



WORKING STRESS

IMPROVE STAFF WELLBEING

App that teaches doctors and nurses to reduce anxiety & burnout.

Clinical practice is stressful, and the negative effects are harmful and expensive. *Working Stress* is an evidence-based intervention that enables clinical staff to cope with stress and avoid its negative effects. It is the only occupational health tool developed specifically for healthcare professionals with 'gold standard' evidence to prove that it is effective within the NHS.

It develops valuable lifelong personal skills that have a positive effect on patient safety, sickness absence, staff turnover and organisational culture.

Evidence and effectiveness

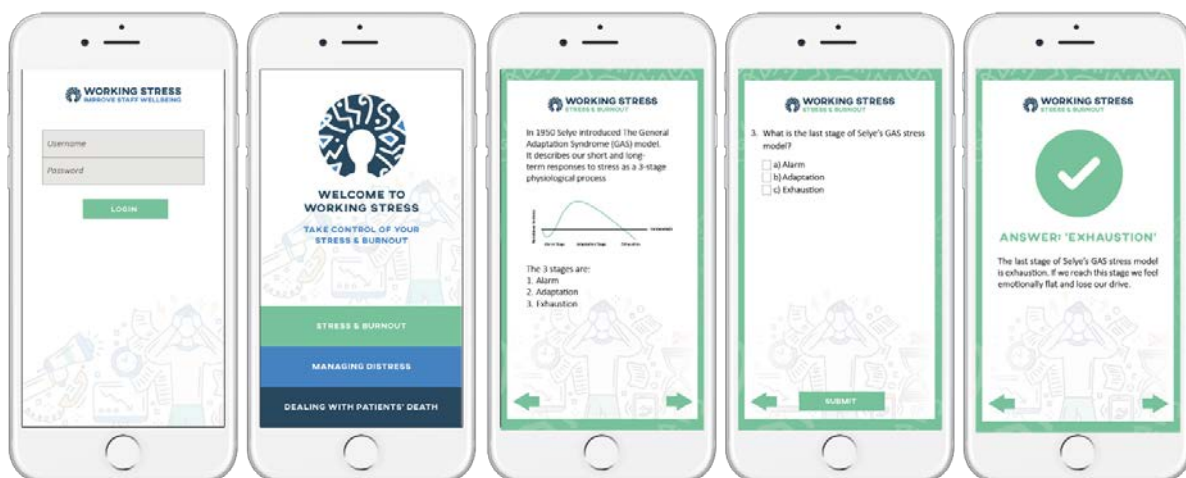
The *Working Stress* app contains 3 interactive modules based on widely recognised academic research and cognitive frameworks. It helps users to view stress more constructively and cope with it more effectively. A randomised controlled trial (RCT) with 227 doctors tested the effectiveness of *Working Stress*. In the trial *Working Stress* reduced the number of doctors suffering:

- ↓ Severe anxiety by 33% ¹
- ↓ High burnout by 9.5% ²
- ↓ Severe insomnia by 60% ³
- ↓ Hazardous drinking by 50% ⁴

It reduced fatigue and improved doctors' perceptions of their employer and working conditions. It also increased use of coping strategies, such as humour, seeking emotional support and self-reflective practice.

Clearly, *Working Stress* can also deliver significant benefits to employers. If offered to all clinical staff, it can reduce the negative effects of work-related stress across the organisation. *Working Stress* is easy to deploy, opportunity costs are low, staff compliance is high, and the benefits are realised quickly.

- ✓ Designed for NHS clinicians
- ✓ 'Gold standard' evidence
- ✓ Single 30-minute session is effective
- ✓ Supports CQUIN 1a programmes





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Is it another mindfulness app?

No. *Working Stress* is not a mindfulness, meditation or yoga app. It is based on widely recognised academic research and frameworks. The *Working Stress* app contains 3 modules:

- 1. Understanding Stress & Burnout**
- 2. Managing Stress & Burnout**
- 3. Dealing with Patients' Death**

It targets an individual's cognitive appraisal of stressors and improves their ability to cope with them. It provides information about stress, grief and burnout and explores their psychological and physical effects. It then presents a range of evidence-based coping strategies that clinicians can apply immediately. Quizzes reinforce and consolidate learning.

Implementing *Working Stress* in your trust

Working Stress can be offered to all clinical staff in a trust at the same time to deliver widespread improvements. The app is easy for employers to deliver and convenient for staff to use. It can be completed on any device in just 15 minutes. It will support and enhance existing programmes around CQUIN 1a: *NHS Staff Health & Wellbeing*.

We are offering NHS trusts access to the app at £10 for each professionally qualified clinical staff member. This single one-off investment will enable clinical staff to cope with stress more effectively delivering psychological, physical, and organisational benefits (Lazarus & Folkman, 1987).

Offering *Working Stress* to your staff is simple:

1. Purchase an access package based on the number of clinicians in your organisation
2. We customise *Working Stress* with your trust logo and welcome messages
3. You invite clinical staff to access the *Working Stress* app through our secure website
4. Each user creates a unique and anonymous user account
5. Staff complete *Working Stress* whenever is convenient
6. Users can give anonymous feedback that we share with you
7. We give you regular reports about use of the app

¹ Before the intervention, 55.5% of doctors suffered from anxiety (of which 25% suffered severe anxiety). The interventions reduced doctors' anxiety levels, including those doctors suffering from severe anxiety by 33.2%.

² Before the intervention, 78.5% of doctors suffered from moderate or high burnout (of which 67.41% suffered from high burnout). The interventions reduced their levels of burnout, including those suffering from high burnout by 9.5%.

³ Before the intervention, 49.3% of doctors had clinical signs of insomnia (of which 25% had clinical insomnia that is moderately severe or severe). The interventions reduced insomnia by 60%

⁴ 92.5% of doctors in the trial consume alcohol. Of those who drink, 5.7% drink hazardously in one sitting daily or weekly, the interventions reduced these levels of hazardous drinking by 50%.