

A Proposed Project on An Interprofessional Approach to Promote Resiliency

Through Mindfulness and Self-Care Practices in the Acute Care Setting

Kent Brouwer, BSN, RN, Jordan Potter, Melanie Hardin Pierce, DNP, RN, APRN, ACNP-BC

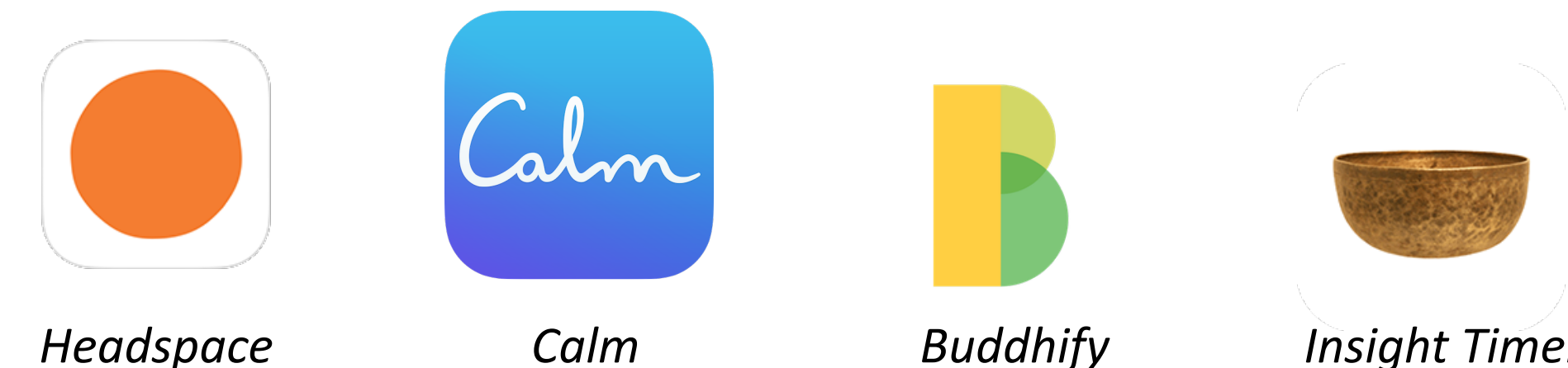
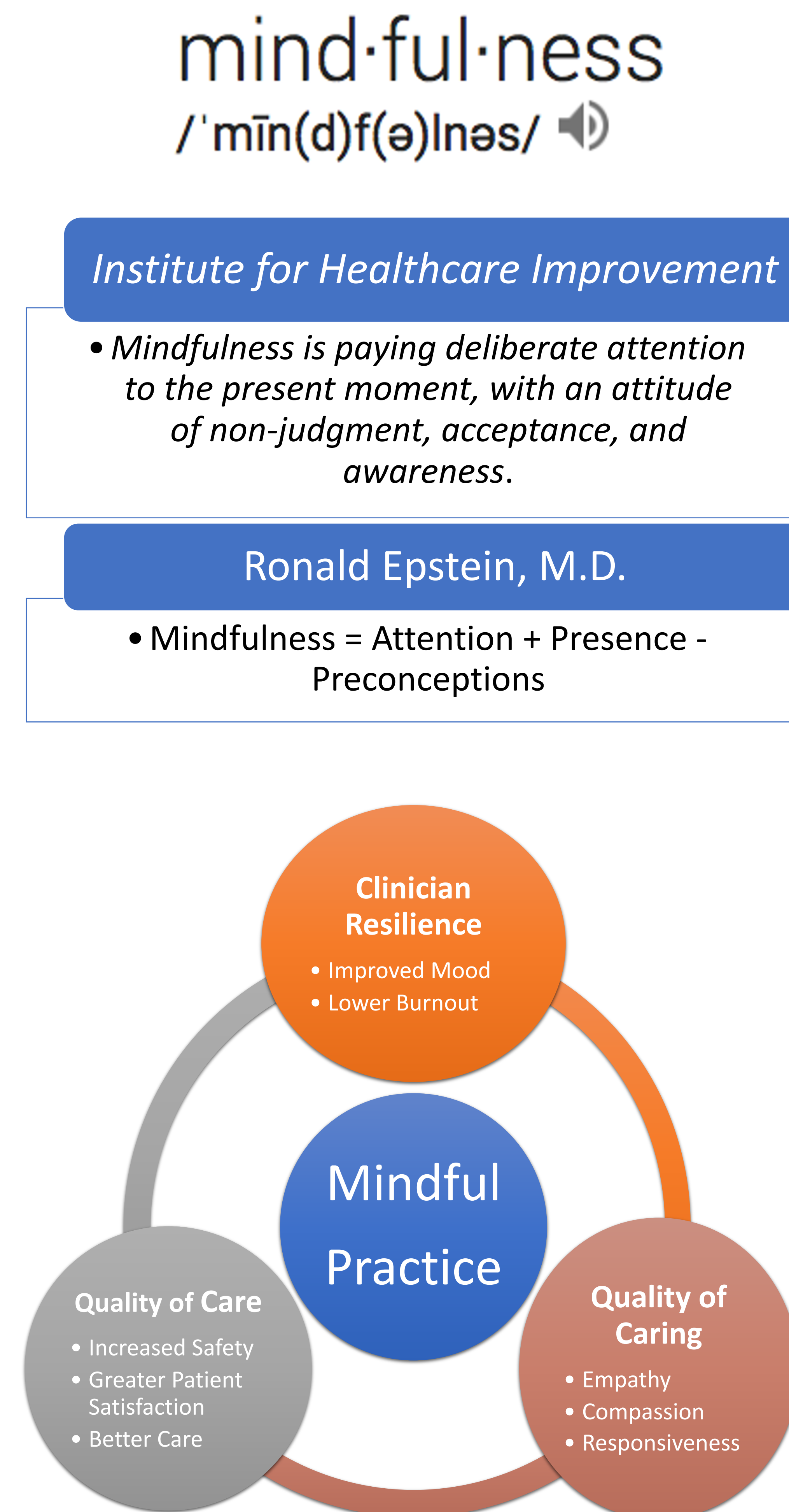


Background

- By 2025, the U.S. will be “short 90,000 physicians and 500,000 nurses” (Bureau of Labor and Statistics, 2016)
- About 18% of nurses leave the profession within a year (RN Work Project, 2017)
- About 60% of nurses leave the profession within eight years (RN Work Project, 2017)
- Burnout and compassion fatigue are on the rise among all healthcare professionals (Lyndon, 2015)
- Approximately 82% of U.S. nurses report feeling overly stressed from work (ANA, 2015)
- Burnout and compassion fatigue are both multifaceted issues with many causative factors
- The rates show that burnout and compassion fatigue affect the entire team, including the patient
- Brief interventions that can be used in the acute care setting to reduce burnout and compassion fatigue are needed to improve retention of the healthcare workforce (Luken & Sammons, 2016)

Objectives

- To determine if a brief mindfulness intervention can be utilized to improve self care and decrease burnout for nurses working in an acute care setting (utilizing markers of burnout and self-care)
- To find a mindfulness intervention that can be used in a variety of health professions and settings
- To observe at least a fifty percent reduction in markers of burnout among study participants and see a positive correlation between self care measures and decreased rates of burnout



Methods

Site: A progressive care cardiovascular floor at UK Chandler Hospital

Participants: Nurses who have been working >1 year due to increased risk for burnout (RN Work Project, 2017)

- Will be randomly assigned to experimental (mindfulness) or control (matched activity) conditions

Experimental Condition:

- Practices of mindfulness could include guided meditation through a mobile device application, such as Headspace® (options listed in the bottom figure)
- Practices will be incorporated into the workday and during days off

Control Condition:

- Comparable behavioral activities (games) assisted by the use of a mobile device application that does not involve mindfulness
- Practices will be identical to the mindfulness condition

Measures:

- Markers such as anxiety, depression and empathy will be measured using the Maslach Burnout Inventory, the Perceived Stress Scale, and the Smith Anxiety Scale (Gilmartin et al., 2017)
- Feasibility measures will include recruitment of enough participants to power statistical significance, smartphone accessibility, and actual utilization of headspace application
- Measures of self care will include happiness, sleep hygiene, emotional regulation, and mindful acceptance (mindfulness)
- Quantitative data collected at baseline and after implementation

Data Analysis

- Complete a regression analysis pre and post implementation of the placebo and experimental groups
- Complete a chi-squared test of independence on the measurements of stress and burnout plotted with the self-care activity or exercise