

# Emergency care doctors not getting sufficient 'down time', new study shows

November 2 2020

---



Credit: Pixabay/CC0 Public Domain

A survey of more than 4,000 UK emergency care doctors has shown that they need more support to recover from work pressures between shifts.

Published today in the *BMJ Open*, the study highlighted how the doctors' 'need for recovery' was higher than anything recorded in previous studies of a similar nature—and could be helped by factors such as reducing the number of antisocial shift patterns and improving access to leave.

Led by a newly formed Trainee Emergency Research Network, sponsored by University Hospitals Plymouth NHS Trust (UHPNT), and with collaboration from the University of Plymouth and the Royal College of Emergency Medicine, the research asked a total of 4,247 doctors in emergency departments from 112 NHS Trusts around the UK to complete a validated Need for Recovery (NFR) Scale. This 11-item questionnaire assesses how work affects inter-shift recovery, with items compiled to form a score between 0 and 100.

The median average NFR result was 70—higher than any scores reported in other professions or populations to date.

In addition, a higher proportion of antisocial working was associated with a higher NFR score, suggesting that any reduction in antisocial shifts could help improve wellbeing.

Known as the TIRED study, it was the largest healthcare study to date of a tool that assesses the need for staff to physically and psychologically recuperate following a period of work. The authors also propose that the use of this tool could identify staff wellbeing issues before they progress to burnout.

The research took place in 2019 before the COVID-19 pandemic, but authors suggest the study findings remain relevant given that pressures on emergency care doctors are only likely to have increased.

Lead author Dr. Laura Cottey, Chief Investigator for the Trainee Emergency Research Network study, said: "We all know that emergency

care can be a high-pressure environment, but these results provide the evidence of the impact this work demand is having on staff wellbeing. Previous Need for Recovery scores among a variety of population groups were reported between 36 and 44, so for the median score to be 70 among over 4,000 doctors is definitely something that needs to be addressed.

"Among our respondents, we saw that NFR scores were increased by difficulty accessing annual and study leave, as well as an increased proportion of antisocial working—such as night shifts. Better access to leave and any reduction in antisocial shifts might result in direct improvements in NFR and help protect against the development of burnout."

Co-author Dr. Blair Graham, Lecturer in Urgent and Emergency Care at the University of Plymouth and Specialty Registrar in Emergency Medicine at UHPNT, said: "The first step to overcoming any problem is recognizing that there is one—so having these results is a good start. Even if fewer antisocial shifts cannot be achieved, acknowledgement of a problem and the provision of rest facilities may help to mitigate the issue.

"The next step would be for us to carry out the research at different times of year to understand whether the results are seasonal, or affected by other factors. Although this study was conducted prior to COVID-19 arriving in the UK, we believe the findings still need to be taken into account as pressures on emergency care doctors are only likely to have increased during the pandemic."

Professor Gary Minto, Director of Research and Development at UHPNT, said: "Here at University Hospitals Plymouth, our research strategy is that, in addition to our longstanding strength in running clinical trials, we also expand our focus into other areas of social care,

health and wellbeing. The TIRED study, which addresses mental health in Emergency Doctors, is a great example. This prominent nationwide study, initiated, led and delivered by doctors in training contains important messages about downtime and shift patterns which are relevant across the UK, particularly as the COVID-19 situation evolves."

**More information:** Laura Cottey et al, Need for recovery amongst emergency physicians in the UK and Ireland: a cross-sectional survey, *BMJ Open* (2020). [DOI: 10.1136/bmjopen-2020-041485](https://doi.org/10.1136/bmjopen-2020-041485)

Provided by University of Plymouth

Citation: Emergency care doctors not getting sufficient 'down time', new study shows (2020, November 2) retrieved 16 July 2024 from <https://medicalxpress.com/news/2020-11-emergency-doctors-sufficient.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.