

HEE Enhancing Human Factors

Improve Patient Safety: Resilience

Please read the information below to understand more about resilience and its relevance to human factors and patient care.

How is resilience defined?

Resilience is the ability to ‘bounce back’ or positively adapt to ongoing stress or adversity (Smith et al, 2008).

Resilience fallacies:

- Never show emotion – no-one can tell what you’re feeling
- Must handle everything on your own
- Always act fast
- Accomplish superhuman feats
- Always fully composed
- Have it or you don’t – you are either a resilient person or you’re not
- It’s a destination – after practice, you will learn to be resilient

Resilience facts:

- Regulate emotion – show the appropriate emotion/level of emotion for the situation
- Seek support
- Know when to slow down
- Bounce back – come back from difficult situations; don’t give up
- Everyone can develop it – you can increase your resilience
- It’s a process – resilience in individuals is constantly developing

What exactly is resilience?

Resilience has been defined in a number of ways, including as:

- **A process**, whereby individuals react to a risk by drawing on protective factors that help them to behave in a more resilient manner
- **A trait**, where individuals possess internal characteristics that help them to demonstrate resilience
- **A state**, where individuals can adapt their behaviours depending on the situation – it’s trainable
- **An outcome**, where an individual has learnt to be resilient following adversity or stressors

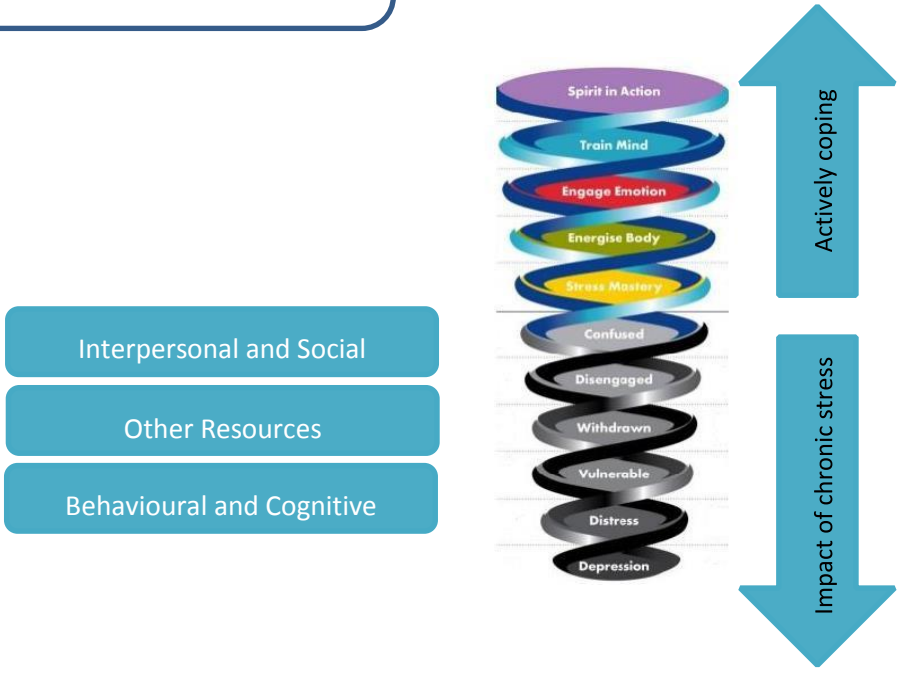
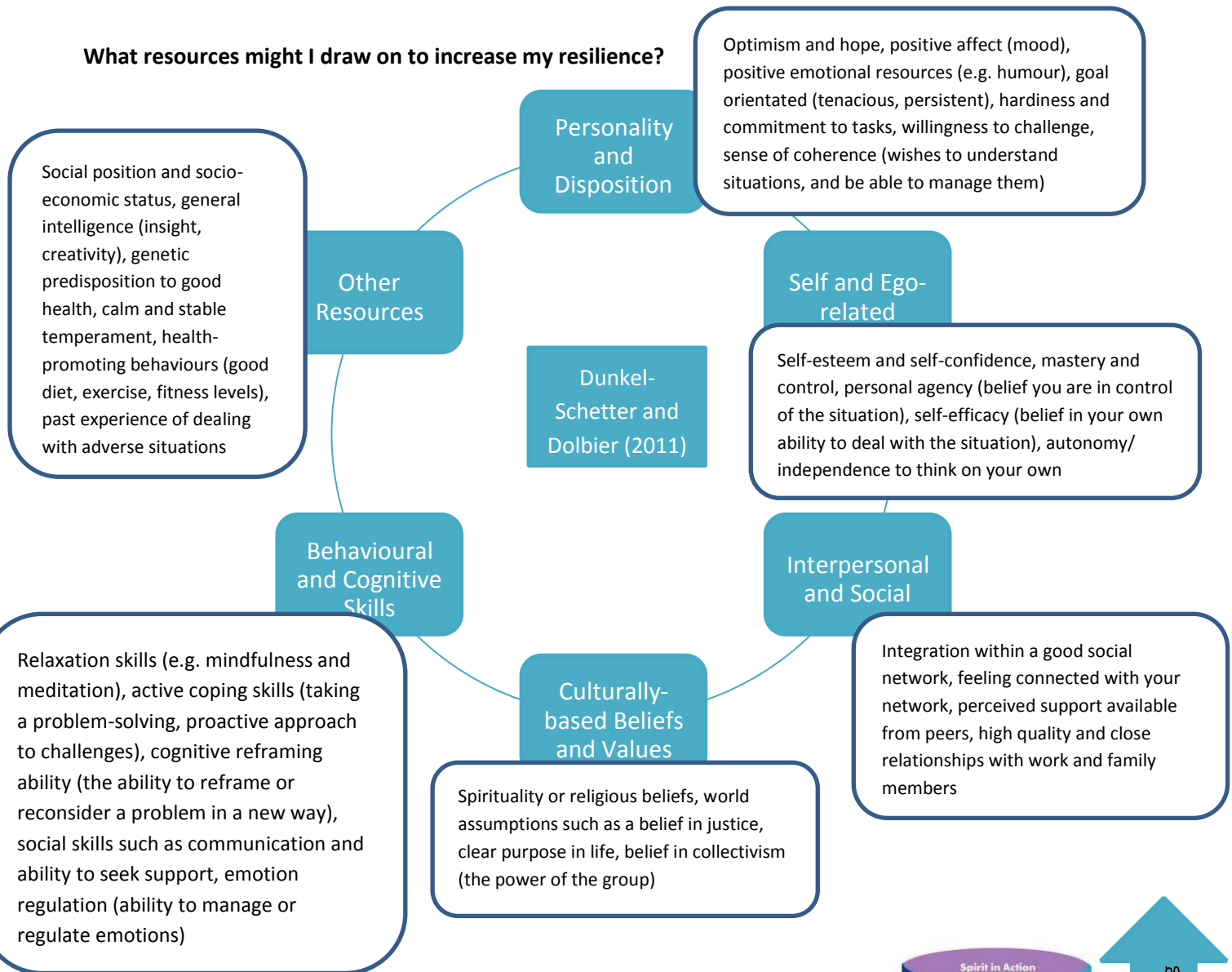
A recent investigation reinforced the view that **resilience is a multi-dimensional construct**, characterized as a process where **individuals can access a range of internal and external resources to adapt to challenging situations** (Pangallo, Zibarras, Lewis and Flaxman, 2015).

Why is personal resilience related to patient safety?

Increases in individual resilience in the workplace can result in beneficial outcomes such as improved wellbeing, lowered stress and better job performance (Robertson, Cooper, Sarkar, & Curran, 2015). Passi et al (2016, in press) highlight direct links between student or trainee wellbeing and developing resilience; resilience is an important protective factor enabling physicians to avoid reaching a stage of ‘burnout’. As also discussed in the Pre-Reading sheet, wellbeing and stress levels have been shown to impact an individual’s performance in their role, thus also impacting levels of patient care.

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What resources might I draw on to increase my resilience?



How can I explore or develop use of resilience resources in my job?

1) Challenge yourself to use all the resources available to you

Understand what you can do when you experience the ‘downward spiral’

- a. **Prioritise and delegate**
- b. **Talk and connect**
- c. **Exercise/diet/go outside**
- d. **Sleep**
- e. **Mindfulness**
- f. **CBT or ACT**

2) Explore your own resilience in more detail:

Build a profile of your resilience using The Nicholson-McBride resilience quotient.

<http://www.testyourrq.com/my-rq/>

3) Reflect on your past experiences to identify if you should seek assistance:

Monitor your own well-being to understand if your behaviour is ‘active coping’ or if you are struggling to cope; do you need to ask for assistance or support? Studies of resilience recognise that it is an ‘dynamic internal dialogue’ whereby medical students and trainees, and physicians, can build on their personal attributes and develop new strategies to reframe and cope with clinical experiences and exam pressures (Greenhill et al, 2015).

4) Consider learning more about ACT (Acceptance Commitment Training)

ACT is a tool designed to help people improve their performance at work and meet their goals (e.g. having a fulfilling work life). ACT is designed to teach you skills to deal with negative thoughts and feelings, and helps you to accept what is out of your control whilst committing to do whatever you can to improve your quality of life or performance at work.

ACT helps achieve **psychological flexibility**: “*The ability to contact the present moment and pursue one’s goals without being deterred by unwanted thoughts, feelings and/or psychological sensations*”.

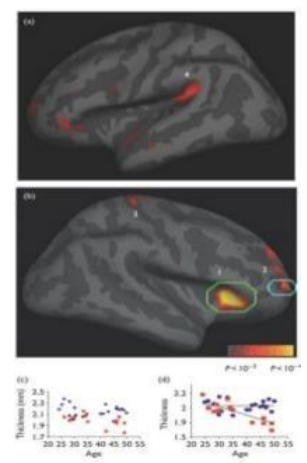
For more information on ACT: https://contextualscience.org/list_of_resources_for_learning_act

5) Try mindfulness: a cognitive coping resource to improve resilience

Mindfulness training improves functioning in areas related to:

- | | |
|--------------------------------------|-----------------------|
| a. Regulation of the stress response | d. Self-regulation |
| b. Executive functioning | e. Sensory processing |
| c. Attentional control | f. Memory |

Meditators show a thickening of cortex in regions associated with attention and self-awareness. “Regular practice of meditation may have neuroprotective effects and reduce cognitive decline associated with normal ageing” (Hassed, 2014).



- 6) **Investigate support that is available through HEE Yorkshire and the Humber LETB**
- 7) **Share experiences with your peers and colleagues:** Use your local network of your peers, your colleagues at work and other medical professionals for support. One example of structured group support is the use of Schwartz rounds (<https://www.pointofcarefoundation.org.uk/our-work/schwartzrounds/>) – this technique has been piloted by the Kings Fund in the UK from 2009-2013 and continues now through the Points of Care Foundation.
- 8) **Maintain an intellectual interest in what you do:** A common theme in the research regarding resilience in medical practitioners is that students, trainees and doctors with career progression, job variability, the opportunity to develop special areas of interest, or a commitment to ongoing CPD demonstrate higher resilience (Balme et al, 2015). Engaging in any kind of CPD is beneficial, including:
 - a. Structured (doing research or undertaking an academic role)
 - b. Unstructured (reading journals)
 - c. Group activity (practice based small groups, Balint groups: <http://balint.co.uk/> and protected time learning schemes)
- 9) **Don't be afraid to admit to, or learn from, mistakes:** An essential aspect of developing resilience is focused on learning from difficult situations. Admitting mistakes in medicine is still not common practice. This short TEDx talk explains why:
https://www.ted.com/talks/brian_goldman_doctors_make_mistakes_can_we_talk_about_that