

# Investigation of wellbeing interventions in NHS staff

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<b>Registration date</b> 17/02/2017	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 04/06/2024	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Stress, anxiety and depression are significant causes of sickness absence among NHS employees, and contribute to the NHS having higher rates of sickness absence than any other public sector organisation in the UK. The effects of mental distress not only impacts healthcare workers as individuals, but can also have negative consequences for their patients via a compromised quality of care. Mindfulness is a technique which involves a specific way of paying attention, non-judgmentally, to the present moment. The development of mindfulness skills can lead to a number of therapeutic benefits including increased compassion for oneself and others, and reductions in negative emotional states. Recent studies have shown that traditionally delivered, face-to-face mindfulness-based treatments among NHS employees, and mindfulness-based self-help (MBSH) treatments among medical students can be effective. Given shortages of trained therapists and the 24/7 nature of NHS working hours, MBSH may offer particular potential among NHS employees in terms of flexibility, accessibility and cost-effectiveness. The primary aim of this study is to investigate the effectiveness of a smartphone-delivered MBSH program called 'Headspace' in reducing stress among NHS staff.

### Who can participate?

Adults who are currently employed by an NHS trust in Kent, Surrey or Sussex who meet the inclusion criteria.

### What does the study involve?

Participants are randomly allocated to one of two groups. Those in group one are given access to Headspace which is a website and smartphone application (app) that primarily provides users with mindfulness meditation practices. Those in group two are told to use Moodzone which is a NHS website that has advice and ideas on how to deal with stress from work. Participants in both groups are asked to use the treatments every day for one month for at least ten minutes per day. They are encouraged to continue to use the websites for a further three months. Participants are followed up at the end of the study to measure their levels of stress.

### What are the possible benefits and risks of participating?

Participants may benefit from learning a variety of techniques on how to reduce stress, anxiety and depression as well as a year's free subscription to the Headspace mobile application and

website, while Moodzone is free to use. There are no direct risks of participating however participants may find it difficult to reflect on their thoughts, feelings and experiences and may feel distress.

Where is the study run from?

This study is run from the University of Sussex and takes place in NHS trusts in Kent, Surrey and Sussex.

When is the study starting and how long is it expected to run for?

October 2015 to March 2019

Who is funding the study?

1. Economic and Social Research Council (UK)
2. Headspace Meditation Limited (UK)

Who is the main contact?

Ms Heather Taylor  
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## Contact information

### Type(s)

Public

### Contact name

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## Additional identifiers

### Clinical Trials Information System (CTIS)

Nil known

### Integrated Research Application System (IRAS)

210175

### ClinicalTrials.gov (NCT)

Nil known

### Protocol serial number

CPMS 32617, IRAS 210175

# Study information

## Scientific Title

A definitive randomised controlled trial investigating two online wellbeing interventions to reduce NHS staff stress

## Acronym

MindSHINE 3

## Study objectives

The primary aim of this study is to investigate the effectiveness of smartphone-delivered mindfulness-based self-help (MBSH) intervention 'Headspace' in reducing stress among NHS staff.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

1. University of Sussex, Sciences & Technology C-REC, 15/10/2016, ref: ER/HT207/8
2. Health Research Authority (HRA), 23/01/ 2017, ref: 16/HRA/ 5525

## Study design

Randomised; Interventional; Design type: Treatment, Prevention, Education or Self-Management, Psychological & Behavioural

## Primary study design

Interventional

## Study type(s)

Treatment

## Health condition(s) or problem(s) studied

Specialty: Mental Health, Primary sub-specialty: Anxiety - stress; UKCRC code/ Disease: Mental Health/ Neurotic, stress-related and somatoform disorders

## Interventions

Participants are allocated to one of two unguided online wellbeing interventions, using block randomisation within the survey platform, Qualtrics.

Participants in the experimental arm are given access to Headspace which is a mindfulness app and website. Headspace can be viewed via either smartphone app (Apple or Android) or website and offers participants psychoeducation and guided mindfulness meditation practices.

Participants in the active-control arm are directed to Moodzone which is a NHS website for helping people to deal with work-related stress. Moodzone is delivered via a NHS webpage and offers advice and exercises designed to help manage work-related stress.

Participants in both arms are asked to engage with the exercises suggested within their given intervention for a minimum of ten minutes per day for the initial 30-days of the study, and are encouraged to continue to engage with their given intervention for a follow-up period of 120-

days. Objective and subjective measures of engagement are measured at follow up. Also, meditation and moderation analysis conducted in order to establish the processes and factors influencing mindfulness-based self-help (MBSH) engagement and outcomes.

## **Intervention Type**

Other

## **Primary outcome(s)**

Stress is measured using the Depression, Anxiety and Stress Scale (DASS – 21; Lovibond & Lovibond, 1995) at baseline and 125 days.

## **Key secondary outcome(s)**

1. Depression is measured using the DASS-21 at baseline, day 35 and 125
2. Anxiety is measured using the DASS-21 at baseline, day 35 and 125
3. Mindfulness is measured using the Five-Facet Mindfulness Questionnaire – Fifteen Items (FFMQ-15; Baer et al., 2008; Gu et al., 2016) at baseline, day 35 and 125
4. Self-compassion is measured using the Self-Compassion Scale – Short Form (SCS-SF; Raes, Pommier, Neff, & Gucht, 2011) at baseline, day 35 and 125
5. Well-being is measured using the Short Warwick-Edinburgh Mental Well-being Scale (SWEMWS; NHS Health Scotland, University of Warwick & University of Edinburgh, 2007) at baseline, day 35 and 125
6. Burn-out is measured using the Maslach Burnout Inventory (MBI; Maslach & Jackson, 1986) at baseline, day 35 and 125
7. Compassion-for-others is measured using the Compassionate Love For Humanity Scale (CLS; Sprecher, & Fehr, 2005) at baseline, day 35 and 125
8. Rumination is measured using the Ruminative Response Scale (RRS; Nolen-Hoeksema & Morro, 1991; Treynor, Gonzalez, & Nolen-Hoeksema, 2003) at baseline, day 35 and 125
9. Worry is measured using the Penn State Worry Questionnaire (PSWQ; Mayer, Miller, Metzger, & Borkovec, 1990) at baseline, day 35 and 125
10. Sickness absence concerning the 3 months prior to the intervention, and the 3 months following the initial 30-day intervention period is measured using a non-validated questionnaire at baseline and 125-days, and where consent has been obtained, via objective sickness absence data provided by NHS Human Resources departments, after trial completion.
11. Adherence to and engagement with both interventions is measured using non-validated questionnaires and objective usage data provided by Headspace for participants assigned to the Headspace condition, at day 35 and 125
12. Beliefs about engaging with Headspace is measured using a non-validated questionnaire at baseline and 35 days
13. Expectations of Headspace and Moodzone is measured using non-validated questionnaires at baseline
14. A control variable of prior mindfulness experience is measured using a non-validated questionnaire at 125-days
15. Stress (as a secondary outcome when measured at these timepoints) is measured using the DASS-21 at baseline and day 35

## **Completion date**

01/04/2019

## **Eligibility**

### **Key inclusion criteria**

1. Aged 18 years or older
2. Currently employed by an NHS trust in Kent, Surrey or Sussex
3. Work in a role that involves direct contact with patients for at least one day per week .
4. Currently in work (i.e. are not on long term sickness absence)
5. Not currently undertaking and/ or are willing to refrain from engaging in any other psychological intervention during the 125-day course of the study
6. Self-reported sufficient English language ability to read and listen to the MBSH intervention materials
7. Regular personal access to an Apple or Android smartphone/ tablet or to a computer with internet access

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

**Key exclusion criteria**

Not meeting inclusion criteria.

**Date of first enrolment**

20/02/2017

**Date of final enrolment**

01/10/2018

**Locations****Countries of recruitment**

United Kingdom

England

**Study participating centre****University of Sussex (Lead centre)**

University of Sussex

Falmer

Brighton

United Kingdom

BN1 9QH

**Study participating centre**  
NHS Trusts in Kent, Surrey and Sussex

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United Kingdom

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## Sponsor information

**Organisation**  
University of Sussex

**ROR**  
<https://ror.org/00ayhx656>

## Funder(s)

**Funder type**  
Research council

**Funder Name**  
Economic and Social Research Council

**Alternative Name(s)**  
Economic and Social Research Council (ESRC), ESRC

**Funding Body Type**  
Government organisation

**Funding Body Subtype**  
National government

**Location**  
United Kingdom

**Funder Name**  
Headspace Meditation Limited

# Results and Publications

## Individual participant data (IPD) sharing plan

The current data sharing plans for the current study are unknown and will be made available at a later date

## IPD sharing plan summary

Data sharing statement to be made available at a later date

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>		25/08/2022	26/08/2022	Yes	No
<a href="#">Participant information sheet</a>	version 8.0	03/05/2018	04/06/2024	No	Yes
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes