

Time to think – psychoanalytically-informed reflective practice group for GPs

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Introduction

We were awarded a small project grant by the Faculty of Medical Psychotherapy to set up and study a 1-year pilot monthly, psychoanalytically-informed reflective practice group for GPs. Our objective was to provide a safe thinking space for them to reflect on emotional aspects of their work, the therapeutic relationship, and organisational dynamics pertaining their practice.

11 prospective group participants completed the Maslach Burnout and Psychological Medicine Inventories at baseline with scores indicating that this was a group of GPs feeling relatively emotionally exhausted, who nevertheless maintained a high sense of personal accomplishment and assessed themselves positively for psychological skills and sensitivity. The group has been running remotely since June 2020 and is facilitated by a clinical psychologist and a GP, supervised by a psychoanalytically-trained organisational consultant. A project management group provides the operational link with the local Mental Health Trust and a holding function. All group members are salaried GPs. 8 GPs have attended at least once and 5 are regular group members.

The aims of the study are:

- To reflect on content and process by identifying themes arising in reflective practice in this particular setting
- To evaluate the impact of the group

Methodology

We are using a qualitative methodology:

- Thematic analysis of (anonymised) group process notes and supervision notes.
- Focus groups at 6-months and 1-year with thematic analysis of (anonymised) transcripts.

As the project is ongoing, we are here only reporting preliminary findings based on process notes from the first 6 months of the group and the first focus group.

Two researchers independently coded the data and met regularly to discuss and reconcile codes. Themes and broader thematic categories were further developed from codes.

Preliminary Results

Table 1: Group process notes (first 6 groups)*

Category	Themes
Feelings	<ul style="list-style-type: none"> • Distress, sadness, anxiety, loneliness • Inadequacy, guilt, shame • Feeling overworked • Persecution
Attributions	<ul style="list-style-type: none"> • Demands and emotional impact of patients • Lack of safety, support and trust • Change • Demands of the system, frustration with hierarchy and leaders
Needs	<ul style="list-style-type: none"> • Need for care, support and trust • Need to assert power, ask for help, ability to change the system
Reflection	<ul style="list-style-type: none"> • Questioning role of GP and identity • Relationships with patients and colleagues • Curiosity / Uncertainty
Reflection on group experience	<ul style="list-style-type: none"> • Structure and function of group • Group process: discomfort, problem solving, reassurance, boundaries

Table 2: Focus group (at 6 months)*

Category	Themes
Feelings	<ul style="list-style-type: none"> • Exhaustion (overworked) • Distress, embarrassment, loneliness • Frustration (with system and leaders)
Experience of the group	<ul style="list-style-type: none"> • Anger • Persecution • Powerlessness
A) Structure, frame and process	<ul style="list-style-type: none"> • Structure, membership, frequency • Uncertainty (purpose, role, expectations)
B) Impact	<ul style="list-style-type: none"> • Relationships (within / outside group) • Gratitude • Intimacy and connection • Validation / feeling energised

*Themes listed in order of frequency

Focus group: Impact of the group

'I think "it's time to think" - it has created a space for that'

'I feel like someone's got my back'

'Feeling like I can be open and say those things and not be judged for them in a bad way ... I like that we talk about the staff and the weird dynamics in our weird workplaces'

'It's sort of invigorating and reenergizes us and reminds us why we do this job'

'My boundaries have got stronger over time ... knowing that you guys are going to be here'

'[It] allows me a platform to grow and I'm being more assertive, and just a bit more assured of myself; that it's OK to do what I want to do, I'm not crazy'

'I feel like I suddenly have some tacit, very lovely connections locally which didn't exist before, and an intimacy which didn't exist before'

'I think it's improving my use of mental health services appropriately; building trust'

The group at work

'Things at the moment feel like the "great unravel"' *'One needs to be superhuman'*

'Doctors don't look after other doctors' *'I am never going to trust this system to help me'*

'There are two victims in the system - the patient and the doctor' *'...this sense of unfairness'*

'I do not want the group to turn into another task and finish meeting' *'It's hard to be vulnerable when not sure that others will hear'* *'Who is looking after me?'*

'Originally my job as a GP was being there for people, but it feels like that has been eroded'

Discussion / Conclusion

Our preliminary findings suggest that this is a group at work in accordance with its objectives, which is defining a life and a process of its own, and is thinking on what it is like to be a GP in this area at this point in time. The group appears to be reflecting upon the complexity of feeling brought by its members in conjunction with matters of task, role, boundaries and relationships pertaining both to the work in general practice and to the group itself. A sense of persecution, isolation, powerlessness and injustice in the face of relentless demands, an uncaring system and a changing role seems to be an emerging prevalent narrative. Group members already acknowledge a significant positive impact of the group, highlighting in particular an experience of intimacy and connectedness, but also feelings of validation, empowerment and care. We are hoping to further refine themes and enhance our understanding of the group content and its trends, through thematic analysis of process notes for the remaining 6 groups. In addition, thematic analysis of supervision notes may allow for a deeper insight into the underlying (including unconscious) dynamics, such as anxieties, conflicts and defences as they emerge in the group.