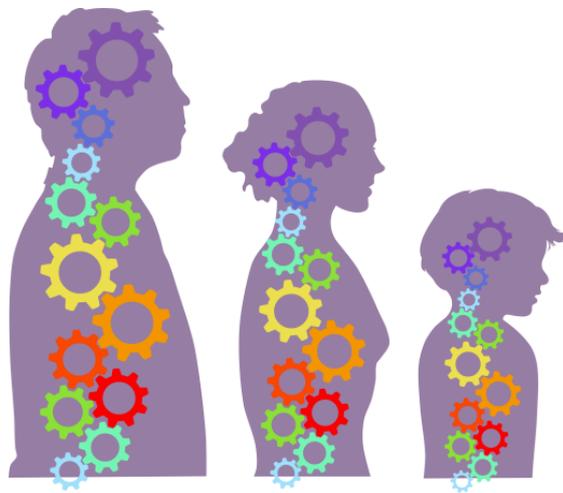


# MIND & BODY PROGRAMME

## Workforce survey: 2015-2018

January 2019



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## Executive summary

### The Mind & Body Programme: Learning & Development

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We recognise that our workforce is essential if we are to achieve our commitment to join up and deliver excellent mental and physical healthcare, research, and education so that we treat the whole person. The Learning and Development workstream aims to improve patient care and staff experience through the sustainable provision of effective education and development opportunities for our workforce.

### Mind & Body Workforce Survey 2015

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In 2015 the Mind & Body Programme completed a comprehensive [scoping review](#) of learning and development to steer the future of the Learning and Development workstream.

### Aim

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*This report seeks to set out the progress and impact of the Mind & Body Learning and Development workstream from 2015 to 2018, using the scores collected as part of this survey.*

### Methods

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The 2018 survey was administered to replicate the 2015 delivery as closely as possible, with around 400 and 800 in each cohort respectively. Responses by profession and organisation were broadly comparable.

### Findings

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Comparison between 2015 and 2018 survey responses have been organised into the following categories:

1. **Awareness of mind and body** – increased by nearly 10% in 2018 (from 87% - 95% of respondents)
2. **Confidence in supporting both mind and body** – up by nearly 10% for those self-reporting as ‘confident’, while those self-reporting as ‘unconfident’ dropped by nearly half (20% to 11%)
3. **Attitudes towards mind and body training** – number of people that see mind and body training as mandatory rose from 74% to 78%
4. **Views on delivery of mind and body training** – the number of people that had received mind and body training was up by nearly 20%, with notable increases in online and simulation training

### Implications

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The report findings indicate that accessibility of mind and body training, uptake of training, and workforce confidence in addressing mind and body needs all improved significantly. This suggests good progress based on the headline outcomes set out in the Mind & Body Learning and Development strategy.

These findings demonstrate the value engaging and developing a workforce and building visibility for the programme, alongside other complementary work such as clinical service development and our [Champions Network](#). Efforts to develop our educational ‘offer’ should be pursued in line with the values and guiding principles of this work, such as focusing on people’s stories, and multi-disciplinary working.

### Recommendations

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The following recommendations seek to encourage future progress in relation to support the workforce to work with both mind and body needs of patients and service users.

1. Maintain delivery of mind and body training opportunities in organisational processes, e.g. induction
2. Increase accessibility of online and digital resources to support flexible learning for staff needs
3. Continue to deliver existing training while assessing opportunities for new resources to plug gaps
4. Assess feasibility of a train-the-trainer/enhanced champion training programme to expand reach
5. Develop improved evaluation and research opportunities to assess the impact of training delivery

## The Mind & Body Programme: Learning & Development

One of the Mind & Body Programme's three key workstreams is Learning and Development. We recognise that our workforce is essential if we are to achieve our commitment to join up and deliver excellent mental and physical healthcare, research, and education so that we treat the whole person.

The Learning and Development workstream aims to improve patient care and staff experience through the sustainable provision of effective education and development opportunities for our workforce. This will support staff to be aware and confidently practice essential skills across both mind *and* body needs.

We envisage a local health and social care landscape where patients and service users routinely access care that addresses their physical and mental health needs simultaneously, provided by services and staff who feel valued, supported, and empowered to do so. This vision will deliver improved clinical outcomes, patient and staff experience, and cost-effectiveness of services, as well as addressing societal attitudes.



### Mind & Body Workforce Survey 2015

In 2015 the Mind & Body Programme completed a comprehensive [scoping review](#) of learning and development to steer the future of the Learning and Development workstream. Training opportunities available at the time, along with staff views on mind and body and related training offered, were the focus of the review. This heavily informed to development of the [Learning and Development strategy](#).

Staff views were collected via online survey, focus groups, and interviews, encompassing South London & Maudsley, Guy's & St Thomas', and King's College Hospital NHS Foundation Trusts alongside the Institute of Psychiatry, Psychology & Neuroscience at King's College London, and local primary and social care.

In addition to providing useful recommendations and directions for learning and development relating to mind and body, the survey responses provide benchmark scores that can be used to assess subsequent progress and impact. These scores fall broadly into: staff awareness of mind and body; staff confidence in addressing mind and body; staff attitudes towards mind and body; and staff views on the delivery of learning and development opportunities.

*AIM: This report seeks to set out the progress and impact of the Mind & Body Learning and Development workstream from 2015 to 2018, using the scores collected as part of this survey.*

## Methods

The survey was administered in 2018 to replicate as closely as possible its delivery in 2015. It was hosted on the same digital platform, in the same format, and advertised using the same digital channels, including intranets, newsletter, and the King's Health Partners' bulletin.

The survey was open to all staff within King's Health Partners and local health and social care organisations. Response rates based on profession, organisation, and Clinical Academic Group were comparable between 2015 and 2018 respondents. Nursing was the profession that provided most respondents, followed by medicine, allied health professions, administrative staff, and managers. South London & Maudsley, Guy's & St Thomas', and King's College Hospital NHS Foundation Trusts were once again mostly highly represented, with the notable difference that the 2018 survey saw a threefold increase in respondents from primary and social care, including the third sector. Once again, all Clinical Academic Groups had responses from their staff.

In total, more than 1200 staff provided responses to the survey including both 2015 and 2018 samples, approximately 800 and 400 respectively (these numbers are broken down by profession and organisations in the table below). This represents a sufficient number to allow comparisons between the two cohorts, to thus assess changes from 2015 to 2018.

*Table 1. Respondents by profession from 2015 and 2018.*

<b>Profession</b>	<b>2018 respondents</b>	<b>2015 respondents</b>
Nursing	35%	45%
Administrative staff	12%	13%
Psychology	10%	14%
Managerial staff	9%	6%
Medicine	8%	12%
Occupational Therapy	5%	4%
Third sector	5%	0%
Physiotherapy	4%	2%
Social work	3%	1%
Other	9%	3%

*Table 2. Respondents by organisation from 2015 and 2018.*

<b>Organisation</b>	<b>2018 respondents</b>	<b>2015 respondents</b>
<b>Guy's and St Thomas' NHS Foundation Trust</b>	49%	26%
<b>South London and Maudsley NHS Foundation Trust</b>	20%	36%
<b>King's College Hospital NHS Foundation Trust</b>	15%	22%
<b>Primary &amp; Social Care</b>	7%	3%
<b>King's College London</b>	6%	13%
<b>Third sector</b>	3%	0%

## Findings

The findings of the comparison between survey responses on 2015 and 2018 have been structured by section according to the survey questions:

1. Awareness of mind and body
2. Confidence in supporting both mind and body
3. Attitudes towards mind and body training
4. Views on the delivery of mind and body training

### Awareness of mind and body

In 2015, 87% of survey respondents reported being aware of the overlap between physical and mental health needs. In 2018, this increased significantly to 95% of respondents, representing nearly a 10% increase.

This suggests that the activities of the Mind & Body Programme, as well as other local and national initiatives, have significantly increased the number of staff that are aware of mind and body health needs.

### Confidence in supporting both mind and body

In 2015, 58% of respondents were 'confident' or 'very confident' in addressing both mental and physical health needs. In 2018, this increased significantly to 64% of respondents, once again a near 10% increase.

Additionally, 20% of 2015 respondents were 'unconfident' or 'very unconfident', which has reduced significantly to only 11% in 2018. This means that there were *nearly half as many staff* feeling unconfident in address mind and body needs in 2018.

These findings suggest that our workforce is becoming increasingly confident in addressing and supporting both the mental and physical health needs of their patients and service users. Improving this measure of workforce confidence was a key aim of the Mind & Body [Learning and Development strategy](#).

### Attitudes towards mind and body training

In 2015, 74% of responses suggested that mind and body training should be mandatory, while in 2018 this increased to 78%. Similarly, while in 2015 only 1% thought that such training should be optional/unnecessary, this dropped to 0% in 2018.

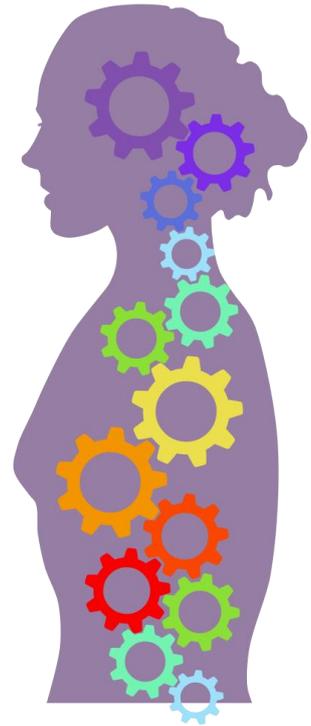
This suggests that staff are increasingly seeing training and support to work with patients' and service users' mental *and* physical health needs as highly important. From additional text-based responses it was evident that this trend was particularly true in mental health settings, relating to the importance of physical health in their service users.

## Views on the delivery of mind and body training

In 2015, 36% of respondents had received training in the workplace on mind and body health needs. In 2018, this had increased to 42%. This shows a nearly 20% increase in the number of people reporting that they had accessed mind and body training, an important metric of availability and accessibility.

In relation to the format and delivery of mind and body training there were noticeable trends. The amount of lecture-based training actually reduced by around 10% from 2015 to 2018, however this was counteracted by significant increases in the amount of experiential simulation, interprofessional, and online training accessed by respondents. This is a favourable move to providing staff with experiential, flexible methods of learning beyond the classroom, and aligns with global healthcare trends.

These findings support an increased availability and accessibility of mind and body training, and demonstrate that the training opportunities currently available align with staff preferences.



## Implications

**Assessing progress:** These findings provide helpful measures against which to assess progress towards the ‘headline outcomes’ set out in the Mind & Body Learning and Development strategy. The findings suggest that access to mind and body training opportunities has improved, that uptake of these resources has increased, and most significantly that this has supported development of a more confident workforce, relating to mind and body working. However, further research and evaluation work must be undertaken to assess progress against the final outcome of improved delivery of care.

### Headline outcomes

- **Improved access** to learning and development opportunities for local staff
- **Increased uptake** of these opportunities by our workforce
- **A more confident workforce**, capable of delivering mind and body care
- **Improved delivery of care** for interacting mental and physical health needs of our populations

While these findings are positive with regards to the progress and impact of the Mind & Body Programme, it is important to attempt to understand why change is happening and thus drawn out implications. Evidently progress has been achieved from 2015 to 2018, emphasising the importance of continuing the work that is currently underway.

**Workforce focus:** Finding evidence of workforce development in relation to awareness and confidence in addressing mind and body needs, as well as improved attitudes towards training in this area, demonstrate the value of prioritising the workforce. This has been a keen focus of the Mind & Body Programme, which encouragingly has demonstrated in a positive impact. It must be considered that this work on Learning and Development sits alongside related service development work and other workforce initiative, such as staff health and wellbeing, and our sizeable [Champions Network](#). Engaging staff on multiple fronts has undoubtedly played a part in delivering progress.

**Visibility:** The visibility of the Mind & Body Programme has been essential to reaching staff. Communications strategies and close collaboration with communications team, not least the King's Health Partners internal team, have supported engagement with the workforce and uptake of training opportunities. Similarly, organisational visibility, being involved in inductions, working with education and training teams within the partners, and having digital resources haeb broadened the programme's audience.

**Next steps:** However, more work must now be done to further grow the influence and reach of the Learning and Development workstream. In line with the Learning and Development Strategy, new training opportunities must continually be developed, listening to the needs and preferences of staff. Ensuring that this educational 'offer' includes all staff, provides a range of modalities, engages interprofessional and multi-disciplinary groups, and focus on patient and service user stories is essential.

## Recommendations

The following recommendations seek to encourage future progress in relation to support the workforce to work with both mind and body needs of patients and service users.

1. Maintain delivery of mind and body training opportunities in organisational processes, e.g. induction
2. Increase accessibility of online and digital resources to support flexible learning for staff needs
3. Continue to deliver existing training while assessing opportunities for new resources to plug gaps
4. Assess feasibility of a train-the-trainer/enhanced champion training programme to expand reach
5. Develop improved evaluation and research opportunities to assess the impact of training delivery

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## Appendix – Survey questions

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1. Profession
2. Organisation
3. Clinical Academic Group
4. Before today, were you aware of the crossover between the mental and physical health needs of many patients? (yes/no)
5. How confident would you feel to address a patient/service user need regarding interacting mental and physical health? e.g. a nurse on a burns ward discussing low mood with patients, a psychologist recognising signs of poor dental hygiene in service users on a psychosis ward, or a community physio talking to patients about body image issues. (5 point Likert scale, very confident – very unconfident)
6. Have you received any training or education relating to the crossover between people's mental and physical health needs? (please select all that apply: UG, PG, in the workplace, no)
7. How was this training delivered? (please select all that apply)
8. Should healthcare professionals receive training or education relating to the crossover between mental and physical health needs? (please select all that apply)
9. How should this training be delivered? (please select all that apply)
10. How important do you think training on people's mental and physical health should be for each group?
11. How could healthcare services benefit from training on mental and physical health needs? (please select all that apply)