

FAQ

FREQUENTLY ASKED QUESTIONS

Managing stress and the mental health of your GP registrar

As a GP supervisor it is vital you teach your registrar how to manage their stress and mental health.

In doing so, you will help them build resilience for a successful training term in your practice, and also a happy and rewarding GP career.

Highlighting the importance of self-care will help your registrar successfully adjust to the pressures of general practice and boost their ability to deliver best practice care.

This resource aims to help you start the conversation.

How significant is stress and poor mental health in doctors?

A national survey by Beyond Blue in 2013 revealed doctors had substantially higher rates of psychological distress and attempted suicide compared to the Australian population and other professionals.

The discrepancy was particularly significant in doctors aged 30 years and under – the predominant age group of GP registrars.

A smaller survey by BMC Medical Education, also in 2013, showed only 10 per cent of the respondents had a high resilience score.

Resilience was positively associated with compassion satisfaction (the pleasure you derive from being able to do your work) and personal meaning in patient care.

Resilience was negatively associated with burnout, secondary traumatic stress inhibitory anxiety, general intolerance to uncertainty, concern about bad outcomes and reluctance to disclose uncertainty to patients.

For further reading, see the following surveys:

- National Mental Health Survey of Doctors and Medical Students
https://www.beyondblue.org.au/docs/default-source/research-project-files/bl1132-report---nmhdmss-full-report_web
- A survey of resilience burnout, and tolerance of uncertainty in Australian general practice registrars
<https://bmcmededuc.biomedcentral.com/articles/10.1186/1472-6920-13-2>

How can I start the conversation about stress with my registrar?

The Perceived Stress Scale (PSS) is a tool you can use with your registrar to start the conversation about how stressed they (or a patient) are feeling. Encouraging other staff in the practice to complete the PSS may also get more people talking about perceived stress, and management strategies.

Download the following link to PSS and use it in your teaching:

<http://podcast.uctv.tv/webdocuments/COHEN-PERCEIVED-STRESS-SCALE.pdf>

What can I tell my registrar about the PSS?

You can provide the following points:

- The PSS is a global measure of perceived stress.
- The PSS is a measure of the degree to which situations in one's life are appraised as stressful.
- Items are designed to tap into how unpredictable, uncontrollable and overloaded respondents find their lives.
- The scale also includes a number of direct queries about current levels of experienced stress.
- The PSS was designed for use in community samples with at least a junior high school education.
- The items are easy to understand and the response alternatives are simple to grasp.
- The questions are of a general nature and hence, are relatively free of content specific to any subpopulation group.

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What other tool(s) can I use in a conversation with my registrar about stress?

A 'stress inventory' is also a useful starting point for a conversation about stress.

Encourage your registrar to write all the reasons they might be stressed under two categories: external stressors and internal stressors.

A general example (**with patients**) may look something like this:

| MY 'STRESS INVENTORY' | |
|--|--|
| EXTERNAL | INTERNAL |
| <ul style="list-style-type: none"> • Major life changes • Work or school • Relationship difficulties • Financial problems • Being too busy • Children and family | <ul style="list-style-type: none"> • Chronic worry • Pessimism • Negative self-talk • Unrealistic expectations/perfectionism • Rigid thinking, lack of flexibility • All-or-nothing attitude |

http://www.helpguide.org/mental/stress_signs.htm

A more specific example (**GPs/registrars**) may look something like this:

| MY 'STRESS INVENTORY' | |
|--|---|
| EXTERNAL | INTERNAL |
| GPs | Registrars |
| <ul style="list-style-type: none"> • Time pressures • Threat of litigation • Excessive paperwork • Health reform/bureaucratic interference • Excessive hours/on call work | <ul style="list-style-type: none"> • Work conditions • Administrative concerns • Rural issues • Work/life balance • Family/job conflict • The exam • Patient's unrealistic expectations • Disrupted social life |

>> Schattner and Coman, MJA 1998, Dowell et al, NZMedJ 2000

>> Larkins et al AFP 2003
Schattner et al 2010, Chambers et al, BJGP, 1996

The GP-registrar example above is a reminder that what stresses registrars can be different to what stresses you as an experienced GP. So, having this conversation with your registrar can help you teach them stress management strategies relevant for their current life stage, and set the foundation for healthy stress management for their ongoing career.

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Do I need to be mindful about the different stresses experienced between registrars and experienced GPs?

It is important to remember the kind of stressors a registrar might face are different to those we face as experienced GPs.

Our life stages, age and career experience mean we have different pressures, coping mechanisms and supports to manage stress.

For example, a GP married with children may have a supportive partner who ensures healthy meals are provided when they work. With years of clinical experience, his GP is confident in his profession – but may feel guilty about their workload impacting the amount of time they can spend with their family.

Meanwhile, a young registrar may be living in a different city to their parents and support network. So, they are less likely to have support of someone helping with meals. Their stressors may include clinical and administrative uncertainties, the KFP exam, and feeling isolated from their support networks and social life.

By acknowledging with your registrar the different stressors you both face, you can help them prioritise what actions they can take for stress and mental health management.

Are there any other factors I need to consider which may influence stressors for my registrar?

Stress is influenced by many factors, including context, personality, and prior learning experiences. You may not know the previous traumas your registrar has encountered.

For example, if they had a bad experience during their hospital training, this may influence the way they deal with stressors in general practice.

Or they may have unrealistic expectations of the different pressures in general practice to the hospital system. For example, a lot of registrars may hope, or expect, a career in general practice to be more lifestyle friendly than shift work in a hospital. The reality that a GP career may not be a neat 9am to 5pm job, and the different responsibilities in the chain of patient care may cause new stresses they weren't prepared for.

For further reading about what stresses GPs versus GP registrars:

GP SURVEYS

- The stress of metropolitan practice <https://www.mja.com.au/journal/1998/169/3/stress-metropolitan-general-practice>
- Job satisfaction, psychological morbidity and job stress among New Zealand general practitioners <https://www.ncbi.nlm.nih.gov/pubmed/10935564>

REGISTRAR SURVEYS

- Stress, personal and educational problems in vocational training. A prospective cohort study <https://www.ncbi.nlm.nih.gov/pubmed/12833779>
- GP registrar well-being: a cross-sectional survey <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2835665/>
- Stresses, coping mechanisms and job satisfaction in general practitioner registrars <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1239665/>

In starting the conversation about stress with my registrar, how do I avoid alarming them?

Explain that stress is not always bad, in fact some stress is natural and healthy.

Good stress

The body's fight or flight response can enhance cognitive function, for example: in making safe clinical decisions for patients; or motivating decision-making which can help your registrar successfully overcome obstacles.

Bad stress

Prolonged or chronic stress can hinder a person's everyday life and be detrimental to their health.

You can speak to your registrar about the stress response system, or hypothalamic-pituitary-adrenal axis.

Learning to manage stress can build resilience. You can help your registrar by reminding them they are doing a good job. If they make a mistake, it's important to help them move on with an attitude of learning from that mistake. Explain that setbacks are an opportunity to learn.

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How will I know if my registrar is under stress?

Red flags can include:

- Registrar is disengaged.
- Avoidance of tasks or people.
- Missing meetings.
- Asking questions they know the answer to.

Be mindful that registrars can fly under the radar – or cover up, signs and symptoms of stress. You don't have to wait for red flags to intervene. Signs of stress can fall into four categories: cognitive, emotional, physical and behavioural.

COGNITIVE

- Memory problems
- Inability to concentrate
- Poor judgement
- Seeing only the negative
- Anxious or racing thoughts
- Constant worrying

EMOTIONAL

- Moodiness
- Irritability or short temper
- Agitation, inability to relax
- Feeling overwhelmed
- Sense of loneliness and isolation
- Depression/unhappiness

PHYSICAL

- Aches and pains
- Diarrhoea or constipation
- Nausea, dizziness
- Chest pain, rapid heartbeat
- Loss of sex drive
- Frequent colds

BEHAVIOURAL

- Eating more or less
- Sleeping too much or too little
- Isolating yourself from others
- Procrastinating or neglecting responsibilities
- Using alcohol, cigarettes or drugs to relax
- Nervous habits. For example, nail biting or pacing.

How can I manage a registrar who takes a lot of sick leave?

A registrar taking sick leave impacts the booking availability in your practice, and therefore GP workload. However, it is important you remain supportive of your registrar when they are sick. Many registrars have physical health issues when they first start in a general practice, but find it difficult or stressful to take the time they need to recover properly. Being led to feel guilty, or not being reassured it's ok to take the time they need, may adversely impact their ongoing health, stress management and ability to provide best practice care.

How can I help registrars to not feel stressed or intimidated by patients who have googled their symptoms or illness before face-to-face appointments?

Help your registrar cognitively “flip” their patients’ google searches, so they see it as a positive. Explain this shows their patient is engaged and health literate, rather than criticising the patient for being interested in their health care.

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Is there a simple exercise I can do to show my registrar how I manage stress?

You can start a discussion about stress management by doing the following exercise with your registrar. Write a list under two columns with the following headings:

- **SELF** – List what you do in your practice to help you manage stress.
- **PRACTICE** – List what you arrange in your practice to help you manage stress.

What are some strategies for managing stress I can discuss with my registrar?

Following on from the previous answer, you could discuss strategies such as those listed in the table below.

| SELF | PRACTICE |
|--|--|
| <ul style="list-style-type: none"> • Exercise • Hobbies or interests • Adequate sleep • Time for family, friends • Support from family • Meditation/yoga • Healthy diet • Alcohol (for and against) • Positive thinking • Work-life balance • Debrief with others | <ul style="list-style-type: none"> • Holidays, days off • Debrief (with peers) • Control patient numbers, time, work hours • Breaks for meals and timeout • Don't take work home • Work-life balance • Time to prepare for KFP exam and supporting their preparation with Random Case Analysis sessions |

How can I help my registrar develop the resilience needed for the inevitable uncertainties and challenges of general practice?

Role model and discuss the following:

- **Attitudes and perspectives** - Valuing the role of a GP, maintaining interest, self-awareness and accepting limitations.
- **Balance and prioritisation** - Setting limits, continuing professional development, honouring self.
- **Practice-management style** - Good business and practice management, surrounding yourself with good staff, proactive management of bullying and harassment, positive practice culture.
- **Supportive relationships** - Personal, professional, good communication.

You can also use **Cognitive Behavioural Therapy** (CBT) in your teaching to help registrars learn to feel comfortable with acknowledging their uncertainties. For example, ask your registrar to practise saying phrases such as, "I am not sure what is going on here, but this is what we are going to do to sort it out."

This method will help your registrar switch an unhelpful mindset to a helpful mindset.

UNHELPFUL MINDSET:

"To be a competent doctor I must show that I know what I am doing,"

HELPFUL MINDSET:

"To be a competent doctor I should feel comfortable in saying 'I am feeling uncertain.' "

For more ideas about helping your registrar build resilience, read:

- General Practice Supervisors Australia (GPSA) guides <http://gpsupervisorsaustralia.org.au/guides/>
 - *Identifying and Supporting GP Registrars at Risk*
 - *Managing Uncertainty in General Practice*
 - *Bullying and Harassment: Pursuing Zero Tolerance in General Practice*
- *Building Physician Resilience* <http://www.cfp.ca/content/54/5/722.short>
- *First Do No Harm - Being a Resilient Doctor in the 21st Century* by Leanne Rowe and Michael Kidd, 2009
- View Ted Talk, Kelly McGonigal: *How to make stress your friend* <https://www.youtube.com/watch?v=RcGyVTAoXEU>

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Should I also include value-based teaching to help my registrar develop resilience?

Yes. **Values-based teaching** complements what you teach your registrar about the clinical and business aspects of a GP practice. This teaching method introduces to your registrar the idea that developing resilience is part of the GP's skill set: that we have to learn from our mistakes, not be destroyed by them.

Examples of values-based teaching include:

- **Service** – Role model the value of a GP's role as one of service to help people (positive value), rather than a profession that leads to deprivation and compassion fatigue (negative potential).
- **Excellence** – Strive for excellence (positive value), but recognise you are not invincible (negative potential).
- **Curative competence** – Show competence in curing people (positive value), as opposed to omnipotence (negative potential).
- **Compassion** – Registrars who have had a negative hospital training experience, may have lost the ability to feel compassion. You can reverse this negative learning by role-modelling compassion (positive value), instead of cynicism and depersonalisation (negative potential).

What are some other useful resources for stress management which I can share with my registrar?

- **Australasian Doctors' Health Network.** This is a website for doctors and medical students, and doctors' families and colleagues <http://adhn.org.au/>
- **Black Dog Institute** relaxation techniques and hints to avoid harmful stress. You could also print these tips and techniques for your staffroom noticeboard. www.blackdoginstitute.org.au/education-training/health-professionals/psychological-toolkit
- **myCompass** is a new internet and mobile phone-based program for people with mild to moderate depression, anxiety or stress. <https://www.mycompass.org.au>
- Encourage your registrar to have their own family doctor independent to your general practice.