerns

ABC Online by Antonia O'Flahert 536 words • ASR AUD 254,275 • Wellbeing at Work • ID: 1513440885 04 Oct 2021 6:25 AM

Supplied: Peakpx.com The number of Queensland doctors seeking help for mental health and acute or chronic stress is worryingly higher than pre-COVID levels, new data reveals. Key points:

The Queensland Doctors' Health Programme helpline is...

807.810 UNIQUE DAILY VISITORS, 39.067 AVERAGE STORY AUDIENCE

Exhausted doctors in fear of fatal mistakes

Page 10 • 408 words • ASR AUD 5,632 • Photo: No • Type: News Item • Size: 264,00 cm² • QLD • Australia • Wellbeing at Work • ID: 1546433566



MORE than half of the state's junior doctors are so exhausted that they live in fear of a medical disaster

The latest Australian Medical Association Queensland's (AMAQ) 2021 Resident Hospital Health Check (RHHC) paints a shocking picture of doctors working unbearable extra hours that are often reported.

Last year, 51 per cent of the doctors said that fatigue was a constant concern, up from 48 per cent in 2020 and 46 per cent in 2019.

AMA Queensland Council of Doctors in Training (CDT) and the Australian Salaried Medical Officers' Federation Queensland (ASMOPO) s- urveyed 808 interns, house officers and other junior doctors to compare employment conditions in public hospitals across the state.

The resident hospital health check listed 21 hospitals and graded them report cardstyle on five different categories to give them an overall grade. Caboolture, Ipswich, Queensland Children's Hospital, Robina, The Royal Birbane and Women's Hospital and Townsville all recorded the lowest overall grades of C.

The lowest category scores were Ipswich Hospital, r- eceived a D+ in career progression and Caboolture, which received a D+ in wellbeing and workplace culture.

CDT co-chairs doctors Robert Nayer and Natasha Abeysekera said the upward trend was a wake-up call from frontline health workers to our hospital system

"Every year, more and more doctors in training raise this as a key concern and they need to be heard before their fears become a reality," Dr Nayer said.

"Thirty per cent of survey respondents also told us they had felt unsafe at work this year, up from 27 per cent in 2020 and 22 per cent in 2019.

"Those results are reasonably consistent, or slightly worse, than the numbers reported last year so for many hospitals," he

Dr Abeysekera said there had been a small increase in the rates of bullying, discrimination and sexual harassment in eensland's public hospitals, but a noticeable drop in satisfaction with the way these incidents were handled.

CDT Wellbeing Portfolio spokesman Dr Chris Erian said that AMAQ had requested an additional \$1.97m in the last state budget to expand the Wellbeing at Work program, but the funds had not been committed.

135 007 CIRCULATION

Exhausted doctors in fear of fatal mistakes

MORE than half of the state's junior doctors are so exhaus-ted that they live in fear of a medical disaster.

ruicai uisaster. The latest Australian Medi-The latest Australian Medi-cal Association Queensland's (AMAQ) 2021 Resident Hospi-tal Health Check (RHHC) paints a shocking picture of doc-tors working unbearable extra hours that are often unpaid. Last year, 51 per cent of the doctors said that fatigue was a constant concern un from 48

constant concern, up from 48 per cent in 2020 and 46 per

cent in 2019. AMA Queensland Council

of Doctors in Training (CDT) of Doctors in Training (CDT) and the Australian Salaried Medical Officers' Federation Queensland (ASMOFQ) surveyed 808 interns, house officers and other junior doctors to compare employment conditions in public hospitals across the state. across the state

The results have been used or grade hospitals around the state with many scoring low for career progression, workplace culture and bullying.

The resident hospital health check listed 21 hospitals and graded these resident the progression of the pro

and graded them report card-style on five different catego-ries to give them an overall

grade. Caboolture. Ipswich. grade. Caboolture, Ipswich, Queensland Children's Hos-pital, Robina, The Royal Bris-bane and Women's Hospital and Townsville all recorded the lowest overall grades of C. The lowest category scores

were Ipswich Hospital, received a D+ in career progression and Caboolture, which received a D+ in wellbeing and workplace culture.

CDT co-chairs doctors Robert Nayer and Natasha Abeysekera said the upward trend was a wake-up call from frontline health workers to our bosvital system. our hospital system. "Every year, more and

more doctors in training raise this as a key concern and they need to be heard before their fears become a reality," Dr

fears become a reality." Dr Nayer said.

"Thirty per cent of survey respondents also told us they had felt unsafe at work this year, up from 27 per cent in 2020 and 22 per cent in 2019.

"Those results are reason-ably consistent, or slightly worse, than the numbers re-ported last year so for many hospitals," he said.

Dr Abeysekera said there had been a small increase in he rates of bullying, discrimi-nation and sexual harassment

in Queensland's public hospi-

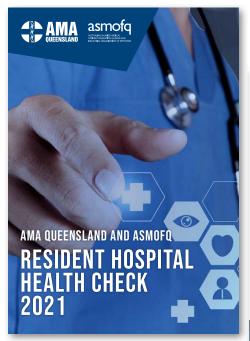
in Queensland's public hospinals, but a noticeable drop in satisfaction with the way these incidents were handled.

"Just over a third of junior doctors have personally experienced these abhorrent behaviours and 41 per cent said they had witnessed bullying, discrimination or sexual harassment in our hospitals," she said.

CDT Wellbeing Portfolio spokesman Dr Chris Erian said that AMAQ had requested an additional \$1.97m

in the last state budget to ex-pand the Wellbeing at Work program, but the funds had not been committed.

APPENDIX D RHHC RESULTS





| Part |

APPENDIX E

COPIES OF EVALUATIONS FROM HOSPITALS WHO USED DIFFERENT SURVEYS



Redland and Wynnum Hospitals

	INTERN EDUCATION EVALUATION REPORT						
Topic: RESILIENCE ON THE RUN			Term: 2	Week:3	Date: 01/05/18		
Presenter: DR IRA VAN DER STEENSTRATTEN			Venue: Can	aipa Meet	ing Room		
Level:	Intern:	JHO/SHO:	PHO / REG:	MBBS Student Other:		Other:	

Criteria	Excellent	Good	Fair	Poor	Comment
Learning Objectives Clearly stated and consistent with Intern needs and the requirements of professional development	54%	46%			
Content Relates to the learning outcomes within Australian curriculum framework and AMC standards	54%	46%			
Session Format Quality and delivery of the session	72%	28%			
Overall Satisfaction	72%	28%			

Suggestions and Comments by Interns:

Thank you for this opportunity to have this teaching

Below are examples of the surveys that some hospitals undertook of the Resilience on the Run program separate to the AMA Queensland survey. These have been included to demostrate the positive results received via different survey formats, with the majority of respondents stating the sessions' learning objectives, content and format was excellent or good.



Redland and Wynnum Hospitals Working together to put patients first

INTERN EDUCATION EVALUATION REPORT						
Topic: RESILIENCE ON THE RUN			Term: 2	Week:2	Date: 24/04/18	
Presenter: DR IRA VAN DER STEENSTRATTEN			ATTEN	Venue: Canaipa Meeting Room		
Level:	Intern: 12	JHO/SHO:	PHO / REG:	MBBS Student 0		Other:

Criteria	Excellent	Good	Fair	Poor	Comment
Learning Objectives Clearly stated and consistent with Intern needs and the requirements of professional development	58%	42%			
Content Relates to the learning outcomes within Australian curriculum framework and AMC standards	75%	16%	9%		
Session Format Quality and delivery of the session	84%	16%			
Overall Satisfaction	75%	25%			

Suggestions and Comments by Interns: • Great really looking forward to next week

- Lactose free sandwiches if possible please no cheese



Redland and Wynnum Hospitals

INTERN EDUCATION EVALUATION REPORT								
Topic:	Resilience	on the run		Term: 5	Week: 7	Date: 12/12/17		
Presen	ter:			Venue: Caniapa Meeting Room				
Level:	Intern: 8	JHO/SHO:	PHO / Reg:	MBBS Stud	dent:	Other:		

Criteria	Excellent	Good	Fair	Poor	Comment
Learning Objectives Clearly stated and consistent with Intern needs and the requirements of professional development	75%	25%			
Content Relates to the learning outcomes within Australian curriculum framework and AMC standards	75%	25%			
Session Format Quality and delivery of the session	75%	25%			
Overall Satisfaction	75%	25%			

Suggestions and Comments by Interns:

- Useful discussion
- Good tips for self-care, good contact information and resources Great to have the reminder about self-care.... Now just need a 28 hours day! Very useful, great info and contacts
- Great objective
- Very useful

MATER HOSPITAL 20/06/19

Please complete the following by selecting the response that describes your assessment of the statements below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The session was organised and flowed in a logical sequence	100%	0%	0%	0%	0%
The facilitator created an open environment for learning and discussion	100%	0%	0%	0%	0%
The content was relevant to my learning needs	86%	14%	0%	0%	09
Learning materials (e.g pre-reading, powerpoints, handouts, equipment, resources) were professional and easy to read/understand and to access	100%	0%	0%	0%	0%
The session encouraged me to reflect upon my knowledge and skills for continuing professional development	100%	0%	0%	0%	09

What did you gain from this session? How to prioritise my health I enjoyed talking about these issues Resilience in the workplace My health and happiness affects my patients Resources to access support Please name at least 1 way to improve this session:

Ira - I feel like interns at least at this hospital are very well supported with minimal expectations. Do you do this course with regs/pho? They seem much unhealthier. Maybe some role play. Love it.

MATER HOSPITAL 02/05/19

Please complete the following by selecting the response that describes your assessment of the statements b

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
The session was organised and flowed in a logical sequence	86%	14%	0%	0%	0%
The facilitator created an open environment for learning and discussion	100%	0%	0%	0%	0%
The content was relevant to my learning needs	71%	29%	0%	0%	0%
Learning materials (e.g pre-reading, powerpoints, handouts, equipment, resources) were professional and easy to read/understand and to access	100%	0%	0%	0%	0%
The session encouraged me to reflect upon my knowledge and skills for continuing professional development	86%	14%	0%	0%	0%

What did you gain from this session? Validation that it's important and necessary to make yourself a priority too Mindfulness strategies
Open environment for discussion of issues that we all have Open environment for discussion of issues that we all have it interesting to hear others experiences. Short meditation session will be useful Mindfulness strategies Skills to deal with stress and conflict Importance of Self Awareness and how the doctor is feeling Good length of time Being reminded of the importance of mindfulness. It's okay to take breaks - not to feel guilty Please name at least 1 way to improve this session No comments were given as to how this session could have beer improved

APPENDIX E (CONT.)

COPIES OF EVALUATIONS FROM HOSPITALS WHO USED DIFFERENT SURVEYS



Hervey Bay Hospital Wide Bay Hospital & Health Service

Junior Doctor Education Program

SESSION EVALUATION

Resilience on the Run Part 1

presented by

senter Dr Ira van der Steenstraten

te 06.03.2018

Medical Education, Hervey Bay Hospital

 The Session

 Strongly Agree
 Agreed
 Disagree
 Strongly Disagree
 Not Applicable

 Learning objectives were clearly identified
 78%
 22%
 0%
 0%
 0%

 The presentation was pitched at the appropriate level
 89%
 11%
 0%
 0%
 0%

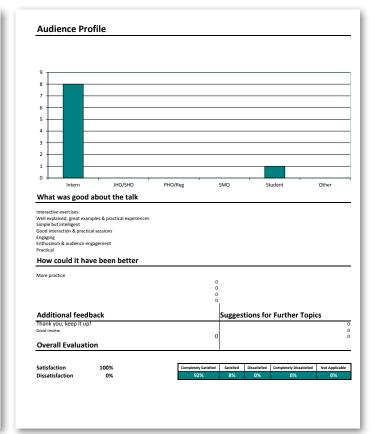
 The content was clinically relevent
 89%
 11%
 0%
 0%
 0%

 Up-to-date information was used for the presentation
 89%
 11%
 0%
 0%
 0%

9 participants attended the session 9 evaluations were completed

The Experience							
	Strongly Agree	Agreed	Disagree	Strongly Disagree	Not Applicable		
The presentation was enjoyed	89%	11%	0%	0%	0%		
Audience interaction was encouraged	100%	0%	0%	0%	0%		
The session improved understanding of the topic	89%	11%	0%	0%	0%		
The information informed clinical practice	78%	22%	0%	0%	0%		

The Presenter					
	Strongly Agree	Agreed	Disagree	Strongly Disagree	Not Applicable
The presenter was enthusiastic	100%	0%	0%	0%	0%
The presenter engaged well with the audience	100%	0%	0%	0%	0%
The presenter was well organised	100%	0%	0%	0%	0%
The presenter kept to time	100%	0%	0%	0%	0%
	100%	0%	0%	0%	0%





Hervey Bay Hospital

Wide Bay Hospital & Health Service

Junior Doctor Education Program

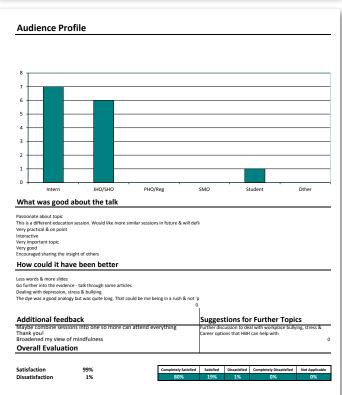
SESSION EVALUATION

Topic	Resilience On The Run	
Торіс	presented by	
Presenter	Dr Ira van der Steenstraten	
Date	14.09.2017	
Location	Medical Education, Hervey Bay Hospital	
Number of Attendees	16 participants attended the session	
Number of Evaluations	14 evaluations were completed	

The Session						
	Strongly Agree	Agreed	Disagree	Strongly Disagree	Not Applicable	
Learning objectives were clearly identified	71%	29%	0%	0%	0%	
The presentation was pitched at the appropriate level	79%	21%	0%	0%	0%	
The content was clinicaly relevent	79%	21%	0%	0%	0%	
Up-to-date information was used for the presentation	77%	23%	0%	0%	0%	
	76%	24%	0%	0%	0%	

	Strongly Agree	Agreed	Disagree	Strongly Disagree	Not Applicable
The presentation was enjoyed	79%	21%	0%	0%	0%
Audience interaction was encouraged	93%	7%	0%	0%	0%
The session improved understanding of the topic	79%	21%	0%	0%	0%
The information informed clinical practice	71%	21%	7%	0%	0%

	Strongly Agree	Agreed	Disagree	Strongly Disagree	Not Applicable
The presenter was enthusiastic	86%	14%	0%	0%	0%
The presenter engaged well with the audience	79%	21%	0%	0%	0%
The presenter was well organised	86%	14%	0%	0%	0%
The presenter kept to time	86%	14%	0%	0%	0%



APPENDIX E (CONT.)

COPIES OF EVALUATIONS FROM HOSPITALS WHO USED DIFFERENT SURVEYS

EXAMPLES OF ALTERNATIVE SURVEYS

Metro South Health

Bayside Health Service - Redland Hospital Medical Education Unit

Redland Hospital Intern Training Program

	Formal (Intern) Education Program (FEP)					
Term: 2	Topic: Wellness at Work – Week 1	Date: 20/04/21				
Presenter: Dr Ira van der Steenstraten						

Criteria	Excellent	Good	Fair	Poor
Learning Objectives Clearly stated and consistent with Intern needs and the requirements of professional development	5 – 42%	7 – 58%		
Content Relates to the learning outcomes within Australian curriculum framework and AMC standards	5 – 42%	7 – 58%		
Session Format Quality and delivery of the session	6 – 50%	6 – 50%		
Overall Satisfaction	5 – 42%	7 – 58%		

Comments by Interns:

- Good presentation
- Interactive elements were very helpful
- Fantastic session very interactive
- Good session important topic
- Excellent presenter!

V1 Effective: July 2019 Review: January 2020



Metro South Health Bayside Health Service - Redland Hospital Medical Education Unit **Redland Hospital Intern Training Program** Formal (Intern) Education Program (FEP) Term: 2 Topic: Wellness at Work - Week 2 Date: 27/04/21 Presenter: Dr Ira van der Steenstraten Excellent Good Learning Objectives Clearly stated and consistent with Intern needs 6 - 50% and the requirements of professional Content Relates to the learning outcomes within Australian curriculum framework and AMC 6 – 50% 6 - 50% standards Session Format Quality and delivery of the session 6 - 50% 6 – 50% Overall Satisfaction 7 – 58% 4 - 42% Comments by Interns: Very relevant and important Good session Fantastic session – thank you Good interactive component **D** Queensland

MATER INTERN WELLBEING AT WORK SESSION FEEDBACK FROM FRIDAY 19 MARCH 2021

Please select the response that describes your assessment of the statements below.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
This education session met my learning needs	0%	0%	20%	40%	40%
This education session provided opportunities to apply/practice the learning	0%	0%	40%	0%	60%
The facilitator created an open environment for learning and discussion	0%	0%	20%	0%	80%
This learning activity encouraged me to reflect upon my knowledge and skills for CPD	0%	0%	20%	20%	60%
What did you find valuable about this session?					

Really important and makes me feel very supported!

Comfortable intimate environment , supportive presenter, good to actually spend a fair amount of time sitting down and taking about well-being (but can imagine it'd be a bit stressful on a busy day).

Thinking about the session overall.

	1. Very	2.	3.	4.	5.
	poor		Satisfactory		Outstanding
how would you rate this session?	0%	0%	20%	40%	40%
how would you rate the facilitator?	0%	0%	20%	20%	60%
A Ab ab A b Ab I ab I ab I d ab I d I a ab I d I a ab I a					

Maybe more time for us to go through our own experiences and examples, and to discuss amongst

MATER INTERN WELLBEING AT WORK SESSION FEEDBACK FROM FRIDAY 12 MARCH 2021

Please select the response that describes your assessment of the statements below.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
This education session met my learning needs	0%	0%	0%	25%	75%
This education session provided opportunities to apply/practice the learning	0%	0%	25%	0%	75%
The facilitator created an open environment for learning and					
discussion This learning activity encouraged me to reflect upon my	0%	0%	0%	25%	75%
knowledge and skills for CPD	0%	0%	0%	0%	100%

Government

What did you find valuable about this session?

Solid practical ways to prevent burnout & compassion fatigue and for our own self care. Resources provided. Comfortable supportive environment

I really liked the exploration of self care methods and importance

Thinking about the session overall..

	1. Very	2.	Satisfactory	4.	5. Outstanding
	poor				
how would you rate this session?	0%	0%	0%	25%	75%
how would you rate the facilitator?	0%	0%	0%	25%	75%

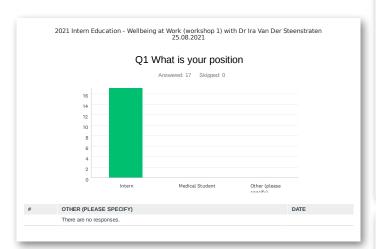
Any thoughts on how this session could be improved?

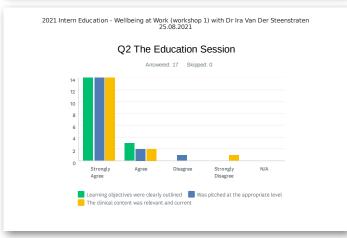
I think more group discussion and interaction could be good, especially in the 2nd session. In the end it did feel like we were just given a lot of information and it would have been nice to discuss it and our personal experiences with each other a bit more. Maybe even doing one of the surveys mentioned (eg K10, self care) during the session

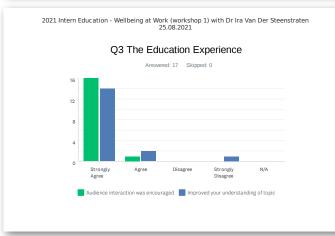
The middle hour was really valuable. It was probably a little bit long of a session overall with no break in the presentation!

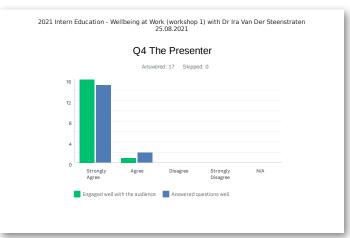
APPENDIX E (CONT.)

COPIES OF EVALUATIONS FROM HOSPITALS WHO USED DIFFERENT SURVEYS











Q6 What could have been better?				
	Answered: 4 Skipped: 13			
±	RESPONSES	DATE		
L	Coffee	8/26/2021 12:11 PM		
2	More food	8/26/2021 8:13 AM		
3	The presentation suggests that junior doctors don't cope well due to their inability to handle difficult patients, and ignores the real issues such as understaffing, the discouragement of claiming overtime, abuse from nursing staff, etc.	8/25/2021 7:47 PM		
1	Humor	8/25/2021 2:02 PM		

2021 Intern Education - Wellbeing at Work (workshop 1) with Dr Ira Van Der Steenstraten

2021 Intern Education - Wellbeing at Work (workshop 1) with Dr Ira Van Der Steenstraten $25.08.2021\,$

Q7 Any suggestions for future topics?

Answered: 3 Skipped: 14

#	RESPONSES	DATE
1	Physical symptoms of burn out and stress, how to catch signs early before it affects work	8/26/2021 12:11 PM
2	Anti vax talks	8/26/2021 8:38 AM
3	Copd	8/25/2021 2:02 PM

APPENDIX F

LETTER OF RECOMMENDATION AND SELF-REFLECTION

10th February 2019

Jane Schmitt CEO, AMA Queensland PO Box 123 Red Hill QLD 4059

Dear Ms Schmitt,

I am writing to you to advocate for the continuation of the "Resilience on the Run" program by Dr Ira van der Steenstraten. I attended the program in 2017 as an intern at the Gold Coast University Hospital. Almost two years on, I'm now a Senior House Officer and still applying the skills I learnt from that workshop.

The concepts of "resilience" and "mindfulness" were not new to me when I attended the program. They were drilled into me during medical school. But I couldn't comprehend their importance until I finished medical school and joined the workforce. With "Resilience on the Run", they were reiterated to me at a time when I needed them the most. Internship was stressful and "Resilience on the Run" was a great refresher on "mindfulness" for me. It helped make a stressful job more tolerable.

Additionally, Dr van der Steenstraten's teaching approach was what made the difference to me. She explained the research and evidence behind "mindfulness". She gave relatable examples to illustrate how "mindfulness" can be used in our everyday practice. As a result, I was able to apply and practise it more effectively.

I am by no means advocating "resilience" as the solution to systemic issues within hospitals. However, I do believe that resiliency and mindfulness are important not just in clinical practice but also in everyday life. I believe that introducing it to interns will help them cope better with stressful situations for the rest of their careers.

If you have any further questions regarding my experience with "Resilience on the Run", please feel free to contact me and I'd be more than happy to answer them.

Yours sincerely, Dr Dana Phang

Wellbeing at work

"Hey, we have the wellbeing session today, right? There will be food!" My day was already made better by the thought of the catered lunch at the Wellbeing at Work program.

The topic of self-care has been visited many times throughout medical school and is an essential topic for the demanding medical profession. However, at work, I often find myself too busy and occupied with the tasks in front of me, and I do not take enough breaks or take adequate care of my physical and mental wellbeing. "I just have to finish this one more task/note/patient plan" and before I realised, it had been four hours before I took a bathroom break or had something to eat.

The Wellbeing at Work program reminded me and my colleagues of the importance of self-care. More importantly, Dr Steenstraten shared with us her clinical expertise and the different methods of integrating self-care into our workplace. I am appreciative of the wellbeing program, as I often find myself forgetting about self-care in the work environment or often prioritising work over my wellbeing. Sitting at the wellbeing sessions was similar to sitting in a support group—where we shared our experiences and daily struggles and how each one of us achieved self-care. We laughed, we reflected, and we gained more insight into the strategies to achieve self-care at work and the available help/services for us and how to reach out for help when things become overwhelming.

Not only is being able to share experiences in a safe space with your peers therapeutic in itself, but also listening to my colleagues who may have encountered similar issues helped me develop self-awareness and provided me with an opportunity to learn from their solutions or come up with solutions when these issues were discussed as a group under the guidance of Dr Steenstraten. I found myself nodding many times throughout the sessions, as I could relate to many of my peers' issues or have light-bulb moments where I thought "that is a great way to solve it". We were further guided in the sessions to analyse our emotions, actions and why we react in certain ways in certain workplace situations (i.e. feeling more irritable at work when there is a poor team dynamic or when we have not had lunch). Like this quote, "You can not give to others out of emptiness in yourself" (RACGP, 2014). I found going through these analyses especially beneficial as this helped me to understand my own triggers and again reminded me that by achieving adequate self-care, this ensures my efficacy at work, ensures I am a safe team member in the clinical setting, and promotes effective patient care.

The sessions concluded with information on various help available to doctors— including hotline numbers and individual therapy sessions and how to access these. All of which are practical and great tools for doctors to seek professional help if needed. I am glad that we have wellbeing sessions at this early stage of our career, as the strategies discussed at the wellbeing sessions are applicable throughout our career development.

