

Dumke College of Health Professions

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ABSTRACT

Due to workplace demands and traumatic stressors, the majority of nurses report experiencing burnout, leading many of them to consider leaving the nursing profession. ICU nurses are at an increased risk of developing psychological disorders, such as PTSD and burnout syndrome, leading to an even higher turnover rate which creates not only a large financial burden on the healthcare system but also has profound mental health effects on those nurses. Evidence has shown that resiliency is a trait, both inherent and learned, that help nurses combat the negative psychological effects that lead to burnout. A literature review was conducted that identified not only the effectiveness of resiliency against burnout but also identified strategies and training to improve nurse resiliency, decrease burnout, and minimize turnover. The purpose of the project is to use those strategies in creating a resiliency toolbox for the nurses in the burn trauma ICU. The effectiveness of the strategies will be evaluated using a pre-post design. (1,2)

PICO QUESTION

For nurses working in the Burn Trauma Intensive Care Unit, does implementing a resiliency toolkit reduce reports of burnout and increase intention to stay compared to nurses that do not receive the resiliency toolkit?

LITERATURE REVIEW

A literature review was undertaken to explore the effectiveness of resiliency training programs to reduce reports of nurse burnout in the intensive care unit (ICU). Four themes emerged from the literature regarding nurse resilience and burnout.

- The first theme is based on common stressors identified in critical care nursing, which can lead to professional burnout (1)
- The second theme explored the effects of burnout on nurses and the healthcare system

 (3)
- The third theme examined the role that resiliency can play in preventing or reducing burnout and showing traits of a resilient nurse
- The fourth theme identified strategies to increase resiliency in ICU nurses (4)
- Turnover among ICU nurses is as high as 25-60%, costing hospitals over \$200,000/year (2)
- Resiliency trainings have been shown to combat feelings of burnout in nurses (2)

Resiliency Toolkit Implementation in the Burn Trauma Intensive Care Unit

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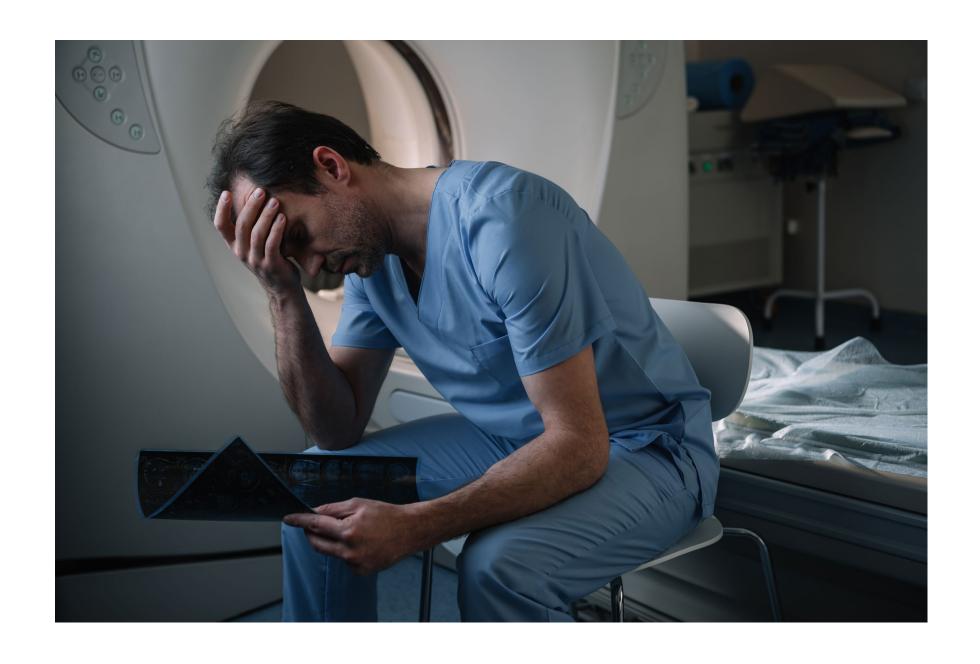
PROJECT METHODOLOGY

The purpose of this master's project is to implement strategies to increase resiliency, reduce burnout, and promote retention for nurses in the Burn Trauma Intensive Care Unit (BTICU) by developing a resiliency toolkit that can be used during shift change safety briefings. Six deliverables were created to obtain this goal.

- (a) Pre- and post-survey given to measure the nurses' perceived resiliency and level of burnout.
- (b) Pre- and post-survey given to measure the nurses' intent to stay on the BTICU.
- (c) Biweekly resiliency tips to be included in the Clinical Practice Council nursing tips sheet in the Unit.
- (d) PowerPoint of project description and implementation delivered during a charge nurses meeting.
- (e) PowerPoint of introduction and goals delivered during a general staff meeting.
- (f) Resiliency toolkit created, providing the charge nurses short exercises to implement.
- (g) Plan and implementation of project timeline developed.

RESILIENCY TOOLKIT

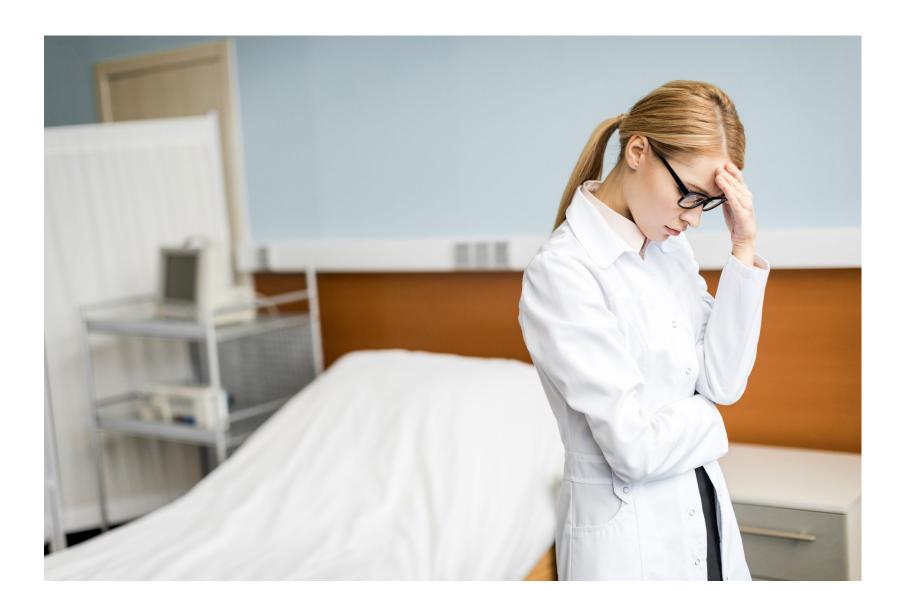
The toolkit shows different resiliency exercises that can be used throughout the shift. The resiliency toolkit provides a list of short, easy to implement exercises that charge nurses can choose from to use during shift change safety briefings and throughout the shift to prompt nurses to use the exercises to increase their resiliency.



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IMPLEMENTATION AND EVALUATION

The plan for this master's project begins by giving the pre-surveys and introducing the resiliency toolkit to the BTICU nurses during a staff meeting. Following the presentation, a resiliency and retention survey will be emailed to all nurses on the unit. Each shift on the BTICU starts in a conference room with a safety briefing in which the outgoing charge nurse provides the oncoming nurses an update and safety concerns for each of the 15 patients in the BTICU, and then patient assignments are made. These safety briefings typically last 10-15 minutes. In subsequent shifts, the charge nurses will be asked to set aside 1-3 minutes of the safety briefing to choose and implement a resiliency exercise chosen from the resiliency toolkit. The nurses will participate in these exercises for six weeks to expose each nurse to multiple exercises and provide opportunities for the nurse to implement the strategies into their practice to increase their resiliency and, thus, decrease their symptoms of burnout. After the six weeks conclude, the nurses will be sent a follow-up resiliency and retention survey. The data will be compared and a summary of the project and the results will be provided to the management team of the BTICU.





FRAMEWORK

The promoting action on research implementation (PARIHS) framework mirrors the multifaceted nature of the many factors involved when implementing evidence into practice. Because resiliency is a broad concept, addressing this clinical problem needs a narrow focus with specific evidence and context driving the application strategy. The PARIHS model uses a linear application model, moving from low to high, with evaluation based on where outcomes fall along this continuum. Within this continuum, one can analyze efficacy by comparing the baseline to the outcomes. Because of clear and concise evidence required by this framework, it can easily be disseminated and applied broadly (5)

CONCLUSIONS

The research that guided and supported the development of this project demonstrates that nurses are not only experiencing burnout but also psychological effects such as PTSD, anxiety, and depression due to the stressors of ICU nursing. These nurses are leaving the bedside in rates higher than nurses are in general, and this turnover is creating a financial burden on the healthcare system. Turnover also can impact patient care and outcomes when seasoned nurses leave, only to be replaced by newer, less experienced nurses. Numerous studies exist for using resiliency training as a tool to decrease burnout in nurses. Nurses that identify as resilient are likely to describe themselves as optimistic, hopeful, flexible, and able to critically think through problems. This project aims to implement an easy-to-use resiliency toolkit composed of short, thought-provoking exercises designed for nurses in a burn trauma ICU. Using a pre- and post-survey, results will be examined for the effectiveness of the exercises in reducing feelings of burnout, increasing resiliency, and promoting intent to continue working on the burn trauma ICU.

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