

Who cares for the carers?

The impact
of workplace
stress on senior
hospital doctors

This booklet contains the results of an HCSA survey of 817 senior hospital doctors on the impact of workplace stress, conducted between August 27th 2015 and September 8th 2015.

The findings were featured on the front page of The Guardian on September 11th 2015.

On September 15th 2015, TUC delegates unanimously endorsed an HCSA motion (see page 14) demanding action from government and employers on the issue of stress facing doctors.



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Who cares for the carers?

The following data represents indicative research conducted following widespread reports of mounting workplace stress from members of the Hospital Consultants and Specialists Association, the only professional association and trade union dedicated solely to hospital doctors. More than 800 consultants and specialists responded in order to be able to relate their experiences of life on the front line.

The results are stark – painting a bleak picture of relentless and rising stress, pressure from senior management, relationship breakdown and ill-health among consultants. Against the backdrop of the government push for a ‘cost neutral’ shift to seven-day hospital services the findings are more worrying still. They also suggest a potential, highly damaging exodus of experienced consultants, with more than eight in 10 respondents revealing that the current levels of stress had caused them to re-evaluate their retirement plans.

HCSA has publicly stated that it is In Favour of A Safe Seven-Day Service for the NHS.

As part of that campaign we have identified three major areas of concern

by which any proposals should be measured - safety, fairness and work-life balance.

Hospital doctors, like all NHS employees, are not super-human. Nor should they be forced to sacrifice the basics of family and recovery time because of well-intentioned, but hastily conceived, plans that fail to acknowledge the additional resources seven-day services will require.

This research underlines our fear that any attempt to rush through changes to the consultants’ contract, not least without an acknowledgement of the pre-existing levels of stress and pressures driving this, risks causing serious damage to an increasingly overwhelmed hospital workforce.

That can only have a negative impact on patient outcomes and the reputation of our world-class health services.

A Trades Union Congress motion tabled by HCSA on the stresses facing hospital doctors notes:

“From continuous battles with waiting time targets in A&E to the funding crisis that is seeing many senior doctors reaching for the exit door to either retire or work overseas, stress amongst

[continued](#) ►



“Stress amongst senior doctors in hospitals is just not taken seriously, to the detriment of the doctor and the patients.”

► from page 3

talented lifesaving doctors is continuing to impact on our NHS.

“Consultant workload has been continuously increasing and the pressure to care for an ever-increasing patient caseload is causing some consultants’ mental health to be impacted. Depression, anxiety and

stress are the most prevalent reasons for sickness absence amongst hospital consultants and specialists.

“The health and well-being of all NHS staff should be a top priority, but time after time NHS organisations either fail to see the signs or do not know what to look for.

“Stress amongst senior doctors in hospitals is just not taken seriously, to the detriment of the doctor and the patients.”

The issue can no longer be ignored. That is why HCSA is urging the government and employers to work with us to determine a strategy that will safeguard all medical staff, and pressing to ensure that the outcome of any changes to the consultants’ contract acknowledge the backdrop against which they would take place.

Across the country seven days a week NHS staff do amazing work that continues to be recognised as world-class, going above and beyond the call of duty to care for patients.

The question we now need to ask is, who cares for the carers?



The Findings: Unreasonable levels of stress at work

Q1. In a typical week, how often would you say you feel unreasonably stressed at work?

One in three hospital doctors (33.1%) reported “unreasonable” levels of work stress most or all of the time in an average week.

Taking into account those who reported unreasonable stress levels “about half of the time” (34.9%), more than two-thirds (68%) said they faced unreasonable levels of work stress for about half the week or more.

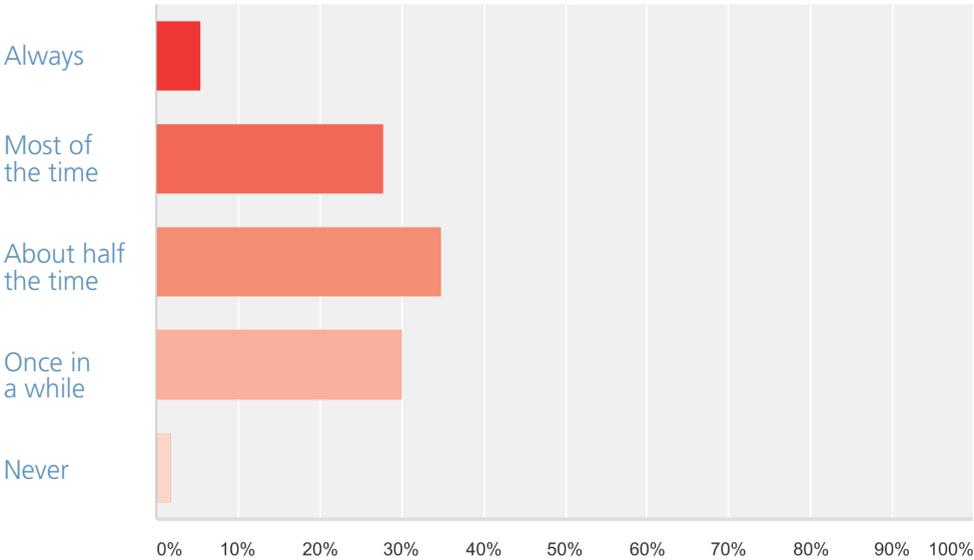


Fig 1: How often are you unreasonably stressed?

Always	Most of the time	About half the time	Once in a while	Never
5.39%	27.7%	34.93%	30.15%	1.84%

Is workplace stress increasing?

Q2. Compared to last year, have your work stress levels increased, decreased or remained about the same?

More than seven in 10 hospital doctors (74%) responding reported work stress levels higher than last year.

Increased	Decreased	About the same
74%	4%	22%

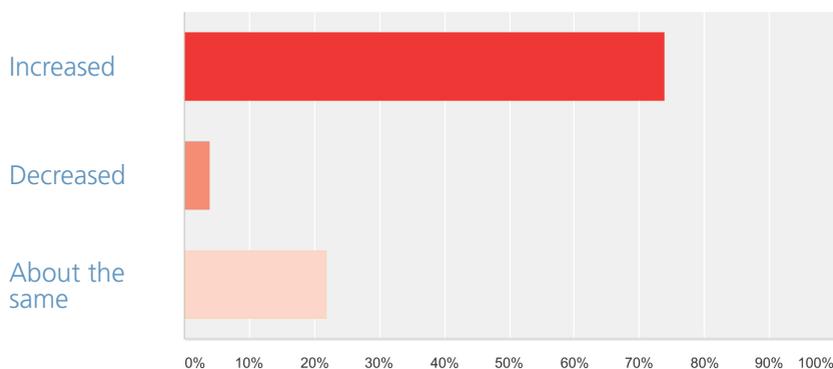


Fig 2: Is workplace stress increasing?

Key causes of workplace stress

Q3. On a scale of 1 (low or no stress) to 5 (highly stressful), please rate how each of the following possible causes impacts on your day-to-day level of work-related stress:

Workload was the biggest single cause of workplace stress, with more than six in 10 respondents (64.7%) giving the category the top stress ratings of 4 or 5.

Unsympathetic management and lack of consultation over changes were the next two single biggest causes of stress identified by respondents, with the

two categories being awarded 5s - the highest level of stress - by 41.8% and 41.3% respectively. Once respondents awarding 4s were factored in, those figures rise to 63.1% and 69.3% - nearly seven in 10.

Of the other 11 areas where respondents were asked to evaluate the levels of stress caused, the two next areas of concern were restructuring, and lack of communication between staff and management.

See Fig 3: Causes in detail on page 8



The causes: What doctors said

Respondents were invited to expand on the causes of their workplace stress. Hundreds of individual responses included:

"A disconnection between the management spin and the actual performance of the hospital. We are chronically understaffed at every level. Consequently we are worked into the ground. I have taken early retirement at 55 because I simply cannot go on working like this."

"Alleged consultations after which they go ahead and do as originally planned."

"Dangerously understaffed and business case keeps getting turned down."

"Forced to accept changes from management and hospital restructuring that lead to unsafe practice and a poor and dangerous standard of care to both adults and children."

"We have to take the blame when things go wrong but no longer have any influence to improve things."

"Lack of beds, lists start late, lists then finish late. I eat my dinner over a bin in the anaesthetic room whilst my patient is asleep in theatre. I have NO control over my work finish time and therefore unable to plan any family evening activities."

"There is an ever-increasing demand to work extra and long hours. The department is chronically understaffed and we seem to be cutting corners and taking increasing risks to complete the work dumped on us. There is a general feeling of disenchantment and low morale amongst all colleagues and the critical comments in the press and by people in authority don't help."

"Unfair job plans and weekly timetables, which are essentially designed to compensate for chronic and marked understaffing, have an insidious and corrosive effect on consultant morale, and are a major source of stress. Intensified working sessions combined with the lack of provision for the required natural breaks in a four-hour PA session is another source of stress. In the last year or so with a persistently rising demand on radiology services, a typical ultrasound list is fully overbooked from 0900 to the equivalent of 1400 (because appointment times have been reduced, so reporting the cases has to be done after one's session in one's own time!). This means there is a knock-on effect on when subsequent lists and reporting sessions can be started, and therefore the whole day is regularly over-extended and unpaid."

The causes: Detailed breakdown

	1. Low or no stress	2.	3. Moderate or occasional stress	4.	5. High level of stress
Long working hours	7.47%	16.00%	40.40%	21.73%	14.40%
Too much work	3.45%	8.90%	22.97%	35.06%	29.61%
Not enough rest breaks	9.87%	16.27%	30.80%	25.87%	17.20%
Unsympathetic management	4.51%	12.33%	20.03%	21.35%	41.78%
Bullying	36.62%	18.51%	13.45%	11.98%	19.44%
Sexual, racial or other harassment	70.93%	12.27%	6.27%	3.20%	7.33%
Discrimination or prejudice from colleagues or managers	50.73%	16.20%	10.36%	9.03%	13.68%
Lack of communication between staff and management	6.10%	10.74%	26.53%	25.60%	31.03%
Introduction of new management techniques	10.76%	14.34%	22.84%	27.22%	24.83%
Restructuring	8.03%	12.05%	21.42%	29.32%	29.18%
Lack of consultation over changes	4.91%	9.69%	16.07%	28.02%	41.30%

Fig 3: Causes in detail

The Findings: Measuring work-life balance

Q4. Does stress at work impact on your family life?

Around 83% of respondents reported that work-related stress had taken a toll on their family life, compared to just 17% who said it had not.

In detailed written responses, long shifts, in particular beyond contracted hours, were cited as a common cause of relationship tension, including break-ups and divorce, and a major cause of guilt because of their impact on parental responsibilities.

Many respondents reported that stress at work was causing them to bring

their frustrations into the home, leading to angry exchanges and leaving them unable to communicate normally with their families.

Another trend saw repeated reports of having to work extra hours at home outside of contracted hours in order to try to keep on top of administration workload or to carry out “Supporting Professional Activities” as defined in their contractual job plans.

Yes	No
82.96%	17.04%

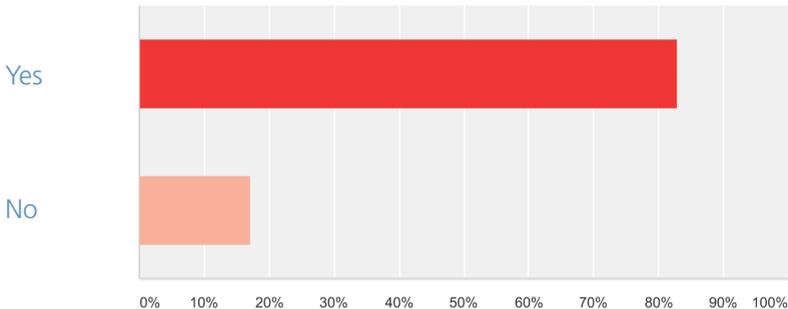


Fig 4: Does work stress affect your family life?



Impact on family life: What doctors said

Some of the hundreds of individual responses included:

"All I do is work. I have no time for anything else"

"Unable to sleep. Nightmares about poor care to patients. Feeling of helplessness. No-one cares."

"I don't recognise the person I was before I became a consultant. I've lost many friends who cannot understand the pressure that I am under and am considering resignation before I lose my family."

"The four-hour target means that we often work beyond our contractual hours at weekends."

"I'm tired all the time. When I get home the kids are full of beans and I am just unreasonably grumpy. I can hear myself yelling at them and I just can't stop."

"Long, unpaid working hours in the NHS have put a massive pressure on my family and personal life."

"Long hours means I don't see my kids. Expected extra SPA activity needs doing in my own time further eroding into family life. This work is not recognised formally."

"My wife of 28 years has had enough. I am seriously considering getting out of the NHS."

"My wife has had to take me aside and reflect on my worsening temper at home. I don't seem to be able to shrug off the stresses from work as easily as I did. (age 51!)."

"I spend a lot of time at home doing work and worrying about work. Rarely able to switch off completely. I often think about resigning."

"What family life?"

Sleepless nights

Q5. Do you ever have sleepless nights thinking about work?

Yes	73.37%
No	26.63%

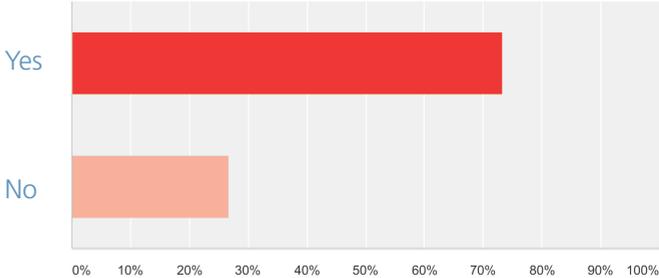


Fig 5: Sleepless nights because of work

Skipped breaks

Q6. Do you ever skip breaks?

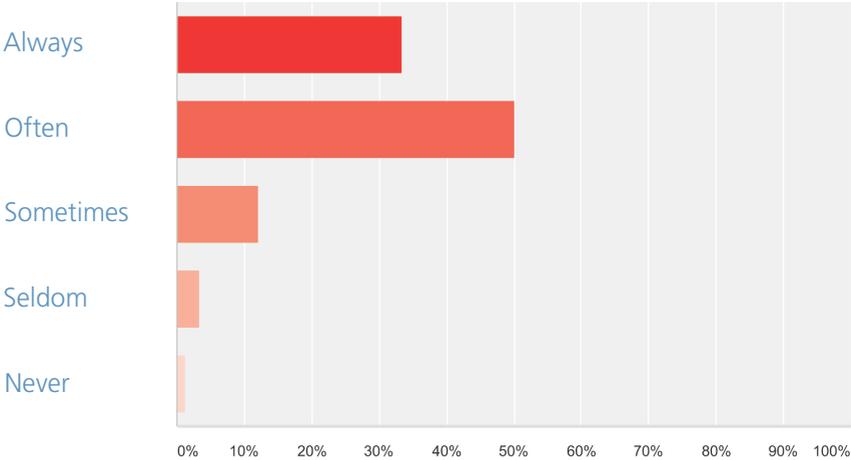


Fig 6: Skipped breaks

Always	Often	Sometimes	Seldom	Never
33.33%	50.07%	12.08%	3.32%	1.20%

The Findings: How work stress affects doctors' health

Q8. Would you say your general health and well-being has been adversely affected by work-related stress?

Yes	70.61%
No	29.39%

Hospital doctors' detailed responses (see below) paint a worrying picture of stress-related ill-health among hospital consultants, both mentally and physically.

Among the ailments respondents linked to their own work-related stress were:

- Clinical depression
- Type 2 diabetes through poor diet and skipping meals
- High blood pressure
- Stomach ulcers
- Strokes
- Anxiety
- Severe gastritis
- Shingles
- Palpitations
- Back problems
- Fatigue
- Loss of appetite and weight loss



Impact on health: What doctors said

"Difficulty sleeping on occasions, chronically tired, losing weight. Have had a couple of reviews by GP - no physical cause, only work related stress."

"Have gone home in tears on several occasions. Have been on cusp of taking stress related time off work, but don't want to make it worse for my colleagues."

"Stress is affecting me physically. Because I get home v late, I eat and go straight to bed which makes it harder to control cholesterol/ weight etc. I am also constantly tired (although when I have caught up with sleep during e.g. holidays, I am very

Long hours

Q7. On average, how often do you work more hours than contracted?

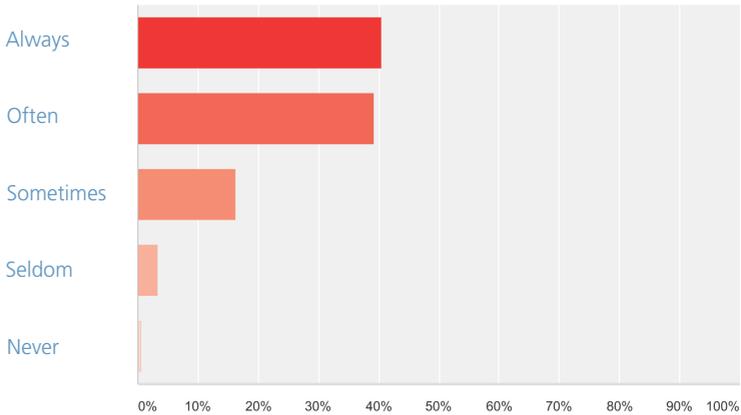


Fig 7: Long hours

Always	Often	Sometimes	Seldom	Never
40.40%	39.2%	16.29%	3.44%	0.66%

energetic). I wake up early worrying about work stuff and the stress and sleep deprivation definitely contribute to a permanent state of anxiety, which can be quite debilitating."

"I am usually chronically sleep deprived which is obvious when I take leave and spend the first 3 days sleeping."

"I don't sleep well and don't ever feel truly rested. I'm irritable and feel tense and tearful most of the time."

"I feel stressed and depressed a lot of the time. Whilst I enjoy caring for patients the current management political environment squeezes all joy out of work itself. I cannot sleep and my relationship with my spouse and children is affected."

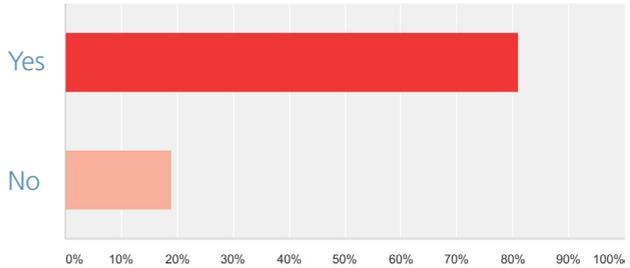
"I have decided to quit medicine aged 42."



The Findings: Impact of stress on retirement plans

Q9. Have you considered retiring earlier than previously thought as a result of work pressures?

Yes	80.93%
No	19.07%



Current low morale amid growing stress among hospital doctors appears to be having a significant negative impact on the prospect of retaining staff until full retirement age.

Fig 8: Impact on retirement plans



HCSA's TUC motion on doctors' stress

Stress amongst hospital consultants and specialists is a constant reminder of how vulnerable senior public sector worker are on the front line. From continuous battles with waiting time targets in A&E to the funding crisis that is seeing many senior doctors reaching for the exit door to either retire or work overseas, stress amongst talented lifesaving doctors is continuing to impact on our NHS.

Consultant workload has been continuously increasing and the pressure to care for an ever increasing patient caseload is causing some consultants' mental health to be impacted. Depression, anxiety and stress are the most prevalent reasons for sickness absence amongst hospital

consultants and specialists.

The toxic mix of a stressful workplace combined with a culture of bullying and trying to balance family life can often result in complete burn out for the doctor. The health and well-being of all NHS staff should be a top priority, but time after time NHS organisations either fail to see the signs or do not know what to look for.

Congress believes that stress amongst senior doctors in hospitals is just not taken seriously to the detriment of the doctor and the patients. Congress calls on Government and employers to work with the HCSA to determine a strategy that will safeguard all medical staff in the future."



Membership Application Form 2015-16

Or join online

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Title	Surname
Forenames	Male/Female
Qualifications	
GMC No	
Speciality	
Year Qualified	Year of Birth
Main Hospital	
Preferred Mailing Address	
	Post Code
E-Mail	
Contact Telephone Number	

Grade Consultant Associate Specialist Speciality Trainee
 SAS doctor Staff Grade/Trust Speciality Doctor

Signature _____ Date _____

Current Subscription Rates:

- Full Annual - £250 per annum commencing October 1st 2015 (pro rata 1st membership year)
- Full Monthly - £21.50 per month
- Specialist Trainee Annual - £100 per annum commencing October 1st 2015 (pro rata 1st membership year)
- Specialist Trainee Monthly - £8.50 per month

Please complete the Direct Debit Mandate overleaf and send it to the HCSA address stated

Introduced by (if applicable) _____

Important - Please Note:

We are not normally in a position to provide personal representation over issues that have arisen prior to joining the HCSA. Please DO NOT fax or e-mail this application form – we need an original signature on the Direct Debit Mandate for your bank to authorise payments

Instruction to your bank or building society to pay by Direct Debit



HCSA
1 Kingsclere Road
Overton
BASINGSTOKE
Hampshire
RG25 3JA



Please fill the whole form using a ballpoint pen

Name(s) of account holders

Service user number:

9	9	7	5	7	2
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Payment reference (to be completed by HCSA):

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Instruction to your bank or building society

Please pay The Hospital Consultants and Specialists Association direct debits from the account detailed in this instruction subject to the safeguards assured by the direct debit guarantee. I understand that this instruction may remain with The Hospital Consultants and Specialists Association and, if so, details will be passed electronically to my bank or building society.

Bank or building society account number:

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Branch sortcode:

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Address

Post code

Signature

Date

Banks and building societies may not accept Direct Debit instructions for some types of accounts

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit the organisation will notify you (normally 10 working days) in advance of your account being debited or as otherwise agreed. If you request the organisation to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit, by the organisation or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when the organisation asks you to
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