Understanding how to promote and sustain General Practice supervisors' wellbeing Aim & Objectives

Limited research has explored General Practice supervisors' experiences of burnout and wellbeing. This project aimed to generate theoretical models of both constructs, identify risk and protective factors for supervisors' wellbeing, and explore strategies to manage burnout and promote wellbeing.

Method

A systematic literature review qualitatively consolidated data from 26 international studies exploring wellbeing amongst Family Medicine/General Practice trainers. This was complemented by a primary qualitative study comprising interviews and focus groups with 19 supervisors and stakeholders.

Results

The review identified limited conceptual research regarding the constructs of interest. In the primary study, wellbeing was conceptualised as comprising multifaceted, interacting personal and professional domains that are fuelled by an underlying wellbeing reservoir. Inadequate value fulfilment was thought to produce burnout, comprising six symptom domains: exhaustion, overwhelmed, affect changes, compromised performance, avoidance, disengagement. From the primary study, we generated a conceptual model arguing that the draining aspects of a given task (e.g., clinical work, emotional workload of supervision) are manipulated by enablers (i.e., external supports that lessen or remove workload) and contextual moderators (i.e., individual and situational factors that magnify or minimise the perceived drain of a task). The opposing force within this process is the level of value fulfilment/rewards arising from the task. Burnout will arise if there are too many tasks where the drains outweigh the rewards. Interventional themes aligned with this model and drew upon two key themes: peer networks, and communication and acknowledgement.

Discussion

The conceptual models of burnout and wellbeing align well with previous work with registrars, providing further support for that model. The proposed model of risk factors aligns with the Job Demands-Resources model, elaborating the mechanisms within that model to provide greater guidance for intervention development.

Implications

The conceptual model of risk and protective factors highlighted key interventional targets to support supervisors' wellbeing. Emphasis should be placed on building supportive practice environments, helping supervisors manage unhelpful psychological traits (e.g., perfectionism), and supporting supervisors' autonomy. A supervisor community of practice was discussed as a mechanism for debriefing, sharing education ideas and strategies, and allowing supervisors to leverage one another's areas of subject matter expertise. Calls were also made for bolstering the General Practice and supervisor workforces to improve workload viability, and for greater acknowledgement of their work to help sustain them.

Future research

The conceptual models developed within this study require further testing, ideally through psychometric instrument operationalisation. Additionally, the models can be used as conceptual frameworks for intervention design and implementation. Evaluation of such interventions would then permit real-world testing of the conceptual models' hypotheses. Further research is required to define 'supportive practice culture', and to operationalise a feasible and acceptable supervisor community of practice.

References

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