



## **Take 5 – managing burnout and wellbeing within the NHS**

*Dr Sula Windgassen, health psychologist and psychotherapist talks to consultant dietitian Sophie Medlin*

### **Sophie**

Hello and welcome to the ProConnect podcast series, aiming to inform and connect healthcare professionals on a range of subjects outside of clinical practice. I'm Sophie Medlin, a consultant dietitian based in London, and today we're talking virtually to health psychologist Dr Sula Windgassen about managing mental health and wellbeing, especially for everyone working within the NHS.

Welcome to the podcast Sula! This is such an important area and I'm looking forward to discussing it with you.

### **Sula**

Thanks, Sophie, thanks for having me

### **Sophie**

Can you introduce yourself and tell people what you do and a bit about why your background is so relevant?

### **Sula**

I'm a health psychologist and psychotherapist, so I work to help support people with different chronic illnesses, or the experience of persistent physical symptoms, using evidence-based psychological tools and psychotherapeutic models. And I've got a specialism in gut disorders and my PhD was on using cognitive behavioural therapy to improve symptom severity in irritable bowel syndrome.

### **Sophie**

And we have a problem with psychology, a bit like we have a problem with dietetics, don't we, where there's nutritionist, nutritional therapist. In your field, there's also lots of different terms that people use, some of which are regulated and some which aren't. Would you mind talking to that a little bit, briefly?

### **Sula**

I mean, it's a shock to most people that psychologist isn't actually a protected term. So chartered psychologist is in the UK, but that also means very little, unfortunately, because you can be a chartered psychologist registered with the British Psychological Society and that can be a very research-based training that you've had as opposed to clinical where you've been working with patients. So there are different types of psychologists and different training routes. Clinical psychologist is the main one that people know about. And to become a clinical psychologist, you have to have worked with humans providing therapy and have been trained on different therapeutic modalities.



The difficulty, I suppose, is not all rotations, placements and models are focused on health and that intersection between health and mental health. So it can be really difficult to find a clinical psychologist that has relevant experience for health. But there's also difficulties unfortunately with health psychologists because to become a health psychologist regulated with the Health Care Professional Council, you also don't need to have done any clinical training. So there's lots of health psychologists out there that have no relevant clinical training, or no clinical training whatsoever. So it's really tricky for patients to find the right support.

My background is – I've got my research backing from my PhD and my health psychology training was a mix of research and clinical practice, but I went out and got various bits of training. So I think my best advice for people looking for a specialised clinician to help support psychologically is to explore what the qualifications are and to what degree they've had experience; merging the models of mental health and psychotherapy with physical health and to what degree they know your condition. And I'm quite pedantic about, you know, psychologists having been trained or therapists having been trained on the specific region or health condition.

### **Sophie**

I think it's so important. You know, I hear some horror stories from people who've seen therapists who have no idea about their medical condition and they have to start explaining it to the clinician, I don't think that's particularly helpful. So one of the things we want to talk about on this podcast is about stress and burnout. It's obviously been such a difficult time for people working in the NHS. When I talk about my experience working in the NHS, people talk to me about it a bit like I've been in the army; how are you and how did you cope and things like that.

And I think, you know, unfortunately post-pandemic things are even more stressful and more difficult, more high pressure than they have been. And of course, we've had a lot of conversations and there's been a lot of talk about stress and burnout - particularly for people in the NHS. I guess what do we mean by burnout to start with and what are the causes and how do you find it impacts individuals?

### **Sula**

I mean, burnout is such visceral term, isn't it? You can almost picture, you know, exactly what's gone on for people. And essentially it is when you've been working at max capacity, meeting all the demands and having demands that then exceed your capacity and trying to continue to meet those so that you've gone beyond what's, you know, physiologically really available for you. And generally, people recognise that they're burned out primarily because of how they're feeling psychologically. But there are, of course, physical effects of that, too. So, you know, common signs of burnout, of feeling irritable, having compassion fatigue and feeling anxious where you might not usually feel anxious about these particular things, having that sense of dread of doing what you're going to do.



But for lots of people as well, those are really like activated symptoms where, you know, you feel quite reactive perhaps. But for lots of people, burnout can also present where you feel switched off and numbed out so that you're just not enjoying your job. But you might not be enjoying things outside of your job and you feel completely tuned out. And that can be a really disconcerting feeling.

But in both directions, what's happening under the bonnet, as it were, is you physiologically have not got the capacity to meet the demand or even if they're not quite demands, but just enjoyable things that you need to get activated for your nervous system, your immune system, all of the various kind of allostatic systems in the body just don't have that bandwidth anymore.

### **Sophie**

And you know, I certainly experienced in the NHS where you could work 24 hours a day, seven days a week, and it's still not enough. There's still people who need you, there's still problems to be solved. And certainly working for myself I could work all the time and there's still not enough time in the day. And interestingly, I get, my tonsils sort of swell when I'm getting burnt out and I'm like, okay, I need to listen to myself. I know if I have a decent night's sleep and I recover, I'll be okay. But it's certainly, you know, there are those physical symptoms as well.

If you're sort of managing a team, I guess. I mean, you do manage a team, but what would the signs and symptoms be that managers should look out for when it comes to burnout, and people struggling with this kind of stuff? And what steps do you think they should take if they are worried about a member of their team?

### **Sula**

I mean, the biggest, most obvious sign is when your colleagues are coming to you saying 'I'm finding this difficult' because usually I find that people are quite good at saying 'this seems like a little bit too much'. But for members of staff that find that difficult and also there can be all these sorts of kind of power dynamics and concerns culturally about whether that's going to disappoint people and make you seem like a bad employee.

The people that tend to go really quiet and then start making lots of little mistakes, they might be, you know, really non-consequential mistakes, but they're frequent and perhaps uncharacteristic as well. Those are the opportunities, I think, to just check out how overwhelmed and burdened their employees feel. And I do think having that initiative as a manager or a leader of a team to bring that conversation up is important culturally, in a workplace environment to be accepting and be permissive and say, you know, 'this can happen, how are you feeling? What can we do about it?'

I think one of the difficulties that I see come up in the NHS time and time again with this, however, is that in the very real challenges that we've got with trying to maximise the human resource, with financial restraints perhaps, the onus can then go on the individual to try and sort things out, you know, manage stress better and make your holiday more efficient, you know, all of these kinds of things or be more organised. But when somebody is coasting towards burnout, or in burnout,



things are going to be slower and it's going to be harder for them to a) get organised and then maintain that organisation and also practice the decision making in order to work out like this is going to suit me better. So they really require that support. So trying to link them in with as much support as possible, but also thinking about practically, you know, phasing down hours a little bit to give them a bit more space mentally so that they can then, you know, recuperate is one of the best things that I think can be done for somebody that's going towards burnout.

**Sophie**

It's so difficult, isn't it? Because I think, you know, as a manager, you're likely to also be feeling pretty burnt out and pretty struggling with things. And then if you've got an employee who is saying to you, 'I'm fine, I'm fine', but you know that they're not fine, it is really hard to figure out how to manage that situation, isn't it?

**Sula**

Having that service concern about, 'Okay, we've got X amount of employees and we've got these amount of patients, we can't deal with such and such being off or reducing hours'. I completely understand that worry. But in my experience and also, you know, research tends to show this, if you're able to be responsive pre-emptively or even, you know, when somebody is in burnout and give them the reprieve they need to recover and make them feel supported, the likelihood is long-term that's going to make, and I don't even mean like in two years' time, I mean, you know, the following six weeks to two months, is going to be much better and they're going to be much more prepared to come back to work and able to keep on an even keel than if you, you know, pile on the pressure of, 'Oh, but we need to squeeze this in' because they're just inevitably going to go off sick and then you have no one. So although that pressure is there, it is so much more protective to the service as well as the employee to try and pre-emptively come up with some measures there.

**Sophie**

And I think one of the things that comes to my mind is when I look back on times in my life where I've been really stressed and overworked and overwhelmed, there's something about presenteeism where I was there, but I wasn't really able to fulfil my duties effectively – this is not in the NHS. But because of that then people still expect you to do things, but then actually you're not able to do them. And so ultimately things fall apart irrespective. So I think it's about trying to, as you say, notice the signs, see what's going on and spend time with people and talk to them in a non-judgmental way, isn't it? Because I think otherwise, you know, if it's mistakes that are being made and you pick someone up on them, there's a way of doing that which can make them completely close off and feel even more under pressure and stressed out and unhappy. Or there's a way of doing it to say, 'Is this something we can help you with? How can we make it easier for you?' Which I think could make a massive difference.



**Sula**

Yeah, it's so transformative to have that conversation and in a warm and accepting way, it takes this layer of additional pressure off which then in itself is quite alleviating. It doesn't get rid of the whole burnout problem, but it takes off a big chunk that could otherwise, you know, keep people spiralling down. So having that conversation in the right way is super important.

**Sophie**

And acknowledging how hard people are working. And we know you're really trying, but what can we do to help to solve this, or what do you need? It's so helpful. Speaking of people being kind of having the onus put on them, I guess that's a relevant thing to think about. But equally, we all as individuals do need to think about how we can take care of ourselves going into the NHS, working in the NHS, working for ourselves, whatever it might be. What steps do you recommend people think about taking to build resilience and help to manage stressful situations better?

**Sula**

One of the things is awareness. I think we're so deconditioned in being connected with what's going on for us emotionally and physiologically. We have these expectations placed on us societally, in our workplace, socially and our own, like internal standards. And it's not really a question about whether we should try and meet them. It's just a given. So it's like, 'Well, I know I should go for this promotion' or 'I know I should get all this done by the end of the day. And if I haven't, I need to squeeze it in'. And, it all presents itself as knowledge and facts. And when that's the case, that's the most important concern of our brain and our body will just perform to what we're directing it towards. And if we do this repeatedly without any counterbalance in a, well, how am I feeling emotionally, but also how am I feeling physically and what's the state of my body, fatigue wise, or how quickly your brain is working. Because by the end of the day it all slows down and you might be there for 3 hours doing something that would have taken you 20 minutes because you just keep stopping and starting and what have you. And if we're just completely unaware of that because of this kind of mental narrative, 'I just need to get it done by the end of the day', that's unquestioned. Then, of course, you know, it starts to quickly snowball and spiral that we just get into these cycles of overdoing it, not getting enough rest or replenishment and then the same thing continues until we go in this downward trajectory.

And one of the biggest things that I think people have to learn once they've started getting towards burnout territory or being severely burnt out is to reconnect with those signals of their body earlier on. And that also includes getting familiar with their emotions. And I think people only really think about their emotions when they're heightened, whether that's, you know, heightened positively or negatively. So, 'Oh, my gosh, I'm really anxious and I'm feeling overwhelmed'. Well, that's already like up the scale of 60, 70 as opposed to somewhere in the 20% mark. And same with, you know, feeling happy, you know, or feeling, you know, joyful. But if we can start to teach ourselves to be aware of the more subtle emotional shifts and what we're feeling resistant to and what we're opting out of, those things can give us a real, like, early warning signal of, 'Oh, maybe you shouldn't take this extra thing on, or maybe you should say no to that, or maybe you want to reorganise some stuff or take some extra time to replenish ourselves'.



And one of the practices that I suggest for people to do this is; I've come up with this concept of this nervous system thermometer chart. So the idea of like you can be in green where everything feels like you've got enough energy in the bank, you can be responsive to meet demands, but you can equally just hang out and be there quite happily. And, then as you go up the scale, you've got, you know, going towards yellow, orange, red is more activated where you feel in this go, go, go, go, go. And that can be positive as well. And often, you know, we do thrive on stress. So it's not always like a negative experience. But if you're in that mood, it's really hard for you to stop. And I hear that from people all the time. Well, I'm in the middle of it now, so I might as well finish it. No, I won't take that five-minute break because I need to get it done. But if we do that over and over again, we never have little moments of counterbalance. And then up at the top is this shut down mode, which is really intriguing, I think, where you kind of go beyond activated and it's kind of purply-blue and that's when you know, you're not really making choices anymore. Your brain and physiology is kind of being like, 'No, you can't go there'. So somebody asked you to do something. You might say yes, but your brain's not ever letting you do that in that moment of time because you just don't have the capacity.

It's hard, I think, for people to see, to decide for that mood because it can look like green mode. Like I could be sat watching the TV in green mode, really enjoying the programme that I'm watching. But I could be sat watching the TV just kind of blanked out, not engaging. So helping you decipher which mode am I in, how am I physically feeling? Is my brain feeling slow and heavy? Is my body feeling like that or yeah. Do I feel like I've got capacity here can tune you in on like a moment to moment basis?

### **Sophie**

And what about this resilience piece? Do you think there's something we can do day to day or occasionally just to try and build a bit more resilience to the day-to-day pressures? You know, we talk about some people being much more resilient than others. And you know and I know from clinical practice that some people seem to be able to take on everything and have this huge capacity and huge resilience. And other people feel much more burnt out or worn out by perhaps what might be perceived as being less symptoms, less pressure, less, you know, situational things going on.

### **Sula**

I think there's so many different things that feed into this resilience. And I think the latest research kind of questions: is resilience just one thing? It seems to be a multitude of things, right? In terms of like our mindset, how we respond to things and our dispositions. You know, somebody that's more optimistic and sees things as, you know, glass-half- full, more likely to be resilient because then they feel that would be likely to meet the challenge or it will turn out okay. And of course, that frees you up mentally and emotionally a lot more. There's potentially loads of things that we can do to try and increase resilience. What I would counter is it's hard when you're already burnt out. I think first of all you kind of need to recover from that on an almost like a physiological level.



And then, you know, the process of looking after how you're approaching things mentally. One of the biggest things that I try and encourage people to notice and then create more flexibility with, is a real 'all or nothing' mindset. So people tend to be like, I'm all in, or I'm all out. I need to finish this whole entire article or I won't do it now. We all have this tendency, I think, but particularly when we're stressed, that seems to kick in more and it erodes any possibility for going easy on yourself and trusting that you can meet the demands because you're like, 'Well, I didn't finish it today, so I'm never going to finish it'. And you know, things can really generalise out from there. So I think just even spotting that mental tendency of seeing things all one way or all another and expecting then quite a lot from yourself or completely disengaging, which then can accumulate the stress, can really help build resilience. Because once you start getting experience of seeing the grey areas and that things do progress when you're working with that middle ground, it can be such a relief. And then also it lends itself to feeling more optimistic about your capacity and also how things might turn out just generally speaking, too.

### **Sophie**

One of the things I think people might resonate with is this idea that when you go on holiday, you're always sick or as soon as you stop working, maybe at the weekends you just completely crash. There is some physiology behind that, isn't there? And what's going on there? Do you know that sort of stuff to hand?

### **Sula**

I think the way that our society is set up is for us to be very boom-bust. Even the idea of like you work for 4 to 6 months and then you get to take, I mean, for some people, just a week's break, not even two weeks and that in itself is, you know, what we call boom-bust. So you keep going, keep going, keep going, and that's your boom. And then you stop. And then essentially you bust like you've got nothing left to give and so on. On a physiological level, essentially what's going on there is we've got our autonomic nervous system, which is the mechanism behind our stress response. And we've got two branches of that, the sympathetic nervous system, which is our fight or flight, which isn't just there when we're feeling completely anxious or scared. It's just there to help us meet the demands of every day. And so that's constantly activated. And then the counterbalance of that is our parasympathetic nervous system, which helps us relax and come back to an equilibrium. And, ideally, we should be having multiple opportunities to come back to an equilibrium. But often the case is that we don't really. We have insufficient time to come back to that balance.

So if we've got an ongoing period of time where we've just got a much more dominant, sympathetic nervous system, that has an impact on lots of different systems in the body. So the immune system being one of them, how our hearts work and our cardiovascular system, our digestive system. And so it changes how our organs are functioning; it changes the ability of the immune system to do what it needs to do. And so then when we stop, when we go on holiday, for example, or we have the weekend, our parasympathetic nervous system is working really hard to come back online and get us back to that equilibrium. But because we've been burning ourselves out, essentially working so hard, we might not quite have the capacity to restore that equilibrium.



So it feels like a crash rather than just coming back to baseline and just taking the immune system example, when all that adrenalin, cortisol, noradrenaline washes out, that's been changing how our immune system is functioning. And so then our immune system's kind of depleted. So we might be more likely to get a cold or you feel your tonsils, for example, but with bowel symptoms, same thing, right? We've had the adrenaline, noradrenaline kind of suppressing what our digestive system is doing. Then you come to that moment of relaxation on the weekend and then it starts to come online. But it's a huge event because it hasn't been, you know, working with regularity throughout the week. So then it causes all sorts of stomach upsets. So there's so many different like specific mechanisms how that works. But essentially is this overactive stress response changing the landscape of what our bodies are doing until we try and claw it back and then everything's just kind of not where it needs to be to get us nice and regular and calm.

### **Sophie**

If we're in a stressful situation or something stressful has happened, often people find it really difficult to switch off and disconnect from that, I guess when they get home or at the weekend or whatever it might be. What techniques do you suggest people use to help them to disconnect from stressful situations or stressful incidences and to help them to calm down and get into that parasympathetic state?

### **Sula**

Making the distinction between shutting down and switching off, I think it's so difficult to decipher the two to just even knowing that there is a differentiation, one is suppression and trying just not to think about it, which takes up a lot of mental energy actually, and, you know, causes all sorts of other responses in the body. And one is, you know, making a conscious decision to acknowledge and then do something that's going to nourish you. So, I think trying to work out what that looks and feels like for yourself. Does it feel like you're tensing up so that, you know, you're not thinking about what just happened or what's going on at work and you're trying to, you know, stuff your brain full so that it hasn't got an inch to even think about that, which is, you know, that shows up like scrolling on your phone whilst watching TV, whilst maybe there's somebody else talking to you in the background. So you've just not got any space at all to be thinking about work and needing that constant distraction.

And often, you know, chronic busyness as well, like stacking up your weekend. So you're full of everything, but you're not really getting that physical rest. Equally, it can be really hard to get into that parasympathetic nervous system mode when you're really activated, you know, when there's been a lot going on and then you're asking yourself, just relax, just watch TV. Your brain can't really transition that smoothly. And also, you know, watching TV might not be the activity of choice.

What we can do to really help with that is, again, tune into where you are physiologically. So, you know, your brain's wanting to race over what's happened and problem solve and perhaps ruminate on it, which it does naturally when we're experiencing stress, but instead shifting that focus to how did your body feel and how can you best nourish it where it's at? And for some people they might be like, 'Well, I just feel so exhausted. I just need to lie down and get that quiet





or listen to some nice music that's going to relax me'. And for some people in a particular moment that might be like, 'I just need to expel this energy and, you know, do some exercise'.

And really giving yourself choices of how you might do that. It might not be that you need to deactivate in that moment, but you just need to channel and express and yeah, working out what that is for you. And then, instead of asking yourself not to think about the stressor, making an intentional choice about where you want to put your attention, so what is the pleasure that you can turn towards? Or what is the nourishing thing that you can turn towards to really be as present as possible? And that is the opposite of suppression that's just fully engaging in something that's going to serve you.

**Sophie**

And what sort of examples of things do you think people could be trying when you're feeling that way? What sorts of things do you recommend people do or try to get themselves into that better headspace?

**Sula**

I mean, the bar is super low, I think people think that it has to be something massive, like go for a massage or go to the sauna, but really it can be, you know, sit in a nice atmosphere with a scented candle, glowing lights, listening to some nice music or, you know, just stroking a pet and really being fully present for that and engaging with them in whatever they're doing, or taking a pet out for a walk; engaging in conversation that's stimulating to you with people that you love; showing some kind of nurturing, whether that's to people, it can be to your plants; doing something really intentional and mindful; making a nourishing, healthy meal that you know is going to restore your body. Picking something that gives you a sense of joy and everybody's joy is different. But it can be things like reading, or watching a programme, but the emphasis is on, you know, feeling that engagement rather than something that ends up being quite passive. So there are so many things and I think the expectation we can automatically have for stress relieving is super high. But really it's the little things. It's just paying attention as much as you kind of being as present for it.

**Sophie**

And even with things like meditation, I think people think that if they're not sat there completely with no stimulation, they're kind of getting it wrong. Whereas, you know, I'm a big fan of guided meditation and things like that. I think that can be much more accessible to people. It's a real case of whatever works for you, isn't it?

**Sula**

Yeah, you could go to the park and be meditating without silencing your thoughts. I think that that impression of what meditation is really puts people off because you can't silence your thoughts, for one thing. And that creates then a lot of pressure. So whatever you can be with that feels meditative and soothing. That's meditation.



**Sophie**

And do you think we can use these techniques in a workplace sometimes? Is there something that people could be doing in a workplace situation that helps to, I don't know, ground them a bit better and get them into a better headspace? For the, you know, so it's lunchtime for the afternoon, for example.

**Sula**

Even just a little environment shift, getting up from your desk and going somewhere slightly different, even if you don't have enough time to, you know, take a really long lunch break, but, you know, going for a little five-minute walk around the block, I often do that in between clients where I don't have a huge amount of time. But if I can see that it's sunny outside and I just want that shift, it makes such a big difference in your mind and body. Going to get like that little cup of tea or another drink of water and nourishing yourself in that way, but being present for it, moving from your desk, speaking to colleagues. I mean, speaking to colleagues is such a massive destressor and, I think, that's one thing that was lost when lots of people started working from home. Just those little snippets of conversation when you, when you're between tasks or when you're debriefing from whatever clinical encounter that you've just had, doesn't have to be to any purpose, just a little kind of sense that somebody else is there, those things make such a big difference too. And I think when we're stressed, we can get tunnel vision and withdraw and then we start to lose that as well.

**Sophie**

And finally are there any resources and places that people can go to get more information about this stuff or things that they could start trying? Is there anywhere that you would point people to?

**Sula**

On my website, I've got so many different booklets and guided resources and that nervous system thermometer chart's on there. So that's <https://www.healthpsychologist.co.uk/> I mean there's loads as well on the NHS website - just little pages about stress management and also where to go for free therapies, great resources, great centres with lots of amazing clinicians.

I mean those would be my two suggestions. And then there's wonderful charities like Mind that has just so much on their website and they also do lovely charity and wellbeing groups and things like that to get involved in. They've got initiatives like gardening in the community and joint knitting circles and things like that.

**Sophie**

Lovely, great ideas. And I think there, you know, there is so much more out there than there ever has been, isn't there, on these things? Which is so great to see. Thank you so much Sula, it's been great talking to you.

**Sula**

Yeah, thanks for having me.



**Sophie**

Thank you for listening to the ProConnect podcast, brought to you by Abbott. Join us again soon for our next episode where I will be talking to consultant dietitian Dr Anne Holdoway about her career path both within and outside the NHS and her top tips for broadening horizons in dietetics.

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