

Nurse Burnout – Consequences and Prevention Strategies

Introduction

Burnout in nursing is a very common phenomenon and is increasingly seen in the current nursing workforce. It is a response to excessive work stress which is represented by emotional drainout, exhaustion, detached response to people, loss of idealism, depersonalization, and reduced personal accomplishment. Nurses who experience burnout not only bring down the quality of healthcare services provided at their organization, but also put their patients' lives and health at risk (Dall'Ora et al., 2020).

Using a case study, this paper aims to explore the effects of exhaustion and burnout in a nurse and its consequences regarding patient outcomes. It also aims to explore strategies using which a nurse can approach clinical practice with enthusiasm and optimism so as to provide the best possible services to patients and promote their own professional growth. Finally, on a larger scale, it aims to understand various strategies that healthcare organizations can implement in order to make the transition period from student nurse to registered nurse smoother and more competent.

Nursing Shift – Fulfilment of Nurse Responsibility

From the case study, it is evident that Anika did not meet her roles and responsibilities as an RN during her shift. This is apparent through several examples of incidents that have been highlighted in the case study.

One of her assigned patients had just had a TURP procedure, was on bladder irrigation, and had to be administered IVAB during her shift. She was inexperienced in caring for a patient with this particular care requirement and had not checked the online manual available for caring for these patients. The result was that although she had settled the patient, she had not checked his bladder irrigation, nor had she started his IVAB. According to the Registered Nurse Practice Standards (NMBA, 2016), an RN is expected to think critically (Standard 1), maintain capability for practice (Standard 3), conduct comprehensive assessments (Standard 4), develop a plan for practice

(Standard 5), and provide safe and appropriate care (Standard 6). From Anika's actions, it is clear that she has breached all the nursing practice standards mentioned above.

Bladder irrigation is a commonly used technique in elderly people accounting for about 34% of all nosocomial infections (Jain et al., 2015). As a result, nurses have a huge responsibility to constantly check the status of the catheter and ensure that it is infection-free (Paterson et al., 2019). If identified in the earlier stages, an infection can be easily controlled thereby preventing the patient from going through unnecessary distress (Shehab, 2017). By not checking on the patient during her shift, Anika exposed him to the risk of developing an infection which could have long-term implications for him.

Another oversight on her part was not checking another of her patient's blood glucose levels during her shift which was required to be checked every 4 hours. Her chart indicated that her IDC needed to be removed and that the patient had a history of type 2 diabetes. This is a serious risk case because diabetes patients have a higher chance of infections, especially of the urinary tract (Nitzan et al., 2015). Additionally, the placement of a catheter in the urinary tract is also a cause of UTI risk, thereby doubling the risk in this patient (Assadi, 2018). Therefore, as the patient's chart indicated IDC removal, it was extremely important to check her BGL to ensure that her unmanaged diabetes will not interfere with infections associated with catheter removal. This was a serious mistake on Anika's part as she exposed the patient to possible UTI either due to high BGL or delay in removing the IDC due to unavailability of her BGL results.

According to the case study, as Anika reflected on her shift, she thought about what other tasks she may have forgotten while caring for her patients. This is a very serious issue as her mistakes have the potential to cost patients their lives, or, at the very least, a lot of money (Hall et al., 2016).

Recommendations

As evident from the case study, Anika was under a lot of stress lately and was having difficulty in maintaining a work/life balance. At the beginning of the shift, she was clearly uncomfortable with the assignment of patients because she had no experience

or knowledge of how to care for a patient with bladder irrigation. At this point, she should have voiced her concerns to the Nurse-in-charge telling her clearly that she did not know how to take care of the concerned patient. The Nurse-in-charge would have either transferred the patient to another nurse's care or requested another nurse to show Anika what to do with the patient. In either case, it would have given Anika a chance to learn about bladder irrigation (which is a common technique) and how to check the device for signs of infection in the patient (Qalehsari et al., 2017).

As per the case study, Anika had met several nurses on the shift. Therefore, as she was already feeling exhausted and overwhelmed, she should have requested one of the other nurses to help her with the patients, for example, to check the BGL of one of the patients who required IDC removal. This would have ensured that all her nursing tasks would have been appropriately fulfilled without posing unnecessary dangers to any patient. Teamwork in nursing is extremely important for elevating both qualitative and quantitative outcomes of the nursing practice. Studies have shown that a lack of teamwork in nursing can lead to increased stress, higher chance of errors, and overall dissatisfaction in nurses. Nurses working together can pool their knowledge, expertise, and resources to provide the best quality care for patients (Judge, 2017). It is difficult for a single nurse to acquire all patient experiences in a short duration as is the case with Anika. However, if she would have requested another nurse who was familiar with bladder irrigation to show her good practices, she would have had a chance to learn things practically and enhance her knowledge.

Anika was aware that the policy and procedure manual for bladder irrigation was online. However, she had not previously had an opportunity to check the manual and learn about caring for patients on bladder irrigation. Considering this, Anika could have approached the shift positively with the idea of learning something new. She could have checked the manual, read the guidelines and then applied them to the patient, thereby making her learning more practical and useful. Given that a lot of young nurses prefer technological learning experiences rather than textbooks, Anika's organization had made sure that all the important documents were accessible online so that nurses could refer to them whenever required. Several studies have been conducted to understand

the learning preferences of nurses and implement them to facilitate their clinical learning experiences (McCrow et al., 2014). Technology has been considered to be of utmost importance as compared to textbooks due to its ease of use and accessibility. As a result, it now becomes the nurses' responsibility to make use of these technological aids to enhance their learning while on duty (Mangold et al., 2018).

Strategies for Smooth Transition

It is clear that Anika is having problems with transitioning from a student nurse to a registered nurse, which is apparent from a lack of balance between her work life and her personal life. This is not a new issue and the period of transition from a student to a graduate nurse is considered to be filled with stress and challenges. This is because student nurses work in a controlled and supervised environment whereas graduate nurses are expected to practice independently as health professionals (Opoku et al., 2019).

One strategy that has been proven to be very useful to nurses as they transition from students to professionals is supervision. It has been shown to increase the nurses' ability to draw links between their theoretical learning and practical experiences (Moore and Fitzgerald, 2017). Another study found that formal supervision during the first year of practice as a graduate nurse really helped make the transition period smoother due to the expert feedback and support received by the supervisor (Melman et al., 2016). Apart from that, supervision promotes competency and allows graduate nurses to connect their learning experiences to clinical practice. It increases their clinical skills, perception of competence, and self-confidence, eventually making them capable of providing quality healthcare services to their clients. In addition to supervision, support from colleagues and senior staff has also been shown to play a very important role in helping nurses on their transitional journey. These people are in the right position to provide information and advice based on their own experiences, which provides useful pointers to newly graduate nurses for their practice. Structured learning experiences such as group discussions and networking can also go a long way in easing challenges on a nurse's journey (Al-Awaisi et al., 2015).

Another strategy for helping nurses transition from students to graduates is by implementing transition-to-practice programs. These programs are designed with the knowledge that student nurses require skill development and preparation to smoothen their transition process. These programs comprise of learning resources that are aimed at improving the knowledge and skills of new graduate nurses to prepare them for their clinical practice. Given the high rate of nurse dropouts within their first year of joining as a graduate nurse, these transition programs also build and maintain nurses' commitment to their profession (Gordon et al., 2014). Some examples of these programs are Flying Start Program in Scotland, Regulatory Model of Transitioning New Nurse to Practice in United States, and an entry to practice program in New Zealand (Rush et al., 2013). Some of the components that are covered in these programs include orientation, study days, preceptorship, and academic credit-status points, which encourage nurses to remain committed to their work and pursue postgraduate studies in the future (Haggerty et al., 2013).

Conclusion

Every nurse faces several challenges through the journey from being a student in a supervised work environment to being a registered nurse where patient decisions need to be made independently. Lack of a supportive work environment can lead to exhaustion, tiredness, poor work/life balance, and poor delivery of healthcare services. It can lead to serious errors when working with patients, and hinder education and growth of nurses. In this paper, Anika's clinical experiences were used to understand the serious consequences of burnout, and lack of support from the healthcare organization exacerbated these effects. It further explored several strategies and programs that can be used by nurses as well as healthcare facilities to help nurses adjust to the demands of their profession.

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