

Oncology Nurse Burnout

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Outline

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- **Penn Medicine Current Programs**
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The Nature of Oncology Nursing

Oncology nurses are routinely exposed to **human suffering** which leads to great **emotional distress** (Coetzee & Klopper, 2010).

They have the ability to create and maintain **relationships** with patients and families which then causes them to feel a greater sense of **burden and grief** (Wu, Singh-Calson, Odell, Reynolds & Su, 2015) especially after traumatic events such as **death, prognosis of terminal illness and suffering**.

44% of inpatient oncology nurses reported some degree of **burnout** according to a study done at Memorial Sloan-Kettering Cancer Center (N = 153) (Emanuel, Ferris, von Gunten, & von Roenn, 2011).

Background

Research has demonstrated that **compassion fatigue and burnout** are two of the most commonly reported **work-related consequences** for nurses (*Sabo, 2011*).

Burnout and compassion fatigue contributes and leads to **turnover intention and patient dissatisfaction** (*Lee, Kuo, Chien, & Wang, 2016*).

Turnover costs an average of **\$20,561** in the United States per nurse (*Duffield, Roche, Homer, Buchan, & Dimitrelis, 2014*).

Nurse retention assists in closing the nursing shortage gap by both increasing job satisfaction and also by facilitating patient relationships by way of greater continuity of care and improved communication among interdisciplinary professionals. (*Wu, Singh-Calson, Odell, Reynolds & Su, 2015; Oncology Nursing Society, 2015*).

What is Burnout?

Syndrome defined as a combination of **emotional exhaustion**, **depersonalization**, and **reduced personal accomplishment**.

Presents as disengagement, irritability, frustration, hopelessness, loss of motivation & depression.

Has a rapid onset and resolution, suggesting that **removal of stressor source may be effective**.

Maslach Burnout Inventory

The MBI is a widely used validated measure of burnout in human service professions, including oncology.

22 item scale which is comprised of 3 subscales

- emotional exhaustion
- depersonalization
- reduced personal accomplishment

PICO Question

Does implementing mindfulness practice and education in Oncology Nurses decrease burnout?

P: Oncology Nurses

I: Mindfulness practice and education

C: No intervention

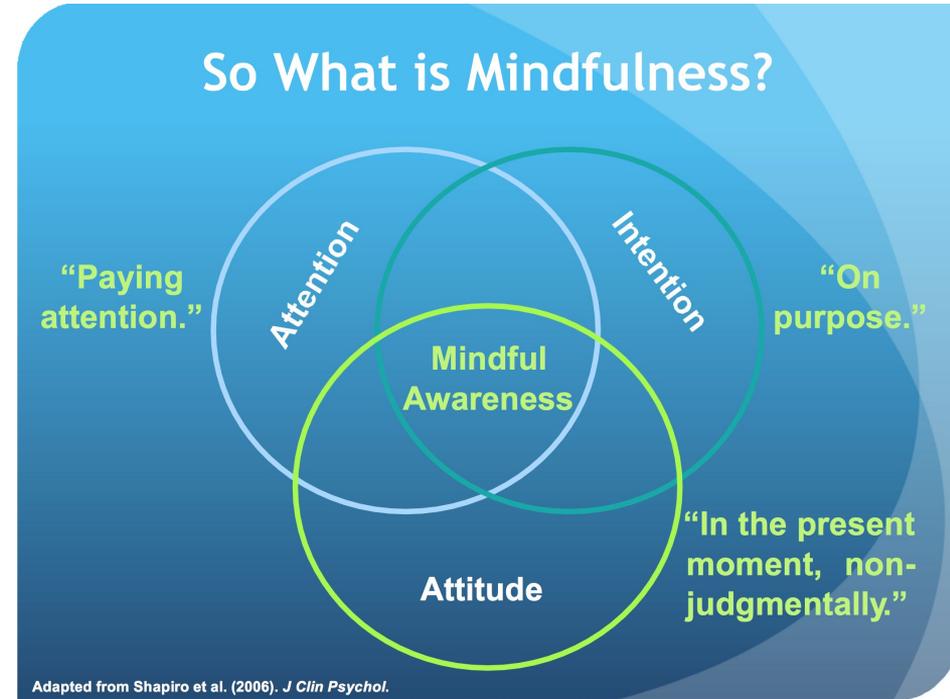
O: Decrease in burnout

Mindfulness Based Stress Reduction

Being purposefully present and attentive in the moment to one's experience without judgment or resistance (*Attention, Intention, Attitude*).

Training to process stressful situations and to notice the subtle signs of stress in order to curtail them before they escalate.

Mindfulness practices include various forms of meditation as well as debriefing & discussion.



Penn Medicine's Offerings to Nurses

Center for Nursing Renewal

- Yoga
- Meditation and relaxation room
- Massage chairs

Nursing Support Group

- Monthly meeting with Social Worker (RP3: Vanessa Jackowski)

Jessica Jarmon, MSW, Staff Support Coordinator

- Employee resource outside of the EAP
- Can meet 1 on 1 or in groups with nurses onsite or offsite.

Employee Assistance Program

- 24 / 7 service which is 100% paid by UPHS
- Toll-free 24-hour access to masters-level intake counselors
- 8 Free face-to-face counseling sessions

Penn Behavioral Health Mindfulness Program

4 Week Mindfulness Skills Group

- Teaches the core principles and practices of mindfulness.
- Each class focuses on a theme linking mindfulness, stress, and quality of life with experiential guided meditations.

Individual Mindfulness Sessions

Cost: Each class / session is covered by an available EAP session.

Drop in Sessions: Thursdays, 12:15pm - 12:45pm; 3440 Market Street

- FREE for those who completed the 4-week group course or participate individually.

Mindfulness Hotline 844-291-1128

- Introduces mindfulness and how it can help address stress, burnout, and quality of life.
- Offers explanation of multiple mindfulness meditation exercises.

Mindfulness Apps

<http://www.pennbehavioralhealth.org/mindfulness/>

Review of Literature Overview

Stress Levels of Nurses in Oncology Outpatient Units

(Ko & Kiser-Larson, 2016)

Effectiveness of a Mindfulness Education Program in Primary Health Care Professionals

(Asuero, Queraltó, Pujol-Ribera, Berenguera, Rodriguez-Blanco & Epstein, 2014)

The Effects of Mindfulness-based Stress Reduction on Nurse Stress and Burnout, Part II: A Quantitative and Qualitative Study

(Asuero, Queraltó, Pujol-Ribera, Berenguera, Rodriguez-Blanco & Epstein, 2014)

Development and Evaluation of Targeted Psychological Skills Training for Oncology Nurses in Managing Stressful Patient and Family Encounters

(Traeger, L., Park, E. R., Sporn, N., Repper-DeLisi, J., Convery, M. S., Jacobo, M., & Pin, W. F. 2013)

Review of Literature:

Stress Levels of Nurses in Oncology Outpatient Units.

Descriptive, cross-sectional study exploring coping behaviors and interventions of 40 RNs and LPNs who completed the Nursing Stress Scale, three open-ended questions, and a demographic questionnaire

Results: Nurses stated that more mindfulness meetings could help in processing occupational stress

- Debriefing after the death of a patient
- Monthly grief meetings to discuss patients who have died
- Weekly yoga offerings

Conclusion: Nurse educators and leaders should develop exercise and support groups, counseling resources, and stress management classes to assist nurses in effectively managing their stress

(Ko & Kiser-Larson, 2016)

Review of Literature:

Effectiveness of a Mindfulness Education Program in Primary Health Care Professionals

Randomized control trial of 68 health care professionals in Spain which found that mindfulness-based programs could **reduce burnout and mood disturbance, increase empathy, and develop mindfulness.**

Intervention: 8 weekly 2.5 hr sessions + one 8 hr session

- **Educational presentations:** on thought awareness, biases, event processing, conflict management and burnout prevention
- **Formal mindfulness meditation:** yoga, mindfulness practice
- **Narrative and appreciative inquiry exercises:** Story writing about personal experiences in practice. Listening and sharing strengthening
- **Discussion:** Share the experience and discuss the effects of mindfulness practice

Conclusion: Mindfulness-based programs should be used as part of continuing professional education to reduce and prevent burnout, promote positive attitudes among health professionals, strengthen patient-provider relationships, and enhance well-being.

Review of Literature:

The Effects of Mindfulness-based Stress Reduction on Nurse Stress and Burnout, Part II: A Quantitative and Qualitative Study.

Randomized control trial of 27 RNs at LVHHN (14 in treatment group and 13 in control group) in an 8-week program that meets approximately 2.5 hours a week and includes a 6-hour daylong retreat between the 6th and 7th weeks

Results (*measured by both the Maslach Burnout Inventory Scale and an Evaluation Form*):

Participants showed significant reductions in emotional exhaustion and depersonalization, and a trend toward significance in their improvement in sense of personal accomplishment. The importance of MBSR to the participant was rated 9.3/10

Conclusion: Mindfulness Based Stress Reduction should be implemented as a powerful intervention to address burnout, however, it is even more powerful when viewed as part of a multifaceted effort.

(Cohen-Katz, J., Wiley, S. D., Capuano, T., Baker, D. M., & Shapiro, S, 2005).

Review of Literature:

Development and Evaluation of Targeted Psychological Skills Training for Oncology Nurses in Managing Stressful Patient and Family Encounters

26 outpatient chemotherapy infusion nurses at Massachusetts General Hospital Cancer Center participated in a focus group providing psychological skills training to combat burnout and stress.

Intervention: Focus groups followed the topics of: (a) rewarding patient and family encounters, (b) difficult encounters, (c) ramifications and coping strategies for difficult encounters, and (d) training needs and preferences.

Results (*measured by both the Maslach Burnout Inventory Scale and Perceived Stress Scale*)

Focus groups indicated strong commitment among nurses to psychosocial care. Psychological skills training for managing difficult encounters showed **feasibility, acceptability, and potential benefit in reducing emotional exhaustion and stress**. At two months, participants showed reductions in emotional exhaustion ($p = 0.02$) and stress ($p = 0.04$).

Conclusions: Implications for Nursing: Brief training that targets sources of clinical stress may be useful for nurses in outpatient chemotherapy units.

Recommendations for Practice

Oncology nurses need help dealing with the psychosocial implications of their care:

- Mindfulness-based programs
- Advertising available programs on units/ in break rooms/ via email
 - Include signs and symptoms of burnout & stress
- Create a burnout initiative within the hospital including the multitude of resources already available
- Include mindfulness practice during monthly support group meetings
- CE Credit
- Promote mindfulness apps
- Include mindfulness programs and training in nursing school

Suggestions for Future Research

- More RCT of MBSR among nurses, particularly in oncology
- Explore the cost / benefit of making programs mandatory for nurses
- Benefit of including mindfulness programs in nursing school

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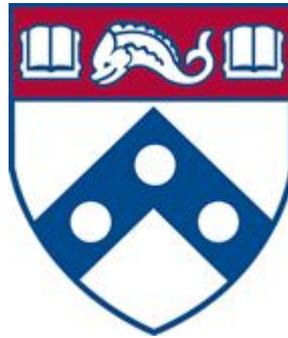
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