

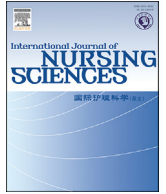
HOSTED BY



Contents lists available at ScienceDirect

# International Journal of Nursing Sciences

journal homepage: <http://www.elsevier.com/journals/international-journal-of-nursing-sciences/2352-0132>



## Discussion

# Fifteen minutes may decrease nursing burnout: A discussion paper

Bronwyn Jones

Academic Staff Member, Nelson Marlborough Institute of Technology (NMIT), New Zealand

## ARTICLE INFO

### Article history:

Received 13 October 2019  
 Received in revised form  
 24 November 2019  
 Accepted 27 November 2019  
 Available online 27 November 2019

### Keywords:

Nursing staff  
 Occupational health  
 Professional burnout  
 Psychological resilience  
 Workforce support

## ABSTRACT

Burnout is a global concern for nurses with broad implications for the health of staff and patients. Efforts to foster resilience that have been successful in other disciplines have yet to be applied in nursing. As employers have become more responsible for the wellbeing of their employees, leveraging these successes in other disciplines could be a straightforward way to improve the wellbeing of the nursing workforce through reducing burnout. Specifically using a paid pre-shift 15 minute program grounded in mindfulness may decrease burnout through improving resilience.

© 2020 Chinese Nursing Association. Production and hosting by Elsevier B.V. All rights reserved.

## What is known?

- Burnout is a significant issue in the nursing workforce which has implications for patient safety and staff retention. Occupational health and safety is concern for which employers are increasingly responsible and accountable.
- Improving nurses' resilience is emerging in the literature as a strategy to decrease nursing burnout. Studies in other professions have found that strategies to improve mindfulness improve resilience.

## What is new?

- There are few specific nursing programs to develop resilience in the workforce. There are even fewer programs which are aimed at developing nursing resilience in the workplace.
- This article outlines one potential workplace program that could be used as a pilot study to evaluate the effectiveness on one program aimed at improving nurses' resilience in the workplace.

Burnout in practicing nurses is a global concern and fostering resilience may address the key elements of this nursing workforce issue [1]. Fortunately, employer-provided on-shift activities foster improved resilience [2] and pre-shift activities have also been shown to enhance nurses resilience [3,4]. Many of these

interventions appear straightforward, such as smartphones and aromatherapy; but unfortunately, these activities appear unpractical in some clinical setting because of the dynamic workloads resulting from rapidly changing patient acuity. Resilience is critical to building a robust and sustainable nursing workforce particularly in acute healthcare settings and addressing burnout is too important to discount because of the implementation challenges [5]. Potentially a strategy incorporating known resilience-increasing activities during a paid pre-shift period could facilitate resilience and address burnout in nursing.

## 1. Burnout is an increasing workplace concern for nurses

A significant number of practicing nurses suffer from burnout while continuing to care for their patients. Burnout for these nurses are reported to be between 30 and 65% of nurses in the hospital setting [6,7] and the associated consequence (staff turnover) is on the rise [8]. Burnout rates vary throughout different world areas. A Canadian study reported that 47.3% of staff nurses suffered from symptoms of burnout compared with 36% of human service professionals including nurses in Japan [5]. In the United States of America the reported burnout rates are reported as between 30% and 60% depending on the workplace environment [7]. While clearly unfortunate for the nurses, this burnout is also a risk for patient safety [6,9].

Prevention of burnout also has implications for the health of the individual nurse. Health care workplaces may find increasing financial implications as work related stress becomes more widely

E-mail address: [bronwyn.jones@nmit.ac.nz](mailto:bronwyn.jones@nmit.ac.nz).

Peer review under responsibility of Chinese Nursing Association.

recognised as a health and safety issue. Burnout has been associated with situational factors and individual factors [10]. Maslach et al. [10] suggest three dimensions to burnout, exhaustion (emotional and physical), stress (work related), and inefficacy, with exhaustion having the largest impact on the individual's health. Resilience has been presumed to be protective against burnout, and this hypothesis has had some support [5]. While situational factors can be modified the nature of nursing does not allow for all situational stressors to be eliminated. Individual factors including the development of resilience have the best potential for decreasing burnout in the workplace.

## 2. There are established interventions to address burnout outside of nursing

Studies examining resilience, or the ability to cope with adverse situations, show that some nurses have developed mechanisms that allow them to continue providing care in spite of continuing adverse situations [1,11]. These findings mirror the value of mindfulness in other professions. From musicians using yoga [12] to athletes using meditation [13] mindfulness improves professional performance. Earlier work suggests that nurses do respond well to mindfulness training [14,15]. Mindfulness has been significantly associated with resilience in health professionals with an associated decrease in stress and greater mental health [16]. It has been identified that there is a significant positive association between resilience and nurses who used strategies to prepare for work prior to their shift [3].

## 3. There are emerging options for increasing resilience in nursing to address burnout

However, a structured implementation of a pre-shift mindfulness session in nursing with the goal of increasing resilience has not been trialled. An in-shift program to improve both nurses resilience [2] and the workplace environment has had positive results. However this approach might be impractical in acute nursing environments and an alternative may be more appropriate. Building on these findings it is logical that a dedicated resilience development period prior to nurses commencing their patient workload could reduce burnout, improve nursing longevity and provide a healthier workplace. It also has the potential to improve patient safety. This approach has yet to be evaluated.

## 4. Applying the resilience building techniques of other workplaces in nursing could help address nursing burnout

Specifically a cross over pilot study would be appropriate to evaluate a planned pre-shift resilience program. The program would include a 15 minute paid session that allowed 1) music listening, 2) drawing or colouring book, or 3) yoga. It is proposed that each nurse be given a 15 minute session once a week for one month. The activity would be of the participants' choice. These activities have been chosen as a practical combination of activities which have been found in Manomenidis et al.'s [3] and Mintz-Binder and Andersen's [2] studies to have an impact on resilience in nurses. Following that session individuals would work their shift. Prior to the commencement of the program and after the completion of the one month program At the end of their shift, using a validated resilience measurement tool, such as *The brief resilience scale* [17] or the *DRS-15* [18], would be compared to a control group, in this situation a group which commenced work as they routinely would. A Mann-Whitney *U* test with a *P*-value of <0.05 would show a significant improvement in resilience. These additional 15 minutes could cause scheduling challenges and the

value of the increased resilience (if there is any) would need to outweigh the scheduling challenges and increased cost if this program were to be widely used.

The reality of nurses professional and personal commitments preclude the wide uptake of nurses self-scheduling resilience training in their personal time. With the requirements for professional development often expected to be undertaken outside of rostered hours of work and the complexities of managing shift work and personal life resilience training is not considered a priority. For these reasons it is unreasonable to expect nurses to undertake a period of resilience training in their personal time.

## 5. Burnout in nursing impacts everyone and is too important not to address

In many professions burnout is a concern restricted to human resources departments and individuals; in nursing however it is everyone's concern because there is a direct impact to patient care. Burnout is a problem of work-related stress [10] and therefore a strategy to prevent it should be incorporated into the workplace.

### Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.ijnss.2019.11.004>.

### References

- [1] Wei H, Roberts P, Strickler J, Corbett RW. Nurse leaders' strategies to foster nurse resilience [cited 2019 Jun 13] *J Nurs Manag* 2019;27(4): 681–7. Available from: <https://onlinelibrary.wiley.com/doi/abs/10.1111/jonm.12736>.
- [2] Mintz-Binder RD, Andersen JS. Resiliency building techniques for nurses to improve the workplace environment. 2019 Feb 1 [cited 2019 Aug 26]; Available from: <https://sigma.nursingrepository.org/handle/10755/16752>.
- [3] Manomenidis G, Panagopoulou E, Montgomery A. Resilience in nursing: the role of internal and external factors [cited 2019 Jun 4] *J Nurs Manag* 2019 Jan 1;vol. 27(1). <https://doi.org/10.1111/jonm.12662>. 172–8. Available from:..
- [4] Phillips CS, Becker H. Systematic Review: Expressive arts interventions to address psychosocial stress in healthcare workers [cited 2019 Sep 26] *J Adv Nurs* 2019;0(0). Available from: <https://onlinelibrary.wiley.com/doi/abs/10.1111/jan.14043>.
- [5] Guo Y, Luo Y, Lam L, Cross W, Plummer V, Zhang J. Burnout and its association with resilience in nurses: a cross-sectional study [cited 2019 Aug 27] *J Clin Nurs* 2018 Jan;27(1–2). <https://doi.org/10.1111/jocn.13952>. 441–9. Available from:..
- [6] Figueira Martins Rodrigues CC, Pereira Santos VE, Sousa P. Patient safety and nursing: interface with stress and Burnout Syndrome. *Rev Bras Enferm* 2017 Sep;70(5):1083–8. Available from: <http://search.ebscohost.com/login.aspx?direct=true&db=ccm&AN=125339156&site=ehost-live>.
- [7] McHugh MD, Kutney-Lee A, Cimiotti JP, Sloane DM, Aiken LH. Nurses' widespread job dissatisfaction, burnout, and frustration with health benefits signal problems for patient care [cited 2019 Jun 10] *Health Aff* 2011 Feb 1;30(2): 202–10. Available from: <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2010.0100>.
- [8] Nursing Solutions Inc. National health care retention report. 2019 [cited 2019 Jun 13]. Available from: <http://www.nsinursingsolutions.com/Files/assets/library/retention-institute/2019%20National%20Health%20Care%20Retention%20Report.pdf>; 2019.
- [9] Van Bogaert P, Timmermans O, Weeks SM, van Heusden D, Wouters K, Franck E. Nursing unit teams matter: impact of unit-level nurse practice environment, nurse work characteristics, and burnout on nurse reported job outcomes, and quality of care, and patient adverse events—A cross-sectional survey. *Int J Nurs Stud* 2014 Aug;51(8): 1123–34. Available from: <http://search.ebscohost.com/login.aspx?direct=true&db=ccm&AN=103959649&site=ehost-live>.
- [10] Maslach C, Schaufeli WB, Leiter MP. Job burnout [cited 2019 Aug 27] *Annu Rev Psychol* 2001;52(1):397–422. <https://doi.org/10.1146/annurev-psych.52.1.397>. Available from:..
- [11] Jackson D, Firtko A, Edenborough M. Personal resilience as a strategy for surviving and thriving in the face of workplace adversity: a literature review [cited 2019 Jun 10] *J Adv Nurs* [Internet] 2007;60(1):1–9. Available from: <https://onlinelibrary.wiley.com/doi/abs/10.1111/j.1365-2648.2007.04412.x>.
- [12] Khalsa SBS, Shorter SM, Cope S, Wyshak G, Sklar E. Yoga ameliorates performance anxiety and mood disturbance in young professional musicians [cited 2019 Jun 10] *Appl Psychophysiol Biofeedback* 2009 Aug 6;34(4):279. <https://doi.org/10.1007/s10484-009-9103-4>. Available from:..

- [13] Baltzell A, Caraballo N, Chipman K, Hayden L. A qualitative study of the mindfulness meditation training for sport: division I female soccer players' Experience [cited 2019 Jun 10] *J Clin Sport Psychol* 2014 Sep 1;8(3). 221–44. Available from: <https://journals.humankinetics.com/doi/10.1123/jcsp.2014-0030>.
- [14] dos Santos TM, Kozasa EH, Carmagnani IS, Tanaka LH, Lacerda SS, Nogueira-Martins LA. Positive Effects of a stress reduction program based on mindfulness meditation in Brazilian nursing professionals: qualitative and quantitative evaluation. *Explore N Y N* 2016 Apr;12(2):90–9.
- [15] Pipe TB, Bortz JJ, Dueck A, Pendergast D, Buchda V, Summers J. Nurse leader mindfulness meditation program for stress management: a randomized controlled trial. *J Nurs Adm* 2009 Mar;39(3):130–7.
- [16] Kemper KJ, Mo X, Khayat R. Are mindfulness and self-compassion associated with sleep and resilience in health professionals? [cited 2019 Aug 27] *J Altern Complement Med* 2015 Jun 2;21(8):496–503. Available from: <https://www.liebertpub.com/doi/abs/10.1089/acm.2014.0281>.
- [17] Smith BW, Dalen J, Wiggins K, Tooley E, Christopher P, Bernard J. The brief resilience scale: assessing the ability to bounce back. *Int J Behav Med* 2008 Jul;15(3):194–200. Available from: <http://llcp.nmit.ac.nz:2048/login?url=>.
- [18] Bartone PT. Test-retest reliability of the dispositional resilience scale-15, a brief hardiness scale [cited 2019 Jun 13] *Psychol Rep* 2007 Dec 1;101(3). <https://doi.org/10.2466/pr0.101.3.943-944>. 943–4. Available from:.