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Primary Health Care  
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## Teaching Newsletter

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New! You can now follow us on Twitter

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Our academic clinical fellow (GP Registrar in old money) **James Seddon** teaches budding surgeons how to write clinic letters. Read about it in his article published in *Clinical Teacher* <http://ow.ly/ZsFf30aJeX5> #melded

Research into **barriers and facilitators to help seeking behaviours in GPs**—first report by principal investigator **Ruth Riley**. Read more on page 2

**Bristol medical student Anna Taylor publishes a paper** with co-authors Hannah Condry, GP and 3D lead, and David Cahill, medical director, based on her work in the year 2 Disability, Diversity and Disadvantage vertical theme which shows the benefit of formal teaching for undergraduates on interacting with patients from the LGBT community. This teaching has been replicated in other medical schools and in the postgraduate setting.

Some of you will remember that she presented a practical session about LGBT teaching at the 2015 Year 5 workshop. Her session was called 'LGBT patients: role modelling and consultation skills'. Anna is currently on her Year 5 elective

You can read her article here [Implementation of teaching on LGBT health care](#)

### Bristol students doing well with Foundation posts this year

For the first time since the SJT process came in, there are no Bristol students still waiting to be placed at this stage of the year on the Foundation School Programme.

**Our students this year have scored on average higher than the national average of scores**, which is partly why they have all done so well.

Over 25% of this year's graduates will have posts in the Severn Foundation School.

**A big thank you** to all our GP teachers who will have contributed to this success.

### Workshop for New GP Teachers 24th May Canyng Hall, Clifton, Bristol, 1.30-5pm

Now is an exciting time to get involved in student teaching. Bristol Medical School has developed a brand new curriculum—**MB21**— which will start this autumn. General Practice based teaching will treble and we are looking for more enthusiastic GPs to help with our programme.

If you have not taught medical students before or have done very little teaching, this workshop is for you. We will provide you with an overview of the existing and new curriculum and information how you can join our community of GP Teachers. There will be also hands on practice of some teaching skills including giving feedback.

To book your place email [phc-teaching@bristol.ac.uk](mailto:phc-teaching@bristol.ac.uk)



## Exploring the barriers and facilitators to help-seeking by GPs: improving access to support

### Summary of findings from Principal Investigator Ruth Riley

Researchers at the University of Bristol, Keele University and University College London have completed a study exploring the experience of being a GP living and working with anxiety, depression, stress and/or burnout, and at the factors that help and hinder GPs who are seeking help and support. We interviewed 47 GPs over the phone and in person, and have analysed the transcripts using a thematic analysis. Here is a summary of our findings.

#### Sources of stress and distress for GPs

Participants reported a range of stressors. These included emotional labour, such as managing emotions arising from difficult consultations, and abusive behaviour from patients; practice culture, such as bullying or toxic partnerships, isolation and lack of support; and work role demands, such as workload, complaints and inquests, fear of making mistakes, revalidation and financial worries.

#### The experience of living and working with distress

Many of the GP participants related concerning levels of distress. Symptoms reported included those of burnout, anxiety, depression. Many of the participants reported previously having had suicidal thoughts. A theme of shame and fear of failure was also commonplace. It should be noted that many participants indicated that they were passionate about general practice and felt privileged to be treating patients, despite these emotional difficulties and workplace challenges.

#### Barriers and facilitators to help seeking

GPs reported barriers and facilitators to help seeking for distress that were related to both work and symptoms. Work related barriers and facilitators included a need to attend work (sometimes known as 'presenteeism'); internalised and perceived stigma within the practice relating to mental illness; and concerns around confidentiality, time and identity. Symptom related barriers and facilitators included a difficulty with acknowledging symptoms and the inertia related to depression. It was found that many GPs reached crisis point before seeking help.

Participants discussed the varying quality of treatment they had received. The importance of information about relevant services was highlighted, and the benefits of both specialised services and supportive work environments were extolled.

We are currently writing up papers based on our findings, which will include recommendations around addressing and combatting the stigma surrounding mental illness; promoting and availability of informal and formal support for GPs; a willingness to talk about vulnerability and illness, and having open channels of communication, ensuring GPs feel less isolated and better able to cope with the emotional and clinical demands of their work and addressing the stress related to escalating workloads.

Thank you for your interest in this study. If you have any questions, please email the project's PI, Ruth Riley, on [R.Riley@Bristol.ac.uk](mailto:R.Riley@Bristol.ac.uk) or researcher Johanna Spiers on [js16447@Bristol.ac.uk](mailto:js16447@Bristol.ac.uk)

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