

LETTERS



MEET THE ROBODOCS

Misunderstanding the meaning of resilience

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McCartney's views on resilience training as advocated by the new head of the General Medical Council, Terence Stephenson, show that she misunderstands the purpose of resilience and resilience training.¹ As a member of the Army Reserve and of my NHS trust's resilience committee, I am disturbed by this misunderstanding—it is particularly poignant that McCartney's piece appeared in an issue of *The BMJ* dealing with suicide and divorce in doctors.

Resilience is not about not complaining, working harder, or unquestioning obedience, nor is it about being a Robodoc. It is about accepting that no matter how good you are, as an individual or a team, things will go wrong, and about developing mechanisms to mitigate the effects of this. The fact that even excellent doctors make mistakes, or that patients and relatives will still complain about doctors who don't make mistakes, and that patients will still be harmed, is rarely, if ever, mentioned in undergraduate or postgraduate medical training. Resilience training acknowledges this, and allows both individual clinicians

and the teams and institutions they work in to plan how to deal with this while minimising adverse effects in those involved and other patients.

As Terence Stephenson says, resilience is something that the military does well, although it is not unique in this. Resilience is something that medical students and young trainees need before something devastating happens, either to themselves or to a colleague. It would be a pity if others in charge of training make the same mistake as McCartney about the meaning of resilience.

Competing interests: None declared.

1 McCartney M. Meet the Robodocs: resilient automatons who do as they're told. *BMJ* 2015;350:h566. (2 February.)

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