

Editorial

Physician heal thyself (Luke 4:23)

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Summary

The performance culture of the health service means that the psychological well-being of staff is becoming paramount in maintaining the workforce and in sustaining psychological health and morale. A Charter for Psychological Staff Wellbeing and Resilience is introduced that puts the onus on us and on employers to make the necessary adjustments to their workplace cultures and encourage professionals – us – to break through the barrier of stigma.

Declaration of interest

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There is a paradox at work in the health service. The National Health Service (NHS) wants to attract and, although in decreasing numbers, continues to attract, staff who want to be employed in one of the caring professions. On the other hand, however, the conditions under which most of us now work are, instead, making us uncaring towards our patients and towards each other.

Staff well-being in the NHS

There are now a large number of reports that are showing how workers in the NHS are expected to work to tighter and tighter performance targets¹ and this is now having a knock-on effect. In 2013–2014, for example, nearly 16 000 000 staff days were lost on account of staff sickness.² For those of us who work, or who have worked, in mental health services, sickness absence rates are significantly higher than in other fields.³ Staff well-being should surely now be an imperative, and we are no longer in a position of ignorance. Indeed, as NHS England Chief Executive Simon Stevens himself said last year, 'Staff wellbeing is no longer a "nice to have", it's a "must do".'⁴

It is a tragically well-known fact that healthcare professionals' rates of suicide are among the highest of all occupational groups in England and Wales, but why is it that we do not seek help? The answer is, almost invariably, stigma, together with shame, anxieties about confidentiality and a fear of the negative impact

of disclosure.^{5–7} As Professor Lewis Appleby so rightly said, 'Doctors who are ill need to be treated, not punished'.⁸ And yet well over two-thirds of NHS trusts have no plans or policies in place to support their staff.

Why not? We know all too well that organisations which put the health and well-being of their employees first perform much better than those who do not. There are measurable effects on such factors as employee retention and staff sickness absence but these factors can also be translated directly into financial savings for Trust Boards. It is not at all surprising, therefore, that the recent independent Mental Health Taskforce recommended that NHS England should incentivise NHS staff well-being under the current standard contract by 2017.

An annual survey of well-being¹¹ has found that self-reported depression is increasing among the 1106 members of the psychological therapies workforce who participated in the study. Self-reported rates of feelings of depression have increased from 40% last year to 46% this year, with feelings of failure increasing from 42% to just under 50%. These figures do not, of course, occur on their own because the same survey found a statistically significant increase in self-reported stress with 70% of respondents now saying that they feel stressed often or all the time, which is up 12% from the previous year. One quarter of respondents told the authors that they have a chronic, long-term condition.

Where, then, is the blame to be laid? There was an increase in feeling the pressure to meet targets all the time (from 41% to 45%) as well as increased dissatisfaction with time spent on administration and performance requirements (from 20% not at all satisfied in 2014 to 41% in 2015). There are, of course, many other factors too, including the incidence of reported bullying and harassment, which has doubled. Indeed, the British Association for Behavioural and Cognitive Psychotherapies warned, only last year, that: 'an NHS culture of bullying and intimidation, [is] preventing us from openly raising (sic) our concerns, and undermining our clinical judgment'. 12

The role of organisations in staff well-being

So what is the answer? West & Dawson¹³ have identified organisational factors such as a culture based on integrity and trust but individual factors such as real clarity, work–life balance, freedom and autonomy, and recognition and reward are important as well.¹⁴

Several employer and provider organisations, including the South London and Maudsley and Tavistock and Portman NHS Foundation Trusts, mental health charities, including Mind and Rethink, a number of learned societies and professional associations, including the Royal College of Psychiatrists, the British Psychological Society and the British Association for Behavioural and Cognitive Psychotherapies and third-sector providers, including the Anna Freud Centre and the Westminster Pastoral Foundation, committed themselves to a new Charter for Psychological Staff Wellbeing and Resilience in the NHS that was launched in February this year as a joint partnership initiative of the British Psychological Society and the New Savoy Conference.¹⁵ The over 20 signatory organisations committed to promote effective services through models of good staff well-being at work, to engage in reflective and generative discussion with colleagues, other leaders and frontline staff, to co-create compassionate workplaces and sustainable services and to monitor and improve the well-being of their staff.

To quote from the Charter, 'The Charter aims to reset the balance in the drive to improve access, [and], asks for a great focus on support for staff wellbeing to sustain the impact that we know that psychological services have when they are delivered effectively.' The Charter continues, 'Those services which have good staff wellbeing will be more sustainable and make the most difference to those they are helping.' 15

The Charter has attracted all-party political support. The former Community and Social Care Minister, Alastair Burt said, 'I can't be standing on platform day in, day out, talking about a world-leading service if I'm standing on something that's rusting away beneath me . . . It can't be done unless [staff] feel valued and unless [staff] feel [that their] wellbeing is taken seriously'. The former Shadow Mental Health Minister, Luciana Berger, said: 'It is unacceptable that the dedicated psychological professionals who provide vital support to those in need are themselves increasingly suffering from stress and other mental health conditions' and former Care Minister, Norman Lamb, said: 'Quite apart from the clear moral argument for taking staff wellbeing seriously, we cannot hope to achieve equality for mental health unless the psychological workforce is properly supported'. The standard standard supported'.

The way forward

So, what next? A Wellbeing Collaborative Learning Network has now been established through which to take the Charter forward but we all have a responsibility for ourselves, our colleagues and all of those with whom we work. Our annual survey has provided a catalyst for people to realise they can start to speak out about staff well-being in ways that benefit us all. We may not have the capacity to heal ourselves but we can do a lot more to keep ourselves psychologically and physically healthy and engaged and to stop ourselves from falling ill, and our employers, and those of us who are employers, have a moral duty to offer meaningful help. It is incumbent on all of us to consider how we can contribute to this, both on an individual and on a collective basis.

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