

Thank you for joining today's event, which will start at 14:00

Q↑

There is still time to add to our Enjoying Work playlist. While you are waiting, please add a song that brings you joy to the chat and we will add it to the playlist and share a link following today's event.

If you experience any technical difficulties, please email enjoyingwork@rcpsych.ac.uk.



Welcome

Learning Set 6

QI

Dr Amar Shah, National Improvement
Lead for Mental Health

10 May 2022



Today's agenda

14:00 – 14:10	Welcome and introduction	Amar Shah National Improvement Lead for Mental Health
14:10 – 14:40	Compassionate cultures for compassionate care	Professor Michael West CBE
14:40 – 14:50	End of programme theory of change	QI Coaches
14:50 – 15:00	Break	
15:00 – 15:20	Q+A session with the coaches	Tom Ayers
15:20 – 15:30	Celebrating your achievements	QI Coaches
15:30 – 15:50	Reflecting on the collaborative	QI Coaches
15:50 - 16:00	Summary and close	Emily Cannon Head of QI, NCCMH

Housekeeping

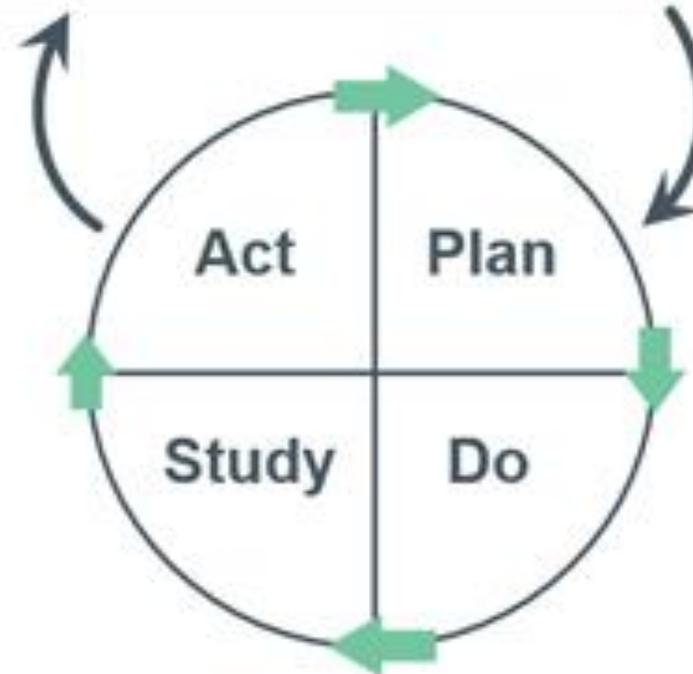
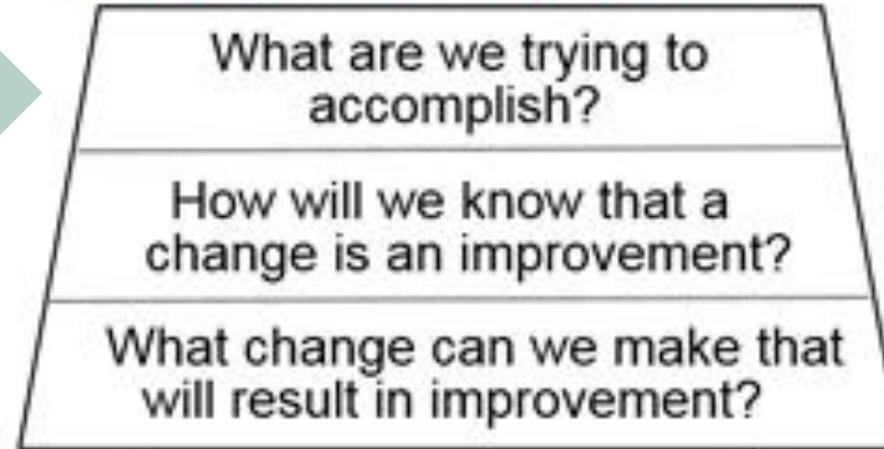
- Please mute your microphone unless you are speaking.
- Please make use of the chat function to introduce yourself to the group. If you would like to ask a question or leave a comment, please use the chat or raise hand function within the meeting.
- If you experience any technical difficulties, please email enjoyingwork@rcpsych.ac.uk.
- The session will be recorded and shared on our website. If following today's event, you do not wish to be identified, please contact us on the email below.
- We will be live tweeting this event from @NCCMentalHealth! Please find and follow us on Twitter or search for #EnjoyingWork.

Our aim

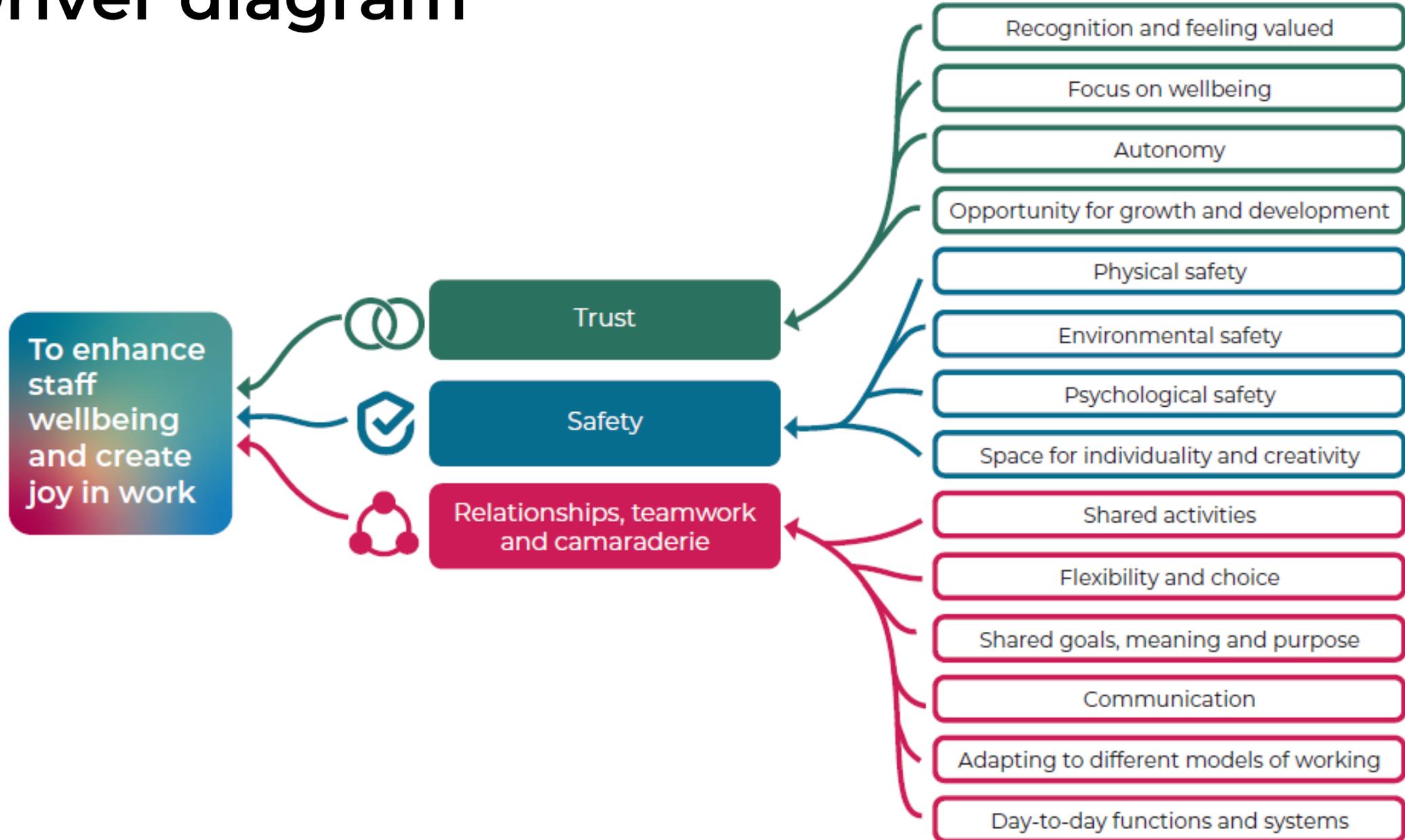
To enhance staff wellbeing and create joy in work

Aim

Model for Improvement



Driver diagram



Measurement Plan

Weekly data collection via the ImproveWell app to measure:

Joy in work (weekly)

- The percentage of people in the team who have enjoyed being at work on a frequent basis each week

Burnout (weekly)

- The percentage of people in the team who experience no symptoms of burnout

Recommending your team as a place to work (weekly)

- The percentage of people in the team who are extremely likely to recommend their service/team as a place to work

Data from the whole collaborative

Q[↑]

June 2021 – May 2022



NATIONAL
COLLABORATING
CENTRE FOR
MENTAL HEALTH

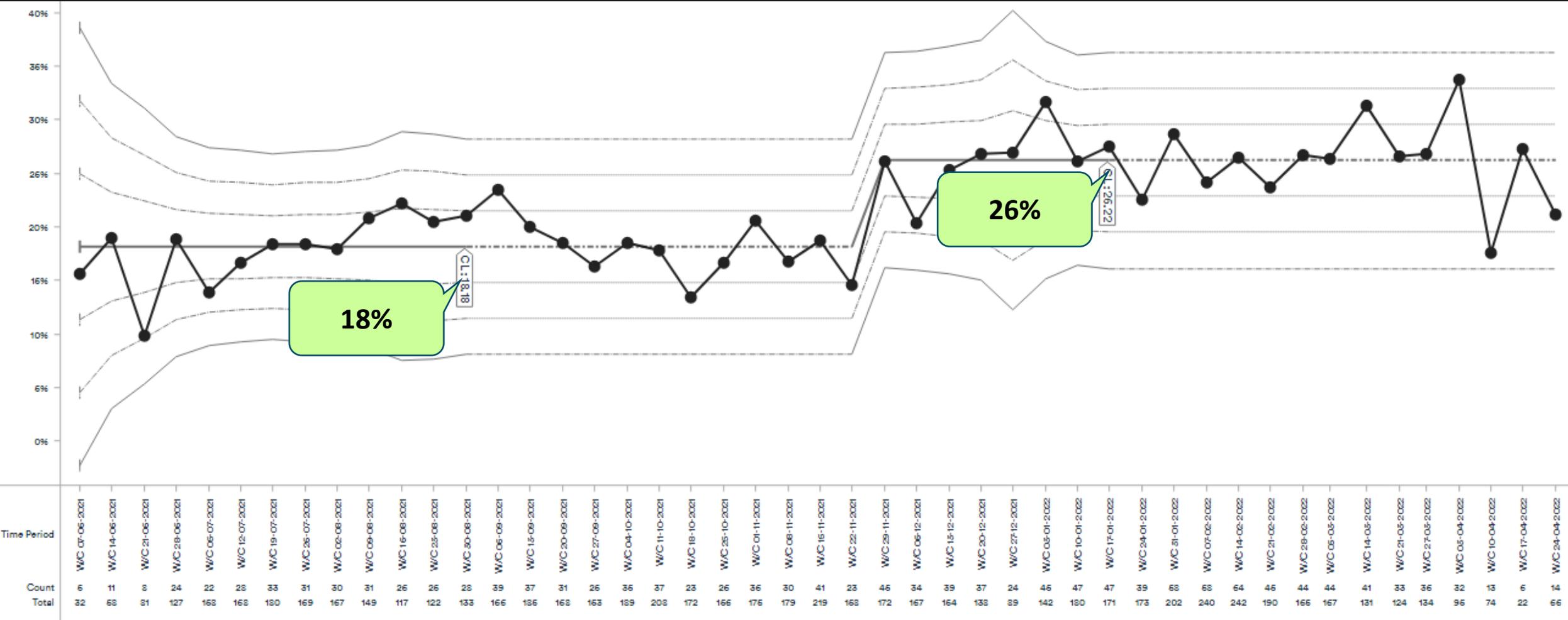


RCPSYCH
Enjoying work

 #EnjoyingWork

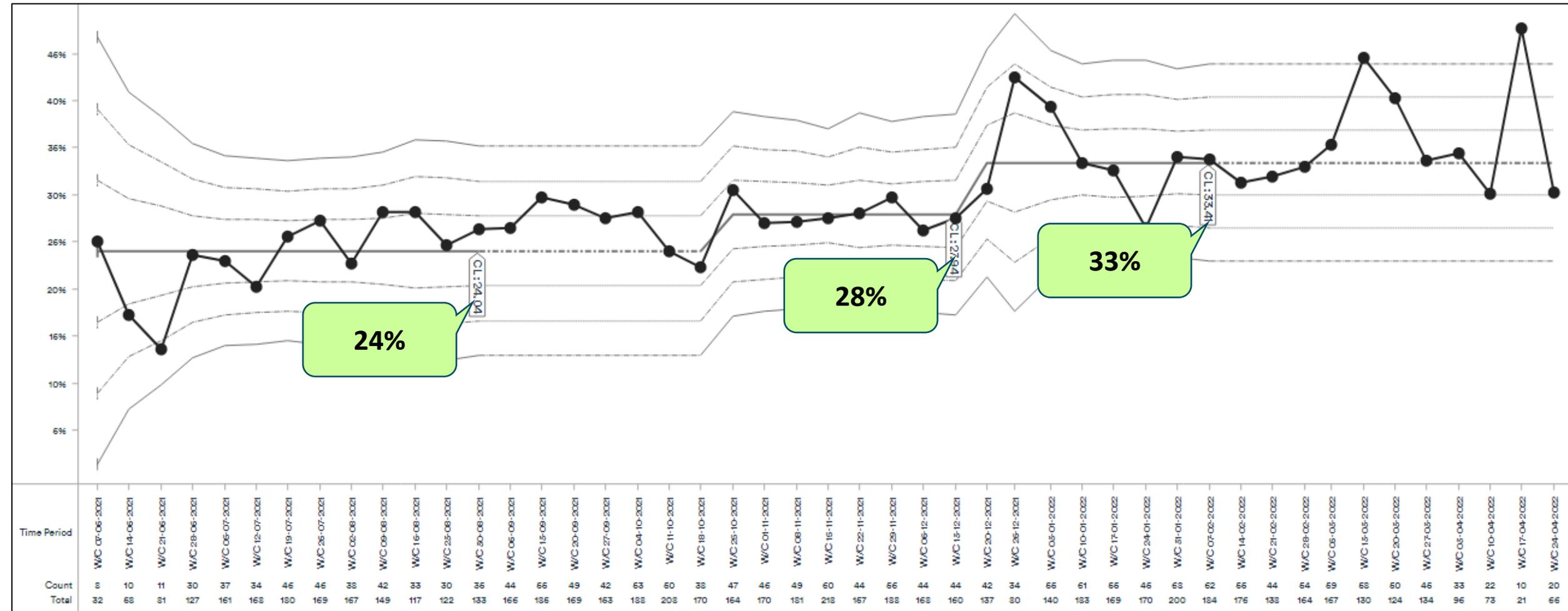
Enjoyment at work

% people who have enjoyed being at work frequently



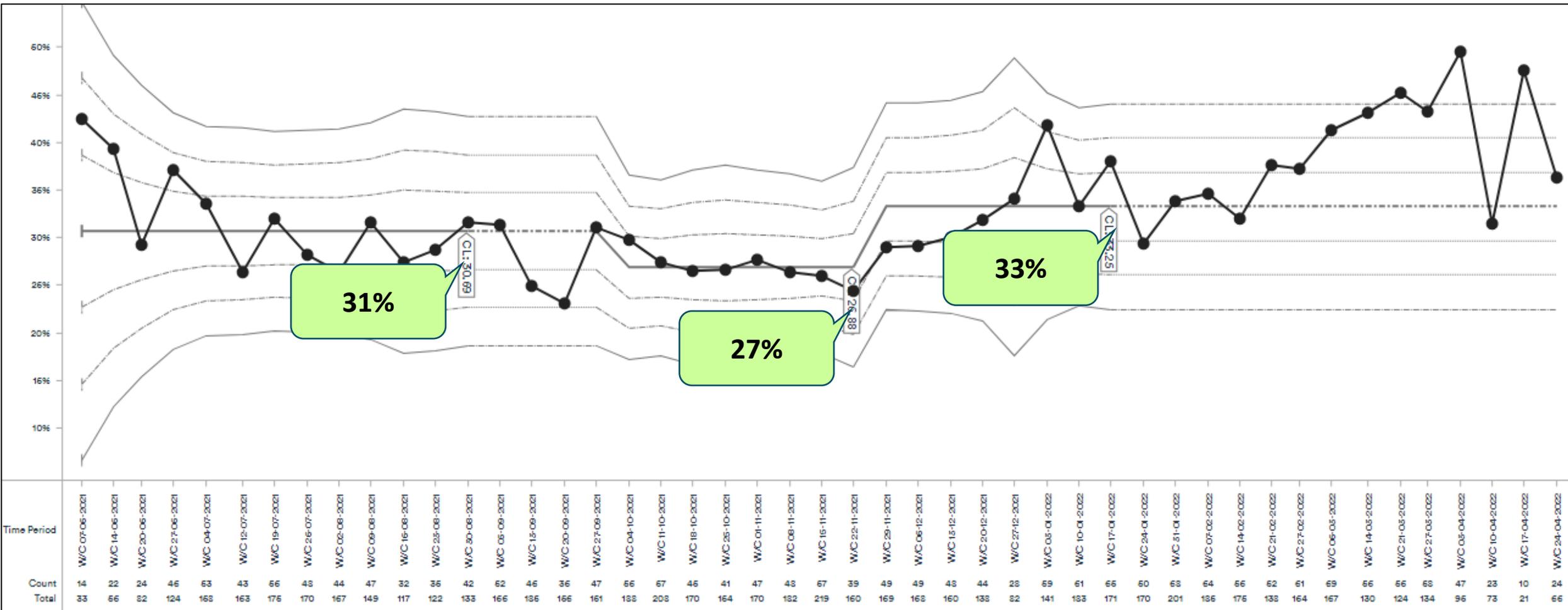
Feelings of burnout

% people who experience no symptoms of burnout



Recommending team as a place to work

% people who are **extremely likely** to recommend their team as a place to work (9 or 10 out of 10)



Data from pre and post-collaborative surveys

Q↑



Mini-Z Burnout Survey

Overall, I am satisfied with my current job (1 = strongly disagree, 5 = strongly agree)	3.65	3.77
I feel a great deal of stress because of my job (1 = strongly disagree, 5 = strongly agree)	3.13	2.85
Burnout (1 = severe burnout, 5 = no burnout)	3.80	3.87
My control over my work is (1 = poor, 5 = optimal)	3.34	3.48
Sufficiency of time for documentation is (1 = poor, 5 = optimal)	2.81	2.90
The atmosphere in my primary work area is (1 = calm, 5 = hectic/chaotic)	3.05	2.82
My professional values are well aligned with those of my department leaders (1 = strongly disagree, 5 = strongly agree)	3.87	3.91
The degree to which my team works efficiently is (1 = poor, 5 = optimal)	3.62	3.62
The amount of time I spend on work digital systems OUTSIDE of my work time is (1 = excessive, 5 = minimal)	3.52	3.60
My proficiency with the digital systems I use in my job is (1 = poor, 5 = optimal)	3.66	3.77

Gallup 12 survey (1 = strongly disagree, 5 = strongly agree)

Do you know what is expected of you at work?	4.21	4.19
Do you have the materials and equipment to do your work right?	3.87	4.01
At work, do you have the opportunity to do what you do best every day?	3.42	3.56
In the last seven days, have you received recognition or praise for doing good work?	3.27	3.43
Does your supervisor, or someone at work, seem to care about you as a person?	4.16	4.16
Is there someone at work who encourages your development?	3.84	3.94
My professional values are well aligned with those of my department leaders	3.87	3.91

Gallup 12 survey (1 = strongly disagree, 5 = strongly agree)

At work, do your opinions seem to count?	3.71	3.81
Does the mission/purpose of your organisation make you feel your job is important?	3.66	3.78
My proficiency with the digital systems I use in my job is (1 = poor, 5 = optimal)	3.66	3.77
Are your colleagues committed to doing quality work?	4.16	4.22
Do you have a best friend at work?	3.00	3.02
In the last six months, has someone at work talked to you about your progress?	3.80	3.91
In the last year, have you had opportunities to learn and grow?	3.78	4.01

Compassionate cultures for compassionate care

Q↑

Professor Michael West CBE

Senior Visiting Fellow, The King's Fund

Professor of Organizational Psychology, Lancaster University

Emeritus Professor, Aston University

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Compassionate Cultures for Compassionate Care

Michael West CBE



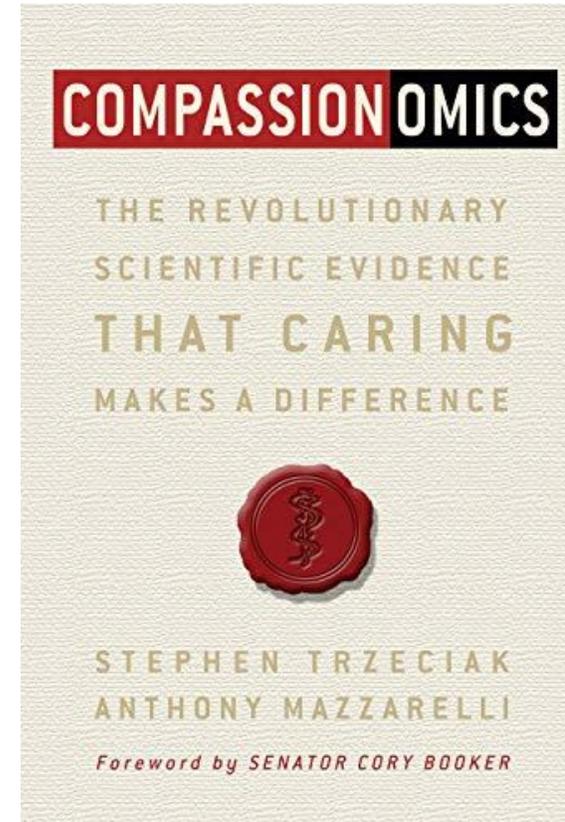


The pressures

- Vacancies in health care and global competition
- Increasing and unsustainably high levels staff stress among doctors
- Intention to quit and retention
- Demands on services - Complexity, ageing population, health inequalities
- Need to transform models and systems of integrated health and care - more collective and family power

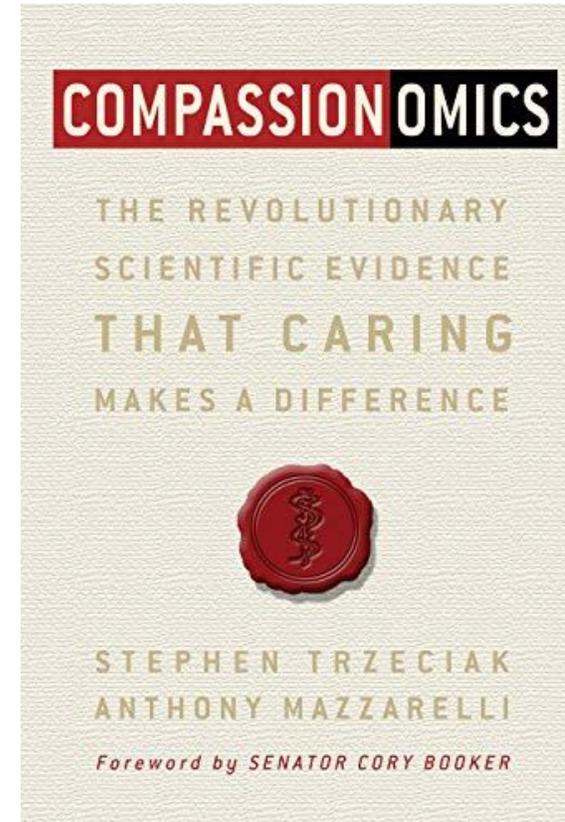
Compassion in Health and Social Care

- Compassion from anaesthetists vs sedatives – patients calm but not drowsy. 50% lower requirement for opiates post surgery and shorter stay.
- Lung cancer patients randomly assigned to compassionate palliative care survived 30% longer
- Diabetes – optimal blood sugar control 80% higher; 41% lower odds of complications
- HIV patients 33% higher adherence to therapy and 20% lower odds detectable virus;
- 21 RCTs large improvements in service-user depression, anxiety, distress and wellbeing



Compassion in Health and Social Care

- More compassion does not affect encounter length
- Clinician compassion – lower depression, anxiety, distress
- Cost savings - difference of 5.6% between high and low patient satisfaction hospitals
- US GPs: 51% lower medical bill; Canadian GPs: 51% fewer referrals to a specialist; 40% less diagnostic testing.
- Canada RCT of homeless people at A&E; compassion group 33% less likely to return to A&E over next 30 days
- Size of effects greater than effects of aspirin in heart attacks, and of statins in 5-year risk of cardiovascular event



What leaders pay attention to, talk about and model in their own behaviour tells those in the organization what it is they should value.



Compassionate leadership

Compassion

- *Attending*: paying attention to staff – ‘listening with fascination’
- *Understanding*: shared understanding of what they face
- *Empathising*
- *Helping*: taking intelligent action to serve or help

West, M. S., & Chowla, R. (2017). Compassionate leadership for compassionate health care. In P. Gilbert (Ed.). *Compassion: concepts, research and applications*. London: Routledge, 237-57.

Compassionate Leadership

Attending

Understanding Empathising

Helping

Effective Leadership

Inclusive Leadership

Collective
Leadership

System Leadership

- *Direction* A clear, shared, inspiring vision and goals
- *Alignment* The efforts of people and teams aligned around the vision and goals
- *Commitment* Developing trust and motivation

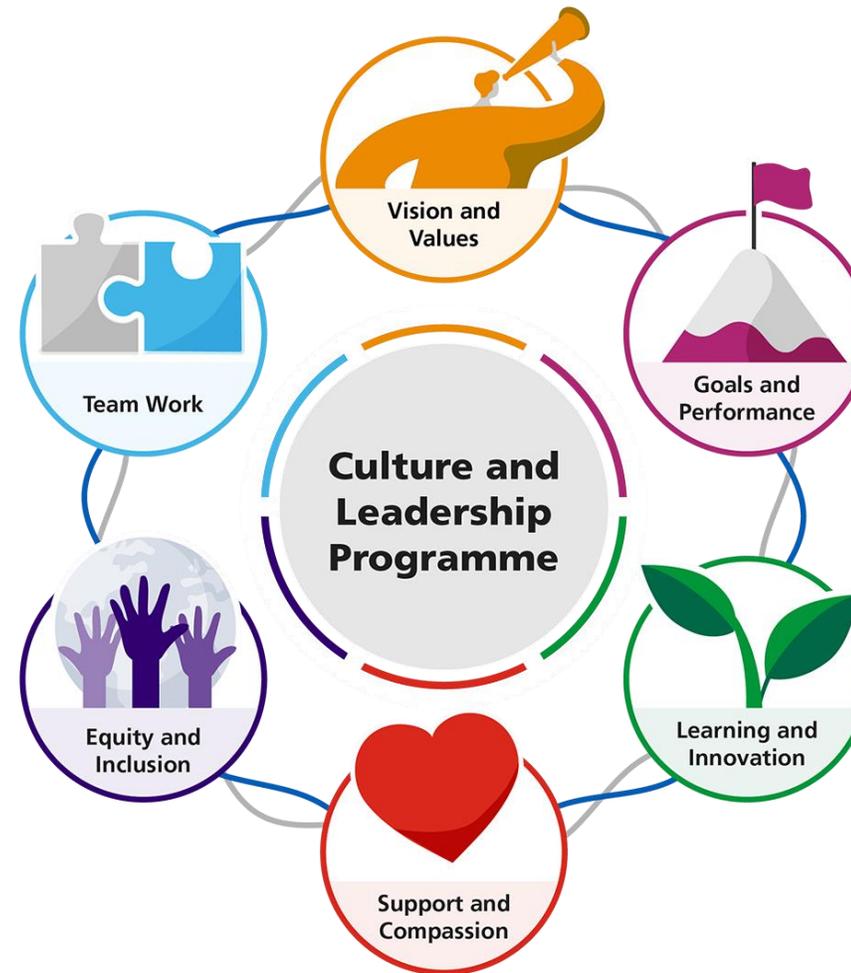
- A shared vision
- Positively valuing difference
- Frequent face to face contact
- Continuous commitment to equality and inclusion
- Clear roles and strong teams

- Everyone has leadership responsibility
- Shared leadership in teams
- Interdependent leadership
- Consistent leadership styles

- Shared vision and values
- Long term objectives
- Frequent face to face contact
- Constructive conflict management
- Mutual support and altruism

Presence, attention and listening permeating culture

- Vision: Compassion and listening
- Goals: Patient, service user, community and staff experience
- Learning: Identifying and exploring problems and challenges
- Support: Caring for staff, caring for service users
- Equity and inclusion: Including the voice and experience of all
- Engaging the wisdom of all within and between teams



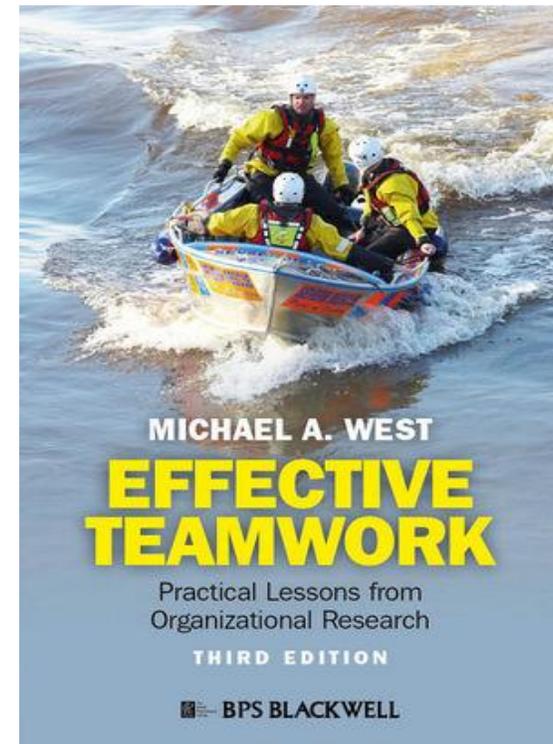
<https://www.england.nhs.uk/culture/culture-leadership-programme/>

The ABC of Core Needs at Work



Effective Teamworking

- Inspiring vision and 4-5 clear goals
- Regular, positive engaging team meetings
- Compassionate, supportive relationships
- Effective communication and discussion
- Absence of chronic or intense conflicts
- Diversity embraced and valued
- Enthusiastic inter-team support and cooperation
- Team learning, improvement and innovation
- Space for reflection

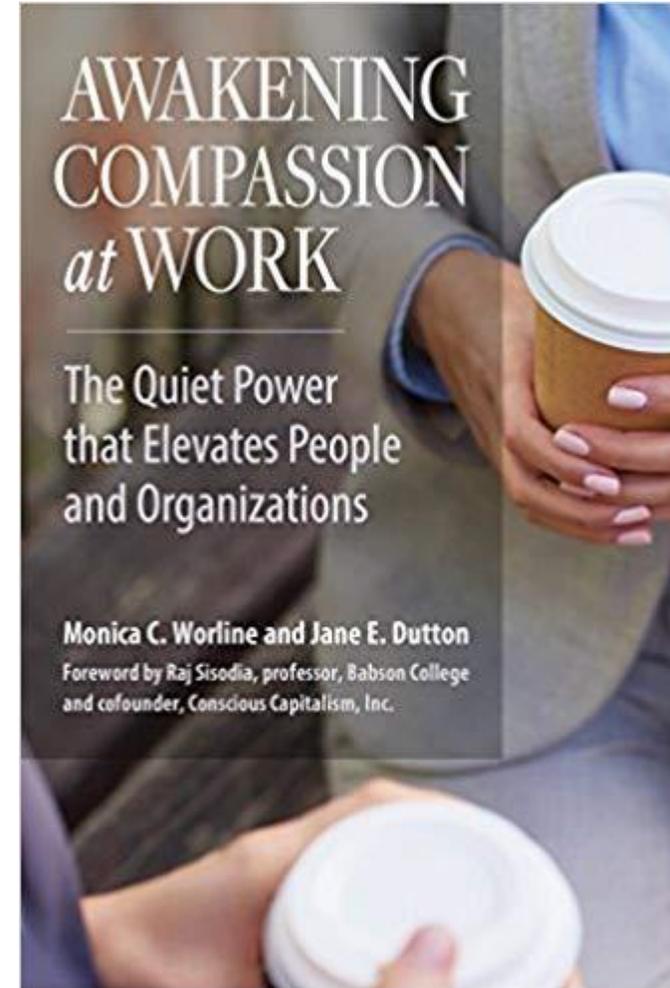


Reflection Time

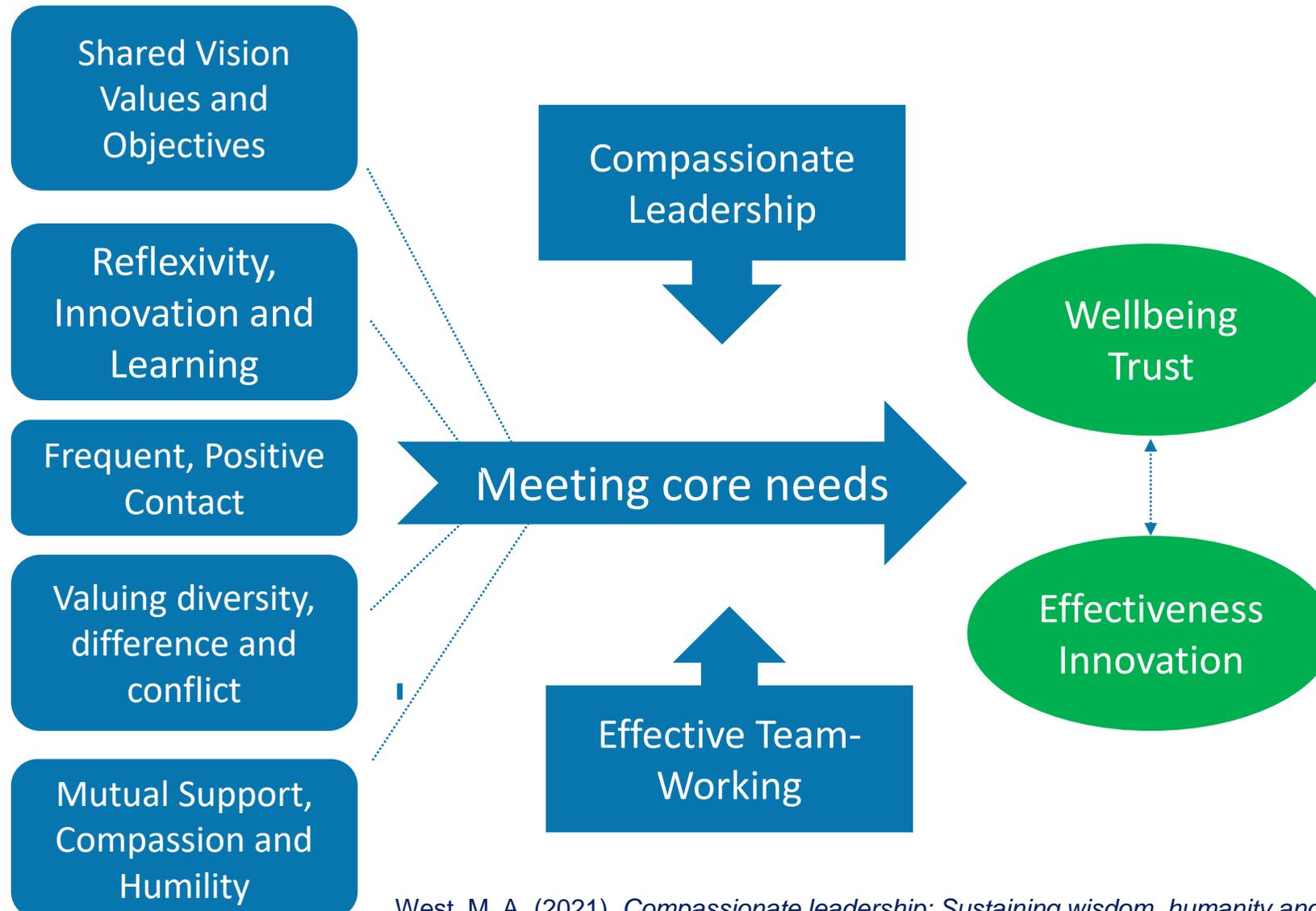
People, teams and organisations are more productive, effective and innovative when they regularly take time out to reflect, learn and adapt.

Everyone Leading for Compassionate Teamwork

- Noticing suffering at work and inquiring
- Challenging policies oriented to blame
- Being curious - suffering is often masked by missed deadlines, errors or conflicts
- Cultivating the assumption that others are good, capable and like me
- Being present and remaining calm and steady in the face of suffering
- Empathic listening, being present without needing to fix or solve necessarily
- Avoiding legalistic approaches that deny human connection
- Addressing corrosive politics, toxic interactions, underperformance via 'fierce compassion'



Transformed teams and organizations





1. Compassion: a universal human value
2. A crisis of leadership in health and social care
3. Compassion in health and social care
4. Compassionate cultures in health and social care
5. Compassionate team leadership and psychological safety
6. Compassionate leadership is effective leadership
7. If it's not inclusive, it's not compassionate leadership
8. Collective leadership
9. Compassionate leadership across boundaries
10. Compassionate leadership and innovation
11. Leadership self-compassion

The Swirling Leaf Press



GIG
CYMRU
NHS
WALES

Addysg a Gwella Iechyd
Cymru (AaGIC)

Health Education and
Improvement Wales (HEIW)

Activities that aid recovery enable:

Psychological detachment from work

Relaxation

Mastery – achievement from challenging tasks

Control – what to do and when in non-work time.

Some intuitive but empirically supported findings:

Work breaks (e.g., proper lunch breaks without tasks)

Vacations (though effects fade quickly)

Physical activities/exercise

Natural environments

‘Blue’ environments – sea, lakes, rivers etc.

‘Green’ environments – forests, hills, fields

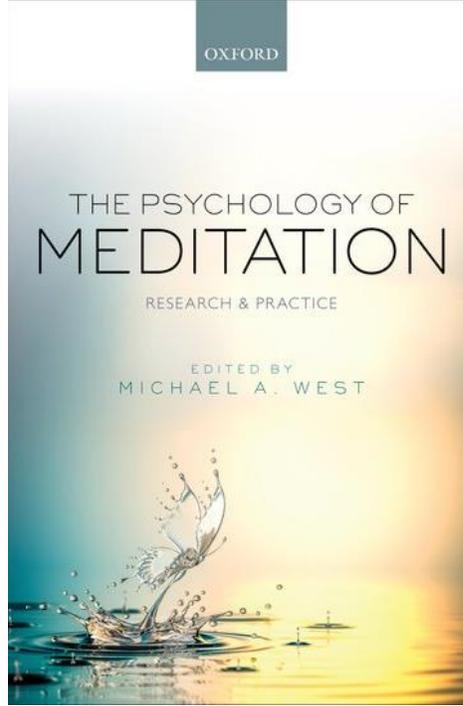
Urban green (parks)

Urban non-green (architectural variety and low building height)

An important ‘inverse recovery law’:

Those whose work is most stressful are least likely to do these things

Sonnentag, Venz & Casper, (2017). Advances in recovery research: What have we learned? What should be done next? *Journal of Occupational Health Psychology* 22, 365-380.



The International Bestseller
'Startling, vital, a life raft' GUARDIAN

**MATTHEW
WALKER**
**Why We
Sleep**

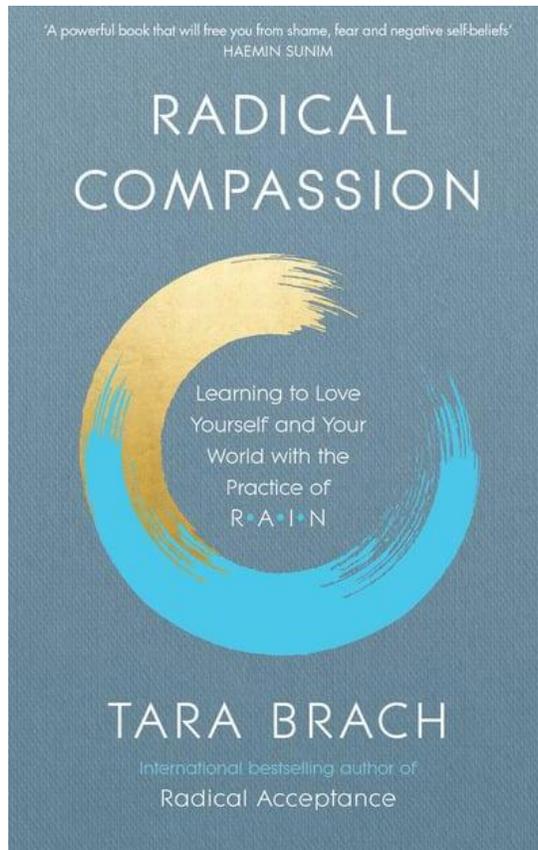


The
New
Science
of Sleep
and
Dreams



- *Belonging*
- *Sleep*
- *Exercise*
- *Being Present*
- *Learning*
- *Giving*

The courage of self-compassion - RAIN



- **Recognizing**
*when we feel pain—
'listening with
fascination'*
- **Accepting**
*the feelings rather
than rejecting them*
- **Inquiring**
*into them with caring
curiosity*
- **Nurturing**
*and caring deeply for
ourselves*

<https://apps.apple.com/gh/app/the-self-compassion-app/id1553464180>



e mail m.a.west@lancaster.ac.uk
Twitter [@westm61](https://twitter.com/westm61)

Thank you!

End of Programme Theory of Change

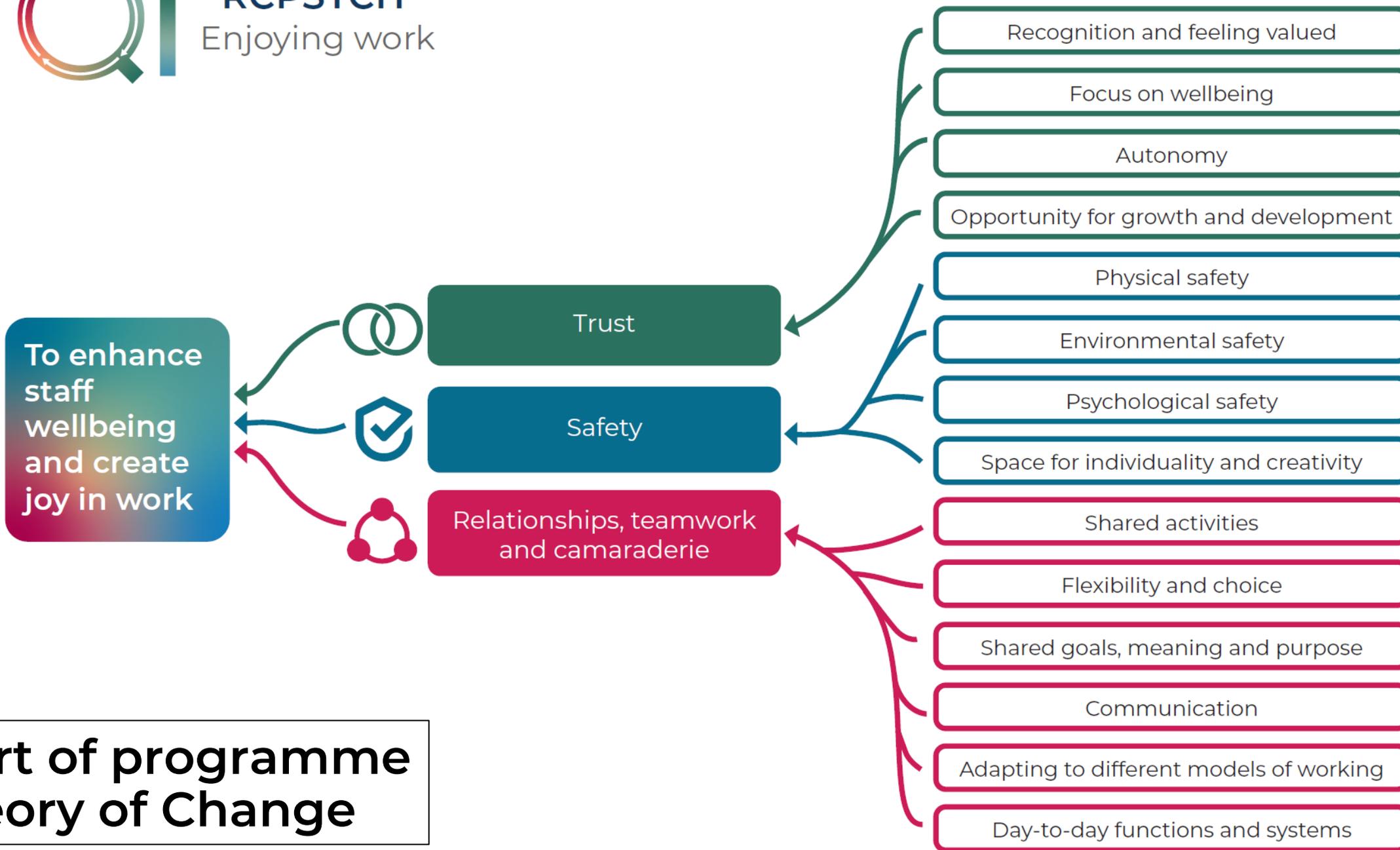
Q↑

Matt Milarski (he/him) &
Ros Warby (she/her)
Quality Improvement Coach, NCCMH



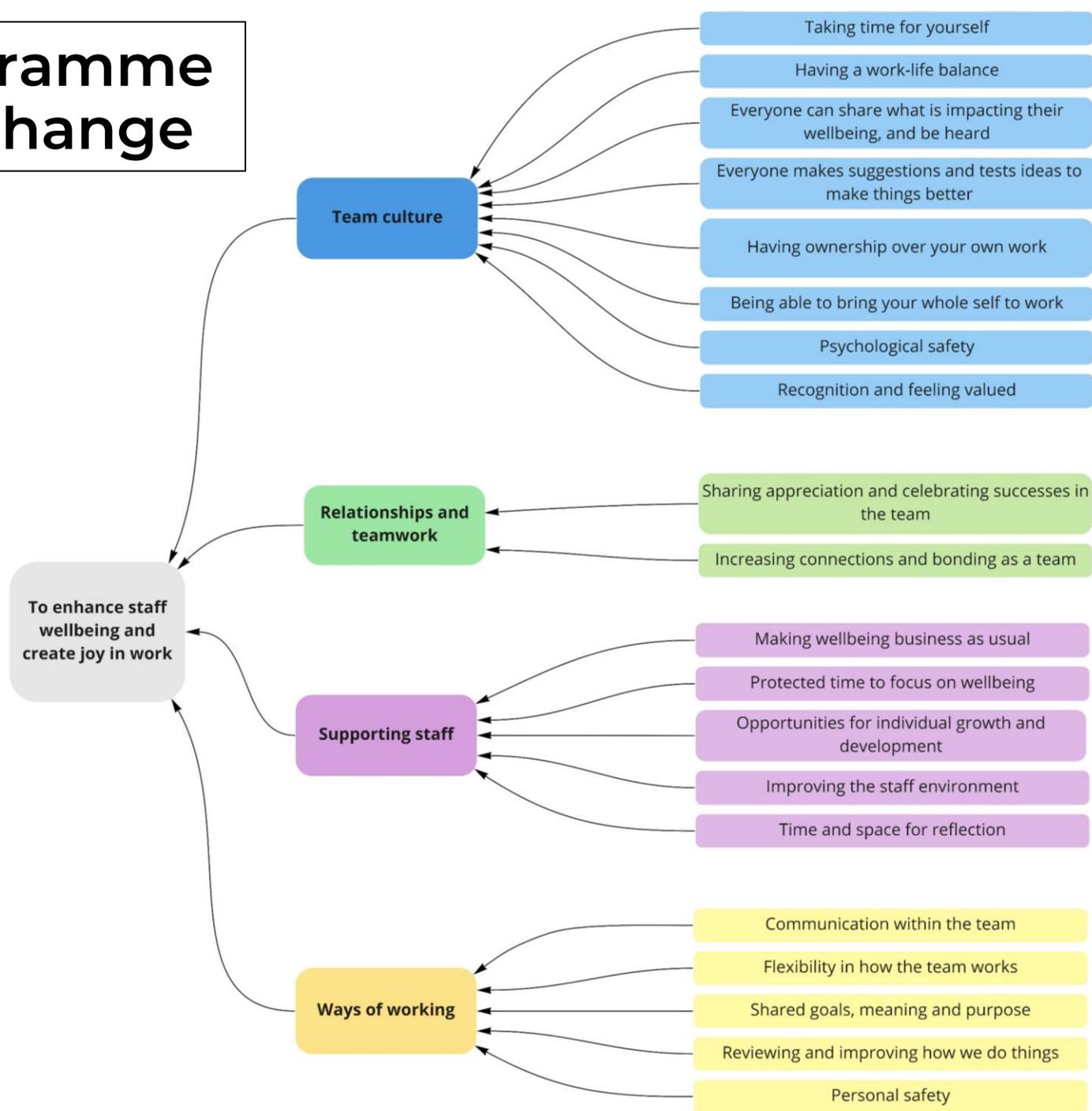


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**Start of programme
Theory of Change**

End of programme Theory of Change



TEAM CULTURE

Taking time for yourself

Having a work-life balance

Everyone can share what is impacting their wellbeing, and be heard

Everyone makes suggestions and tests ideas to make things better

Having ownership over your own work

Being able to bring your whole self to work

Psychological safety

Recognition and feeling valued

WAYS OF WORKING

Communication within the team

Flexibility in how the team works

Shared goals, meaning and purpose

Reviewing and improving how we do things

Personal safety

RELATIONSHIPS + TEAMWORK

Sharing appreciation and celebrating successes in the team

Increasing connections and bonding as a team

SUPPORTING STAFF

Making wellbeing business as usual

Protected time to focus on wellbeing

Opportunities for individual growth and development

Improving the staff environment

Time and space for reflection

Are there any secondary drivers you would like to add?

Follow the link in the chat or use this code at www.menti.com.

50121989

Break

Q↑

10 minutes

We'd like to encourage you to use the break to do something that will bring you joy!



Q+A with the Coaches

Q↑



Celebrating your successes!

With thanks to the Regional
Communications and
Engagement Team at
Health Education England
for the memes



Reflecting on the Collaborative

QI

Matt Milarski (he/him) &
Ros Warby (she/her)
Quality Improvement Coach, NCCMH



BREAKOUT 1 (4mins)

Share one thing about taking part in the collaborative that was different to what you expected.

BREAKOUT 2 (4mins)

One moment where taking part in this collaborative has made a difference to your team.

BREAKOUT 3 (4mins)

One thing you are going to do moving forward when the collaborative has ended.

What is your top tip for a team starting a similar project?

Follow the link in the chat or use this code at www.menti.com.

2768043

What word would you used to sum up your time on the Enjoying Work Collaborative?

Follow the link in the chat or use this code at www.menti.com.

80885510

Please share your feedback on today's Learning Set

See the chat box for the link

Close

Q↑

Emily Cannon (she/her)
Head of Quality Improvement, NCCMH



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