

Peace of Mind: Exploring the Feasibility and Effectiveness of a CAMHS Staff Mindfulness Group. A Preliminary Analysis.

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Background and Aims:

- Mindfulness can be described as “paying attention in a particular way: on purpose, in the present moment, non-judgementally” (Kabat-Zinn, 1994, p.4).
- Mindfulness-based interventions (MBIs) have been implemented successfully to promote mental and emotional resilience and reduce distress among healthcare professionals, a work population who have been deemed to have high demands and often limited control over their working environment (Virgili, 2015). There is also research suggesting that MBIs with staff results in better care and well-being experienced by their patients (Grepmaier et al., 2007).
- In order to successfully teach mindfulness, it is recommended that a personal practice is undertaken (McCown, Reibel, & Micozzi, 2010).
- The current study aimed to present the preliminary analysis of exploring the feasibility, effectiveness and staff experience of two “Peace of Mind” mindfulness-based groups delivered for staff in a child and adolescent mental health service (CAMHS) in North East Lincolnshire.

Method

Participants:

Twenty five staff members volunteered to take part in the “Peace of Mind” Group, held for one hour per week over eight weeks (from October 2015 to January 2016). A total of 23 participants (21 female, mean age = 40.98, age range 22.92- 60.50) completed the group (completion rate: 92%). The mean attendance of those who completed the group was 5.74 sessions out of 8 (SD = 1.7, range = 4-8), this equates to an average attendance of 71.75%.

Procedure:

- Each session was led by an external professional: June Spencer, a teacher/practitioner of Mindfulness and Complementary Therapies.

Brief overview of course content:

- Explanation of Mindfulness
- How we process and perceive the world
- How our perceptions affect our experiences
- Developing kindness and compassion and growing a mindful attitude
- Work life balance awareness
- Mindful communication/ mindful inquiry
- Mindful exercises: breathing/ body scan/ sitting meditation/ loving kindness meditation

Outcome Measures

- The Five Facet Mindfulness Questionnaire (FFMQ)
- The Perceived Stress Scale (PSS)
- The Self-Compassion Scale, Short Form (SCS-SF)
- The Compassion Scale (CS)

Data Analysis:

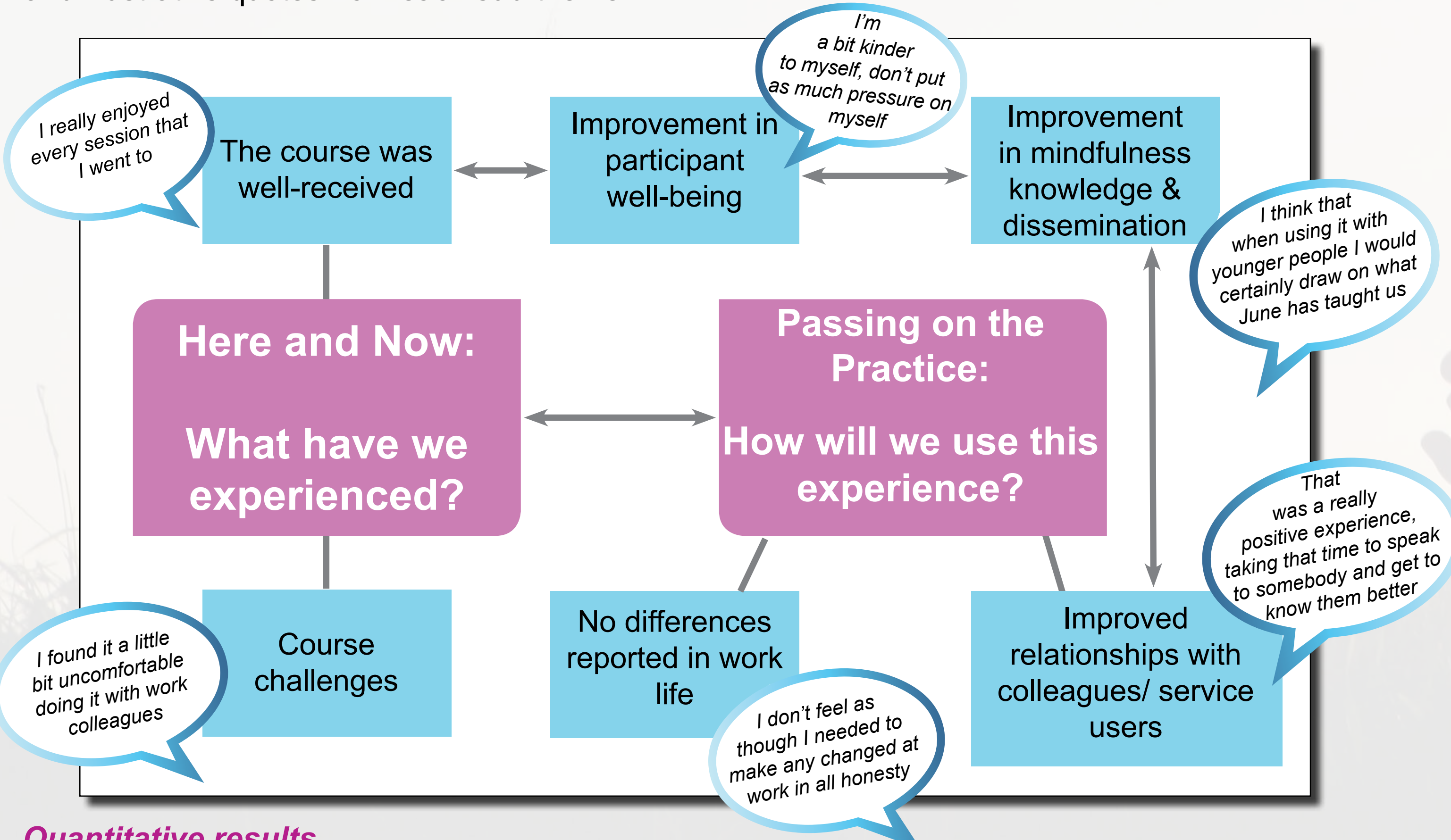
The changes in questionnaire scores pre- and post-group were analysed using paired sample t-tests using SPSS.

The interviews were recorded and transcribed. Responses were then collated into one document and analysed thematically, following the five stage process described by Braun & Clarke (2006).

Preliminary Results

Qualitative Results

Two themes, and six sub-themes emerged from the thematic analysis of the semi-structured interviews. See below for an example of the Thematic Map, and illustrative quotes from each sub-theme.



Quantitative results

Results demonstrated the feasibility of the group (attrition rate was low, and attendance was high), and significant improvements in self-reported overall mindfulness from pre- to post-group. There were also increases reported in perceived stress, compassion towards self, and compassion towards others- although these were not significant differences.

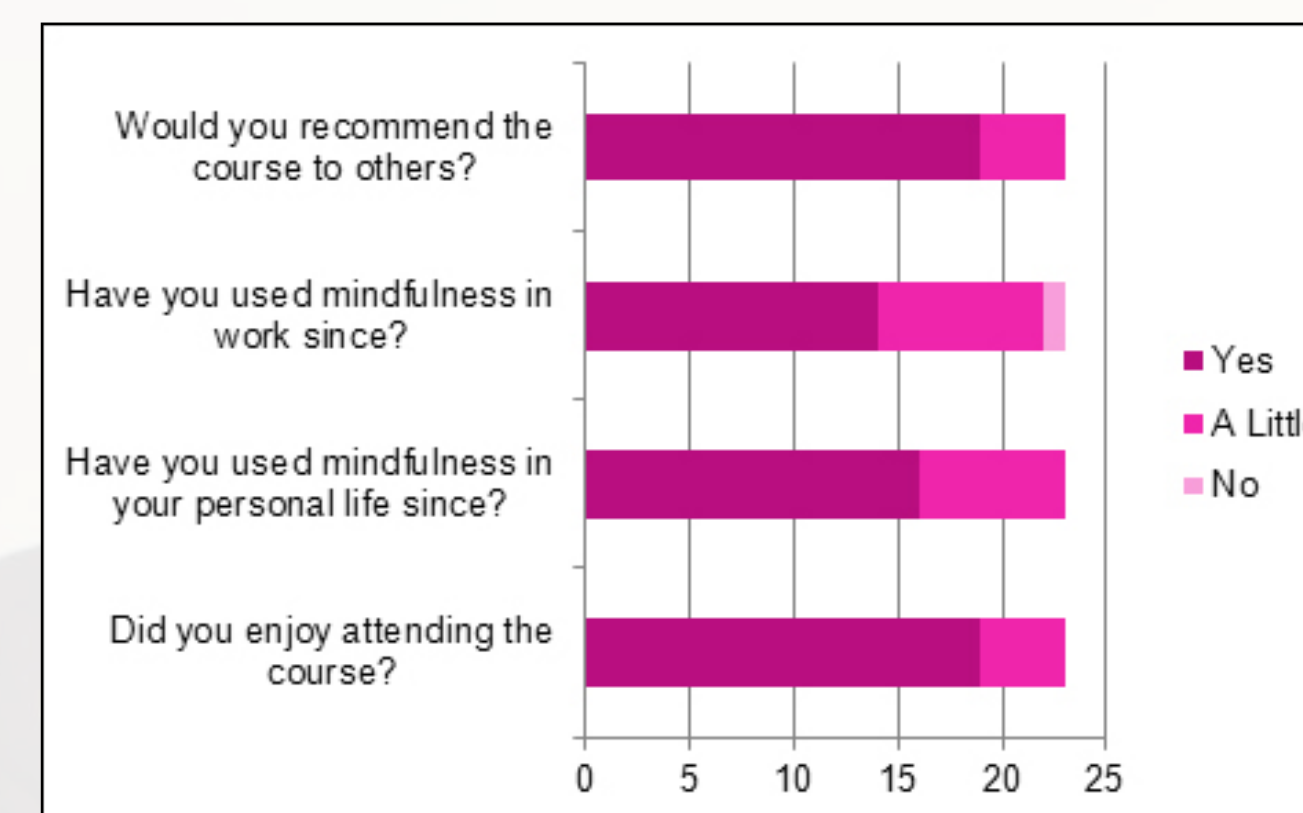


Figure 1. Questionnaire responses from all participants post-group.

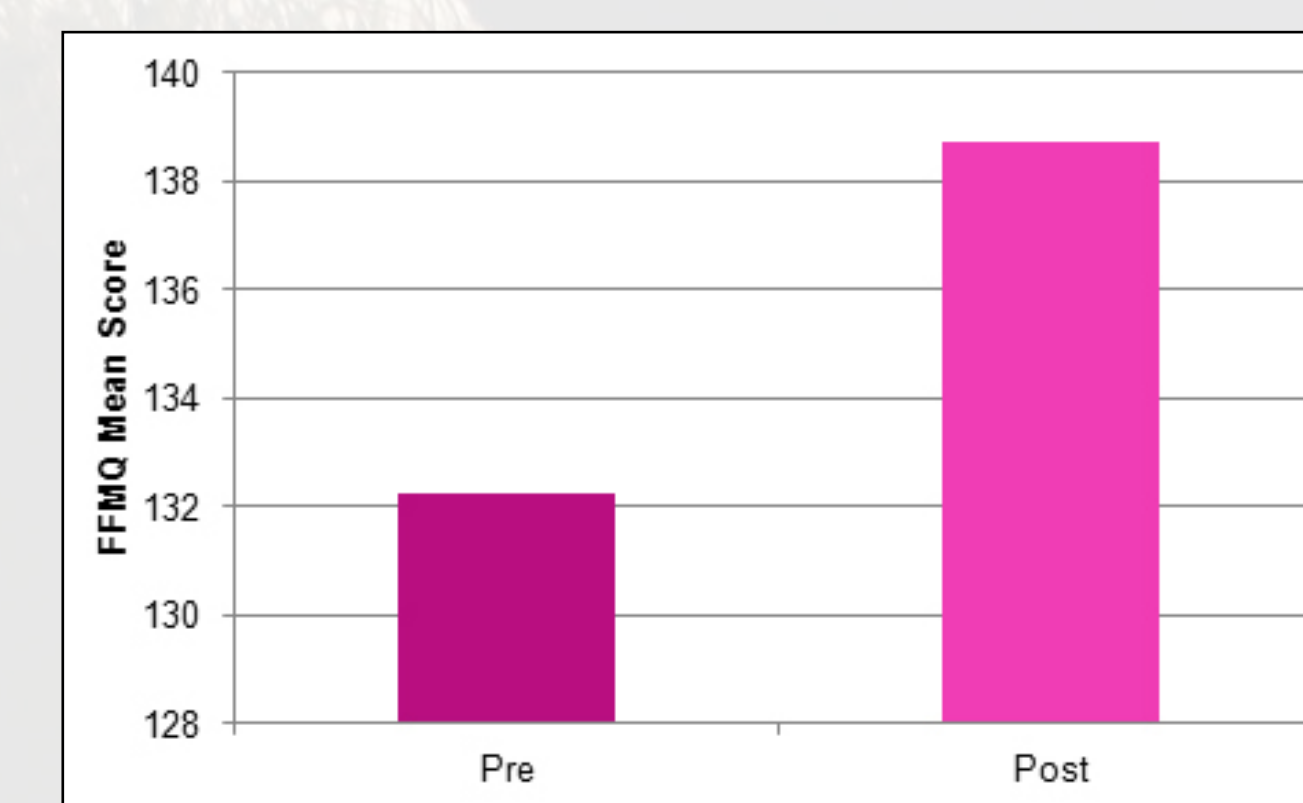
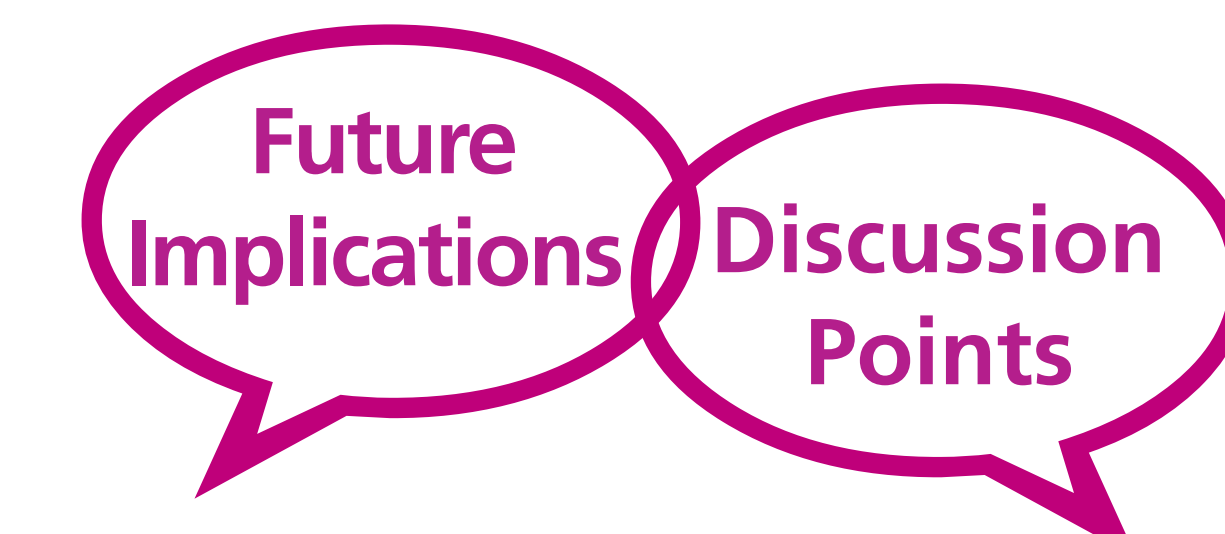


Figure 2. Mean participant FFMQ Scores pre- and post-group. Significant change from pre-group scores (M = 132.23 SD = 17.90) to post-group scores (M = 138.73 SD = 18.21), $t(21) = -2.86$, $p = 0.009$.

Discussion:

- Our results indicated that the mindfulness-based course was feasible within an NHS CAMHS setting. It showed a significant increase in mindfulness scores from pre- to post- group and appeared to be well-received by staff members despite some reported challenges. This suggests that even a brief mindfulness-based intervention of 8 hours can improve mindfulness amongst staff within a workplace setting.
- This is in line with Morgan, Simpson and Smith (2014), who state in a review of 14 studies of Health Care Workers' experiences of mindfulness training that mindfulness can be developed both in the intrapersonal context (in terms of self-care) and/or the interpersonal context (interacting with patients or colleagues).
- Limitations include: small/self-selecting sample, lack of a control group, and the fact that 69.6% of participants had used mindfulness in their personal life prior to attending the course. The study did not explicitly address instructor training or experience, which may influence the effectiveness of mindfulness interventions (Grossman et al., 2004). Furthermore, the lack of significant change for the compassion scales may be due to a lack of emphasis on compassionate-mind content.
- Future research could test participants several months later, to see if their post-group mindfulness scores remain higher than their pre-group levels, and whether there are any improvements in staff well-being/productivity within work.
- It is clear that further research into mindfulness-based interventions for staff is needed in other NHS workplace organisations.



- Is it too much of a challenge for some people to experience mindfulness within a work setting, or with people they know?
- Should mindfulness based-practices be used in all NHS organisations?
- Did staff specifically benefit from the mindfulness practice or are other factors at play e.g. getting away from work, an opportunity to get to know colleagues better, a more cohesive team environment?

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