



## **Australian & New Zealand College of Anaesthetists**

### **SA and NT Trainee Welfare Support Guidelines Feb 2012**

*The tragic suicide of one of our South Australian trainees in 2009 brought the issue of welfare of trainees sharply to the foreground. This tragic event was the focus of discussion at a Special Trainee Welfare Meeting of the Regional Education Sub-Committee on 13<sup>th</sup> November 2009.*

*At this meeting there was recognition of the stress and distress that trainees can encounter during training, and a desire to put in place measures to identify and support trainees who are experiencing distress.*

*The South Australian Education Sub- Committee has accepted that it has some responsibility to promote trainee well-being ,to provide support and aid access to appropriate resources. It is important that trainees have access to appropriate health and well-being professionals and services. It is not the role of the College or the Committee to treat or assume responsibility for mentoring or treatment. The Committee can, however, assist trainees to access professional assistance. This initiative has been welcomed and supported by the SA & NT Rotational Trainee Committee.*

**The aim of these guidelines is to provide a list of key issues and tasks that contribute to successful outcomes.**

Trainees as adults are ultimately responsible for their own wellbeing. However, they are also subject to many internal and external stresses during training. Some stress is shown to enhance performance, but prolonged stress can lead to distress; and if prolonged can lead to impairment.

Trainees are a vulnerable group exposed to stress from expectations of high academic achievement, 'perfect' clinical performance, unsocial hours, critical and adverse events and the difficulties of balancing home and work life. They have immediate easy access to addictive and lethal drugs. This provides an environment in which self or patient harm may result if an anaesthetist becomes severely impaired by major distress, depression or substance abuse.

Early recognition and initiation of a support system may help prevent distress becoming severe or open up communication where individuals are unable to reach out to family, friends or colleagues.

Mentoring is known to be functioning in only one of SA training hospitals currently. The majority of trainees in the SA and NT are rotational trainees who necessarily move from hospital to hospital and may not have direct access to their chosen mentor, or may, for various reasons not be aware of a problem with well-being, or who despite awareness are unable to reach out for support

### **PRINCIPLES OF TRAINEE SUPPORT SYSTEM**

- The underlying principle for welfare support is the recognition that anaesthetic trainees as adults are primarily responsible for their own welfare.
- Support must maintain complete confidentiality, to protect the trainee's privacy, and promote trust between the parties.
- The trainee support system does not replace professional support or mentoring relationships already established, but seeks to complement these.
- All trainees on rotational and in non-rotational positions in South Australia should have access to or be offered support from Support Representatives in their workplace.
- Patient safety and the safety of the trainee are always of the highest priority in dealing with issues of trainee support.
- Support should be offered and accepted voluntarily.

### **GOALS OF SUPPORT**

- To address trainee support at the entry level to SA hospitals or rotational training scheme.

- To educate trainees of the value placed on self-care and health by ANZCA (Declaration of health on advanced vocational training form and Assessment of self-care by trainers in ITA under Professional role) through information available on Welfare of Anaesthetists on the ANZCA website (SIG Resources)  
(*SIGs are tripartite organisations – of ANZCA, ASA and NZSA*)
- When stressed and distressed trainees are recognised, offer support before impairment or crises occur.
- To offer on-going support, throughout training and professional examinations.
- To role model and encourage healthy responses to change, adversity and failure.
- To offer authentic, unbiased support irrespective of challenging behaviour or performance.
- To advise and help trainees to access resources where professional help is indicated (e.g. from GPs medical specialists, counsellors,, psychologists or psychiatrists).
- To provide easily available information that enables trainees to seek crisis help (e.g. Beyond Blue literature).

### **SUPPORT ROLES**

The key to successful implementation of trainees support is the involvement of interested and engaged individuals who are willing to be involved in supporting SA &NT anaesthetic trainees. The team is headed by the Regional Education Support Officer who has a special interest in doctors' health.

Issues of privacy and reluctance to take on responsibility must be weighed carefully against the need for proactive measures. Confidential record keeping and an open and communication strategy between trainees, support representatives and the Regional Trainee Welfare Officer is of paramount importance.

Where concerns exist for a trainee's welfare, the support representative must report to the Regional Trainee Welfare Officer.

Where concerns exist for patient safety, the support representative must report to the Head of Department, Supervisor of Training and the Regional Trainee Welfare Officer.

NB Where patient safety is regularly jeopardised , a report must be made to the relevant Medical Board/ AHPRA

## **THE REGIONAL TRAINEE WELFARE OFFICER**

A Regional Trainee Welfare Officer is a Consultant Anaesthetist with a particular interest in doctors' health and well-being. The Regional Trainee Welfare Officer leads and co-ordinate support for trainees in the SA&NT Training Scheme.

The Regional Trainee Welfare Officer will be:

1. A Consultant Anaesthetist with no direct impact on judging, or deciding professional outcomes, other than contribution to ITAs. Heads of Department , Supervisors of Training and College Examiners may not act as the Regional Trainee Welfare Officer.
2. An individual who is interested and willing to be involved in supporting South Australian anaesthetic trainees during their training in the region
3. An individual who is able and prepare to monitor and offer support in a manner that maintains confidentiality and privacy.

## **ROLE OF THE REGIONAL TRAINEE WELFARE OFFICER**

The Regional Trainee Welfare Officer will:

- Be available to trainees, trainee representatives and support representatives to discuss welfare issues.
- Keep confidential records of those trainees seeking or requiring support
- With the permission of the trainee maintain contact with professional and employer representatives where appropriate
- Lead and coordinate welfare initiatives in collaboration with the support representatives, and the SA Trainee Committee.
- Seek to provide resources to support trainees and support representatives.
- Work closely with the Regional Education Officer, Rotational Supervisors, Supervisors of Training and the other members of the Regional Education Committee ( a sub-committee of the ANZCA SA/NT Regional Committee) within the bounds of confidentiality to find supportive and achievable outcomes in the best interests of the trainee.

## **ROLE OF SUPPORT REPRESENTATIVES**

The Support Representative for each hospital will be a:

- A Consultant Anaesthetist with no direct impact on judging or deciding professional outcomes other than contribution to ITAs. Heads of Department , Supervisors of Training and College Examiners may not act as a Support Representative.
- An individual, who is interested and willing to be involved in supporting SA &NT anaesthetic trainees during their attachment to their hospital department.
- An individual who is able and prepared to monitor and offer support in a manner that maintains confidentiality and privacy.

Support Representatives will each have their own styles of supporting trainees but the following key roles are set out to guide them.

### **Key Roles of the Support Representatives**

The Support Representatives:

- Will familiarise themselves with the following essential resources, which provide evidence-based guidance on matters of recognition of stress and trainees in difficulty.

*Welfare of Anaesthetists: Resource Documents.*

<http://www.anzca.edu.au/fellows/sig/welfare/introduction.html>

*SA iMET South Australian Institute of Medical Education and Training:*

*Trainee in difficulty handbook / Download from hyperlink below.*

<http://www.saimet.org.au/education/tidh.php>

- Will be observant of trainees' progress and wellbeing during attachment to their departments, and act as a resource to other colleagues who may have concerns for the wellbeing of any trainee.
- Will provide access to experienced and unbiased listening, and motivation for trainees during periods of stress or difficulty whether physical or mental.
- Provide access to informed opinion and advice of one who has successfully navigated anaesthetic training. Trainees may benefit from insight into the importance of personal wellbeing through a 'professional friend', who role models and acts impartially to help identify personal, health and mental wellbeing or development needs.

- Will be aware of the possible conflict between the doctor as a trainee and as an employee of an organisation (with its specific expectations, and responsibilities of performance) when advising and supporting trainees.
- Will NOT provide ‘unspecialised’ medical services to any trainee
- Will provide information and resources to aid trainees access specialised mental and physical welfare services including, GPs, specialists, psychiatrists, psychologist and rehabilitation. (Lists and literature available from the Regional Trainee Welfare Officer)
- Will immediately take action, to protect patient safety.
- Will immediately act if there are signs of severe impairment or distress suggesting the risk of, or actual criminal activity, self-harm or suicide.
- Report any major concerns regarding the welfare of a trainee to the Regional Trainee Support Officer.

### **MANDATORY REPORTING**

The new national regime for mandatory reporting of health professionals commenced on 1 July 2010. The *Health Practitioner Regulation National Law* makes all health professionals liable to make mandatory reports in relation to the conduct of other health professionals.

### **Notifiable Conduct**

The trigger for reporting is if “notifiable conduct” occurs. This is where a registered health practitioner:

- practices while intoxicated by alcohol or drugs;
- engages in sexual misconduct in connection with practice;
- places the public at risk of substantial harm in his or her practice because of impairment;
- places the public at risk of harm in his or her practice in a way that constitutes a significant departure from accepted professional standard.

### **When To Report**

A registered health practitioner is required to report another registered health practitioner if the first person forms a *reasonable belief*, in the course of his or her practice, that notifiable conduct has occurred. That is, if you are a registered health practitioner you must report if you believe that another registered health practitioner has behaved in a way that constitutes notifiable conduct.

Under these circumstances a report must be made to the Australian Health Practitioner Regulation Agency (AHPRA) as soon as practicable. There is no set time limit, but clearly reports of notifiable conduct should be made at the earliest practicable opportunity, once a reasonable belief has been formed that notifiable conduct has occurred.

Notification is also required in relation to students. Students, who are required to register under the new law, must also be notified if they are placing the public at substantial risk of harm because of impairment.

### **What Is Not Excepted**

There is no exception for information which comes to a health practitioner as a treating doctor or treating health professional or for information obtained in the course of a health program for health practitioners (unless the program is registered under the statutory schemes referred to above).

### **Employers**

If an employer reasonably believes that an employee health practitioner has behaved in a way that constitutes notifiable conduct, a mandatory report to AHPRA must be made. Many health professionals are not employees of hospitals or aged care facilities, and accordingly the report is only required in respect of health professionals who are employees.

If AHPRA becomes aware that an employer has failed to make a mandatory report, AHPRA is required to report that failure to the responsible State or Commonwealth Minister for consideration and action.

### **Additional Support**

For Doctors health promotion and support in South Australia visit Doctor's Health SA [www.doctorshealth.sa.com.au](http://www.doctorshealth.sa.com.au)

### **References**

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