

Practitioner resilience: – Working in tough times

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Practitioner Resilience

- The What?
 - What is the adversity and the challenges for practitioners - Practicing in tough times
- The Why ?
 - Why bother, and why build resilience in practitioners - Overview of practitioner resilience research
- The How?
 - How to make 'resilient moves' in practice?



The what?

Recommendations for tackling work related stress in the caring professions with benefits to service users, staff and organisations have been reported by Boorman (2009).



Staff well-being...an *'antecedant'* to patient care experience

- ***'Well-being bundles:'***
 - A good local (team)/ work-group climate
 - Co-worker support
 - Job satisfaction
 - A positive organisational climate
 - Organisational support
 - Low emotional exhaustion
 - Supervisor support

(Maben et al 2012 commissioned by the National Institute of Health Research)

Four waves of resilience research (Masten, 2007)

1st wave
individual focus

2nd wave
process
orientation

3rd wave
intervention
focus

4th wave
systemic
approach

5th wave ?
Collaborative
social justice
approach

4th 'The qualities of both the individual and the individual's environment that potentiate positive development' (Ungar & Liebenberg 2011:127)



5th 'Beating the odds, and finding ways of changing the odds' (Hart, Gagnon, Aumann, & Heaver, 2013)



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Testimony for other

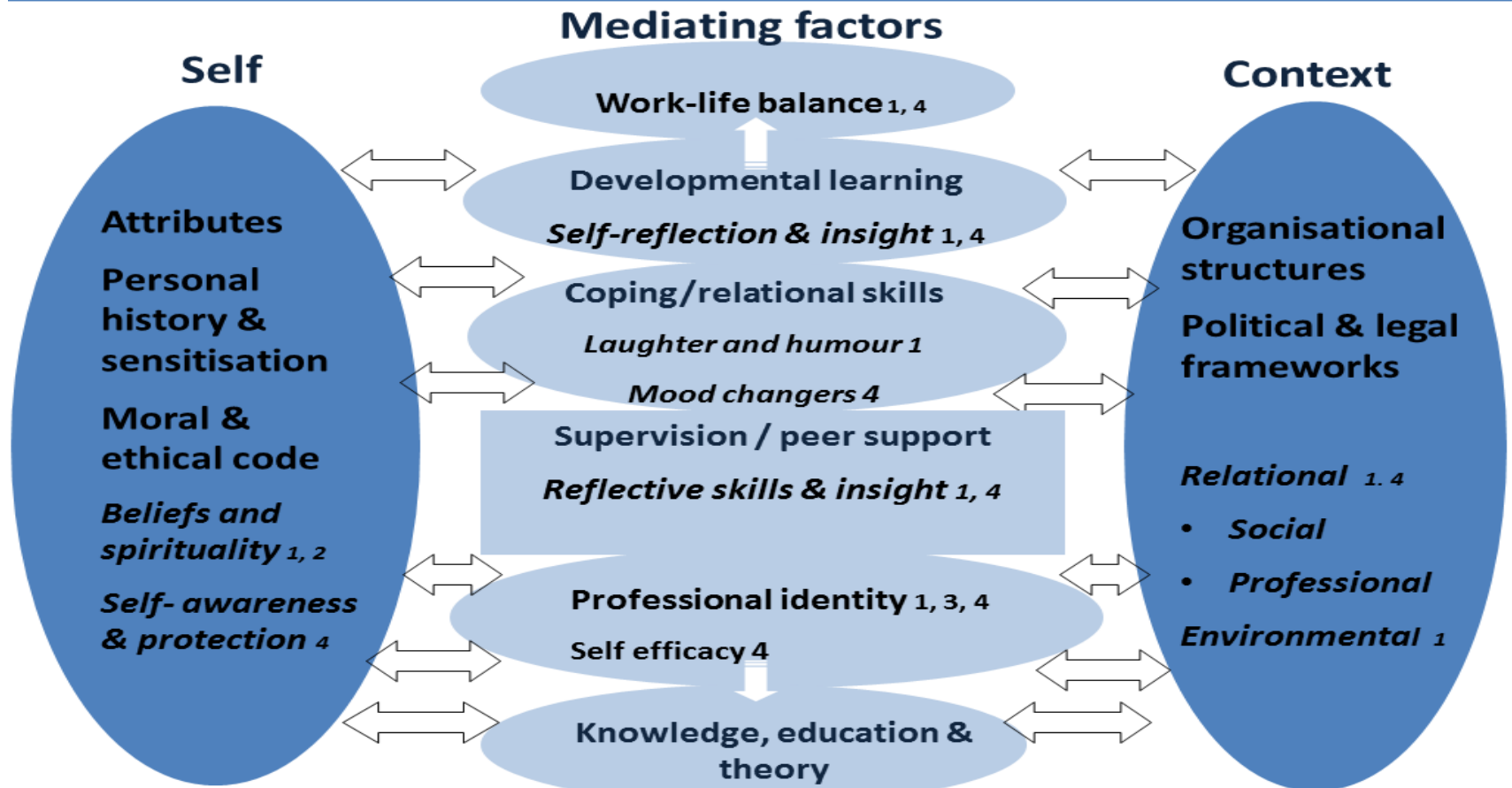
- Exercise1
- Think of a practitioner who you would describe as resilient?



Practitioner resilience across professional groups

Ecological framework

Overlaying PR on Adamson et al 2012 resilience matrix



Key: ¹ McCann et al 2013; ² Jackson et al 2007; ³ Beddoe et al 2013; ⁴ Hunter and Warren 2014



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Resilience selection box

Partner support ¹	Low workload ¹	Control over work ¹	Colleague support ¹	Cake!
Beliefs & spirituality ^{1,2}	Continuing education ¹ Developmental learning ⁵	Family support ¹		Making a difference ¹
Self-reflection protection awareness ^{1,4}	Client connection ¹	Work culture ¹	Laughter / humour ¹	Mood changers ⁴
Coping / relational skills ⁵	Self-efficacy ^{1,4}	Beliefs / spirituality ¹	Supervision /peer support ⁵ Clinical supervision ¹	Friends support ¹
Feeling valued ¹	Work- life balance ^{1,4}	Mentors / role models ¹	Professional identity ^{1,3,4}	



1 McCann et al (2013) 2. Jackson et al (2007) 3. Beddoe et al (2013) 4. Hunter and Warren (2014)
5 Adamson et al (2012)



What do the following stories tell us about practitioner resilience?

And

How can practitioner resilience be shaped in the current context of practice?



Beating the odds

The challenges

The screenshot shows a web browser displaying the Patient Voices website. The page title is "The man in Bed 5" by Laura Mett. The main content area features a video player with a play button, surrounded by colorful sticky notes. To the right of the video is a word cloud with "bed" as the largest word, and other words like "round", "time", "back", "nurse", "ready", "man", "help", "good", "name", "needs", "positive", "patients", "staff", "confused", "empty", "day", "feeling", "now", "pain", "nursical", "managing", "just", "real", "patient". Below the video and word cloud is a navigation bar with "You are in: Patient Voices > The stories > The man in Bed 5" and copyright information: "Copyright 2014 P4gym Projects Limited. Last updated: 05/11/2014. Wordle created at www.wordle.net". There is also a "Disclaimer and acceptable use policy" link and a "Top Back" link.

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The man in Bed 5 Storyteller: **Laura Mett**

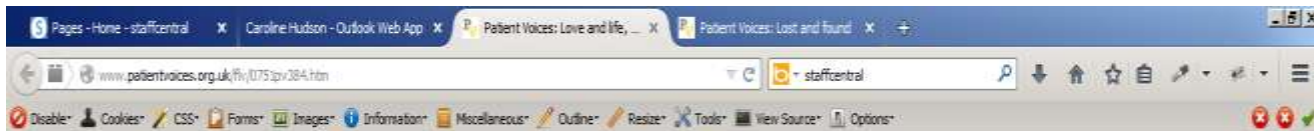
Pressured with too many tasks and too few staff, Laura realises her jobs are stacking up. Trying to stay positive, she tries to introduce herself to her patients but there's no time. Laura realises she only refers to her patients by their bed number and feels beaten and defeated. But that was three years ago and now Ward 14 is a different place - today Laura has time to greet her patients and nurse them the way she should.

bed
round
time
back
nurse
ready
man
help
good
name
needs
positive
patients
staff
confused
empty
day
feeling
now
pain
nursical
managing
just
real
patient

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Work-life balance

Special measures



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Love and life, work and family

Storyteller: Amy Keogh

Confident and outspoken when necessary, Amy enjoyed her role as a healthcare assistant and had a happy work and home life balance. But this changed as her ward became more disorganised and chaotic, leading to Amy having to provide a reduction in her level of care. The final straw was a patient passing away alone and unnoticed by staff. Amy was left feeling devastated and lost her confidence, her feelings of anger and despondency impacting on her home and work life. The arrival of a new manager led to a new start for the ward, and the improvements put in place helped Amy to once again enjoy both her job and her family.



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'Dysfunctional team'

Practitioner resilience



Changing the odds

burn-out

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Lost and found

Storyteller: Marie Hannah

Without support or friendship, opportunity or empowerment, even a profession and vocation can become a prison. Through becoming an RCN representative, Marie found her way out - and onto the stage of the RCN Congress!



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Practitioner Resilience Framework

Basics

is concerned with health and wellbeing

Belonging

is concerned with workers potential for connection

Learning

is concerned with opportunities to expand skill and knowledge

Coping

is concerned with positively handling difficulties

Core Self

is concerned with motivation and morale

Think point:

- Do practitioners have a structure of regular, quality supervision?
- Does their workplace encourage self-care?
- Are there staff opportunities for professional development, a variety of activities & diverse workloads?
- Is there debriefing, mentoring and peer support available to workers?
- Does the team acknowledge the positives and celebrate good work?
- How well do they access the organisational supports available to them?
- How well do they support other colleagues?
- How well do they contribute to a positive, safe, supportive and professional work environment?

What are the challenges and 'resilient moves' that support supervisory relationships?



Novice and preceptor doing better than expected?

Better client connectedness?

PhD – A realist evaluation using practitioners as co-researchers to develop a resilience-based supervisory approach for preceptorship

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newly qualified

Nurse in charge

Storyteller: Heather Merry

Heather has always wanted to be a nurse. A challenging night shift soon after qualification shakes the foundations of her belief in herself, but she is able to start the process of rebuilding through the small, but important successes that make up her day-to-day practice.



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Evaluation

What will you do differently as a result of the session?

What are you taking away that you didn't have when you came today?



Practitioner resilience Christmas list



Workshops & Conference

2014: 2nd International Congress on Resilience, From person to society, Timisoara, Romania,
Towards an ecologically based intervention to grow professional resilience

Hudson, C. A. Hart and P. Dodds. 2014. Towards an ecologically based intervention to grow professional resilience, The Second World Congress on Resilience: from person to society, Timisoara, Romania. Conference supplement

<http://www.congress.resilience.uvt.ro/documents/Congress%20on%20Resilience%202014%20E-book%20R508%2030.10.2014.pdf>



The early and most influential leadings understanding the construct of resilience were made on children experiencing chronic adversity. Afterwards research on resilience expanded to adults and older adults, included empirical studies, and was tackled using a lifespan approach. At the same time, resilience was studied in increasingly diversified situations, belonging into the spheres of traumatic events and of chronic adversity.

Though interventions focused on individual resilience and on tackling personal disadvantages, it very quickly became clear that many factors pertaining to the family and to the general environment are involved in the process underlying the development of resilience. In parallel, it became obvious that families, communities and societies living in chronic adversity or experiencing traumatic events can be resilient. That have been established the fields of family, community and, more recently, societal resilience.

The rapid expansion of the use of the resilience concept is not without generating many questions. Is the extension valid? Does it contribute to the understanding, to the diffusion of the concept of resilience? Or does it lead to its devaluation, its wealth, and "resilience value"? What are the consequences on the theory of resilience? What are the implications for practice? To bring together practitioners and researchers working on individual resilience (assessed in a life cycle perspective), family, community, and societal resilience, the Second World Congress aims to provide answers to these questions and to advance our knowledge on the field. Thus, it will contribute to the progress of the current stage of the evolution of resilience research designated as the fourth wave – a stage characterized by multidisciplinary and low resilience's stages.

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