“What’s Up Doc?”
Following a junior doctor with depression
A skills based workshop

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Workshop objectives

- Experience workplace health assessment tools including stress risk assessment

- Learn skills based strategies to improve physician health and promote personal resilience including the use of cognitive behaviour therapy techniques

- Understand the role of Occupational Medicine in case management and work place rehabilitation
What is Occupational Medicine?
All sedentary workers ... suffer from the itch, are a bad colour, and in poor condition ... for when the body is not kept moving the blood becomes tainted, its waste matter lodges in the skin, and the condition of the whole body deteriorates...
Principles

• Confidential
• Independent
• Support for employee
• Advice for manager organisation and individual
Oxford University Hospitals NHS Trust
Centre for Occupational Health and Wellbeing
Cognitive behaviour therapy

A way of talking about how you think about yourself, the world and other people, and how what you do affects your thoughts and feelings.

CBT can help you change how you think (cognitive) and what you do (behaviour). These changes can help you to feel better.
Underlying Principles

• Initial emphasis on present
• Collaboration and active participation
• Techniques to change thinking, mood and behaviour
• Based on evolving formulation
5 Area Formulation

- Altered thinking (cognitive)
- Behaviour
- Biological response
- Emotions
- Environmental factors
HOT DATE!
Dr X: background information

- F/T junior doctor
- Age 30
- Married to another doctor
- 2 small children
Last straw.....
Symptoms

• Low mood
• Reduced appetite
• Crying
• Guilt
• Poor concentration and memory
• Thoughts of self harm but would not action
• Neck and shoulder pain
Precipitating life events/ongoing stressors

- work

- Juggling two careers
- Multiple job and house moves, including year abroad
- Studying for exams
- Work life balance
- Career crisis
Precipitating life events/ongoing stressors - personal

- Previous infertility and IVF before birth of first child
- Unexpected second pregnancy
- Both children sleeping badly
- Unrecognised and untreated postnatal depression
- Relationship with husband
Assessment tools

• Psychological assessment questionnaires

• Balance wheel tool
  – Before
  – After

• Stress risk assessment
BALANCE WHEEL EXERCISE

- Physical Environment (Work/Home)
- Career/Job
- Money
- Health
- Significant Other/Romance
- Friends and Family
- Personal/Spiritual Growth
- Fun and Recreation
Dr X’s balance wheel
Risk assessment
Stress risk assessment: HSE Management Standards

- Demands
- Control
- Support
- Relationships
- Role
- Change
Impact of work on health

Demands
  - Individual symptoms:
    - Raised blood pressure
    - Sleep & gastrointestinal disturbance
    - Increased alcohol/caffeine intake
    - Increased irritability & negative emotions
    - Back pain: tension
    - Palpitations; headaches

Control

Support

Role

Relationship

Change

Organisational Symptoms:
  - Increased sickness absence
  - Long hours culture
  - Increased staff turnover
  - Reduced staff performance
  - Reduced staff morale and loyalty
  - Increased hostility

CULTURE

EAPLH 2015

Palmer, Cooper & Thomas (2004)
Work related stress

Aim to spend most of time here
Sources of your work stress questionnaire

Tools and templates

There are a number of tools associated with the Management Standards process provided across this website which are free for you to use or share with your colleagues. There are also a number of templates for you to use as a starting point.

Below is a quick access list of these tools:

Why should you do something?

The case for action

- Securing management commitment
- Details the legal requirements for taking action

What should you be doing? The Management Standards

Survey and analysis tools:

- Notes on the HSE Management Standards Indicator tool
- HSE Indicator Tool
- HSE Indicator Tool - Welsh version
- HSE Indicator Tool user manual
- HSE Indicator Tool user manual - Welsh version
- HSE Indicator Tool in other languages
- HSE Analysis Tool [XLS, 2.4 MB]

EAPH 2015
### Scoring

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Bottom 20%</td>
<td>Indicates a score in the bottom 20% when compared to the benchmark scores and it indicates that this item is likely to be a significant source of stress to you and requires your immediate attention.</td>
</tr>
<tr>
<td>Lower 50%</td>
<td>Indicates a score in the lower 50% when compared with the benchmark scores and it indicates that this may be a source of stress to you, there is scope for some improvement on this item and it needs addressing.</td>
</tr>
<tr>
<td>Top 50%</td>
<td>Indicates a score in the top 50% when compared to the benchmark score and it indicates a satisfactory/good response on this item at the time of completing the questionnaire.</td>
</tr>
</tbody>
</table>
Five area formulation for Doctor X

Environment
- Full time job
- Two tiny children
- Medical husband
- Multiple job/house moves
- Career crisis
- Needlestick injury

Thoughts
- I hate myself
- I feel bad/unworthy
- I am a bad wife
- I am not a good enough doctor

Emotions
- Low mood
- Deep sadness
- Guilt - conflicting demands on her time and energy

Behaviours
- Not functioning at work
- Stopped seeing friends
- Crying all time
- Increased alcohol

Biology
- Sleep disturbance
- Decreased appetite
- Poor memory
- Exhaustion
- Palpitations
- Neck pain
- Headaches
Plan

• Unfit for work
• Discussion and normalisation of symptoms
• CBT
• Antidepressants
• Alcohol diary
• Home rehabilitation plan
Wish list

• Resolve career crisis

• Improve work life balance

• Improve relationship with husband

• Feel happy again
Challenging Negative Thoughts
Cognitive Errors

Faults in thinking process that help maintain negative thinking
- All or nothing thinking
- Personalising
- Catastrophising
- Jumping to conclusions
### Thought Diary/Worksheet for thought “I am not a good enough doctor”

<table>
<thead>
<tr>
<th><strong>Situation</strong></th>
<th><strong>Emotion</strong></th>
<th><strong>Automatic Thought</strong></th>
<th><strong>Evidence for thought</strong></th>
<th><strong>Evidence against the thought</strong></th>
<th><strong>Alternative thought</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>On call at work</td>
<td>Sad</td>
<td>I am not a good enough doctor</td>
<td>Always rushing, not enough time for patients</td>
<td>Excellent feedback from clinical and educational supervisors</td>
<td>Despite juggling many commitments I have managed to adequately fulfill my role as a junior doctor</td>
</tr>
<tr>
<td></td>
<td>Anxious</td>
<td></td>
<td>Too slow</td>
<td>Good ARCP</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rate intensity of emotion</td>
<td>100%</td>
<td>Passed exams</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rate belief in automatic thought</td>
<td>8/10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Evidence for thought**
- Always rushing, not enough time for patients
- Too slow

**Evidence against the thought**
- Excellent feedback from clinical and educational supervisors
- Good ARCP
- Passed exams

**Alternative thought**
- Despite juggling many commitments I have managed to adequately fulfill my role as a junior doctor

**Re rate belief in automatic thought**
- 4/10
Exercise: challenging negative thoughts

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<th>Alternative thought</th>
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</thead>
<tbody>
<tr>
<td>Note thought or memory leading to the unpleasant emotion</td>
<td>Note type of emotion and intensity (0-100%)</td>
<td>Note automatic thought, and rate belief in automatic thought (0-10)</td>
<td>Rate belief in automatic thought</td>
<td>Rate intensity of emotion</td>
<td>Re rate belief in automatic thought</td>
</tr>
</tbody>
</table>

Rate intensity of emotion

Rate belief in automatic thought
Musculoskeletal problems
DSE assessment

Chair & Workstation Set Up

- Arms relaxed and by sides. Keep your mouse close.
- Screen straight in front and approximately at arms length.
- Lumbar support of chair comfortably fits into low back.
- Elbows at right angles and forearms are just above level of desk.
- Hips either level or slightly higher than the knees.
- Both feet are comfortably on the floor or on a footrest.
- Posture change is important! There is nothing wrong with reclining – tilt your chair back rather than slouch.

Our bodies were designed to move. Short frequent breaks are better than infrequent longer ones.

OUH Occupational Health Physiotherapy
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Upper body exercises
Home rehabilitation plan

- Bio-psycho-social approach
  - Increasing activities
  - Normalizing sleep patterns
  - Restarting hobbies
  - Exercising
  - Increasing cognitive activity
  - Enhancing coping strategies
  - Nurturing relationships

- Diary
- Health visitor
Five area formulation for Doctor X

Environment
Full time job
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Medical husband
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Behaviours
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Increased alcohol

Biology
Sleep disturbance
Decreased appetite
Poor memory
Exhaustion
Palpitations
Neck pain
Headaches
## Career reevaluation

### Ideal working week exercise

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
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Workplace rehabilitation plan

• Fitness to RTW
• Return to work plan
  – Less than full time trainee 50%
  – Part-time supernumerary phased return to work for 6 weeks
  – Regular meetings for support
  – Delay exams
  – OH follow up at 4 weeks
  – Relapse prevention plan
4 week review: wish list

- Resolve career crisis
- Improve work life balance
- Improve relationship with husband
- Feel happy again
4 week review: balance wheel
BALANCE WHEEL EXERCISE

Physical Environment (Work/Home)
Career/Job
Fun and Recreation
Money
Personal/Spiritual Growth
Health
Significant Other/Romance
Friends and Family
CBT for doctors

• problem oriented approach

• mutual engagement

• time efficient therapy

• restoration of control

*The Physician as Patient—a clinical handbook for mental health professionals. Myers and Gabbard 2008*
Risk of blood borne viruses

- **Hepatitis B**: 30% risk transmission
  Rx: booster dose of vaccine

- **Hepatitis C**: 3% risk transmission
  Rx: early treatment may clear virus and prevent chronic liver disease

- **HIV**: 0.3% risk transmission
  Rx: post exposure prophylaxis, ideally < 1hr
Needlestick Injuries

- Always report needlestick injuries
- Needle safe devices
- Immediate disposal of sharps
- NEVER re-sheath needles
Physiology of stress

Fight or flight
Coping in a panic

4-7-8 Breathing

Laugh more often