

Title:

Promoting Wellness and Mindfulness for Nurses

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Session Title:

Interprofessional Education and Collaboration

Slot:

E 02: Saturday, 18 March 2017: 10:15 AM-11:00 AM

Scheduled Time:

10:15 AM

Keywords:

Mindfulness, productivity and wellness

References:

Howland, L.C., & Bauer-Wu, S. (2015). The mindful nurse. *American Nurse Today*. 10 (9) available at: <https://americannursetoday.com/mindful-nurse/>

Smith, S.A. (2014). Mindfulness-based stress reduction: an intervention to enhance the effectiveness of nurses' coping with work-related stress. *International Journal of Nursing Knowledge*. 25 (2) 119-30. doi: 10.1111/2047-3095.12025. Epub 2014 Feb 26.

Abstract Summary:

This presentation will present the process of designing, implementing and evaluating a series of personal wellness and mindfulness for nurse leaders and graduate nurses in an acute care healthcare facility. The desired outcomes are improved nurse morale, enhanced retention and improved patient satisfaction.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
To outline the purpose of wellness and mindfulness education for nursing staff	-Nurses often state they are unable to "take a break", "eat lunch" or "go to the bathroom" because they are too busy --->not healthy for the nurse --->not good for patient safety --->not conducive with quality care --->not beneficial to team work Why nurses need to practice wellness and mindfulness ---> "put on your oxygen mask first and then care for others" - the same is true in nursing practice --->caring for self and colleagues allows better care for patients.
To share the design, implementation and evaluation of a program to promote wellness and mindfulness	Promoting wellness and mindfulness for nurses "Put on your oxygen mask first...then help others" Design: ---> goals and purpose of

	<p>the program ---> Selecting participants/ target audience ---> why would a nurse want to participate Implementation: --->Session content --->frequency of sessions --->prioritizing with needs of a busy clinical setting Evaluation: ---> pre and post participation measures: -----*Hamilton Anxiety Scale, the Self-Compassion Scale and the Perceived Wellness Scale.</p>
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Abstract Text:

This presentation will share the design, implementation and evaluation of a series on wellness and mindfulness for nurses. Nurses often state they are too busy to take a break or lunch, to go to the restroom or even to take a deep breath and reflect for a moment. But in order to provide quality care for others, one must first be present, care for themselves and feel nurtured and supported. Like the safety announcement on an airplane, put your oxygen mask on first...then help others. This presentation shares our experience in providing nurse leaders and first year nurses the tools needed to re-energize, re-focus and re-center and to allow them to have the energy, caring compassion and patient centered focus when providing patient care as well as when working with other member of health care team.

The series was designed as twice/month roundtables for cohorts of nurse leaders and nurses in their first year of professional nursing practice. The cohort of nurse leaders and nurses in the first year of practice were purposefully designated for this project. Nurse leaders play a key role in establishing the unit culture and for promoting high quality, patient centered care. As the leadership group becomes knowledgeable about and practitioners of mindfulness, they will be able to support their staff to become more aware of the importance of taking care of themselves, in order to better interact with others and to care for their patients. As identified by the American Organization of Nurse Executives, nurse leaders serve as initiators and the primary influence in creating positive, safe and healthful practice/work environments. The second cohort, nurses in their first year of professional practice are particularly vulnerable as they transition from the role of student nurse to professional nurse. In addition, these new nurses are often working night shift, where caring for self is critical and where they may have less interaction with and access to the resources of the organization. Providing this group mindfulness training may enhance employment retention as well as allow them to model self-care behaviors for other staff in the healthcare environment. The organization makes a significant financial investment in the hiring and orientation of new nurses. When these individuals leave a position because of stress, burnout or feeling overwhelmed the cost to the organization is between \$50,000.00-100,000.00. In other words, supporting new nurses during the first year of practice is significant to career trajectory, quality patient care and the financial health of the organization.

Each interactive session was 60 minutes in duration and presented the participants with techniques to center themselves, to relax, reflect and re-energize, and to care for themselves so they are able to care for others. Group size is limited to 12 participants to encourage deep sharing and reflection.

Participants completed pre- and post-intervention survey related to anxiety, self-compassion and perceived wellness to demonstrate if the series makes a difference. Quantifiable outcomes of participation include a decrease in the participant's score on the anxiety scale and an increase in the score on the self-compassion and perceived wellness scales. In addition, patient satisfaction score before and after the intervention are being analyzed.

To facilitate replication of this endeavor by others, this presentation will focus on the process of designing, implementing and evaluating this program in a busy, acute care organization as well as the challenges and opportunities we learned from in the process.

