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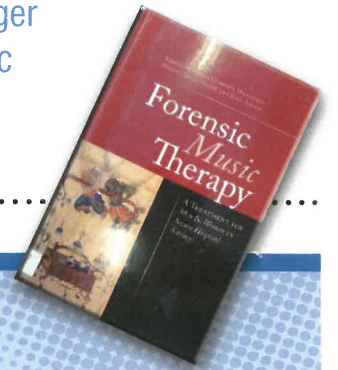
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Does talking about work place emotional stresses reduce sickness and improve wellbeing?



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INTRODUCTION / AIMS

Reflective practice meetings are recommended for supporting the wellbeing of mental health and public health practitioners but little is known about the time taken to produce beneficial effects and the size of such benefits.

This pilot study evaluates the impact of introducing a forum to discuss psychosocial and emotional aspects of providing patient care.

METHODS A mixed methods observational study.

The Intervention;

Reflection on emotional impact of work, team relationships, re-organisation and organisational culture.

Duration; 90 minutes, monthly. Delivered using a group psychotherapy model by a facilitator external to the department.

Participants; A team consisting of art therapists, music therapists, assistants and departmental manager, n=8.

Measures and Analysis;

Sickness records; Pre-treatment and follow-up comparisons of sickness absence days.

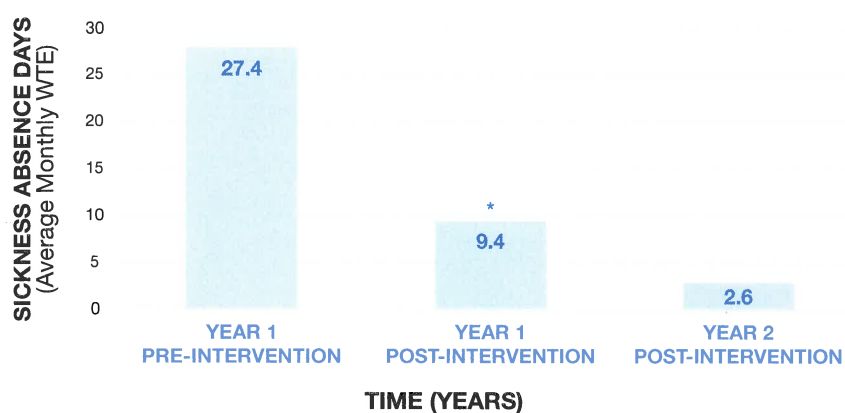
CORE-OM (Clinical Outcomes in Routine Evaluation): Comparisons of Self-rated Global distress scores 3 months, 10 months and 15 months post intervention.

Semi-structured interviews and thematic analysis of the experience of reflective practice.



RESULTS

SIGNIFICANT REDUCTION IN SICKNESS DAYS



Statistically significant reductions in the department average monthly WTE (whole time equivalent) monthly sickness absence days.

Sickness absence rates reduced almost threefold and continued to reduce beyond the first year.

Sickness absence days continued to improve in year 2 despite a 25% increase in work case loads.

REDUCTION IN DISTRESS SCORES



Thematic analysis of interviews with participants

At interview the participants reported the experience of reflective practice meetings as being beneficial in developing interpersonal learning, especially in improving understanding of others roles, impact of behaviour on others and ability to talk directly rather than letting issues bubble under the surface.

Other benefits

The success of the initial evaluation led to the expansion and adoption of the model by the wider department encompassing approximately 120 staff.

CONCLUSIONS/ COMMENTS

- Reflective practice meetings delivered in this way were associated with improved absence, staff well being and team relationships.
- The treatment was cost effective in terms of costs saved through reducing staff sickness levels, increased resilience and productivity in terms of the team maintaining an increased caseload.
- The findings suggest a cumulative mode of action, where benefits increase over time and supports the findings of recent reviews in this area.¹
- The return on investment from reflective practice meeting needs to be quantified through economic evaluations.
- Future evaluations need to be of sufficient duration (i.e. longer than one year) to incorporate longer term cumulative benefits of the intervention.

Limitations

The pilot project was carried out in a high secure forensic setting in which 'toxic emotional processes' have been frequently described.² The benefits of introducing reflective practice meetings in such settings may therefore be more marked than in office settings.

¹ - Better Mental Health for All: A public health approach to mental health improvement (2016) London: Faculty of Public Health.

² - Gordon, J & Kirtchuk, G (eds). (2008) Psychic assaults and frightened clinicians: countertransference in forensic settings. London: Karnac.

