**Junior doctor wellbeing checklist**

All staff wellbeing is important. However, due to the rotational nature of junior doctors’ work, we recognise the additional impact this can have on wellbeing.

This checklist can be used with the BMA Mental wellbeing charter to put in place simple measures to support the wellbeing of all junior doctors.

**Structure**

- All organisations should have a wellbeing guardian that reports to the board and junior doctors forum
- Ensure that mess and rest facilities are included in any new hospital build projects
- Have on-call designated parking spaces
- Enable junior doctors to work from home where possible
- Ensure access to an out-of-hours menu 24/7 that includes a hot meal and cold snacks for staff
- Employers should ensure that staff have access to free psychological support and treatment

**Self-actualisation**

- Provide leadership and team working training for all staff, including junior doctors
- Trusts should create a peer-to-peer mentorship programme for all interested staff, especially new starters and international medical graduates
- Engage with frontline staff to reduce social isolation for all new employees, ideally through existing structures in the organisation (eg the mess)
- Ensure all staff – including locum, bank and temporary staff – can access all parts of the hospital needed for their job and use the trust software
- Appoint a junior doctor onto the trust board and to divisional meetings
- Appoint a junior doctor onto any major incident management structure (eg gold/silver command)
- Each trust should create a quality improvement programme to increase efficiency, productivity and remove non-essential tasks for frontline staff, with input and leadership from junior doctors
Feedback

☐ Create positive feedback mechanisms to reward and promote staff for excellence (e.g. Greatix)

☐ Employers should present exit surveys, NTS reports, Guardian reports and junior doctor forum feedback to the trust board quarterly, including plans of action for any issues identified

☐ Trusts should provide voluntary wellbeing sessions (e.g. balint groups, confidential wellbeing drop-in sessions and reflective practice sessions)

☐ Highlight the wellbeing support programmes available at the trust induction

☐ Introduce the NHS Employers ‘How are you feeling today?’ toolkit to all staff

☐ Self-harm or suicide among staff should be treated as an organisation SUI (or equivalent) and a root cause analysis should be undertaken to evaluate if working conditions contributed, and how the organisation can better support staff

☐ Run an annual wellbeing week to showcase the trust’s support structures for staff

☐ Commit to a ‘no blame’ culture in clinical incident investigations

Workload

☐ Commit to annual reviews of rotas, including workload intensity and decision fatigue through junior doctor feedback

☐ Each department/GP practice should assign an at least monthly clinical session for workplace-based assessments for junior doctors

☐ Introduce self-rostering for trainees

☐ Ensure all junior doctors and locally employed doctors have self-directed learning time commensurate to their training needs

☐ Introduce programmes which allow uninterrupted breaks to be taken by trainees (except in emergencies)

☐ Ensure bleep-free teaching for all junior doctors (except in emergencies)