

# Increasing Resiliency and Reducing Burnout through Mindfulness Based Stress Reduction (MBSR)

Elizabeth Hanna, BSN, MSc, AGANP Student University of Utah (2019)

## Introduction/ Significance

Nursing is notorious for high turnover, low retention, and burnout. The increasing complexity of medicine combined with an aging population means increased expertise and increased workload, during a predicted nursing shortage.

Burnout impacts the individual experiencing it and their colleagues like a contagion and thus should be considered an environmental issue. It contributes to poor outcomes for patients by creating conflict and stress among health care professionals leading to increased medical errors and ineffective delivery of care.

MBSR uses cheap and effective methods of relaxation, meditation and self-care techniques to manage stress, focusing on the way we react to and view stressors in the environment, equipping us with tools to better cope in stressful situations.

## Aims

Develop and determine the utility of a condensed 4-week online MBSR course to increase resiliency and reduce burnout among med-surg nurses.

### The Intervention:

4 forty-five-minute online lessons, consisting of bitesize interactive activities including; audio, video, interactive and passive learning activities

#### Topics:

- What is MBSR
- Burnout and Compassion Fatigue
- Self-Care and Self Compassion
- Moving forward/ Lifelong Habits

#### Cohort:

Nurses with 1+ years’ experience on; Acute Medicine, Post-Surgical, Telemetry, and the Float Pool were recruited via flyers, email and word of mouth. Interested participants were sent links to the surveys and auto-invited to the lessons upon completion.

#### Setting:

121 bed federally funded teaching hospital serving veterans in Wester United States

## Methods to Measure Effectiveness

Pre\* and post surveys delivered via REDCap to determine levels of burnout, resiliency and intent to stay utilizing the following tools;

- Maslach Burnout Inventory (MBI)
- Professional Quality of Life (ProQol 5)
- Resiliency Scale (RS14)

*\*The pre-survey also included optional questions on basic demographics.*

#### Current participation\*:

|                          |    |
|--------------------------|----|
| Filled in initial survey | 30 |
| Completed lesson 1       | 19 |
| Completed lesson 2       | 9  |
| Completed lesson 3       | 7  |
| Completed lesson 4       | 5  |
| Completed post-survey    | 4  |

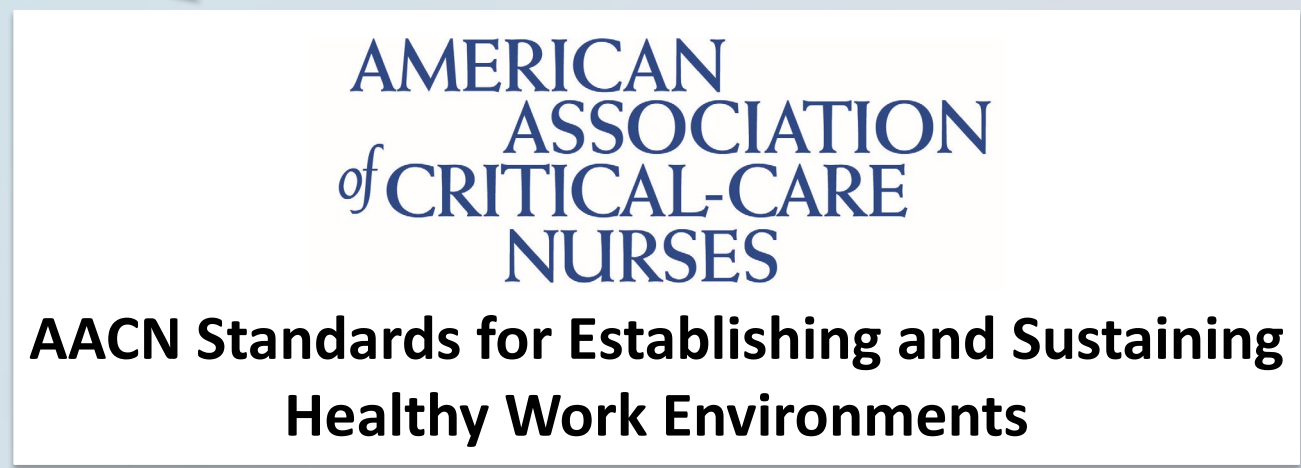
*\*Due to continuous enrollment, participants finish at different times but not all who started will complete the lessons.*

## Statements by Leading Bodies

“Nurses should model the same health maintenance and health promotion measures that they teach... Fatigue and compassion fatigue affect a nurse’s professional performance and personal life. To mitigate these effects, nurses should... maintain their own health and wellbeing”

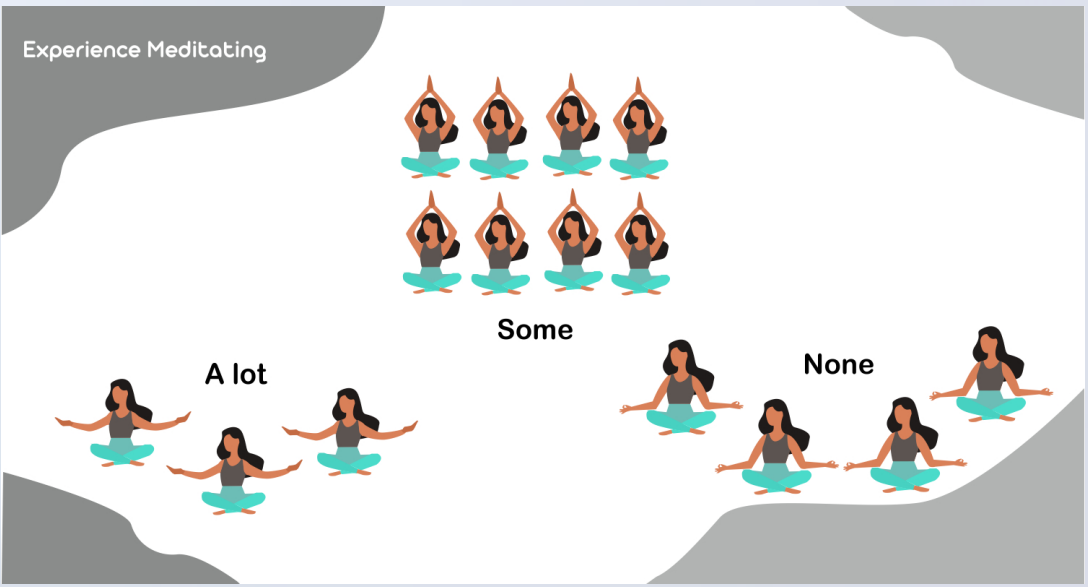


“Nurse leaders must fully embrace the imperative of a healthy work environment, authentically live it, and engage others in its achievement” and “Nurse leaders [must] ensure the design of systems necessary to effectively implement and sustain standards for healthy work environments”



## Expected Outcomes

- Pre-surveys variations in RS14 will be the greatest; resiliency is highly dependent on temperament and personal factors, and lasting change in resiliency overall would require more time and personal commitment to change ingrained habits and perceptions
- ProQoL/MBI scores will be similar across the cohort due to shared experiences and the exclusion of new nurses who are more likely to experience burnout.
- ProQoL/MBI scores will improve in post survey as MBSR has been shown to improve these areas in previous studies
- So far, 100% of the completers plan on using MBSR techniques (yoga, journaling, STOP technique, etc.) in their everyday life and were interested in learning more about mindfulness at the end of the course, this is likely to continue due to the high number of participants with prior experience meditation and the effects of self-selection.



## Challenges

- Lack of understanding of resources available to staff for wellness among inpatient hospital staff, although the Employee Assistance Program is well established and utilized.
- Many new wellness initiatives are not cohesive as this is an area that has recently received a lot of attention and new staff but hasn’t had time to build the infrastructure.
- Nursing culture of self-neglect is seen as dedication, so few nurses take formal breaks.
- The perceived stigma of mental illness within the nursing profession continues and there has been no “Mt Sinai” moment, yet.
- Shiftwork making additional “training” activities difficult; even online, flexible courses require time.
- The overall perception of MBSR for some is still that it is a bit too esoteric due to its Buddhist origins.

## Possible Solutions

- CME credit for MBSR
- Mindfulness and Self-Care Identified as a Required Competency
- Raise Profile of resources available to staff
- Encourage nursing participation on existing Employee Wellness Committee

## Contact

Elizabeth Hanna elizhannanp@gmail.com

