



WHAT'S NEW IN WELLNESS? DECEMBER, 2012

SERVICE AND SUPPORT:

- The number of trainees seeking services continues to increase. From July 1, 2011 - June 30, 2012, we saw 118 trainees for a total of 488 visits. 38% were one-time visits, and 43% visited the Office between two and five times.
- The top reasons behind the initial visit to the Office are academic difficulty, stress and mental health challenges, and career uncertainty. Residents requiring accommodation of training and developing occupational plans are on the rise.
- **Intimidation and Harassment Guidelines** have been updated and **Health and Safety Guidelines** updates are in the final stages of completion (see attached). The PGME **Statement on Disability and Accommodation** will be accompanied by a one page "How To" flow sheet with an expected date of completion in January.
- The **T-IME Working Group on the Learner Experience** continues to collaborate with others to support the streamlining of the orientation and registration process for trainees across sites.

EDUCATION:

We continue to offer a series of workshops that build and repeat on the theme of improving attentional skills (and enhancing non-technical skills) to optimize professional performance and personal well-being. We are interested in partnering with programs to deliver and evaluate outcomes of these educational interventions.

RESEARCH:

- We completed our qualitative study exploring the **transitional experience of residents through the PGY1 year** and learned:
 - Residents identified a variety of strategies to successfully cope with the transitions of PGY1 including:
 - i. Behavioural: Assertiveness, advocating for learning and self-care needs, enhancing sense of control;
 - ii. Cognitive: Self-awareness, self-reflection, managing expectations; and
 - iii. Self-care: exercise, healthy nutrition, sleep, maintaining hobbies/relationships.
 - High team support in the work/learning environment was identified as facilitating successful transitions. This included:
 - i. An emphasis on teaching and learning opportunities;
 - ii. High availability and approachability of faculty/seniors who showed an interest in residents; and
 - iii. Clear expectations and strong orientation to the rotation.
- We are in the process of completing qualitative 1:1 interviews with **residents undergoing remediation** to better understand their experience through a wellness lens and to identify interventions which will support learners and teachers in identifying and ultimately avoiding patterns of interaction that may lead to heightened stress and weakening performance among residents in remediation. **Next steps will be focus groups of faculty with experience in teaching remedial residents.** Please look for requests in the new year if this is of interest to you.