Compassion Fatigue and Health Promotion Behaviors Among Registered Nurses

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This study was completed in partial fulfillment of the requirements for the Master’s Degree in Nursing at California State University, Fullerton
Acknowledgments

• Sadeeka Al-Majid, PhD, RN
  – Professor of Nursing and Project Chair, California State University-Fullerton

• Peggy Kalowes, PhD, RN, CNS, FAHA
  – Director of Nursing Research, Innovation & EBP, Long Beach Memorial Medical Center
The pleasure derived from one’s ability to do their job well.

Feeling of accomplishment and reward that results from providing care to patients
Compassion Fatigue

Occurs from repeated exposures to pain and suffering.

2 subscales:
- Burnout
- Secondary Traumatic Stress
Burnout

Feelings of:

• Hopelessness
• Difficulties at work
• Doing your job effectively

Often related to organizational factors
Secondary Traumatic Stress

Work-related or secondary exposure to traumatic stressful events.

“Often will avoid situations in life that remind them of the traumatic events”
What does compassion fatigue look like?
Physical

Social

Emotional

Work

Spiritual
Organizational Impact

Staff Turnover

- Reduced Productivity
- Increased Sick Days
- Patient Safety
- Patient Satisfaction
- Quality of Care
Why are we Concerned

Demands on Nursing are greater than ever…

- HCAHPS
- Baby Boomer’s Retiring
- Access to Healthcare
Research Questions?

1. How prevalent is compassion fatigue among registered nurses?

2. Are there significant differences between compassion fatigue, health promotion behaviors scores and nursing demographic variables?

3. Is there a relationship between health promotion behaviors and compassion fatigue?
Design and Sample

Cross-sectional, descriptive design using an electronic survey methodology

A convenience sample of registered nurses (n = 364) across multiple hospitals and patient care settings

- Only direct care nurses included, all non-direct care RNs were excluded
Instruments

✓ Demographics

✓ Professional Quality of Life (ProQOL)

✓ Health Promotion Lifestyle (HPLP II)
Procedures

- Institutional Review Board
  CSUF and Hospital Organization

- Sample recruitment
  Announcements
  Email invitations
  Flyers

- SurveyMonkey®
  Eight weeks
  Bi-weekly emails
Data Analysis

• Demographic frequencies
• One-way ANOVA to measure variances between the means
• Linear Regression Analysis to identify correlations between CS and HP Behaviors
• Significance = .05
Results

364 responses

Years of Nursing Experience

- 26% (95) with 0-5 years
- 21% (75) with 6-10 years
- 15% (54) with 11-15 years
- 11% (42) with 16-20 years
- 11% (42) with More than 20 years

Years in Current Specialty

- 34% (125) with 0-5 years
- 30% (109) with 6-10 years
- 27% (99) with 11-15 years
- 20% (74) with 16-20 years
- 17% (62) with More than 20 years
### Demographics

<table>
<thead>
<tr>
<th>Department</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult ICU/CCU</td>
<td>37 (10.2)</td>
</tr>
<tr>
<td>Behavioral health</td>
<td>6 (1.6)</td>
</tr>
<tr>
<td>Emergency room</td>
<td>71 (19.5)</td>
</tr>
<tr>
<td>Float pool</td>
<td>13 (0.8)</td>
</tr>
<tr>
<td>Surgical services</td>
<td>19 (5.2)</td>
</tr>
<tr>
<td>Labor and delivery</td>
<td>22 (6.0)</td>
</tr>
<tr>
<td>Medical/Surgical</td>
<td>58 (15.9)</td>
</tr>
<tr>
<td>Neonatal ICU</td>
<td>29 (8.0)</td>
</tr>
<tr>
<td>Oncology</td>
<td>19 (5.2)</td>
</tr>
<tr>
<td>Pediatric ICU</td>
<td>8 (2.2)</td>
</tr>
<tr>
<td>Pediatric medical/surgical</td>
<td>15 (4.1)</td>
</tr>
<tr>
<td>Pediatric oncology</td>
<td>5 (1.4)</td>
</tr>
<tr>
<td>Recovery room</td>
<td>10 (2.7)</td>
</tr>
<tr>
<td>Special procedures</td>
<td>12 (3.3)</td>
</tr>
<tr>
<td>Telemetry</td>
<td>28 (7.7)</td>
</tr>
<tr>
<td>Women’s health</td>
<td>16 (4.4)</td>
</tr>
<tr>
<td>Hospice/palliative care</td>
<td>5 (1.4)</td>
</tr>
<tr>
<td>Other</td>
<td>1 (0.3)</td>
</tr>
</tbody>
</table>

**Overtime Hours per Week**

- None: 243 (67%)
- 4-8: 22 (6%)
- 9-12: 86 (24%)
- Greater than 12: 13 (3%)
Results

Overall ProQOL mean scores

CS = 50.06 (10.08)
BO = 49.97 (10.07)
STS = 49.74 (10.03)

Low risk ≤ 44; Average risk = 50; High risk ≥ 56
Results

Overall Health Promotion mean scores

Health Promotion = 2.6 (.43)
Health Responsibility = 2.3 (.49)
Physical Activity = 2.5 (.71)
Nutrition = 2.6 (.51)
Spiritual = 2.9 (.56)
Interpersonal Relations = 2.9 (.52)
Stress Management = 2.4 (.53)
Results

Let’s dig a little deeper into the data...

✓ Department
✓ Professional Certifications
✓ Wellness Programs
✓ Overtime
Results

Departments

Mean Score

Palliative Care  Adult Oncology  Pediatric Oncology  PICU  Float Pool

(CS: p < .001, BO: p = .04)
## Results

### Professional Certification

<table>
<thead>
<tr>
<th></th>
<th>CS</th>
<th>Health Promotion</th>
<th>Nutrition</th>
<th>Spiritual</th>
<th>Relationships</th>
<th>Stress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certified</td>
<td>52.4 (9.7)</td>
<td>2.7 (.45)</td>
<td>2.7 (.53)</td>
<td>3.1 (.56)</td>
<td>3.1 (.53)</td>
<td>2.5 (.60)</td>
</tr>
<tr>
<td>Non-Certified</td>
<td>49.0 (10.0)</td>
<td>2.5 (.41)</td>
<td>2.5 (.50)</td>
<td>2.8 (.55)</td>
<td>2.9 (.52)</td>
<td>2.3 (.50)</td>
</tr>
</tbody>
</table>

(CS: $p = .007$; Health Promotion: $p = .006$; Nutrition: $p = .003$; Spiritual: $p = .001$; Relations: $p = .03$; Stress: $p = .003$)
Results

Wellness Program

Compassion Satisfaction: Participant = 50; Non-Participant = 40

Burnout: Participant = 50; Non-Participant = 40

Secondary Traumatic Stress: Participant = 50; Non-Participant = 40

(Health Promotion: $p = .007$; Health Responsibility: $p = .015$; Physical Activity: $p = .008$; Nutrition: $p < .0001$)
Results

Overtime Hours per Week

(\ p = .05)
Burnout Correlation

- Low Burnout
  - Low HP
    - Health Promotion
    - Interpersonal Relations
    - Compassion Satisfaction
    - Spiritual
  - High HP
    - Poor health Promotion
    - Increased Stress
    - Poor Personal Relations
    - Increased Burnout

- High Burnout
  - Low HP
  - High HP
Conclusions

- Overall risk for Compassion Fatigue was average
  - What is average risk?
  - Is average risk ok?

Average BMI for adult in United States... 29.7
Conclusions

• Strategies need to be developed and implemented to help the nurse become more resilient.

• Promote and encourage professional advancement.

• Further investigate workplace wellness programs and their effect on compassion satisfaction.
Conclusions

• Promote positive self-care behaviors.

• Promote work/life balance.
When you are a nurse, know that everyday you will touch a life or a life will touch yours

Unknown
Thank you!
Questions?