

A contemporary portrait of the working life of ambulance services staff in Wales

Abstract:

Background: Ambulance services staff are under more pressure than ever. Inadequate numbers face unmanageable workloads. For the first time in over three decades, ambulance services staff in England and Wales have undertaken industrial action over wages and working conditions.

Aims: To understand the wellbeing and working environment of ambulance services staff in Wales.

Methods: An online survey with 594 ambulance services staff. Data were analysed using standard quantitative and qualitative research methods.

Findings: The survey highlights key factors impacting on wellbeing; including work intensification, burnout and trust in management which leads to increasing intentions to leave the profession.

Conclusion: Ambulance services in Wales are reaching a critical tipping point. If the issues raised in this study are not addressed, the outcome will most likely be an accelerating departure from the profession of highly skilled people who are expensive and difficult to replace.

Keywords: Ambulance services staff, Work intensification, Burnout, Wellbeing, Workplace, Wales.

Key Points:

- Ambulance services staff in Wales are under more pressure than ever, with under- resourcing and inadequate numbers of staff facing unmanageable workloads, pressures and demands that impact the quality of care provided to patients and patient safety.

- Ambulance services staff in Wales are approaching a tipping point, with work intensification and burnout being significant factors.
- There is widespread perception among ambulance services staff of little support from and trust in management.
- In these circumstances, support received from family, friends and social networks is crucial.
- Understanding local factors contributing to workplace wellbeing and those that are driving ambulance services staff to consider leaving the profession is significant for Welsh Ambulance Services NHS Trust.
- If not positively addressed, the outcome will most likely be an accelerating departure from the profession of highly skilled people who are expensive and difficult to replace.

Reflective Questions:

- How do we support and care for our professional leaders to foster effective wellbeing strategies?
- What should organisations consider in ensuring a culture of staff wellbeing is embedded in the values and behaviours of all colleagues?
- How do we personally take responsibility for our own wellbeing and the wellbeing of those we work alongside?

Introduction:

The professionalism of ambulance services staff has been highlighted by the COVID-19 pandemic (Awais et al, 2021; Petrie et al, 2022). However, inadequate numbers of staff, unmanageable workloads, unrealistic expectations, burnout, and moral distress, have been compounded by the effects of COVID-19 (Iacobucci, 2021; NHS Confederation, 2021). Since December, 2022, ambulance services staff in

England and Wales have taken industrial action for the first time since 1989. The strikes form part of a wave of industrial unrest across a number of sectors in the UK over wages, pensions and working conditions, as the cost of living rises. In this context, it is therefore important to focus on the wellbeing and working environment of this vulnerable, yet indispensable, group of healthcare workers.

Ambulance Services in Wales:

Throughout the past decade, NHS ambulance services have faced significant reductions in their budgets which have impacted the response and service delivery of these organisations (NHS Providers, 2020). As a consequence, ambulance services struggle to meet performance targets. In July 2022, the Welsh Government announced £3 million to recruit more emergency ambulance staff to improve response times for the most serious cases. This funding was made in addition to the £34m of funding announced in December 2021. Welsh Ambulance Services NHS Trust (WAST) currently experiences turnover at a level which is higher than the NHS Wales average and has the highest sickness absence rates in the NHS (Welsh Ambulance Services NHS Trust, 2022). In these circumstances, ambulance services staff in Wales find themselves working in a healthcare environment that is under increasing pressure to meet rising demand and maintain operational resilience and strategic capability; while the organisation is unable to recruit and retain staff across all workforce groups and disciplines. The implications for an already under pressure NHS Wales ambulance services are significant.

Research Methods:

An online survey was undertaken with the cooperation of ambulance services staff at WAST. The survey was contextualised to reflect the working lives of ambulance services staff in Wales.

A working group consisting of Swansea University and WAST staff, including trade union officials from UNISON and the GMB Union, was formed to manage the launch and promotion of the survey. The survey ran through November, 2021 to February, 2022 and therefore all data collected are current. All potential participants were informed that participation was voluntary and were assured of their anonymity. A total of 594 usable responses were received from ambulance services staff at WAST. All survey scales had been previously validated internationally and published (Holland et al., 2018). In addition to answering specific questions, participants were offered the opportunity of providing comments. A number of these are included in this paper. Study findings were analysed utilising standard quantitative and qualitative research methods.

Ethical approval was gained from Swansea University Research Ethics Committee. In addition, global ethical approval was received from NHS Research Ethics Service on August 12, 2021 (REC Reference: 21/HCRW/0017).

Throughout this paper, workplace wellbeing refers to how comfortable, healthy, happy and satisfied staff are working within WAST. Workplace environment explores the internal relationship of WAST to identify the ways in which each area works and supports the effective running of the organisation.

Research Results and Discussion:

Since March 2020, ambulance services staff have been at the frontline tackling COVID-19. While the pandemic has impacted on all health and social care professional groups, the context of specifically providing acute emergency care for COVID-19 patients is nowhere more evident than in ambulance services practice (Bergen-Cico et al., 2020). The pandemic exacerbated existing and increasing

pressures on ambulance services in responding appropriately and safely while maintaining adequate staffing levels (Beldon & Garside, 2022; NHS Providers, 2020; UNISON, 2022A). Indeed, in September 2022, only fifty per cent of life-threatening calls in Wales were reached within the eight minute target time. This figure equals the worst on record since comparable data began in 2019.¹

Our study findings correspond with other industry-wide indicators. More specifically, it identifies that intensifying pressures and demands exacerbated by increasing staff shortages, bureaucracy and a lack of trust in management, as well as perceptions of being under-resourced, erodes a positive climate for staff morale and voice within the organisation, and impacts on the quality of care provided to patients and to patient safety. Participants told us of feeling entirely 'worn out' from ever increasing workloads and were struggling with working over fifty hours per week; describing themselves as being 'machines'. Seventy three per cent of participants indicated they often experience the volume of work they perform as being intensive. Half of the participants (50 per cent) indicated this was a frequent and daily occurrence. Moreover, a significant majority of participants (71 per cent) indicated that their jobs required them to work very fast at least once or twice per day. A similar proportion (75 per cent) of participants reported their job required them to work very hard several times per day. More than half of the participants (60 per cent) reported increasing workloads left them with little time to complete their work at least once or twice to several times a day. One emergency call handler spoke of their concern for colleagues:

Listening to the distressing phone calls I receive from road colleagues who are struggling with the 12 hours of continued pressure as forced to work alone with a colleague (military) who are unable to assist. There is no

¹ The target is to reach sixty five per cent in eight minutes. On average, WAST dealt with one hundred such calls a day. All figures from Digital Health and Care Wales – October 20, 2022.

respite of this pressure especially given in a job which is near to nothing like what they applied to do.). I am hugely concerned by my frontline colleagues' welfare.

In light of increasing demand and pressures, periodically throughout the pandemic, WAST enlisted the support of the military as part of the as part of the Military Aid to the Civil Authorities arrangement. At the peak, two hundred and thirty five Armed Forces personnel from the British Army, Royal Navy and Royal Air Force were assisting WAST as drivers. This created issues with the GMB Union lodging a dispute with WAST and writing to the Welsh Government, warning the use of the military in emergency situations was putting patients and the public at risk while driving down morale among ambulance services staff.

Significant numbers of ambulance services staff spoke of their intentions to leave the profession. Our survey found more than half of participants indicated they either frequently or very frequently consider leaving (52 per cent) and exploring alternative career opportunities (54 per cent). Approximately one in every five participants (23 per cent) indicated they were exiting the profession within the next year. As one participant put it:

I don't intend to be with WAST much longer ... Everyone I speak to is either looking to retire or are actively seeking other employment as they feel the same as I do; which is a terrible shame as we have some really good people working for us.

Research has widely acknowledged there are increasing signs of poor health and wellbeing including symptoms of depression, fatigue, stress, trauma, sleep disorders, post-traumatic stress disorder, emotional exhaustion, burnout, suicidality and suicide among ambulance services staff (Awais et al, 2021; Beldon & Garside, 2022; Clark et al, 2021; Meadley et al, 2020; Petrie et al, 2022). Even outside of public health crises, evidence suggests paramedics may be at a heightened risk of mental ill health.

In 2019, the mental health charity *Mind* (2019), found 91 per cent of ambulance staff in the UK experienced stress and poor mental health while working for ambulance services. In more recent reports, ambulance services staff reported poorer mental health than police and fire services employees (Mind, 2021; Mind Cymru, 2021). Moreover, ambulance services staff were the most likely to say their mental health had deteriorated since the COVID-19 pandemic, describing the work they perform as being 'absolutely soul destroying' (Khaira, 2022). In our study, a significant number of participants indicated that they did not feel they received support at work from their respective organisations, and the ways in which this impacted on their mental health. The mean score for organisational support at work remained one of the lowest among other indicators at 2.41 out of 5. Moreover, more than half (60 per cent) of participants did not feel that the organisation cared about their wellbeing, with only twenty three per cent indicating that their contributions are being valued by the organisation. As to how this left ambulance services staff feeling, one participant states:

I just feel very unsatisfied in my job. Problems and concerns are voiced often but nothing ever gets done about it. The thought of coming into work make me very stressed and I often consider going sick due to stress but then don't because I feel pressured by WAST to be in work. Senior management seem to care only for numbers and statistics more than staff wellbeing and happiness which is unfortunate.

And another:

I feel so fed up with the job. Poor pay, overworked ... Staff morale is at an all time low. Mental health is also suffering. I feel so fed up and low in mood.

It is therefore unsurprising that, as mentioned previously, WAST experiences turnover at a level which is higher than the NHS Wales average and has the highest sickness absence rates in the NHS (Welsh Ambulance Services NHS Trust, 2022). This is symptomatic of what it termed 'moral injury' (MI). Originally studied in the military context, MI refers to a damaging form of suffering which often ensues from having to act against one's moral core. More recently recognised in the context of frontline healthcare workers during the pandemic, such moral wound may arise from working under considerable pressure in a health and care system that is 'log jammed'. Whilst research on MI in the context of frontline healthcare workers such as ambulance services staff remains in its nascent stages, existing research evidence involving veteran samples indicate the experiences of MI is linked to psychological distress, depression, the experience of PTSD symptoms (Moyo, 2015) and the reliance on maladaptive coping strategies (Williamson et al, 2018).

Given the recognition that trust is an integral factor in influencing organisational success, organisational stability and to employee wellbeing, our survey sought to explore the perceived levels of trust healthcare workers have in both senior management and direct supervisors. The survey asked participants several questions regarding employees' trust in senior management and direct supervisors. Twenty eight per cent of participants indicated they were confident senior management would always treat them fairly. However, half of all participants disagreed or strongly disagreed with this statement. Twenty two per cent of participants reported feeling that senior management sincerely considered employees' points of view. However, more than half of participants (56 per cent) did not share this view. One participant mentions:

I have no confidence in the top management at all. They simply do not care about the crews on the road. We are simply just a number that can be used up and replaced.

This participant has been working in ambulance services for four decades:

Senior Management have become so disconnected from frontline staff mainly through demonstrating a total lack of consideration, along with a disregard to staff welfare and wellbeing. All this was prior to COVID 19, which has added to the burden to the point that I feel exhausted. I have been in this service for 40 years. I'm very proud of my career and the fulfilment it has rewarded me with. Sadly though, I can no longer recommend it as a career path which saddens me immensely.

And another:

We are made to feel like our efforts are worthless from senior management. We are lied to and treated like cannon fodder. So much to the extent that I have recently felt the need to completely take some time away from work for my own mental health. In a short space of time away from work I was a calmer ... Slept better and was close to my immediate family again. In the short space of time that I've been back at work the old problems are emerging ... Worrying about work.

Taken together, the general lack of trust in senior management is particularly concerning.

In these circumstances, participants spoke of the importance of support from family, friends and social networks outside of the organisation. Eighty one per cent of participants reported that their family members have supported their participation in the workforce, with eighty three per cent indicating their family members were understanding that they had to fulfil duties from both work and family domains.

Conclusion:

This paper offers a contemporary portrait of working life for ambulance services staff within WAST.

This study recognises that the multifaceted nature of working conditions and staff wellbeing within the organisation, requires significant review. Exploring factors of workplace wellbeing, the survey results relating to work intensification, burnout and intentions to leave raise concerns regarding increased and competing demands and time pressures ambulance services staff are under, and the ways in which these impact on the wellbeing of ambulance services staff, on the quality of care and patient safety.

The results on burnout among ambulance services staff reinforce work intensification issues as impacting on staff wellbeing and intentions to leave the profession. As a consequence, ambulance services and ambulance services staff in Wales are reaching a critical tipping point. If not addressed positively, the outcome will most likely be a further acceleration of highly skilled staff departing the profession who are expensive and difficult to replace.

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