

Pittsburg State University

Pittsburg State University Digital Commons

Posters

2023 Research Colloquium

2023

Evaluation of Nurse Burnout and Currently Used Prevention and Treatment Interventions

Karina Burton

Pittsburg State University

Follow this and additional works at: https://digitalcommons.pittstate.edu/posters_2023

Recommended Citation

Burton, Karina, "Evaluation of Nurse Burnout and Currently Used Prevention and Treatment Interventions" (2023). *Posters*. 3.

https://digitalcommons.pittstate.edu/posters_2023/3

This Article is brought to you for free and open access by the 2023 Research Colloquium at Pittsburg State University Digital Commons. It has been accepted for inclusion in Posters by an authorized administrator of Pittsburg State University Digital Commons. For more information, please contact digitalcommons@pittstate.edu.

EVALUATION OF NURSE BURNOUT AND CURRENTLY USED PREVENTION AND TREATMENT INTERVENTIONS

Introduction

Nurse burnout is a problematic phenomenon resulting in emotional exhaustion, depersonalization, and disengagement (Hertel, 2020, p. 11).

Burnout puts a nurse at higher risk for job turnover and leaving the profession of nursing entirely. With that, the United States alone is expected to have a shortage of up to 500,000 nurses by the year 2030 (Hoang, 2021). With burnout effecting up to 70% of nurses (Hertel, 2020), it is important to take this phenomenon seriously when addressing changes that need to be made in this profession.

It is important to identify those nurses who are feeling burnt out and what interventions are available to them through their working organization and what personal interventions are used to prevent and mitigate this phenomenon. Being able to identify if interventions are beneficial or not is a start in the right direction in correcting this phenomenon.

Methodology

- Cardiac-Telemetry Unit
- Mixed Method Study Design
- Survey
 - Copenhagen Burnout Inventory
 - Feelings of Burnout
 - Interventions Available



Karina Burton
Pittsburg State University
Irene Ransom Bradley School of Nursing

Results

Copenhagen Burnout Inventory:
Scale for Interpretation:

Response	Never	Seldom	Sometimes	Often	Always
	0-20	20.01-40	40.01-60	60.01-80	80.01-100
Response	To a Very Low Degree	To a Low Degree	Somewhat	To a High Degree	To a Very High Degree
	0-20	20.01-40	40.01-60	60.01-80	80.01-100

Summated Mean of Copenhagen Burnout Inventory:

	Personal	Work-Related	Patient-Related	Overall
Mean	58.03	65.33	55.4	59.6

Available Interventions:

- Employee Assistance Program - 1 Nurse, Used 1 Time
- 5 Free Counseling Sessions - 1 Nurse, Used 5 Times
- Relaxation Room - 4 Nurses, Used 1 Time

Personal Burnout Interventions:

- Self Scheduling, Not Working Multiple Days in a Row, Ensure Enough Time off Between Shifts
- Connecting with Patients and Co-Workers
- Spend time with Friends and Family, Regular Hobbies, Watching TV

Additional Organizational Interventions:

- Improved Staffing Ratios
- Improved Management Support

Conclusion

It was determined through the survey that nurses on this Cardiac-Telemetry unit do have feelings of burnout. While nurses responded most frequently of work related factors contributing to burnout, personal and patient related factors had also been reported to contribute to their feelings of burnout.

One common response for the question of additional beneficial burnout prevent and mitigation interventions provided through the organization was improved staffing or improved nurse to patient ratios. This data from the survey correlates with many different sources conducted in the literature review of burnout being caused by the perception of unsafe staffing ratios (Garrett, 2008; Lee et al., 2014; O’Mahony, 2011; Zysk, 2018).

The goal of this DNP Scholarly Project was to evaluate feelings of nurse burnout and assess available interventions through the organization to prevent and mitigate burnout. Data showed that nurses do experience burnout on this unit. Nurses need to be encouraged to utilize the currently available interventions through the organization to prevent and mitigate burnout, along with re-evaluation of how beneficial those interventions are, after nurses actually utilize them. From this further adjustments can be made in the process of preventing and mitigating nurse burnout.

References

- Garrett, C. (2008). The effect of nurse staffing patterns on medical errors and nurse burnout. *AORN Journal*, (87)6, 1191-1204.
- Hertel, R. (2020). *How do we prevent nurse burnout?* Med-Surg Matters.
- Hoang, S. (2021). *3 strategies for combating nurse burnout during and after the pandemic.* *The Oncology Nurse*.
- Lee, H., Yen, M., Fetzer, S., Chien, T. (2014). *Predictors of burnout among nurses in Taiwan.* Community Mental Health.
- O’Mahony, N. (2011). Nurse burnout and the working environment. *Emergency Nurse*, (19)5, 30-37.
- Zysk, T. (2018). *How to build resilience and reduce nurse burnout through better care team communication.* *Nursing Resilience*.