

Long Lives, Healthy Workplaces

A TOOLKIT FOR ANAESTHETIC DEPARTMENTS



Acknowledgements

Long Lives, Healthy Workplaces is an initiative of the Welfare of Anaesthetists Special Interest Group and **Everymind**, with support from the Australian Society of Anaesthetists (ASA) and additional funding leveraged under [The Prevention Hub](#).

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Foreword

We are pleased to present this toolkit to support better mental health and wellbeing for anaesthetists and anaesthetic trainees.

Anaesthetists face a number of unique challenges as part of their work, which can result in poor mental health and poor general health. The stigma surrounding mental ill-health and suicide in the general public, combined with the value many doctors place on being the giver of care rather than the recipient, can make it challenging for anaesthetists to seek help when they need it.

We know from research that well-coordinated programs and approaches implemented in workplace settings can improve mental health and wellbeing, and reduce mental ill-health and suicidal behaviour. For us, the need for a targeted approach that supports the mental health and wellbeing of anaesthetists and anaesthetic trainees was clear.

The Australian Society of Anaesthetists (ASA) recognises the importance of keeping anaesthetists well at work and supporting those who need assistance. Demonstrated progress has been made in supporting the welfare of anaesthetists over the past 20 years. Awareness of workplace stressors and the types of challenges experienced has grown since the establishment of the Welfare of Anaesthetists Special Interest Group through the Australian and New Zealand College of Anaesthetists (ANZCA).

The opportunity to improve the wellbeing of anaesthetists and trainees through targeted interventions is great. There is now also a growing case for, and a commitment to, change.

The *Long Lives, Healthy Workplaces* toolkit is a resource to support anaesthetic departments and individual anaesthetists to operationalise a framework they can put into action. Through using the toolkit, a department or individual practitioner can identify strengths and gaps, and take a comprehensive approach to developing an action plan for change.

It is time not only to engage in a conversation around the wellbeing of anaesthetists, but to take action. As President of the ASA and Chair of the Welfare of Anaesthetists Special Interest Group, we recommend this toolkit as a key resource for your department or practice.

Associate Professor David M Scott

President

Australian Society of Anaesthetists

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What is the purpose of this toolkit?

While health professionals are very good at looking after the health of patients and other people around them, they often tend to overlook their own physical and mental health and wellbeing.

Every workplace has a responsibility to ensure that the mental health and wellbeing of their workers is enhanced and risks associated with mental ill-health are reduced. This responsibility is perhaps more important when thinking about doctors and the hospital environment given the pressures of the job, such as high work demands and the level of accountability required. The nature of medicine means that anaesthetists (and other health workers) are likely to be exposed to potentially traumatic

events as well as other common workplace stressors, such as large workloads and long hours, inadequate support and bullying.¹

Hospitals and individual departments must be aware of the risks to mental ill-health in their working environment and have strategies in place that aim to improve overall wellbeing, reduce risks associated with mental ill-health and suicide, and better support those who need assistance.

Long Lives, Healthy Workplaces provides anaesthetic departments with an operational resource that will assist them to plan and deliver actions that better support the mental health and wellbeing of anaesthetists and anaesthetic trainees, reduce the risk of mental ill-health and suicide, and increase the capacity of leaders, peers and individuals to respond.

The long-term goal of this project is to support good mental health and to prevent mental ill-health and suicidal behaviour amongst anaesthetists and anaesthetic trainees. This is not only important for the individuals concerned, but also for the quality and safety of care provided for patients and families.



This toolkit brings together the best available evidence for what works to prevent and respond to mental ill-health and applies it to the specific needs of the anaesthetic department. The content was informed by research, policy and consultation with anaesthetists.

The toolkit:

- Encourages a strategic and integrated approach to mental health and wellbeing.
- Offers an evidence-based framework and suggested actions relevant to anaesthetists and the environments in which they work.
- Builds the capacity of department leaders to create a mentally healthy environment for all staff.
- Offers guidance about preventive measures that can be implemented within a department and ways support can be provided to anaesthetists who develop a mental health problem.
- Provides practical suggestions on how to use this resource and tailor it for a specific department.

How was the toolkit developed?

The toolkit was developed by **Everymind** under the guidance of a national steering committee and draws on three main sources:

What did the research evidence say? An academic literature review was conducted to understand current knowledge about the mental health and wellbeing of anaesthetists and the role of workplaces in the prevention of mental ill-health and suicide.

What did anaesthetists say?

A series of in-depth interviews and focus groups were conducted to gain rich qualitative data from anaesthetists in their own words

How does this toolkit connect to existing policies and programs?

Relevant policies, programs and initiatives targeted at doctors were reviewed to ensure a connection between this toolkit and other complementary work.

This approach allowed for a comprehensive understanding of current issues affecting anaesthetists and trainees. Full details of the literature reviews and consultations used can be found in the appendices.

Long Lives, Healthy Workplaces is an initiative of the ANZCA Welfare of Anaesthetists Special Interest Group and Everymind, with support from the Australian Society of Anaesthetists (ASA).

Why is mental health and wellbeing important?

Mental health is important to each and every one of us, and it is vital for those providing health care services and support to others.

To progress collective action to prevent mental ill-health and promote mental health and wellbeing, we need to first have a shared understanding of what is meant by the concepts of mental health and mental ill-health.

Mental health² is a positive concept related to the social and emotional wellbeing of individuals and communities. It can also be used to describe the overall wellbeing of a workplace. Having good mental health, or being mentally healthy, is more than the absence of illness, rather it is a state of overall wellbeing. Having good mental health enables doctors to function well in life and at work, including coping with stress and sadness, being able to set and fulfil goals, and the capability to build and maintain relationships with others.²

The term ‘mental health’ is sometimes misunderstood and interpreted as referring to mental ill-health.

This may be because historically ‘mental health services’ were mainly concerned with treating mental ill-health. However, mental health is a desirable quality in its own right and encompasses more than the absence of illness.

Mental ill-health² is a broad term used to describe both mental illness and mental health problems. A mental illness is a disorder diagnosed by a medical professional that significantly interferes with an individual’s cognitive, emotional or social abilities. There are different types of mental illness, with the most common being anxiety and depression.

A mental health problem can also interfere with a person’s cognitive, emotional or social abilities but may not meet the criteria for a diagnosed mental illness. Mental health problems usually occur as a result of life stressors. Mental ill-health is an issue that affects over four million Australians each year³ and can affect doctors of all ages and genders and across any stage of their career.¹

What anaesthetists told us

A mentally healthy workplace⁴ is where people of all levels have a shared vision of, and commitment to, mental health and wellbeing. It is where work demands are realistic in a way that balances the needs of the staff and the employer and do not pose an unreasonable risk to the mental health of individuals. Everyone in the workplace feels comfortable to speak openly about mental health and mental ill-health, without fear of stigma or discrimination. This creates a culture of respect and inclusivity.³

Comments from anaesthetists consulted as part of toolkit development

Work and the mental health of anaesthetists

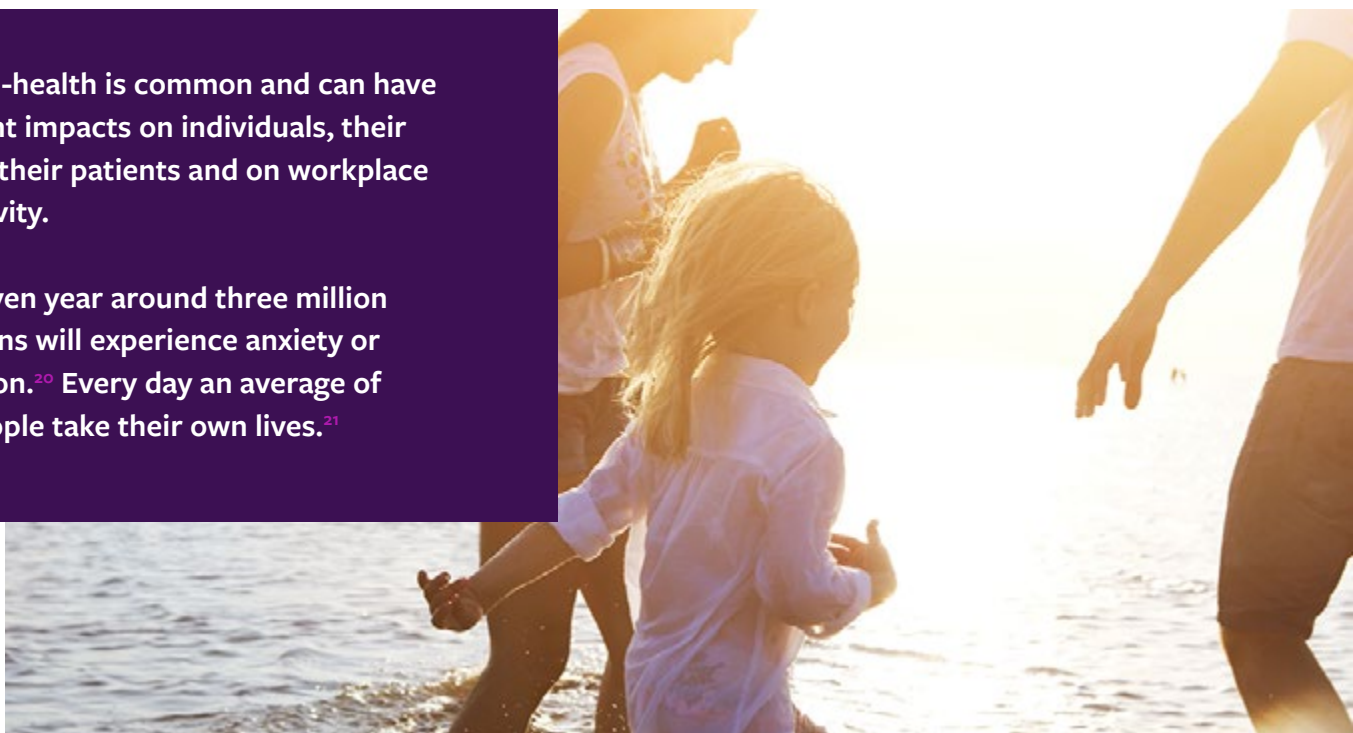
There is a strong reciprocal relationship between work and mental health. Research evidence⁵ supports the positive influence of work on a person's health and wellbeing. Besides being the primary source of income to maintain material standards of living, it also has an important role in providing a sense of purpose and identity, facilitating social connections and participation. Accordingly, having and maintaining employment is generally considered a protective factor for mental health and wellbeing, with mental ill-health often being higher among those who are unemployed. However, the workplace can also have a negative impact on the physical and psychological health of workers and there is a growing body of evidence showing a link between workplace stress and both physical and mental ill-health.⁴⁻⁶

There is evidence^{1,5-19} to suggest that medical professionals, including anaesthetists, experience higher levels of psychological distress than the general community. In particular, there are a number of unique risk factors faced by anaesthetists, which can result in mental ill-health, poor general health and an increased risk of suicidal behaviours.

- Anaesthetists work in a highly stressful occupation and are exposed to trauma and death.^{1,6-9}
- Anaesthetists have high work demands and may or may not feel a sense of belonging to a particular team in the health service where they work.^{1,10-12}
- Anaesthetists often work long hours, experience fatigue, and are exposed to on-call stress, all of which can contribute to mental ill-health.^{1,10-12}
- Risk factors identified that can contribute to substance abuse issues include easy access and availability of opioids and other narcotics, stress, irregular work hours, and the need for vigilance during long hours of surgery.¹³⁻¹⁷
- There is a high level of stigma in the medical profession. This is compounded by the fear of being deemed unfit or unable to work due to being reported for mental ill-health or suicidal behaviour.¹

Mental ill-health is common and can have significant impacts on individuals, their families, their patients and on workplace productivity.

In any given year around three million Australians will experience anxiety or depression.²⁰ Every day an average of eight people take their own lives.²¹



What are the benefits of taking action?

Doctors are a critical part of any health service. Ensuring doctors and other health workers are healthy and well is therefore vital. All workplaces, including health services and hospitals, can either enhance or detract from an employee's mental health and have been identified in national and state policies as an important setting for programs addressing mental health and suicide prevention.^{22, 23}

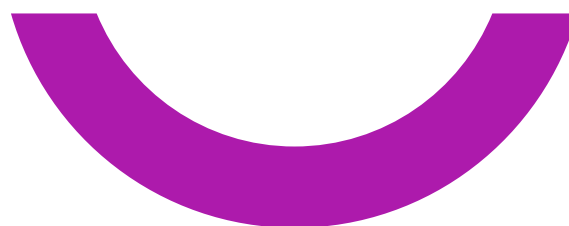
According to the Australian Human Rights Commission (AHRC), creating a safe and healthy workplace makes good sense. Building and maintaining a mentally healthy workforce and creating a mentally healthy workplace maximises wellbeing and can increase productivity, and ultimately patient care.²⁴

The benefits of effective mental health action can include:

- Reducing costs associated with worker absence and high worker turnover.
- Achieving greater staff loyalty and a higher return on training investment.
- Minimising stress levels and improving employee morale and wellbeing.
- Avoiding litigation and fines for breaches of health and safety laws.
- Avoiding the time and cost involved in discrimination claims.
- Avoiding industrial disputes.

There is potential to reduce the human and economic costs associated with mental ill-health by encouraging anaesthetists to access evidence-based prevention and treatment.

- Evidence suggests there is a return on investment for mental health interventions focussing on promoting mental health and wellbeing and preventing the onset, severity and duration of mental ill-health.⁵
- Undergoing treatment for mental ill-health can have a positive impact on the workplace, with successful treatment consistently associated with significant increases in employee overall health and wellbeing, work performance and productivity. Given the nature of anaesthetists' work, there are significant public benefits if performance is increased and adverse outcomes reduced.
- Despite the availability of effective treatments for mental ill-health, evidence suggests that many people (and anaesthetists in particular) either do not seek treatment at all, or seek treatment following lengthy delays, during which health, social and work consequences can accumulate.¹



A strategic and coordinated approach

Long Lives, Healthy Workplaces highlights the need for a strategic and coordinated approach to mental health and wellbeing, from prevention to recovery. A focus on a broad spectrum of interventions allows for activities targeting the specific needs of groups of workers and individuals. It can help people to conceptualise different stages in the development of mental ill-health; from someone with no current difficulties, to non-specific problems or signs, through to those being treated for or recovering from a diagnosable mental illness.

For successful outcomes, there is a need to utilise a comprehensive approach with a range of strategies across education, training, policy, health assessments, systemic reviews and partnerships. Furthermore, the toolkit is underpinned by recognition that working with the culture of a workplace and undertaking research and development in the field are foundational principles.

Effective workplace mental health strategies

A range of workplace programs have been developed and/or evaluated in Australia.⁵ The types of interventions commonly fall into one or more of the following categories,² with the most effective programs taking a comprehensive approach:

- **Primary prevention** - proactive programs that aim to prevent mental ill-health and promote wellbeing by reducing individual and workplace risk factors.
- **Secondary prevention** - programs that aim to identify risks and problems early and manage symptoms when they become evident in the workplace, including strategies on coping with stressors.
- **Tertiary prevention** – programs that minimise the impact of diagnosed mental ill-health on the individual and workplace.
- **Mental health promotion** - programs that focus on increasing healthy behaviours.

Category	Focus	Examples
Primary prevention	<p>Reducing individual risk factors^{5, 25-27}</p> <p>Reducing environmental risk factors^{26,27}</p>	<ul style="list-style-type: none"> • Reducing drug and alcohol misuse • Support healthy diet and physical fitness • Develop individual skills - financial management, stress management, communication skills • Management of physical injury and/or pain • Options to support workers managing ill-health in family • Provide support and flexibility for staff exposed to traumatic events at work or experiencing difficult life events. • Fatigue • Accidents and injury • Excessive stress • Bullying and harassment • Disharmony
Secondary prevention	<p>Identify and respond to problems early^{5, 28-31}</p> <p>Provide support for mental ill-health</p>	<ul style="list-style-type: none"> • Promote awareness of mental ill-health, including signs and symptoms • Support early identification, including self-identification, peer identification and support, and identification by supervisors or managers • Promote a culture of acceptance of mental ill-health • Promote a culture that help-seeking is a positive thing • Promote a culture of offering support and expressing concern for work colleagues • Supervisor training to increase skills in raising difficult personal issues with staff in a helpful, non-threatening way. • Promote use of Employee Assistance Program (EAP) for early support • Provide immediate first aid for staff experiencing a mental health crisis at work • Reassurance of ongoing support for staff receiving treatment for mental ill-health • Partnerships and referral pathways to mental health providers • Provide or facilitate access to peer support models and/or online treatment modalities.
Tertiary prevention	Support recovery from illness and return to work ³²⁻³⁵	<ul style="list-style-type: none"> • Manage absences well • Identify and address any workplace contributing factors • Manage return to work well • Make reasonable adjustments to the work environment • Supervisor training to manage return to work • Facilitate access to support options for family and friends • Address stigma in the workplace.
Mental health promotion	Support good health ^{5, 29}	<ul style="list-style-type: none"> • Ensure a good fit between the job and the person doing the job • Prepare people well for the work they need to do • Create a culture of high expectations along with support • Develop a culture of fairness and equity • Promote mental health literacy (how to stay mentally healthy) • Encourage good communication between managers and staff • Increase social connection and opportunities for peer-support.

How does this toolkit link to other initiatives focused on the mental health of doctors?

Progress has been made within the medical profession to increase awareness of risk factors and higher rates of psychological distress, burnout and suicidal behaviour among doctors and doctors in training, as well as to highlight potential solutions. *Long Lives, Healthy Workplaces* links with other federally funded research being co-led by Everymind as part of the *Tackling the Mental Ill-Health of Medical Students and Doctors* initiative, with funds leveraged by the Australian Society of Anaesthetists to complete this project.

In addition to this, a range of mental health and suicide prevention initiatives, such as the 2017 NSW Junior Medical Officer Wellbeing and Support Plan,³⁶ and facility-led initiatives, such as buddy programs and supervisor training to identify signs of mental ill-health, are in place. Practice frameworks developed by Beyond Blue, such as the *Good Practice Framework for Mental Health and Wellbeing in First*

*Responders Organisations*³⁷ and *Developing a Workplace Mental Health Strategy: A How-to Guide for Health Services*,⁴ provide guidance for the development of a framework specific to doctors. This toolkit draws on each of these initiatives to provide a specific resource to reduce anxiety, depression and suicidal behaviour among anaesthetists and anaesthetic trainees at a local level.

The Prevention Hub, funded by the Australian Government Department of Health, is Australia's first integrated research initiative into preventing anxiety and depression.

Under this initiative, the Black Dog Institute and Everymind have partnered with the Australian Medical Association (AMA), Orygen - the National Centre for Excellence in Youth Mental Health, United Synergies and others to plan and deliver specific research trials and translational research to better understand how to prevent mental ill-health among the medical workforce, with a specific focus on junior doctors, medical students and specialists.

The Prevention Hub is developing a national strategy to assist universities, colleges and hospitals in designing safe and supportive environments for medical professionals (including students). The information within this toolkit aligns with the work conducted on the national strategy to date.



Assessment Tools + Strategies

[Download Assessment Tool](#)

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STRATEGY 1: Improve the training and work environment to reduce risk

To achieve this, our anaesthetic department will:

- **Action 1:** Ensure job design, rosters and individual workloads are reviewed to reduce risks for mental ill-health
- **Action 2:** Design and manage a work environment that minimises harm
- **Action 3:** Ensure adequate and structured access to training and professional development opportunities

Why have these actions been prioritised?

What does the evidence say?

A range of risk factors can impact health professionals' mental health and wellbeing at work, including heavy workload, long working hours, shift work, compassion fatigue and exposure to trauma.¹ Anaesthetists often work long hours, experience fatigue, and are exposed to on-call stress^{6, 7}; all of which can contribute to mental ill-health. Other risk factors identified that can contribute to substance use issues include easy access and availability of certain medications, stress, irregular work hours, and the need for vigilance during long hours of surgery.⁶⁻¹⁹ If a worker experiences high job demands with low job control, together these increase the risk of mental ill-health.¹⁻²⁷ However, when employees have control and choice over their work patterns and shift schedules, this has a positive effect on their mental health.^{1, 27, 36}

What did anaesthetists tell us?

An overwhelming concern raised by anaesthetists consulted in the development of this toolkit was the need to ensure good job design, including a review of rosters and individual workloads to reduce risks. Anaesthetists and trainees said they did not feel a sense of control over the work or their working conditions. They shared concerns about a lack of flexibility with rosters, feeling unsupported when they need to take sick leave, and the lack of an appropriate physical space to take breaks. Issues around the fear of mandatory reporting for those seeking support and having access to drugs as part of the role were also raised during the consultation phase. In addition to this, issues including a perceived lack of support during examination periods and limited access to professional development revealed a need to ensure adequate and structured access to training and professional development opportunities.

What anaesthetists told us

“The department is good about allowing me to have fixed non-clinical sessions, so I know that I’m going to be home on time those days, and I’ve got fixed sort of days off, as well. So that gives me some predictability, and that’s actually really helped; having a predictable working schedule is much easier.”

“There aren’t facilities for consultant anaesthetists to have a sleep. There is no bed that I can use in the hospital. Say I’ve been in, I’m on call all night, and it’s 4am and I’m really exhausted, and the patient’s off the table, but I don’t feel I can drive home, because I’m really tired, there’s nowhere for me to go and have a sleep.”

“We don’t really have meal breaks at all... We’re ending up eating our lunch in the anaesthetic bay. We don’t get out for morning tea... often times you’re working in a situation where you can’t leave the theatre, because you’ve got an anaesthetised patient on the table, and sometimes one in the anaesthetic bay as well.”

Comments from anaesthetists consulted as part of toolkit development



Suggested activities to improve the training and work environment to reduce risk

Action 1: Ensure job design, rosters and individual workloads are reviewed to reduce risks

- 1.1 Conduct a review of rostering practices to identify unsafe working hours and to develop new, evidence-based safe working hour policies and practices.

TIPS

- Ensure staff feel a sense of control over their work by using a collaborative approach to rostering and creating surgery lists.
- Allow staff flexibility, where possible, with their working hours.
- Provide staff with the option to leave early on non-clinical days.

The NSW Health JMO Wellbeing and Support Plan³⁶ proposed:

- Maximum rostered hours - Employees must not be rostered for shift periods totalling more than 14 consecutive hours (inclusive of meal breaks and handover).
- Break after rostered shift periods - Rosters must be arranged to allow a break after rostered shift periods of at least 10 hours.³⁶

RESOURCES

NSW Health JMO Wellbeing and Support Plan³⁶

The plan addresses safe working hours and fatigue; enabling Junior Medical Officers (JMOs) to seek help and treatment when needed; information about where to seek help; improving culture in medicine; improving job security; and enhancing transparency in recruitment and employment. [Download PDF](#)

Australian Medical Association (AMA) National Code of Practice

Hours of work, shift work and rostering for hospital doctors.

Response to ongoing concerns about working hours and safe practice. [Resource Link](#)

Flexible work and training practices. A tool to assist employers, training providers, doctors and doctors in training to implement and access best practice flexible work and training arrangements.

[Resource Link](#)

Junior Doctors Employment Guide. Outlines the different awards and agreements for Junior Doctors in each state and territory in Australia.

[Resource Link](#)

1.2 Support staff to take sick leave if unwell and minimise the impact on colleagues from the loss of a staff member.

TIPS

- Minimise the impact of staff sick leave on other colleagues by ensuring there are appropriate staffing 'replacements' to draw from when needed.

RESOURCES

NSW Health JMO Wellbeing and Support Plan³⁶

The plan addresses safe working hours and fatigue; enabling Junior Medical Officers (JMOs) to seek help and treatment when needed; information about where to seek help; improving culture in medicine; improving job security; and enhancing transparency in recruitment and employment. [Download PDF](#)

1.3 Provide staff with a physical space for breaks.

TIPS

- Provide staff with a physical space that can be used for quiet time, to eat and to rest, other than cafeterias that are shared with the public.

Some considerations when choosing a space may be:

- Location - the degree to which a space is accessible by all or a few.
- Enclosure - the degree to which the space is enclosed by walls, doors or a ceiling.
- Exposure - the degree to which the space offers visual and acoustic privacy.
- Technology - the degree to which the space is outfitted with high-tech or low-tech tools.
- Temporality - the degree to which the space invites lingering.
- Perspective - the direction in which the space focuses the user's attention.
- Size - the usable square footage of the space.

RESOURCES

Harvard Business Review

An article that discusses seven factors of office or space design. [Resource Link](#)

1.3 Continued

RESOURCES

The Privacy Crisis: Taking a toll on employee engagement

Research from Steelcase has revealed that, while togetherness at work is vital for collaboration, in excess it can be taxing. Too much interaction and not enough privacy can take a toll on workers' creativity, productivity, engagement and wellbeing. [Resource Link](#)

Forbes Magazine

Agarwal P. *How do we design workplaces that support mental health and well-being*. Forbes 2018, June 24. [Resource Link](#)

Action 2: Design and manage a work environment that minimises harm

2.1 Reduce access to means of suicide by: Educating anaesthetists and anaesthetic trainees of safe handling drug practices; and reviewing and tightening department policy in regard to access.

TIPS

- Ensure all staff are aware of, and understand, safe handling drug practices in your department.
- Review department policy annually and develop a checklist of strengths and weaknesses.
- Circulate department policy annually with notes of strengths and weaknesses.
- Provide opportunity for staff to contribute ongoing suggestions for improvement.

RESOURCES

Australian and New Zealand College of Anaesthetists (ANZCA)

Guidelines for the Safe Management and Use of Medications in Anaesthesia. A guide to assist healthcare facilities to ensure safe handling, documentation and appropriate access to medications used in anaesthesia. [Download PDF](#)

2.2 Educate and support staff on changes to mandatory reporting so they feel more able to seek help. Promote other services or advocates in the department that can assist those who have questions or concerns.

TIPS

- In April 2018, the Council of Australian Governments (COAG) Health Council unanimously agreed to “take steps to protect patients and strengthen the law to remove barriers for registered health professionals to seek appropriate treatment for impairments including mental health.” The full statement of the Council is listed below as a resource.

RESOURCES

Council of Australian Governments (COAG) Health Council

COAG Health Council Meeting Communique – 13 April 2018.

Mandatory reporting requirements under the Health Practitioner Regulation National Law. [Download PDF](#)

The Welfare of Anaesthetists Special Interest Group

The Welfare Advocate. A resource document outlining how to appoint a suitable person as a welfare advocate including duties and role description. [Download PDF](#)

Mandatory Reporting A document that provides details on Mandatory Reporting requirements for New Zealand and Australia.

[Download PDF](#) Mandatory reporting requirements are currently under review by federal, state and territory Health Ministers.

The role of the welfare advocate

An article discussing the role of the welfare advocate regarding performance issues, psychiatric illness, critical incidents and communication, substance abuse and violations. [Download PDF](#)

Australian Health Practitioner Regulation Agency (AHPRA)

The AHPRA supports the 15 national boards responsible for regulating the health professions. The website provides information about registration, boards, education, complaints or concerns, as well as publications and resources. [Resource Link](#)

Medical Board of Australia

Guidelines for mandatory notifications. [Resource Link](#)

Research on support for doctors facing complaints

Rimmer A. *Colleagues are best source of support for doctors facing complaints, researchers find.* The BMJ, 2017. [Resource Link](#)

Action 3: Ensure adequate and structured access to training and professional development opportunities

3.1 Develop a policy ensuring adequate provision of mental health support for anaesthetic trainees during examination periods.

TIPS

- Identify what exactly is needed by anaesthetic trainees during examination periods. What would best support their mental health during these times?
- Determine who will take lead responsibility. A working group, a sub-committee, staff members, or a specific staff member such as the welfare advocate?
- Gather information. What have other departments done? Are there existing templates or examples that have worked well?
- Draft a policy and implement a plan.
- Consult with anaesthetic trainees, department heads and heads of school.
- Finalise and approve the policy.
- Consider whether procedures are required. Is there a need for clear guidance regarding how the policy will be implemented and by whom? Who will be responsible for developing these procedures? When will this be completed? What will be the process for consultation, approval and implementation?
- Implement and communicate the policy. How will the policy be communicated and to whom? Will training be required to support implementation? What methods will be effective in communicating the policy to key audiences?
- Monitor, review and revise. What monitoring and reporting system will be set up? How will usage be assessed? How can staff provide feedback? How and when will the policy be reviewed and revised?

RESOURCES

NSW Government Industrial Relations

Workplace Policies and Procedures Checklist. A generic guide to developing and introducing workplace policies, including a policy checklist. [Resource Link](#)

3.2 Provide structured access to professional development and training for all anaesthetists.

TIPS

- Identify what professional development opportunities staff in your department are interested in, and could benefit from most.
- Explore opportunities or events that will provide professional development to staff.
- Develop a professional strategy plan, scheduling regular development and training opportunities for staff.

RESOURCES

Australian and New Zealand College of Anaesthetists (ANZCA)

Training. Provides regulation information and links for training and accreditation. [Resource Link](#)

Continuing Professional Development (CPD) Information for participants to record, monitor and provide evidence of CPD activities in practice evaluation, knowledge and skills, and emergency responses in an online CPD Portfolio. [Resource Link](#)

STRATEGY 2: Improve the culture of medicine to increase wellbeing and reduce stigma

To achieve this, our anaesthetic department will:

- **Action 4:** Implement strategies to improve the health and wellbeing of all staff
- **Action 5:** Increase connectedness and peer support
- **Action 6:** Directly address stigma associated with mental ill-health and suicide
- **Action 7:** Create a workplace where bullying, harassment and discrimination are not tolerated

Why have these actions been prioritised?

What does the evidence say?

Elements of our culture can present a risk to mental health and wellbeing. Stigma associated with mental ill-health and suicide is prevalent amongst the population³⁷ and evidence suggests that some doctors feel that having anxiety or depression causes embarrassment for them.¹ Stigma within both the community and the medical profession means many doctors are reluctant to seek help.^{1, 38} However, targeted education and anti-stigma programs can improve knowledge about wellbeing and mental ill-health, positively affecting supportive behaviours in the workplace and improving both help-seeking and readiness to help.³⁷

Another common risk factor that can affect workplace mental health is bullying.^{1, 36, 37} Bullying behaviours may take the form of harassment including verbal or physical abuse, offensive behaviour, social exclusion, or unfair treatment of particular workers.^{36, 37} Bullying in the workplace has been associated with mental ill-health including post-traumatic stress disorder, burn out, depression and anxiety. Integrated, multi-level and scalable interventions must be developed that demonstrate the best efficacy to encourage early help-seeking, enhance individual resilience and wellbeing, and foster early detection of bullying behaviours.³⁸

What did anaesthetists tell us?

Consultations with anaesthetists and trainees revealed the need to implement strategies to improve their overall health and wellbeing. Promotion of a healthy lifestyle, modelling of positive behaviours, and increased literacy about mental health and ways to improve mental health in the workplace, were all suggested areas for action. In addition, matters of concern raised by anaesthetists included the need for increased connectedness and peer support, and the need to address bullying and harassment.

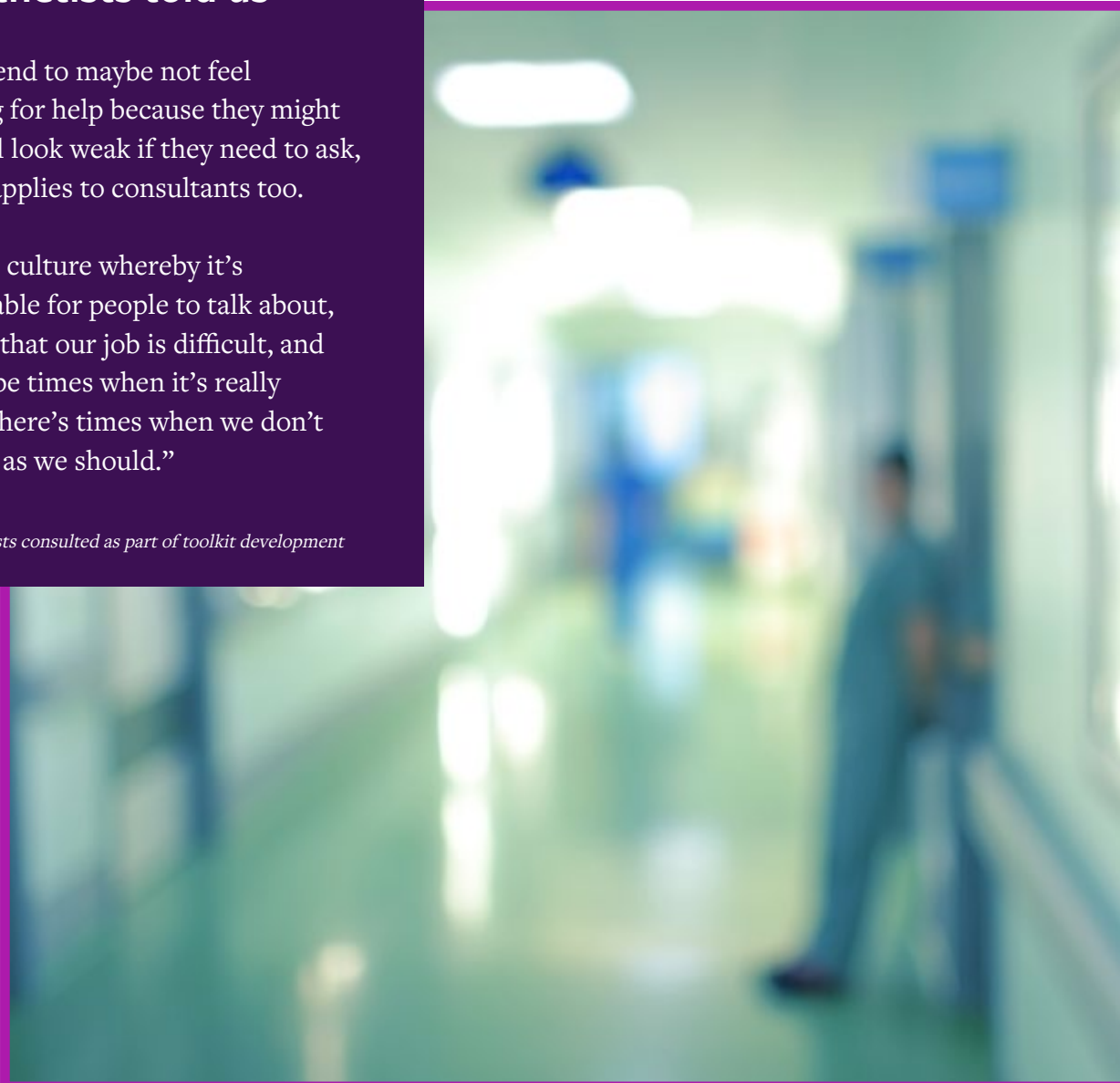
The development of mentoring, peer review groups and networking between anaesthetists and anaesthetic trainees were among the suggestions raised in consultations. A number of anaesthetists and trainees also talked of the need to reduce stigma associated with mental ill-health and suicide, as well as a need to normalise and promote acceptance and understanding of mental ill-health.

What anaesthetists told us

“A lot of trainees tend to maybe not feel comfortable asking for help because they might sort of think they’ll look weak if they need to ask, but that probably applies to consultants too.

I think if we have a culture whereby it’s completely acceptable for people to talk about, you know, the fact that our job is difficult, and there are going to be times when it’s really difficult, and that there’s times when we don’t deal with it as well as we should.”

Comments from anaesthetists consulted as part of toolkit development



Suggested activities to improve the culture of medicine to increase wellbeing and reduce stigma

Action 4: Implement strategies to improve the health and wellbeing of all staff

4.1 Implement prevention and health promotion programs to improve wellbeing.

TIPS

- Identify mental health workplace programs.
- Conduct a situational analysis, select a workplace program that is fit for purpose, and implement it within your department.

RESOURCES

Online tools, programs and initiatives to implement in the workplace

Royal Australasian College of Physicians (RACP)

A range of resources on doctors' health and wellbeing. [Resource Link](#)

Heads Up

A list of training and resource materials. [Resource Link](#)

Head to Health

Find the right Australian publicly funded mental health resources that best suit your needs. [Resource Link](#)

SuperFriend

Ideas for supporting wellbeing in the workplace. [Resource Link](#)

Smiling Mind

Tailored approaches to mindfulness in the workplace. [Resource Link](#)

MindFit

Provides a range of tools such as training programs in health and wellbeing, corporate mindfulness, employee mental health and resilience. [Resource Link](#)

Blue Knot Foundation

Provides training on burnout, compassion fatigue and vicarious trauma. Also delivers workplace training. [Resource Link](#)

4.1 continued

RESOURCES

Resilience on the Run Program

A program run by the Australian Medical Association (AMA) Queensland's Council of Doctors in Training to assist junior doctors with techniques for developing resilience and mindfulness, managing interpersonal relationships, navigating difficult scenarios on the job, and practical steps for asking for help when needed.

Although specific to junior doctors in Queensland, Resilience on the Run provides an example for the creation of similar programs in other regions. [Resource Link](#)

Information for medical staff

The Australian Medical Students' Association (AMSA)

Information, online resources and stories of struggle and success for medical students transitioning into work. [Resource Link](#)

AVANT Mutual

Resilience: Strategies for weathering the storm. Information, support and advice by doctors for doctors. [Resource Link](#)

Computer Assisted Learning for the Mind (CALM)

Podcasts providing practical techniques to develop positive mind states, manage stress, maintain healthy relationships and cultivate mindfulness. [Resource Link](#)

Beyond Blue

Developing a workplace mental health strategy. [Resource Link](#)

Monash Doctors

Monash Care - The Mental Health and Wellbeing Strategy for Doctors. [Resource Link](#)

4.2 Provide information on digital platforms to improve individual wellbeing. Increased access to smart phone apps or websites that provide support for mindfulness, meditation, sleep and coping strategies can be helpful. These are evidence-based, confidential and available to staff at work and at home.

TIPS

- Develop a flyer listing information on digital platforms.
- Share information with staff through a newsletter or display in common areas.
- Introduce the available information at training and orientation sessions for all staff.

RESOURCES

Head to Health

Provides links to trusted Australian online and phone supports, resources and treatment options for mental health. [Resource Link](#)

Smiling Mind

Uses meditation and mindfulness activities to reduce anxiety and improve general wellbeing. [Resource Link](#)

Headspace for Work

Online tool that supports workplace health and happiness by promoting meditation and mindfulness. [Resource Link](#)

SHUTi

An internet-based self-help program for people with insomnia found to reduce depression and anxiety symptoms. [Resource Link](#)

ReachOut Breathe

Helps reduce the physical symptoms of stress and anxiety by slowing down your breathing and heart rate. [Resource Link](#)

Moodgym

Self-help resources for learning and practising skills to help prevent and manage symptoms of depression and anxiety. [Resource Link](#)

The Centre for Clinical Interventions

Online information on a range of mental health topics, including self-help resource modules. [Resource Link](#)

4.3 Promote a healthy lifestyle including diet, exercise, sleep and relaxation, quit-smoking assistance, responsible intake of alcohol, and substance control.

TIPS

- Engage the Work Health and Safety team and/or remind staff about healthy behaviours through newsletters, screensavers, emails and posters displayed in common areas.
- Introduce information about health, wellbeing and risks to health on the job as part of routine training and orientation for all staff.
- Engage staff in initiatives that promote desirable activities in the workplace. (e.g. Harmony Day, World Sleep Day, World Mental Health Day, etc.).
- Provide healthy items such as fruit bowls in tea rooms, keep canteens open after hours for staff to access food, or introduce walking meetings where appropriate.

RESOURCES

Diet

Display the Australian Dietary Guidelines poster with links to resource information and recipes in common eating areas. [Resource Link](#)

The Commonwealth Scientific and Industrial Research Organisation (CSIRO) website provides information and recipes for a Total Wellbeing Diet based on research. Find information on cooking for specific ailments, dietary preferences (i.e. vegetarian) and stages of life. [Resource Link](#).

Exercise

Many government health organisations provide plans for accessing exercise facilities at low cost. Display information in common gathering areas for staff. See your health intranet site for further details.

Many private health funds provide incentives for increasing participation in exercise and relaxation. Ensure staff with private health cover are aware of their benefits and wellbeing incentives.

Smoking cessation

Identify state health service information to provide quit support. For example, NSW Health organisations can provide staff with up to four weeks of nicotine replacement therapy to assist with managing nicotine dependence. [Resource Link](#)

Other services to help with smoking cessation

iCanQuit. [Resource Link](#)

4.3 *continued*

4.4 Leaders and managers promote self-care.

RESOURCES

National Health and Medical Research Council (NHRMC)

Australian guidelines to reduce health risks from drinking alcohol.

Evidence-based advice on the health effects of alcohol to help individuals make informed decision about their drinking habits.

[Resource Link](#)

SMART Recovery Australia

A free group program to assist people with problematic behaviours, including addiction to drugs, alcohol, cigarettes, gambling, food, shopping, Internet and others. [Resource Link](#)

TIPS

- Actively demonstrate desired behaviours and actions.
- Promote and acknowledge desired behaviours and actions.
- Introduce and encourage activities that focus on mind, movement and nutrition, such as practicing mindfulness, holding walking or standing meetings, encouraging healthy food options in the workplace, etc.

RESOURCES

Head to Health

Provides links to trusted Australian online and phone supports, resources and treatment options for mental health. [Resource Link](#)

National Institute of Integrative Medicine (NIIM)

Roadmap to wellness. A preventative healthcare guide written by some of Australia's leading integrative doctors. [Resource Link](#)

Five principles of self-care for health professionals

by Lisa Chu, MD on MedPage Today's KevinMD.com [Resource Link](#)

Heads Up education and training for the workplace

Lists a range of training programs to assist managers and employees to understand mental health in the workplace. [Resource Link](#)

Action 5: Increase connectedness and peer support

5.1 Promote networking amongst anaesthetists and anaesthetic trainees – within the work environment and through other mechanisms.

TIPS

- Provide staff with time to attend peer review groups.
- Provide opportunities for staff to peer network and connect with colleagues.
- Provide opportunities for staff to network across sites (electronically).
- Identify social media networks that staff can connect with to build an increased sense of connectedness and peer support.
- Determine if there are ways to connect Continuing Professional Development (CPD) points to peer networking activities.

RESOURCES

Australian Society of Anaesthetists (ASA)

A not-for-profit organisation dedicated to supporting and connecting anaesthetists, with a primary focus on the economic, workforce and professional interests of members. [Resource Link](#)

5.2 Prioritise time together as a team and set up a mechanism to organise social and other opportunities for peers to connect.

TIPS

- Keep it simple and realistic with a focus on social interaction.
- Hold social activities on a regular but achievable basis. For instance, monthly or quarterly.
- Develop a social calendar and link activities to national health awareness days.
- Be inclusive.
- Identify staff members who are interested in coordinating social activities and events to take the lead.

RESOURCES

HubSpot

27 fun corporate team-building activities and outing ideas everyone will enjoy. [Resource Link](#)

5.2 *continued*

5.3 Establish peer review groups in your department to network with co-workers and review complex cases.

5.4 Develop a mentoring protocol in your department.

RESOURCES

Work health and wellbeing

Resources to strengthen workplace health and wellbeing from Queensland Government Workplace Health and Safety. [Resource Link](#)

SuperFriend

Ideas for creating wellbeing in the workplace. [Resource Link](#)

TIPS

- Identify staff members who are interested in being part of a peer review group.
- Use a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis to review case studies and develop a discussion plan. State aims and purpose of peer review group meetings.
- Develop a schedule for peer review events and circulate invitations to participate.

RESOURCES

Australian and New Zealand College of Anaesthetists (ANZCA) Peer Groups

Information on how to establish peer review groups. [Download PDF](#)

TIPS

- Establish a mentor for all anaesthetic trainees.
- Empower staff to nominate an available consultant to act as their mentor.
- Provide support to mentors.

RESOURCES

Mentoring and peer support programs

The Welfare of Anaesthetists Special Interest Group provides a resource for mentoring and peer support. [Download PDF](#)

Action 6: Address stigma associated with mental ill-health and suicide directly

6.1 Encourage senior leaders and managers to speak openly about mental health and ill-health in the workplace by actively endorsing and participating in activities and events aimed at reducing stigma.²³

TIPS

- Managers and leaders to identify activities aimed at reducing stigma regarding mental ill-health.
- Assess the current situation. What is the level of understanding? What are the issues of discrimination and diversity?
- Create a plan of action. Establish champions, estimate staff resources, include timeline and budget, identify key issues, set goals, develop key messages and draw on others' experience.
- Information is not enough. Identify contact-based educational sessions where staff hear first-person stories from and interact with individuals with lived experience.
- Leaders actively endorse activities through participation.
- Engage employees and communicate often.
- Recognise achievements and progress.
- Evaluate and improve. Review accomplishments, address challenges, celebrate achievements, reassess and modify.

RESOURCES

Beyond Blue

Offers a speaker's bureau supporting people with lived experience to share their personal stories of anxiety, depression and recovery to increase awareness, reduce stigma, and encourage people to talk and take action to get help. [Resource Link](#)

Black Dog Institute

Offers workplace mental health and wellbeing programs to help create a work environment that promotes mental wellbeing, increased staff engagement and greater productivity. [Resource Link](#)

Workplace Strategies for Mental Health

Framework to help eliminate stigma in the workplace. [Resource Link](#)

Crazy Socks 4 Docs

A day about raising awareness of the mental health of all doctors and health practitioners around the world. [Resource Link](#)

6.2 Promote zero-tolerance for discrimination against staff who experience mental ill-health.

TIPS

- Management and leaders model behaviour that reflects zero-tolerance for discrimination against staff who experience mental ill-health.
- Ensure all managers and staff are aware of their legal responsibilities.
- Check your Health Service Intranet Human Resources advice section.

RESOURCES

Fair Work Ombudsman - Australian Government

Free and interactive online courses that teach skills and strategies to help managers, employers and employees at work. [Resource Link](#)

Australian Human Rights Commission

2010 *Workers with Mental Illness: A Practical Guide for Managers*. [Resource Link](#)

Action 7: Create a workplace where bullying, harassment and discrimination are not tolerated.

7.1 Create greater awareness of bullying and unacceptable behaviours to break the cultural expectation that bullying – especially by senior staff in training situations – is commonplace and acceptable.²⁵

TIPS

- Provide information on what bullying looks like in the workplace, how to get help, and how to be a supportive bystander.
- Ensure all staff have read and understood the workplace bullying / respectful workplaces policy and complaints procedure.

RESOURCES

Safe Work Australia

Information about what workplace bullying is, its effects, preventing it, and what to do if you experience it. [Resource Link](#)

Australian Human Rights Commission

Make a complaint. How to lodge a formal discrimination complaint with the Commission. [Resource Link](#)

Australian Human Rights Commission

Workplace bullying: Violence, harassment and bullying fact sheet. [Resource Link](#)

Royal Australasian College of Surgeons

About Respect: Addressing bullying and harassment. [Resource Link](#)

7.2 Create or improve policies and protocols around workplace bullying, setting a zero-tolerance approach.²⁵

TIPS

- Identify your workplace department and state policy and protocol on bullying.
- Ensure managers and leaders understand the policy and protocol to follow.

RESOURCES

NSW Health Policy Directive:

Bullying – Prevention and Management of Workplace Bullying in NSW Health. [Resource Link](#)

7.3 Implement confidential reporting and response procedures for when bullying occurs, treating all matters seriously. Ensure policies and procedures protect anyone who reports or witnesses workplace bullying from victimisation.²⁵

TIPS

- Check your Health Service Intranet for bullying and harassment support lines.
- Encourage confidential reporting by having a secure suggestions and complaints box in a discreet area where anonymous feedback can be lodged.

RESOURCES

NSW JMO support line

Support and advice service provided by NSW Health for junior medical staff. 1300 566 321. [Resource Link](#)

NSW Health Anti-bullying advice line

1300 416 088 [Resource Link](#)

Australian Human Rights Commission

Lodge a formal complaint with the Australian Human Rights Commission on 1300 656 419. [Resource Link](#)

Australian Human Rights Commission

Workplace bullying: Violence, harassment and bullying fact sheet as well as how to be a supportive bystander. [Resource Link](#)

STRATEGY 3: Improve capacity to recognise and respond to those needing support

To achieve this, our anaesthetic department will:

- **Action 8:** Improve the capacity of staff to recognise and respond to mental ill-health and suicide
- **Action 9:** Improve pathways to care for those who need support

Why have these actions been prioritised?

What does the evidence say?

A mentally healthy workplace develops strategies to reduce the risk of mental ill-health and promote mental resilience among staff.³⁸ Education and training in a workplace context has been shown to increase knowledge, skills and capacity to respond.^{4, 38} Research evidence has demonstrated that training targeted specifically at supervisors and managers improves mental health literacy and increases confidence in supporting workers' experience of mental ill-health.^{38 (p17)} Mental health education that focuses on changing stigmatising attitudes and discriminatory behaviours has been shown to have a significant positive effect on workers' supportive behaviour, confidence in engaging with someone experiencing mental ill-health, readiness to help and encouragement of help-seeking in others.^{38 (p17)}

What did anaesthetists tell us?

Consultations with anaesthetists and trainees revealed a need to improve access to information and training about mental ill-health, suicide and how to respond. Anaesthetists interviewed emphasised the need for education and training was in order to improve the capacity of staff to recognise and respond to mental ill-health and suicide. Staff also noted the need for clear pathways to help-seeking and treatment, including the importance of having a general practitioner and the provision of mental health supports.

What anaesthetists told us

“None of us have psychology training, and we all sort of go into this job and then just find ourselves in situations where we need to support colleagues.”

“We have talked about having various general practices... who we know are happy to accept doctors as patients, because a lot of doctors don't have their own GP and we've been talking about trying to get that into place, and we've talked about that for the last couple of years and we haven't actually gotten around to doing it.”

Comments from anaesthetists consulted as part of toolkit development



Suggested activities to improve capacity to recognise and respond to those needing support

Action 8: Improve the capacity of staff to recognise and respond to mental ill-health and suicide.

8.1 Provide education and training about mental ill-health and how to support yourself and colleagues.

TIPS

- Develop staff capability via training focused on mental health support, prevention of mental ill-health and suicide, and debriefing practices.
- Identify the types of mental health information and education that staff may need.
- Offer annual training to refresh the staff knowledge base concerning mental health literacy. Consider linking training to Mental Health Month in October.

RESOURCES

Mental Health Literacy: Past, Present and Future

An article discussing the definition of mental health literacy.

[Resource Link](#)

Information and training to enhance mental health literacy

Everymind

An institute focused on the promotion of mental health and wellbeing as well as the prevention of mental ill-health and suicide. Operations are guided by the *Prevention First* framework, a prevention and promotion framework for mental health. [Resource Link](#)

Everymind also provides face-to-face and online suicide prevention education and training. [Resource Link](#)

Mental Health First Aid (MHFA) Training

MHFA provides skills around recognising the signs and symptoms of mental ill-health, types of treatments available, how to seek help and how to support someone experiencing mental ill-health. Courses delivered face-to-face or online. [Resource Link](#)

8.1 *continued*

8.2 Provide training for leaders and managers, with a focus on mental health first aid, suicide prevention and debriefing practices.

RESOURCES

Heads Up

A list of training and resource materials. [Resource Link](#)

Tools for self-awareness and assessment

Australian Doctors' Health Network

Professional Quality of Life (ProQOL) is a tool for assessing satisfaction and compassion fatigue. [Resource Link](#)

Australian Medical Association (AMA)

Fatigue risk assessment tool and safe working hours campaign. [Resource Link](#)

Centre for Clinical Interventions (CCI)

Online self-help resources on mental health topics. [Resource Link](#)

TIPS

- Provide training to all managers and leaders about how to create mentally healthy teams and identify staff members who may need additional support.
- Debriefing could include speaking with a colleague, manager or the welfare advocate at times when support is required.

RESOURCES

Lifeline Applied Suicide Intervention Skills Training (ASIST)

Participants in ASIST learn to recognise when someone may be at risk of suicide and to respond in ways that help increase immediate safety and link the person to help. [Resource Link](#)

Mental Health First Aid (MHFA) Training

MHFA provides skills around recognising the signs and symptoms of mental ill-health, types of treatments available, how to seek help and how to support someone experiencing mental ill-health. Courses delivered face-to-face or online. [Resource Link](#)

Resource Guide for Critical Incident Stress and Debriefing

A resource guide for human service agencies provided by the Victoria State Government. [Download PDF](#)

8.3 Ensure that orientation for new staff contains information about mental health and wellbeing, as well as mental ill-health.

TIPS

- Include mental health literacy training as part of the orientation process for new staff.
- Ensure department orientation documents are up-to-date and contain the latest resources and referral information.
- Ensure all staff understand that it is against the law to discriminate against an employee because of a disability and that mental ill-health is considered a disability.
- Include information on mental health literacy, facts, myths and help-seeking contacts.

RESOURCES

Heads Up

Information about mental health conditions. [Resource Link](#)

Action 9: Improve pathways to care for those who need support.

9.1 Create and promote a list of general practitioners (GPs) who understand the nature of the medical workforce.

TIPS

- Work with the Doctors' Health Advisory Service and Primary Health Networks to identify primary care providers, including GPs, in your district that are trained to support doctors.
- Develop a department policy that anaesthetists and anaesthetic trainees should have their own general practitioner (GP).

RESOURCES

Doctors' Health Advisory Service

This service aims to ensure ready access to health care for doctors, dentists, veterinarians and medical students. NSW & ACT Help Line: 02 9437 6552 [Resource Link](#)

9.2 Create and promote a list of internal and external supports (other than GPs) who understand the nature of the medical workforce.

TIPS

- Provide and promote access to a range of general mental health supports. Stipulate confidentiality and communicate clear pathways to accessing support.³³
- Display information about external and internal mental health supports (e.g. EAP, welfare advocate, grievance officers, HR, peer support, 'wellbeing champions', and health services for health professionals) in common areas.
- Promote early help-seeking behaviour and encourage staff to take action toward their own mental health.

RESOURCES

Doctors' Health Advisory Service

This service aims to ensure ready access to health care for doctors, dentists, veterinarians and medical students. NSW & ACT Help Line: 02 9437 6552. [Resource Link](#)

Australian and New Zealand College of Anaesthetists (ANZCA) Doctors' Support Program

ANZCA has engaged Converge International – a confidential and independent counselling service - to provide this free service for all ANZCA fellows, trainees and immediate family members.

Help Line: 1300 687 327. [Resource Link](#)

Royal Australasian College of Physicians (RACP) Support Program

A fully confidential and independent free help line available 24 hours a day for RACP fellows and trainees. [Resource Link](#)

Welfare of Anaesthetists Special Interest Group(SIG)

A listing of welfare resources related to common professional and personal stresses. [Resource Link](#)

The SIG also offers a resource document on the importance of having your own general practitioner. [Download PDF](#)

JMO Support Line

Support and advice service provided by NSW Health for junior medical staff: 1300 566 321. [Resource Link](#)

Healthdirect

An online tool for finding a health service provider such as a GP, counselor or psychologist by specific location. [Resource Link](#)

Your Health in Mind

An online tool to assist with finding a psychiatrist within location or by name. [Resource Link](#)

9.2 continued

Doctors 4 Doctors (D4D)

D4D offers support for colleagues by colleagues. Through this service, a colleague lends a listening ear and helps the practitioner formulate the right advice and assistance. [Resource Link](#)

International Doctors in Alcoholics Anonymous (IDAA) Help Line

A confidential network available to health care providers or their family members seeking a peer to talk with about alcoholism, addiction, recovery and related concerns. Contacts will also help IDAA members find recovery meetings at home and when travelling. [Resource Link](#)

Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) Training Support Unit

Training designed with an external Employee Assistance Program (EAP) to support trainees and supervisors in times of difficulty, which could be adapted for use with anaesthetic trainees. [Resource Link](#)

Monash Doctors

Mental Health and Wellbeing Strategy for Doctors. [Resource Link](#)

AVANT Personal Support Program

Key support services for AVANT members: 1300 360 364.

Australian Medical Students Association (AMSA)

AMSA mental health campaign including a wellbeing guide, information on stigma, help-seeking information and other online resources for medical students. [Resource Link](#)

MDA National Professional Support Service

Help line with medico-legal advisers available 24 hours a day to provide support for MDA members: 1800 011 255

Medical Benevolent Association of NSW

A registered charity run by doctors and available to doctors, their families and colleagues in times of crisis. 02 9987 0504

9.2 continued

9.3 Educate staff of their ability to access a Mental Health Care Plan through their GP.

Helplines:

Lifeline – 131 114, 24-hour telephone counselling service

[Resource Link](#)

Beyond Blue – 1300 224 636

Get Support [Resource Link](#)

Forum [Resource Link](#)

MensLine Australia – 1300 789 978

Mental Health Line – 1800 011 511

Qlife – 1800 184 527, free and anonymous LGBTI peer support

Alcoholics Anonymous – 1300 22 22 22

Narcotics Anonymous – 1300 652 820

TIPS

- Provide information to all staff about Mental Health Care Plans, what they are and how to access them.
- Ensure staff have access to information about local GPs.
- Provide staff with information about internal health support services such as the Employee Assistance Program (EAP).

RESOURCES

Australian Psychological Society (APS) - Find a Psychologist

An online tool for finding a psychologist within location or by name.

[Resource Link](#)

Australian and New Zealand College of Anaesthetists (ANZCA) Doctors' Support Program

ANZCA has engaged Converge International – a confidential and independent counselling service - to provide this free service for all ANZCA fellows, trainees and immediate family members.

Help Line: 1300 687 327 [Resource Link](#)

Better Access Initiative

A Mental Health Care Plan that provides Medicare funding toward psychology services for up to 10 individual or 10 group appointments in a year through the Medicare benefits schedule. [Resource Link](#)

9.4 Promote the availability and use of online treatments.

TIPS

- Ensure managers and peers are aware of the variety of options available for treatment.
- Consult with Doctors' Health Advisory Service and specialist doctor supports for advice.
- Promote the availability and use of online treatments and programs for the general community, including doctors.

RESOURCES

Mental Health Online

Internet-based treatment for mental ill-health. [Resource Link](#)

Head to Health

Find Australian mental health resources and service providers. [Resource Link](#)

Life in Mind

Find information, activities, resources and research about suicide prevention. [Resource Link](#)

Healthdirect

An online resource for identifying a range of services and treatments, online and face-to-face, for mental ill-health. [Resource Link](#)



STRATEGY 4: Better support for anaesthetists and trainees impacted by mental ill-health and suicide

To achieve this, our anaesthetic department will:

- **Action 10:** Ensure effective processes to manage staff to stay at work or return to work
- **Action 11:** Ensure the department has policies and services available to support those impacted by suicide

Why have these actions been prioritised?

What does the evidence say?

A mentally healthy workplace is one that ensures staff who develop mental ill-health are supported and receive quality, evidence-based interventions to promote recovery.^{24, 33, 38} Support from supervisors and colleagues, including interventions that focus on coping strategies, problem solving, adjustments to working conditions or time at work, can facilitate return to work and yield positive health improvements for people impacted by mental ill-health.^{33, 38}

The current literature suggests an ongoing need to support those impacted by suicide and suicide attempt.³⁹ The emerging evidence is required to be examined within the workplace context, especially where high risk factors are present.

What did anaesthetists tell us?

The establishment of a welfare advocate and effective stay-at-work or return-to-work processes were among suggestions provided in order to better support anaesthetists and trainees impacted by mental ill-health and suicide. The lack of support for staff impacted by suicide was a common concern raised in consultations. The need for evidence-based communication following a suicide and support for staff were raised as issues to be addressed. Many suggested that departments need to ensure policies and services are available to support those impacted.

What anaesthetists told us

“For me, the main problem is the people who don’t really want to talk, or you look at and think – you need help, but if you opened that subject with them, they’re like – ‘No, I’m fine’ you know, ‘there’s nothing wrong’. It’s the ones who have a problem, but won’t engage. They’re the ones I worry about the most... If they’re people who have friends in the department, then we tend to be able to look out for each other.”

“The other issue I’ve had in the past, I had a trainee who was struggling, and I was really concerned about her mental health. I thought she was going to suicide, and I actually asked her directly, and she confirmed that she was depressed. Accessing help for her was difficult. In the end, I got help from one of the other supervisors in training. We didn’t have a designated welfare advocate in our department, which would have really helped.”

Comments from anaesthetists consulted as part of toolkit development



Suggested activities to better support anaesthetists and trainees impacted by mental ill-health and suicide

Action 10: Ensure effective processes to manage staff to stay at work or return to work.

10.1 Identify and train one or more welfare advocates for your department.

TIPS

- The welfare advocate is someone who junior staff and colleagues feel comfortable with approaching, and who is available and accessible – someone with a sympathetic ear, non-judgemental, and who can maintain confidentiality (e.g., anaesthetic nurse).
- The role of the welfare advocate is not to take on a duty of care, but to be aware of the relevant professional services and suggest or refer peers if in need.
- It may be necessary to have more than one welfare advocate – people who are willing and readily available to assist colleagues.

RESOURCES

The Australian and New Zealand College of Anaesthetists (ANZCA)

Articles discussing the role of the welfare advocate: [Resource Link](#)

Policy of assisting trainees in difficulty: [Resource Link](#)

Welfare of Anaesthetists Special Interest Group

Resource Document 16: *Welfare Issues in the Anaesthetic Department*. [Download PDF](#)

10.2 Develop stay-at-work or return-to-work plans for staff who have been diagnosed with mental ill-health.²⁵

TIPS

- Involve your Human Resources and Return to Work Coordinator early to develop plans.
- Tailor work plans to the individual needs of the staff member; incorporating any reasonable adjustments to their job.
- Develop work plans in collaboration with the staff member, treating health professional(s), family members and those who support them, and review plans regularly

RESOURCES

Heads Up Good Practice Guide

First responders framework to review your organisation's approach to promoting mental health. [Resource Link](#)

Action 11: Ensure the department has policies and services available to support those impacted by suicide.

11.1 Ensure the department has a policy and procedure for supporting staff impacted by the suicide of a colleague, family member or friend.

TIPS

- Anaesthetists can be adversely impacted by the suicide death of a colleague – whether that colleague is in the same department/hospital or not. Staff can also be impacted by the suicide of a friend or family member.
- In the event of a suicide within the service (or a suicide outside of the service that may impact on staff) a department should have a protocol in place that advises how to notify staff, ways to communicate and supports to be provided.
- Have resources available and know where to get immediate advice.
- StandBy Response Service or Doctors' Health Advisory Service may be good sources of immediate advice.

RESOURCES

Beyond Blue

Suicide bereavement and postvention resources. [Resource Link](#)

StandBy Support

A national postvention program offering support and resources to people and communities impacted by suicide. [Resource Link](#)

SuperFriend

Managing bereavement, grief and loss booklets. [Resource Link](#)

11.2 Ensure all staff have resources to support conversations about suicide.

TIPS

- Certain ways of talking about suicide can alienate members of the community, sensationalise the issue or inadvertently contribute to suicide being presented as glamorous or an option for dealing with problems. People who are vulnerable to suicide, or bereaved by suicide, can be particularly impacted by language.
- Read **Everymind** resources listed below for tips on what to say, and what not to say, and why this is important.

RESOURCES

Everymind

Conversations Matter

Resources that provide practical information and tips for individuals and communities to support safe and effective discussions about suicide. [Resource Link](#)

***Mindframe* advice on communicating about mental ill-health**

Advice to assist people when communicating about mental ill- health in a variety of settings, including support for public speakers and lived experience speakers. [Resource Link](#)

Life in Mind

Life in Mind is a national online initiative that connects Australian organisations and communities to the latest suicide prevention information, activities, resources and research. [Resource Link](#)

Other resources

RUOK?

An initiative to inspire and empower everyone to meaningfully connect with people around them and support anyone struggling with life. [Resource Link](#)

StandBy Support

A national postvention program to assist people and communities impacted by suicide. Find support and resources. [Resource Link](#)

11.3 Ensure that services are available to support those who need specialist intervention after a suicide death.

TIPS

- Contact specialists working in the suicide postvention space to provide guidance and support to impacted staff.
- Make support service information available to all impacted staff.
- Ensure staff have access to support (Doctors' Health Advisory Service, Employee Assistance Program or a specialist national service listed below) and provide them with opportunities to provide support to each other.

RESOURCES

Lifeline – 13 11 14 [Resource Link](#)

Suicide Call Back Service

A nationwide service that provides 24/7 telephone, video and online professional counselling to people affected by suicide. 1300 659 467. [Resource Link](#)

Beyond Blue – 1300 22 46 36
[Resource Link](#)

Mental Health Commission of Canada Suicide Prevention Toolkit

An example of a toolkit that could be designed for use by Australian anaesthetists or medical staff. [Resource Link](#)

STRATEGY 5: Improve leadership, coordination, data and information

To achieve this, our anaesthetic department will:

- **Action 12:** Improve leadership capability
- **Action 13:** Improve data collection on the health and wellbeing of the profession

Why have these actions been prioritised?

What does the evidence say?

Promoting good mental health and preventing suicide is everyone's role including senior leaders, managers, line supervisors, colleagues and workers themselves.³⁶ Managers have a key role in building resilience and maintaining the welfare of their staff. To be able to effectively carry out their responsibilities as a manager they should be provided with appropriate tools and training.⁴ Manager training can improve mental health literacy, reduce stigmatising attitudes and promote confidence in supporting employees.³⁷

What did anaesthetists tell us?

Consultations with anaesthetists and trainees revealed a need to improve leadership capability with suggestions such as provision of education and training on positive mental health behaviours as well as addressing workplace bullying, suicide prevention and debriefing practices. In addition to this, availability of resources and information was raised as an area for improvement, with the need to identify what is currently working, and to develop effective ways to distribute this knowledge and information.

What anaesthetists told us

“Leadership can do so much if the head of department would check in with the locums and say “How are you travelling? What are your problems? Let’s have a chat”, rather than just call people in to their office when there’s a problem or complaint...”

Comments from anaesthetists consulted as part of toolkit development



Suggested activities to improve leadership, coordination and data information

Action 12: Improve leadership capability

12.1 Provide education for leadership (including mentors and supervisors).

TIPS

- Education should focus on roles and responsibilities, including modelling of positive mental health behaviours and addressing:
 - Workplace bullying
 - Mental health and ill-health
 - Suicide prevention
 - Communicating about suicide
 - Debriefing practices
- Provide specific training for leaders and managers that focuses on people management skills, mental health and ill-health, identifying staff at risk and supporting those with mental ill-health, as well as suicide prevention in the workplace.

RESOURCES

Lifeline Applied Suicide Intervention Skills Training (ASIST)

Participants learn to recognise when someone may be at risk of suicide and to respond in ways that help increase immediate safety and link the person to help. [Resource Link](#)

Mental Health First Aid (MHFA) Training

MHFA provides skills around recognising the signs and symptoms of mental ill-health, types of treatments available, how to seek help and how to support someone experiencing mental ill-health. Courses delivered face-to-face or online. [Resource Link](#)

Royal Australasian College of Surgeons

Operating with Respect program. Provides resources, training and support to address bullying in the workplace. [Resource Link](#)

Everymind

Conversations Matter

Practical information and tips for individuals and communities to support safe and effective discussions about suicide. [Resource Link](#)

12.1 continued

Mindframe advice on communicating about mental ill-health

Advice to assist people when communicating about mental ill-health in a variety of settings, including support for public speakers and lived experience speakers. [Resource Link](#)

Action 13: Improve data collection on the health and wellbeing of the profession

13.1 Improve data collection on the health and wellbeing of the profession.

TIPS

- Use existing staff surveys and results for your department to review and prioritise actions.
- Consider supporting or collaborating on research trials and programs.

See [Appendix 1](#) for a list of instruments to establish baseline measures and evaluate the mental health and wellbeing of medical professionals.

RESOURCES

Australian and New Zealand College of Anaesthetists (ANZCA) 2017 fellowship survey

This survey evaluated the health and wellbeing of doctors using the Kessler Psychological Distress Scale (K-10). [Resource Link](#)

Stanford Wellness Resources

A robust conceptual framework to guide strategic planning, wellness interventions and measurement tools for physician wellness.

[Download PDF](#)

A 16-item instrument to assess physicians' professional fulfilment and burnout. [Download PDF](#)

Tips + Resources for Anaesthetists

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This section of the toolkit has been developed for use by individual anaesthetists who may work as consultants across many departments. In this chapter you will find suggestions, tips and resources to improve your own mental health and wellbeing.



Reduce risks and stress load

in the workplace

TIPS

- Be aware of what working conditions are considered to be work safe. The NSW Health JMO Wellbeing and Support Plan³⁶ proposed:
 - Maximum rostered hours: Employees must not be rostered for shift periods totalling more than 14 consecutive hours (inclusive of meal breaks and handover).
 - Breaks after rostered shift periods: Rosters must be arranged so that there is a break after rostered shift periods of at least 10 hours.³⁶
 - Quiet space: Space must be made available to take time out in a quiet area other than cafeterias.
- As a sole practitioner, develop a plan for taking leave and a contingency plan for unplanned leave in case of ill-health. Some useful tools for planning for leave can be found at MindTools, listed below.

RESOURCES

NSW Health JMO Wellbeing & Support Plan³⁶

The plan addresses safe working hours and fatigue; enabling Junior Medical Officers (JMOs) to seek help and treatment when needed; information about where to seek help; improving culture in medicine; improving job security; and enhancing transparency in recruitment and employment. [Resource Link](#)

Australian Medical Association (AMA) National Code of Practice

Hours of work, shift work and rostering for hospital doctors [Resource Link](#)

National Code of Practice: *Flexible work and training practices* [Resource Link](#)

Junior Doctors Employment Guide. [Resource Link](#)

MindTools

An online resource that provides a range of tools for planning and managing in business. [Resource Link](#)

Information and advice to prevent bullying and harassment in the workplace

TIPS

- Ensure an understanding of what bullying looks like in the workplace, how to seek help and how to be a supportive bystander.

SafeWork Australia

Information about workplace bullying. [Resource Link](#)

Australian Human Rights Commission (AHRC)

Workplace bullying: Violence, harassment and bullying fact sheet [Resource Link](#)

Lodge a formal complaint with the AHRC on 1300 656 419.

NSW Health Policy Directive

Prevention and Management of Workplace Bullying in NSW Health. [Download PDF](#)

NSW Health JMO Support Line

Support and advice service provided for junior medical staff. 1300 566 321. [Resource Link](#)

NSW Health Anti-Bullying Advice Line

A free, confidential and impartial service for staff and managers of NSW Health: 1300 416 088
[Resource Link](#)

Heads Up

Bullying information for employees. [Resource Link](#)

Training and professional development opportunities

TIPS

- Identify what professional development opportunities you may require.
- Explore opportunities or events that may provide professional development.
- Develop a plan and schedule regular events for staff engagement.

Australian and New Zealand College of Anaesthetists (ANZCA)

Provides regulation information and links for training and accreditation. [Resource Link](#)

Continuing Professional Development (CPD)

Information for participants to record, monitor and provide evidence of CPD activities related to practice evaluation, knowledge and skills, and emergency responses in an online CPD portfolio. [Resource Link](#)



Ways to maintain or improve your mental health and general wellbeing

Enhance your understanding of mental health and mental ill-health

Mental Health Literacy: Past, Present and Future

The Canadian Journal of Psychiatry, 3 March 2016.

An article discussing the definition of mental health literacy. [Resource Link](#)

Heads Up

Heads Up is all about giving individuals and businesses the tools to create more mentally healthy workplaces. Information about mental health conditions. [Resource Link](#)

A listing of training and resource materials. [Resource Link](#)

Everymind

An Institute focused on the promotion of mental health and wellbeing as well as the prevention of mental ill-health and suicide. Operations are based on Prevention First: a national framework for strategic action to prevent mental ill-health and promote mental health and wellbeing. [Resource Link](#)

Question, Persuade, Refer (QPR) Suicide Prevention Training (online). [Resource Link](#)

Mental Health First Aid (MHFA) Australia

MHFA courses teach people simple, practical first aid skills for helping a family member, friend or co-worker who is experiencing mental health problems. [Resource Link](#)

Blended MHFA in the Workplace is available to help managers, supervisors and individuals assist co-workers experiencing a mental health crisis. [Resource Link](#)

SuperFriend

Ideas for creating wellbeing in the workplace. [Resource Link](#)

Find Australian mental health resources and services

Head to Health

Provides links to trusted Australian online and phone supports, resources and treatment options to improve mental health. [Resource Link](#)

Self-care for health professionals

National Institute of Integrative Medicine (NIIM)

Roadmap to wellness. A preventative healthcare guide written by some of Australia's leading integrative doctors. [Resource Link](#)

Five principles of self-care for health professionals

by Lisa Chu, MD on MedPage Today's KevinMD.com [Resource Link](#)

Self-awareness and assessment tools

Australian Doctors' Health Network

Professional Quality of Life (ProQOL) – A tool for assessing satisfaction and compassion fatigue. [Resource Link](#)

Australian Medical Association (AMA)

Fatigue risk assessment tool and safe hours campaign. [Resource Link](#)

The Centre for Clinical Interventions

Online information on a range of mental health topics, including self-help resource modules. [Resource Link](#)

Self-care resources

Smiling Mind

Uses meditation and mindfulness activities to reduce anxiety and improve general wellbeing. [Resource Link](#)

Headspace - Meditation made Simple

Short guided meditation activities to reduce anxiety and improve general wellbeing. [Resource Link](#)

SHUTi

An internet based self-help program for people with insomnia found to reduce depression and anxiety symptoms. [Resource Link](#)

ReachOut Breathe

Helps reduce the physical symptoms of stress and anxiety by slowing down your breathing and heart rate. [Resource Link](#)

Moodgym

Self-help resources for learning and practising skills to help prevent and manage symptoms of depression and anxiety. [Resource Link](#)

Calm

Paid subscription app for sleep, meditation and relaxation. [Resource Link](#)

The Australian Medical Students' Association (AMSA)

Information, online resources and stories of struggle and success for medical students transitioning into work. [Resource Link](#)

AVANT Mutual

Resilience - Strategies for weathering the storm. Information, support and advice by doctors for doctors. [Resource Link](#)

Computer Assisted Learning for the Mind (CALM)

Podcasts providing practical techniques to develop positive mind states, manage stress, maintain healthy relationships and cultivate mindfulness. [Resource Link](#)

Tools and information for building a healthy physical lifestyle

Diet

Display the Australian Dietary Guidelines poster with links to resource information and recipes in common eating areas. [Resource Link](#)

The Commonwealth Scientific and Industrial Research Organisation (CSIRO) website provides information and recipes for a Total Wellbeing Diet based on research. Find information on cooking for specific ailments, dietary preferences (i.e. vegetarian) and stages of life. [Resource Link](#)

Exercise

Many government health organisations provide plans for accessing exercise facilities at low cost. Display information in common gathering areas for staff. See your health intranet site for further details.

Many private health funds provide incentives for increasing participation in exercise and relaxation. Ensure staff with private health cover are aware of their benefits and wellbeing incentives.

Smoking Cessation

Identify state health service information to provide quit support. For example, NSW Health organisations can provide staff with up to four weeks nicotine replacement therapy to assist with managing nicotine dependence. [Resource Link](#)

Other services to help with smoking cessation:

iCanQuit. [Resource Link](#)

Drug and Alcohol Services

The National Health and Medical Research Council

Australian guidelines to reduce health risks from drinking alcohol. Evidence-based advice on the health effects of alcohol to help individuals make informed decisions about their drinking habits. [Resource Link](#)

SMART Recovery Australia

A free group program to assist people with problematic behaviours, including addiction to drugs, alcohol, cigarettes, gambling, food, shopping, Internet and others. [Resource Link](#)

Building social connections

among peers

TIPS

- Keep it simple and realistic with a focus on social interaction.
- Hold social activities on a regular but achievable basis. For instance, monthly or quarterly.
- Join in with other doctors and health workers to celebrate mental health campaigns such as Crazy Socks 4 Docs. [Resource Link](#)
- Identify staff members who are interested in coordinating social activities and events to take the lead.

Some Options

- Peer review groups
- Local mentoring or peer support programs

Team building and workplace activities

HubSpot

27 fun corporate team-building activities and outing ideas everyone will enjoy. [Resource Link](#)

Workplaces for Wellness

An example of an action plan listing ideas for activities that focus on physical activity, healthy eating, social and emotional wellbeing, plus more. [Download PDF](#)

SuperFriend

Ideas for creating wellbeing in the workplace. [Resource Link](#)

Australian Society of Anaesthetists

A not-for-profit member funded organisation dedicated to supporting and connecting anaesthetists with a primary focus on the economic, workforce and professional interests of their members. [Resource Link](#)

Australian and New Zealand College of Anaesthetists (ANZCA) Peer Groups

For information on how to establish peer groups, see: [Download PDF](#)

Mentoring and Peer Support Programs

Welfare of Anaesthetists Special Interest Group resource document for mentoring and peer support programs: [Download PDF](#)

Accessing help and responding to mental ill-health and/or suicidal behaviour

TIPS

- Be aware of available support lines.
- Have a regular GP, or a list of available GPs, to see.
- Identify mental health professionals who can assist.

Medical specific support lines

Doctors' Health Advisory Service

This service aims to ensure that every doctor, dentist, veterinarian or student in these professions has ready access to health care. Helpline details listed below by location. [Resource Link](#)

NSW and ACT

24-hour phone assistance

Helpline and office: 02 9437 6552

Northern Territory and South Australia

24-hour phone assistance

Helpline: 08 8366 0250

Queensland

24-hour phone assistance

Helpline: 07 3833 4352

Tasmania and Victoria

Clinical service and peer support

Phone: 03 9495 6011

[Resource Link](#)

Western Australia

24-hour phone assistance

Helpline: 08 9321 3098

Bush Support Services

Support for remote health workers

Helpline: 1800 805 391

Australian and New Zealand College of Anaesthetists (ANZCA) Doctors' Support

ANZCA has engaged Converge International, a confidential and independent counselling and coaching service, to provide the Doctors' Support Program. The program is free for all ANZCA fellows, trainees, specialist international medical graduates (SIMG), and immediate family members. Users can speak with a counsellor over the phone or make an appointment to see a consultant for a face-to-face session.

- Phone: 1300 687 327 in Australia or email: eap@convergeintl.com.au.
- Identify yourself as an ANZCA fellow, trainee, SIMG or family member.
- Appointments are available from 8am to 6pm Monday-Friday (excluding public holidays).
- 24/7 emergency telephone counselling is available.

Welfare of Anaesthetists Special Interest Group welfare resources

Australian and New Zealand College of Anaesthetists (ANZCA) [Resource Link](#)

AVANT

Personal Support Program for AVANT members: 1300 360 364

Australian Medical Association. [Resource Link](#)

MDA National Professional Support Service for MDA members who need support during medicolegal process – 1800 011 255

Medical Benevolent Association NSW – (02) 9987 0504

JMO Support Line

Support and advice service provided by NSW Health for junior medical staff. 1300 566 321. [Resource Link](#)

Doctors 4 Doctors (D4D)

Offers support for colleagues by colleagues. It is a service where a colleague lends a listening ear and helps the practitioner formulate the right advice and assistance. [Resource Link](#)

Find a GP or mental health professional

Welfare of Anaesthetists Special Interest Group

Resource document for Your Own General Practitioner. [Resource Link](#)

Healthdirect

An online tool for finding a health service such as general practice, counselling, psychology, etc., by specific location. [Resource Link](#)

Better Access initiative

A mental health plan that provides Medicare funding toward psychology services for up to 10 individual or group appointments per year. The Mental Health Care Plan is part of the Better Access to Psychiatrists, Psychologists and GPs through the Medicare Benefits Schedule (Better Access) initiative. [Resource Link](#)

Royal Australian College of General Practitioners (RACGP)

Provides information on managing mental health, the Better Access initiative and mental health-related services provided by GPs. [Resource Link](#)

Your Health in Mind

An online tool to assist with finding a psychiatrist within a given location or by name. [Resource Link](#)

National support helplines

Lifeline

131 114

[Resource Link](#)

Beyond Blue

1300 224 636

Get support [Resource Link](#)

Forums [Resource Link](#)

Men's Line Australia

1300 789 978

Mental Health Line (NSW)

1800 011 511

Qlife

1800 184 527

Alcoholics Anonymous

1300 22 22 22

Narcotics Anonymous

1300 652 820

Suicide Call Back Service

1300 659 467

[Resource Link](#)

Online supports

Mental Health Online

Internet-based treatment for mental ill-health. [Resource Link](#)

Head to Health

Find Australian mental health resources and service providers. [Resource Link](#)

Life in Mind

A national gateway connecting Australian suicide prevention services to each other and the community. Find information, activities, resources and research about suicide prevention. [Resource Link](#)

healthdirect

An online resource for identifying a range of services and treatments, online and face-to-face, for mental health problems. [Resource Link](#)



Understanding mandatory reporting requirements

TIPS

Ensure understanding of changes to mandatory reporting.

- In April 2018, the Council of Australian Governments (COAG) Health Council unanimously agreed to “take steps to protect patients and strengthen the law to remove barriers for registered health professionals to seek appropriate treatment for impairments including mental health.” The full statement of the Council is listed below as a resource.
- Identify services or a welfare advocate who can assist with any questions or concerns.

RESOURCES

Council of Australian Governments (COAG) Health Council

COAG Health Council Meeting Communique – 13 April 2018. Mandatory reporting requirements under the Health Practitioner Regulation National Law. [Download PDF](#)

Welfare of Anaesthetists Special Interest Group

The Welfare Advocate. A resource document outlining how to appoint a suitable person as a welfare advocate, including duties, role and resources. [Resource Link](#)

Mandatory reporting. A document that provides details on mandatory reporting requirements for New Zealand and Australia. [Download PDF](#)

NOTE: Mandatory reporting requirements are currently under review by federal, state and territory Health Ministers.

Australian Health Practitioner Regulation Agency (AHPRA)

The AHPRA supports the 15 national boards responsible for regulating the health professions. The website provides information about registration, boards, education, complaints or concerns, as well as publications and resources. [Resource Link](#)

Medical Board of Australia

Guidelines for mandatory notifications. [Resource Link](#)

The role of the welfare advocate

An article discussing the role of the welfare advocate regarding performance issues, psychiatric illness, critical incidents and communication, substance abuse and violations. [Resource Link](#)

Research on support for doctors facing complaints

Rimmer, A. *Colleagues are best source of support for doctors facing complaints, researchers find.*

The BMJ, 2017. [Resource Link](#)



Education and training to recognise and respond to mental ill-health and suicide

TIPS

- Develop capability and skills in recognising mental ill-health and suicidal behaviours, as well as how to respond and provide support.

RESOURCES

Applied Suicide Intervention Skills Training (ASIST)

Participants learn to recognise when someone may be at risk of suicide and to respond in ways that help increase immediate safety and link the person to help. [Resource Link](#)

Mental Health First Aid Training (MHFA) Australia

MHFA provides skills around recognising the signs and symptoms of mental ill-health, types of treatments available, how to seek help and how to support someone experiencing mental ill-health. Courses delivered face-to-face or online. [Resource Link](#)

Debriefing

A resource guide for critical incident stress and debriefing in human service agencies. [Download PDF](#)

Effective processes to stay at work or return to work after an event of mental ill-health

- Seek advice from Doctors' Health Advisory Service or a workplace welfare advocate.

RESOURCES

Doctors' Health Advisory Service

This service aims to ensure that every doctor, dentist, veterinarian or student in these professions has ready access to health care. Helpline details listed below by location. [Resource Link](#)

NSW and ACT

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Helpline and office: 02 9437 6552

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24 hour phone assistance
Helpline: 07 3833 4352

Tasmania and Victoria

Clinical service and peer support
Phone: 03 9495 6011
[Resource Link](#)

Western Australia

24-hour phone assistance
Phone: 08 9321 3098

Bush Support Services

Support for remote health workers
Helpline: 1800 805 391

INFORMATION

Australian and New Zealand College of Anaesthetists (ANZCA)

Article discussing the role of the welfare advocate: [Download PDF](#)

Welfare of Anaesthetists Special Interest Group

Welfare issues in the Anaesthetic Department. [Resource Link](#)

Heads Up

Resources, actions and tips for creating healthy workplaces in the health services. [Resource Link](#)

NSW Health

See your public health intranet system for policy, templates and work coordinators for recovery.

Information and services available to support those impacted by suicide

Resources to assist people after a suicide has occurred (postvention)

Beyond Blue

Suicide bereavement and postvention resources. [Resource Link](#)

StandBy

A national postvention program to assist people and communities impacted by suicide. Find support and resources. [Resource Link](#)

SuperFriend

Managing bereavement, grief and loss booklets. [Resource Link](#)



Resources to support conversations about suicide

Everymind

A leading Institute dedicated to the prevention of mental ill-health and suicide. [Resource Link](#)

Conversations Matter

An online resource to support safe, effective community discussions about suicide. [Resource Link](#)

***Mindframe* advice on communicating about mental ill-health**

Advice to assist people when communicating about mental ill-health in a variety of settings, including support for public speakers and lived experience speakers. [Resource Link](#)

Life in Mind

A national gateway connecting Australian suicide prevention services to each other and the community. Find information, activities, resources and research about suicide prevention. [Resource Link](#)

Other resources

R U OK?

An initiative to inspire and empower everyone to meaningfully connect with people around them and support anyone struggling with life. [Resource Link](#)

StandBy

A national postvention program to assist people and communities impacted by suicide. [Resource Link](#)

Support services

Lifeline. 13 11 14. [Resource Link](#)

Suicide Call Back Service. 1300 659 467. [Resource Link](#)

Beyond Blue. 1300 224 636. [Resource link](#)

The Mental Health Commission of Canada

This Suicide Prevention Toolkit is an example of what could be designed for use by anaesthetists or other medical staff. [Resource Link](#)

Supporting Information

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Appendices

Glossary of terms

Mental health

A positive concept that relates to the social and emotional wellbeing of individuals and communities. The concept is influenced by culture but generally relates to the enjoyment of life, ability to cope with stress and sadness, fulfillment of goals and potential, and a sense of connection to others.

Mental illness

Describes a clinically recognisable set of symptoms that significantly impact how a person feels, thinks, behaves and interact with others, sufficient to meet diagnostic criteria. There are different types of mental illness and they occur with varying degrees of severity. Examples include mood disorders (such as depression, anxiety and bipolar disorder), psychotic disorders (such as schizophrenia), eating disorders (such as anorexia and bulimia) and personality disorders (such as paranoid or narcissistic).

Mental health problem

Refers to symptoms such as changes in emotion or behaviour that are not of sufficient severity to be diagnosed as a mental illness. This term generally refers to temporary distress or difficulty coping during periods of stress. These can resolve with time or when the individual's situation changes, but if problems persist or increase in severity they may develop into mental illness.

Mental ill-health

Encompasses both mental health problems and mental illness.

Suicidal behaviour

A range of behaviours or actions which are related to suicide, including suicidal thinking, suicide attempts and death by suicide.

Literature snapshot

There are a number of research studies looking at the mental health and wellbeing of anaesthetists across different countries. Themes to emerge from the literature review include that anaesthetists report high levels of stress, an increased risk of suicide and increased risk for substance abuse.

General health and wellbeing

One survey of 546 anaesthetists in the United Kingdom found that anaesthetists reported higher stress levels than the general working population but no higher than doctors in other specialties. Higher reported levels on the various stress indices was also related to reduced job satisfaction and greater physical and mental ill-health.⁷ This was mirrored in surveys of anaesthetists in the Netherlands,⁸ Australia⁶ and Finland.⁹ Factors that tended to contribute to lower job satisfaction or risk of burnout included long hours and on-call stress¹⁰ (e.g. Gaszynska, Stankiewicz-Rudnicki, Wieczorek and Gaszynski, 2014). Factors that contributed to higher levels of job satisfaction seemed to be perceived job control¹¹ and social support.¹² Kinzl et al. also noted that anaesthetists in more senior positions reported higher levels of job satisfaction than those in more junior positions.¹¹ A survey of anaesthesia trainees by Downey, McDonald and Downey demonstrated psychological impairment and poor personal healthcare amongst many trainees, with stressors reported to include exams, critical clinical events and a fear of making errors.¹⁹

Substance use and abuse

A number of studies have looked at factors affecting risk of substance use and abuse. A survey of 100 anaesthetist departments in Australia found that there were 44 cases of substance abuse reported, of which 10 resulted in death. Only 19 departments stated they had formal intervention policies, and those departments that had previous cases of substance abuse were more likely to have a policy in place.¹⁴ Garcia-Guascha, Roige and Padro conducted a review and found that substance use and abuse was prevalent amongst anaesthetists worldwide, and that treatment programs did not tend to show efficacy¹⁵. One survey from the United States examined anaesthetists who were in recovery from substance addiction and found that the majority indicated they were in situations requiring re-exposure to anaesthetic agents during recovery, which is known to be a risk factor for relapse.³⁸ A review by Luck and Hedrick also pointed to risk factors for substance abuse, such as: easy access and availability of opioids and other narcotics, stress, irregular work hours, sleep deprivation and the need for vigilance during long hours of surgery.³⁹ The most common drugs of abuse are those readily available to anaesthetists.

Risk of suicide

Studies in various countries have also indicated higher instances of suicide or suicidal ideations in anaesthetists. Lindfors et al. surveyed Finnish anaesthetists and found that a quarter had suicidal ideations, with those in poor health, with low social support and family problems at highest risk. Work risks included conflict with co-workers and superiors and on call stress. A recent Australian survey found 13 per cent of respondents had a diagnosed mental health issue and 16 per cent had reported suicidal ideations.¹⁸

Policy snapshot

There are a number of Australia-wide policies concerning the general mental health of the population. Children and young people are a particular priority group for mental health promotion, prevention of mental ill-health and suicide, and early intervention activities.

A policy scan was performed under the following parameters:

- Professional group: Anaesthetists and anaesthetic departments in government hospitals; second order priority material relating to those training to be anaesthetists;
- Type of documents: Policy documents, statements, guidance or recommendations;
- Area: mental health, wellbeing, mental ill-health, mental illness, prevention, promotion, suicide prevention, suicide postvention, workplace mental health;
- Locations: Australia and Commonwealth countries (UK/Canada/NZ), peak bodies, regulators, government websites (Commonwealth and Federal), NGO/Advocacy;
- Time period: Within the last five years;
- Language: English.

Outside of this review, there may be relevant policies in private departments, however, in our policy scan we were unable to identify Australia-wide official policies, position statements or regulations concerning anaesthetists and their workplace mental health or mental ill-health.

A number of reports have previously outlined the mental health and wellbeing of doctors generally, most notably by Beyond Blue. These reports looked at various indices broken down by specialty, and anaesthetists were featured. Supported by the Commonwealth Department of Health, Beyond Blue has developed a specific doctor's mental health program to support primary care health providers such as general practitioners, nurses and other allied health professionals, supporting the identification, treatment and management of depression, anxiety and suicidal behavior. As part of Beyond Blue's workplace and workforce program, they have also developed a workplace mental health strategy for health services. This program assists health services in creating mentally healthy workplaces.⁴

In conclusion, there are no public documents or specific policies in place addressing the risk of mental ill-health for anaesthetists and their needs around workplace mental health and wellbeing.

Consultations snapshot

Strategy 1: Improve study, training and work environments to reduce the risk of mental ill-health and suicide

Consultations with anaesthetists and trainees revealed the need to implement strategies to improve their mental health and wellbeing. Promotion of a healthy lifestyle, modelling of positive behaviours, increased literacy about mental health, and ways to improve mental health in the workplace were areas of suggestion. Anaesthetists also raised concerns including the need for increased connectedness and peer support and the need to address bullying and harassment. The development of mentoring, peer review groups and networking between anaesthetists and anaesthetic trainees were suggestions raised in consultations.

The reduction of stigma associated with mental ill-health and suicide as well as a need to normalise and promote acceptance and understanding of mental ill-health were also raised as priorities.

Strategy 2: Improve the culture to increase wellbeing and reduce risk

An overwhelming concern raised was the need to ensure job design, rosters and individual workloads are reviewed to reduce risks. Anaesthetists and trainees communicated that they did not have a sense of control over their work or their working conditions. There was no flexibility of hours, support to take sick leave, or even the provision of an appropriate physical space to rest or take breaks.

Consultations revealed a need to design and manage a work environment that minimises harm. Issues around mandatory reporting and access to drugs were raised during the consultation phase. Also, issues raised around lack of support during examination periods and limited access to professional development revealed a need to ensure adequate and structured availability of training.

Strategy 3: Improve capacity to recognise and respond to those needing access to mental health and suicide services and supports

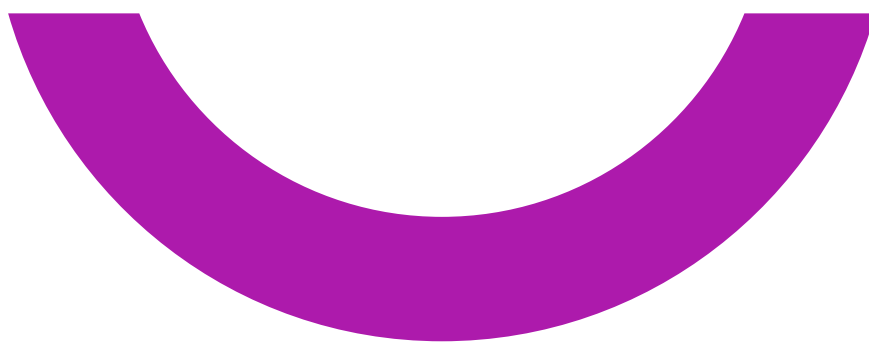
Consultations with anaesthetists and trainees revealed a need to improve access to information and training about mental ill-health, suicide and how to respond. The importance of having a general practitioner was highlighted and provision of mental health supports was suggested. The need for education and training was emphasised in order to improve the capacity of staff to recognise and respond to mental ill-health and suicide. Anaesthetists also raised the need for clear pathways to care so that staff are aware of avenues for help-seeking and treatment for themselves and to support colleagues.

Strategy 4: Better support for anaesthetists and trainees impacted by mental ill-health and suicide

The establishment of a welfare advocate and effective stay at work or return to work processes were among suggestions to better support anaesthetists and trainees impacted by mental ill-health and suicide. The lack of support for staff impacted by suicide was also a common concern raised in consultations. The need for communication after a suicide and support for staff were raised as issues to be addressed, noting that departments need to ensure policies and services are available to support those impacted.

Strategy 5: Improve leadership, coordination, data and information

Consultations with anaesthetists and trainees revealed a need to improve leadership capability with suggestions such as provision of education and training on positive mental health behaviours, addressing workplace bullying, suicide prevention and debriefing practices. Availability of resources and information was raised as an area for improvement, with the need to identify what is currently working and a way to distribute this knowledge and information more effectively.





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