



The Larrey Society

Shaping tomorrow's ambulance policies today

The 'Ambulance Burnout' Issue

The Larrey Society

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Introduction

The Larrey Society was established in March 2015 as the first cross sector “think tank” to help shape the policies for an ambulance service fit for purpose in the 21st century. Membership is open to individuals who are currently or have been previously directly involved in public, independent or voluntary ambulance services and wish to collaborate, share ideas and views under The Chatham House Rule on confidentiality.

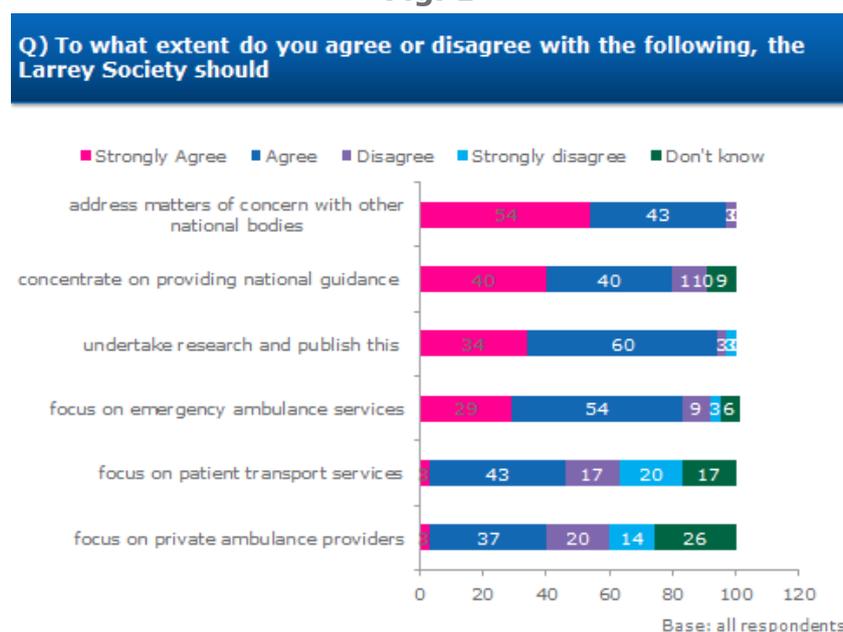
In April the Society commissioned DJS Research, an independent market research company, to carry out a survey with its members. DJS worked with the Larrey Society panel of advisers to develop a short questionnaire to canvass member views on the direction of the society and what issues members believe are important.

The questionnaire was set up as an online survey, and seventy members were invited by email to respond. The online survey took place in May 2015 and a total of 35 members responded. This report looks specifically at the survey results relating to the issue of ‘**Burnout**’, a psychological term relating to exhaustion and diminished interest in work often resulting from overwork and work related stress.

Direction of the Society

Members were asked to indicate their level of agreement with a series of statements about the potential future role of the Larrey Society (see fig. 1 below):

Fig. 1





Agreement was highest for the statement 'the Larrey Society should address matters of concern with other national bodies', with 97% of members agreeing with this statement (54% strongly agreeing). There was also widespread support for the society concentrating on providing national guidance (80% agree) and undertaking/publishing research (94% agree).

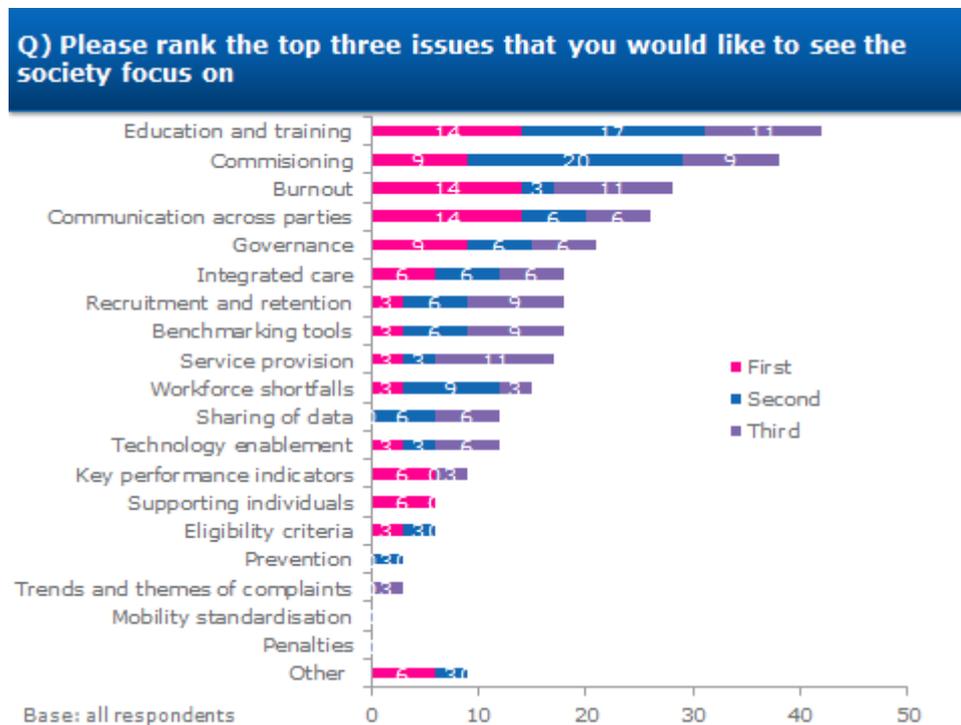
Priority Issues

Members were then asked to indicate which issues they feel are important for the society to focus on (they were asked to choose as many issues as they wanted from a list, and could also make suggestions of their own). Overall, 40% of members chose burnout as an area of focus for the society.



Members were then asked to choose, in rank order, the *top three* issues that they think the Larrey Society should focus on (see fig. 2 below):

Fig. 2



The highest priority issues according to members are education and training, commissioning and *burnout*.



Consequences of Burnout

Members were asked to indicate the consequences of the issues that they would like the Larrey Society to focus on. In the case of burnout, the main consequences were highlighted as:

- Operational delivery.
- Patient safety.
- Quality / care.
- Team working.
- Damage to individual staff.

Members were also given the opportunity to comment on why they feel that the issues chosen are important. A variety of comments were made which highlighted the impact of burnout on the workforce and ultimately the quality of patient care:

Member Comments

"It is evident through research that a workforce that has high stress levels or are suffering burnout does not deliver good quality patient care, increases the burden onto other staff and the circle begins. Significant numbers of people are suffering from this and the Society has an opportunity to re-address this balance."

"In an advancing world of out-of-hospital care, the need for better commissioning, integrated care and strict governance relies on the workforce that you have. If your workforce is "burnt-out" then none of these are possible. If your leaders are pressured to deliver against bad contracts or commissioning then the delivery of care to patients is diminished and the focus then becomes financial before being on "winning" the contract - usually with false promises and a load of assumptions."

"Front line staff are at breaking point due to burnout and staff shortages. Recruitment is important to provide more resources and retention is important to keep experienced staff. Communication between parties, especially political, needs to be made a priority."



A number of comments also linked burnout to other issues such as a lack of adequate education and training and increased demand on services:

Member Comments

"Education and training are the first things to be cut when the REAP level increases. With an average 10% increase per year in service demand, presumably the lack of 'mandatory' training will continue. This absence of governance results in a lowering the overall standard of operational clinician as training needs and education opportunities are not identified. This in turn results in a less empowered workforce which ultimately means that we do not get the best from staff and that the patient does not receive a high standard of care."

"The key issues affecting ambulance services concern ensuring high quality of care despite increasing demand placed on services. Increasing the capability of paramedics to treat at the point of scene, through additional training in advanced clinical skills and the ability to independently prescribe should be seen as a priority. Focus should also be on training/recruitment of staff to meet demand, retention of staff, and avoiding burnout/stress."

The qualitative feedback from members therefore suggests that burnout is not an issue to be considered in isolation, but needs to be considered alongside some of the other priority issues affecting the sector.

The Larrey Society and Burnout

Members were also asked to consider the role that the Larrey Society might play in addressing the issues affecting the ambulance sector, and encouraged to comment on this. Responses generally fell into one or more of the following categories:

- Influence and challenge policy makers to address the issues highlighted.
- Bring together parties from the NHS, private sector and third sector to shape the industry and improve the quality of service for the patient.
- Be an impartial national voice representing the industry.
- Promote best practice and innovation.
- Gather evidence, carry out research and generate publicity about the issues affecting the sector.



Some example comments are provided below.

"To act as a critical ally and impartial voice in ensuring parity between the different Trusts and companies involved in the industry. To act as a representative on a national scale for industry wide issues."

"Assembling research, reviewing existing research and commissioning new insights. Being a voice for the patient and workforce. Shining a torch in the darkness where others fear to tread."

"The Society has the ability to achieve anything it wants. My initial thoughts are, at last, there is an opportunity to influence key decisions, promote good practice and establish guidance for the entire industry."

"By identifying mutual areas that members feel should be focused on within ambulance services, it is hoped that consensus can be reached on how these services should be run. This in turn could affect service governance and influence government legislation."

"The Society is bringing together leads from all areas of healthcare focussing on transport. Transport, both urgent and non-urgent, is all too often overlooked - however it is key in assisting with the flow of patients through the various health care settings. I would hope that by bringing a varied and cross sector of health care professionals and providers together the Larry Society can provide guidance and assistance in bringing change to the service and also recognition of how transport is a fundamental and crucial part of an efficient health service."



Universal Impact

Burnout is neither a new health condition nor is it confined to a specific part of the world nor to any specific job or profession.

It was first coined by German-American psychologist Herbert Freudenberger in 1974, burnout is broadly defined as "physical or mental collapse caused by overwork or stress." It's a universal condition, manifests in many different countries around the world

Since a 2000 World Health Organization report noted that in most countries there was no specific legislation addressing the impact of job stress some governments have taken steps to recognize and prevent burnout; for example in the United Kingdom, the Health & Safety Executive has created management standards to educate employers about work-related stress and make sure they are complying with requirements. Employers who don't comply can face criminal charges or fines, and employees can also bring civil suits against them.

As the research among Larrey Society members has confirmed burnout has become a serious problem for our nation's ambulance service with an increase in stress-related sick leave coupled with a rise in resignations, has created such a major shortage of qualified paramedics, that NHS ambulance trusts have been forced to recruit from abroad to fill the gaps as best they can.

According to the latest available information both the number of paramedics on stress-related leave and the amount of time taken off have increased dramatically in the last three years. Paramedics in England took a total of more than 40,000 days off in 2014 as a result of stress-related illnesses, up 28% since 2013.

Burnout is not only confined to frontline ambulance crews; it impacts on the health of emergency medical dispatchers (EMDs), the first point of entry for emergency calls, and who are the conduits for information between civilians and emergency workers.

Research to date has focused on the direct, hands-on contact with distress, injury, violence and death as the central cause of stress. The role of emergency dispatchers is positioned as more peripheral, which presumes that because they are not present in the field, their exposure to stressful events is more removed and they are, thus, less likely to experience the negative consequences of stress. A future stress-related Larrey Society research project will focus specifically on the impact on dispatchers.



GPs are equally affected by burnout, according to the latest *Pulse* research. The largest ever survey conducted in the profession showed that 50% of 2,230 UK GPs are at high risk of burnout, up four percentage points from the same survey two years ago.

GP leaders say the health service has become an 'industrial hazard' and that burnout is forcing more GPs to leave the profession.

The Nuffield Trust recently warned that the implications of burnout go beyond the human condition and signals danger for the NHS and the plans for an unprecedented £22 billion in savings and seven day working by 2020.

In a briefing to MPs it highlights the growing trend of hospitals relying on agency staff, problems recruiting and retaining GPs and a rise in staff sick leave due to stress and argues that these factors, together with the continued effects of holding down staff pay, suggest that disengagement and burnout could hamper progress at a time of immense pressure on the NHS.

Taking Action on Burnout

Results from the Larrey Society member consultation suggest that addressing burnout and the work/life balance of ambulance crews is a high priority issue for the sector. The issue needs to be considered not in isolation, but alongside some of the other major concerns for ambulance service providers such as education and training, increased demand pressures and commissioning.

A Work Life Balance Code of Practice

The Society also tabled a 7-point code on Work Life Balance and called for its adoption by all public, independent and voluntary ambulance providers regulated by the Care Quality Commission as a corporate commitment to *all* employees who face continuous dangers to their emotional health of 'burnout' as a result of the 24/7 traumatic pressures of their jobs.

Key Actions

In addition to any HR activities currently in place to address this issue the code advocates that by the end of 2015 all regulated ambulance organisations should:

1. Form a special work life balance task force comprising representatives of management and employees;



2. Conduct an organisation-wide consultation programme in order to identify the extent that employees and their families are affected by the consequences of 'burnout';
3. Draw up an action plan which includes the introduction of Key Performance Indicators (KPIs), management and employee training to recognise early signs of burnout, exit interviews and access to an independent counselling service for employees and their families.
4. Publicise the plan internally & externally so that all employees, their families and the public at large are confident that work life balance is formally recognised and is being addressed;
5. Submit the plan to the Care Quality Commission as a benchmark for subsequent review at the end of years 2016, 2017 and 2018.
6. Include a copy of the plan and subsequent updates, including any CQC comments, in all pending and future tenders for NHS contracts.
7. Ensure all leaders are adequately trained with a professional qualification in leadership from an accredited body (NHS Leadership Academy/Chartered Management Institute/Institute of Healthcare Managers) and that specialised training in recognising employee 'burnout' and how they can support their employee better is provided. This should be done in conjunction with a review of policies and procedures.

Note: The action plan of each organisation will need to contain specific different detail in order to meet local and regional service requirements.

The Larrey Society would like to thank DJS Research and all those individuals who took the time to take part in the member consultation and helped produce 'The Ambulance Burnout Issue' Report. The full results of the members' consultation will be available soon.



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