

Association of Anaesthetists – 11 suggested actions for anaesthetic department Wellbeing Leads

1

Encourage all staff who have worked in ICU and anaesthetics at any stage during the COVID-19 pandemic to complete the NHS England wellbeing survey.



2

Work with colleagues to ensure that all staff are able to take annual leave – to reconnect with family and friends.



3

Set up a 'Wellbeing board' or similar resource in the department with:

- a. Association of Anaesthetists [Wellbeing Resources](#)
- b. Mark Stacey's '[Bakers Dozen of Wellbeing](#)'
- c. [NHS People national resources](#)
- d. [NHS Talking Therapies](#)
- e. link to your local hospital Wellbeing initiatives
- f. [Mindedhub](#)



4

Encourage 'good digital hygiene' e.g. a curfew on departmental WhatsApp messages after 7pm. Consider turning off WhatsApp notifications in the evenings and at weekends.



5

Promote as much education and training as possible during 2021 – to refresh old skills and learn new ones:

- a. Work with colleagues to ensure that staff are able to take allocated study leave and attend courses, conferences and workshops
- b. Consider running multidisciplinary training sessions in theatres and ICU during the normal working day



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6

Organise '[Coffee and a Gas](#)' events and departmental social events when social distancing rules allow. Signpost other virtual spaces where doctors can decompress e.g. Practitioner Health Common Room [[Home Workers Common Room Flyer Live.pdf](#) (practitionerhealth.nhs.uk)] or Doctors' Mess [infodoctorsmess@gmail.com, [Twitter @DrsMess](#)].



7

Promote your educational supervisor network for trainees and encourage all other members of the department to choose a mentor [[Mentoring | Association of Anaesthetists](#)] or encourage a 'buddy system'.



8

Encourage department rota organisers to arrange a 'phased/supervised return to work' for staff who have worked exclusively in ICU or who have been self isolating for the past year, with doubling up staff on theatre lists as appropriate.



9

Ask department secretaries/coordinators to keep a list of contact addresses and next of kin details for all staff, and to update this every 6 months.



10

Highlight the recommendations of 'Suicide amongst anaesthetists 2019' working party [[Suicide amongst anaesthetists 2019 | Association of Anaesthetists](#)] and highlight the information available on the Association of Anaesthetists' website [[Suicide | Association of Anaesthetists](#)]. Consider signing up to a suicide-prevention charter as a department, e.g. The McQueen Charter [[The McQueen Charter | East Anglian Air Ambulance | Together we save lives | East Anglian Air Ambulance](#) (eaaa.org.uk)].



11

Promote the '[Going Home Checklist](#)' [[tcoy leaving work cl poster stg1 v3.pdf](#) (mind.org.uk)]: consider printing it and placing on the doors to changing rooms and your department.



Association of Anaesthetists – Seven actions for department Clinical Directors

1

Campaign for adequate lockers, scrubs, car parking facilities, bike racks, shower facilities, food and drink availability 24/7 and free on-call rooms for rest during and after night shifts [[Fight Fatigue resources | Association of Anaesthetists](#)]



2

Ask your departmental appraisers to include an enquiry about that person's COVID experiences at work and at home during their annual appraisal, and establish a personalised plan which might help that person transition back to a more usual way of working if needed. Remember that difficulties will not all manifest straight away - so performance management, critical events etc. need to be investigated with a 'how are you?' approach to start with.



3

Consider training members of the department in active listening skills (e.g. REACTMH) to support staff wellbeing. The scheme where this was provided for free is at present closed, but this link gives contact details for departments interested in arranging such training [[REACT MH Conversation Training - Our NHS People](#)].



4

Consider scheduling formal protected time for multidisciplinary teaching and training in theatre and ICU for all staff.



5

Consider liaising with Head of People/Occupational Health about introducing a peer support programme such as Trauma Risk Management (TRiM). Providers include:

- a. [[DNA TRiM - Design and Deliver Bespoke and Sector Specific Learning Activities](#)]
- b. [[March On Stress >> Trauma Risk Management \(TRiM\)](#)]
- c. [[TRiM-Trauma Risk Management - An overview - Strongmind Resilience](#)].



6

Consider whether your department could offer members a sabbatical and how this could be done.



7

Look after your own wellbeing - in particular the Clinical Director should take allocated annual leave and aim to model behaviours eg taking breaks, having lunch. Have a plan to set boundaries (e.g. email /phone) when away from work or on leave.



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