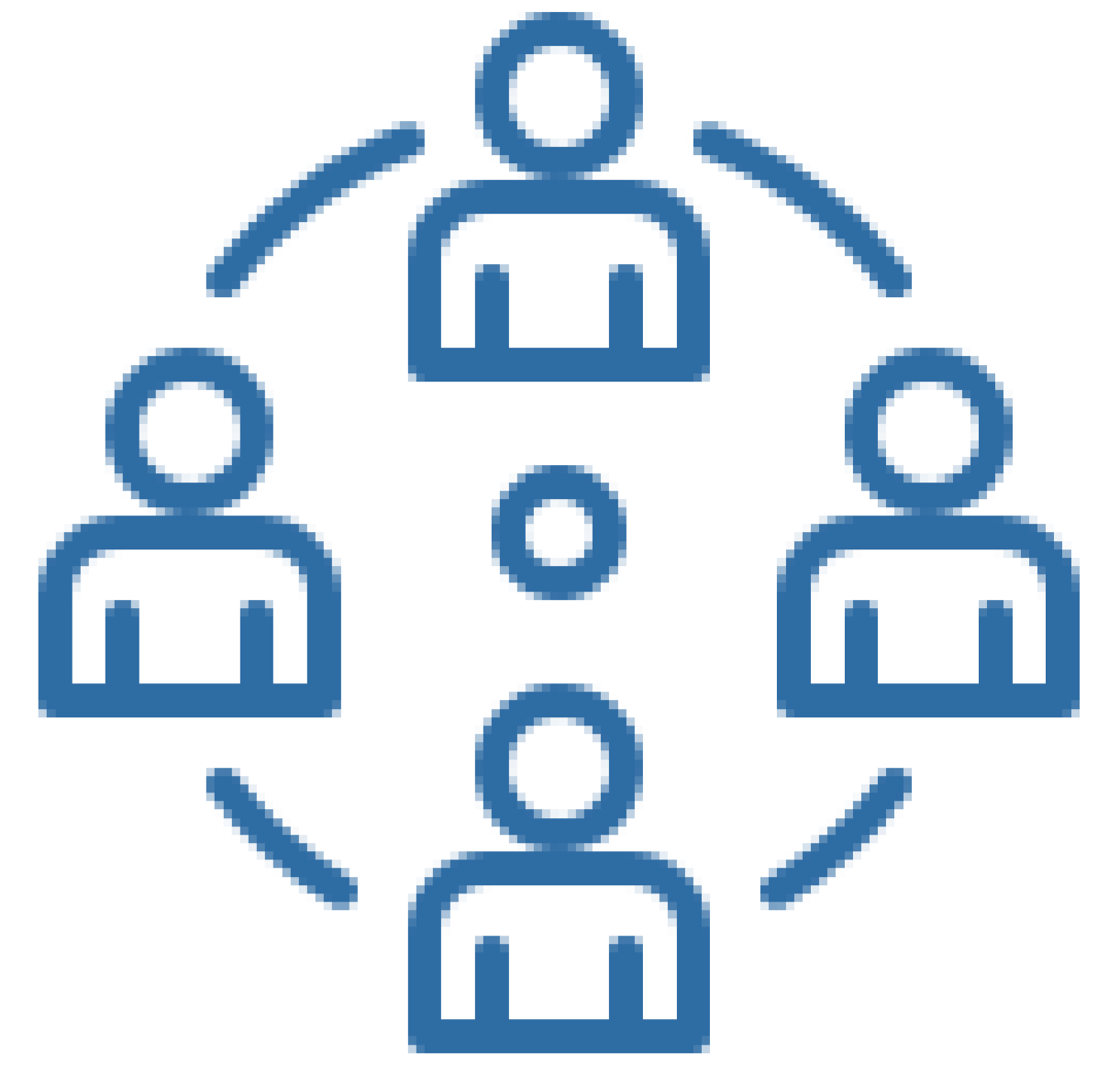


TRAINEE-LED ONLINE SUPPORTIVE SPACES FOR MEDICAL COLLEAGUES: Providing a supportive space for covid frontline workers

BACKGROUND

At the start of the Covid-19 outbreak in the UK, as cases were going up daily, we found our daily working lives as higher trainees in CAMHS was changing beyond all recognition. A group of us began reflecting on how important, powerful and helpful the reflective spaces, we were lucky to have in our training, were for us in our working environment and our careers as a whole. We were also very aware of how little experience other trainees have of this type of space and how beneficial a supportive space can be.



INTRODUCTION

The Wellbeing team at UCLH had put in a varied offer of support to all clinical staff. This included both face to face and online support, as well as individual and group based work. The uptake amongst doctors was consistently minimal.

Driven by how **difficult, confusing** and **traumatising** situations on medical wards can be for any doctor, even without a pandemic, we **felt drawn** to provide a **space** to support our colleagues.

Following meeting with the trauma service lead in our trust, and in line with the current evidence base around trauma, it was felt that a **supportive approach** to the groups would be the most appropriate.

METHOD

We set up **two groups**; one for SHOs and one for registrars. After much deliberation, they were offered **weekly**, in the **evening** for **40 minutes**.

Each group would be facilitated by two child and adolescent psychiatry trainees from the Tavistock training programme with links to UCLH and NCL in mind. The facilitators had 3 training sessions on running an online group and were supervised regularly by Dr Joanne Stubley.

All junior doctors at UCLH were invited to the two online supportive groups via their hospital whatsapp groups and the internal hospital communications email. Reminders were sent out via both these methods each week.

RESULTS

- Poor attendance
- No attendance beyond first session
- **Themes** of first session: thinking around difficulties on wards and strain on individuals
- Groups remained open for **4 weeks**
- Stopped thereafter due to lack of interest

GROUP FRAMEWORK & BOUNDARIES

- **Groups would be held online, to minimise infection risk**
- **Groups would be relatively unstructured to allow a place to bring anything**
- **Participants should display their name and video and group will start with introductions.**
- **Confidentiality would be held (other than the required escalation of serious risk)**
- **The “door” would be closed ten minutes into the group, with no further late attendees**
- **The group facilitators would encourage group members to support each other, make helpful suggestions but primarily listen and validate the experiences shared.**
- **Group facilitators would be alert for medical problem solving with regards to clinical situations brought, and steer conversations away from them.**
- **If facilitators feel like anyone could use further support beyond the group they can signpost you to other resources**

DISCUSSION

Several hypotheses regarding poor uptake explored in supervision.



- Appropriateness of online platform given the doctors working on the frontline
- **Practical** difficulties: protected time, confidential space
- Out of hours nature **blurring work and home boundaries**
- **Fear** of not knowing how large the group size was or who would be there
- Unwillingness to appear **vulnerable** in front of others
- **Overload of support** being offered initially
- Lack of support from the medical trainee representative despite initial interest

CONCLUSIONS

The lack of attendees and failure of these groups was most likely **multifactorial**; organisational dynamics, practical, social as well as due to personality factors of doctors

A plan around providing Balint groups, now that the initial acute trauma of the pandemic has passed is being explored, so as to safely offer a more reflective space.

These groups will be:

- run as part of the protected teaching programme
- run remotely using an online platform
- have focussed invites for specific groups of doctors