

Nurse Resiliency in Pediatric and PICU Nurses.

Ashley Divincenzo BSN, RN

Stephanie Pinter BSN, RN

Alexis Gilmore BSN, RN

Kendra Wetherhold BSN, RN

Follow this and additional works at: <http://scholarlyworks.lvhn.org/patient-care-services-nursing>



Part of the [Nursing Commons](#)

Published In/Presented At

Divincenzo, A. Pinter, S. Gilmore, A. Wetherhold, K. (2017, August 25). *Nurse Resiliency in Pediatric and PICU Nurses*. Poster presented at: LVHN Vizient/AACN Nurse Residency Program Graduation, Lehigh Valley Health Network, Allentown, PA.

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.

Nurse Resiliency in Pediatric and PICU Nurses

Ashley Divincenzo BSN, RN, Stephanie Pinter BSN, RN,
Alexis Gilmore BSN, RN, Kendra Wetherhold, BSN, RN

Lehigh Valley Health Network, Allentown, Pennsylvania

BACKGROUND

- Nurses are experiencing emotional stress and burnout^{2,3,4,10}
- LVHN does not have a method of identifying if nurses are resilient
- Current LVHN death and grief education
 - Orientation, content brief
 - Continuing education hours available
 - Debriefing sessions with Chaplains as needed
- Current LVHN resources: Employee Assistance Program, debriefing, chaplains, journaling, self care promotion
- Pediatric nurses deal with distressing situations such as:
 - Trauma
 - New terminal diagnoses
 - Codes
 - Deaths
 - Difficult situations

PICO QUESTION

- For nurses on the Pediatric Intensive Care Unit (PICU) and Pediatric unit involved in distressing situations, does the use of a resiliency tool compared with no resiliency tool reduce clinical staff burnout?

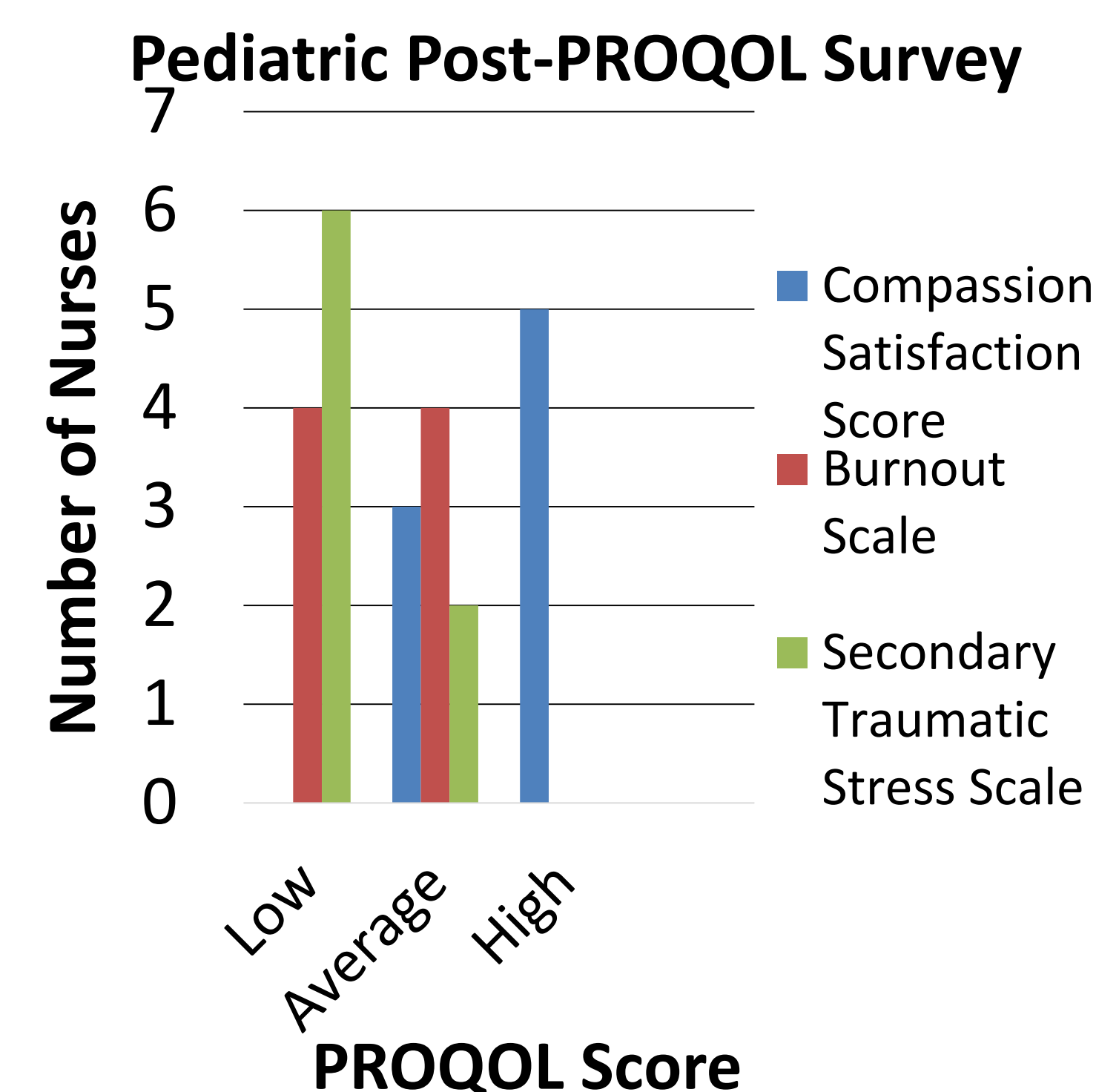
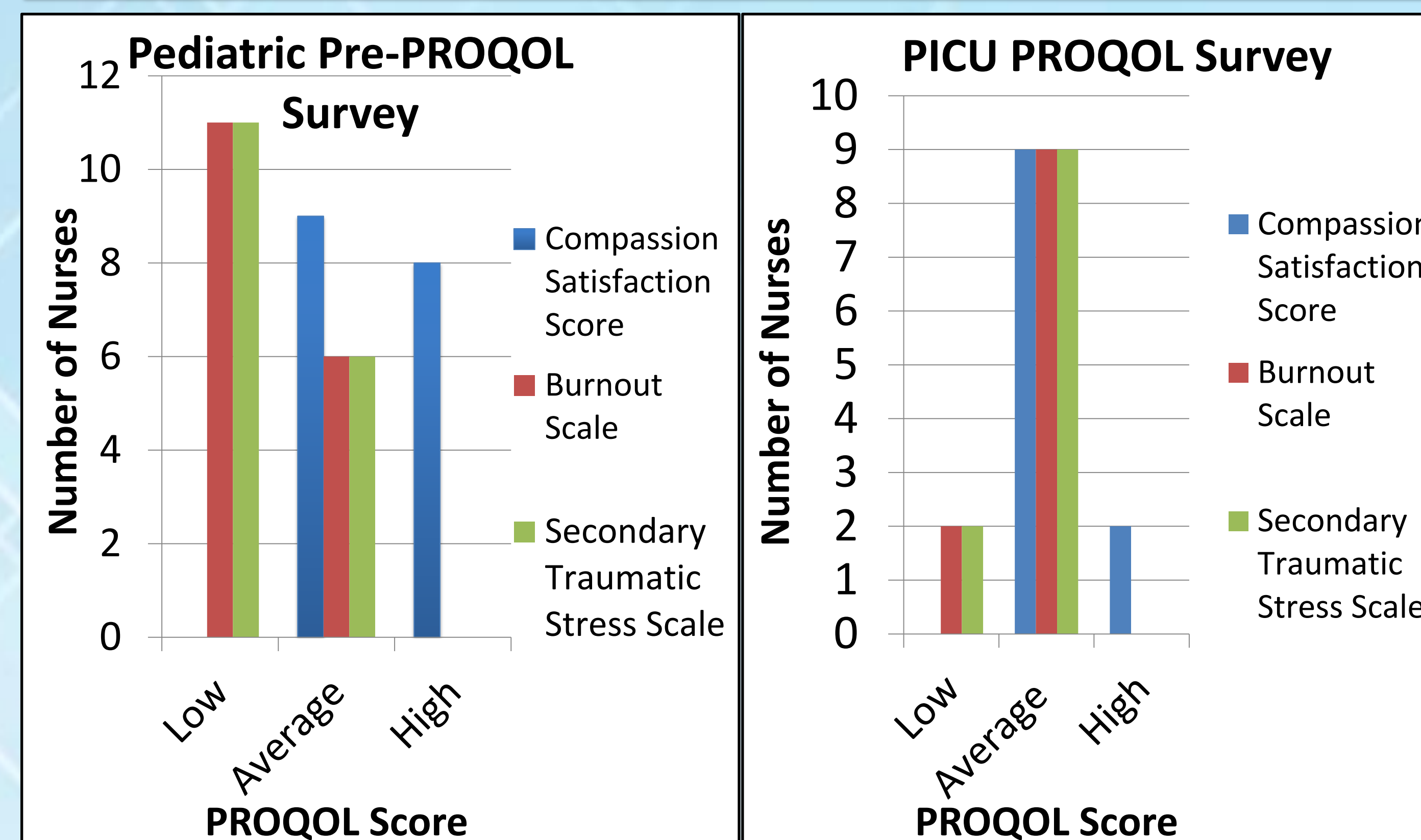
EVIDENCE

- Stress exposure correlated with lower compassion satisfaction and increased burnout⁴
- Moral distress leads to nursing shortages¹²
- Bereavement debriefing sessions found to be meaningful¹¹
 - Focus on self care lead to decreased staff turnover¹¹
- Nurse's experience following patient death
 - Nurses felt a lack of preparedness for the feelings experienced following death⁸
- Traumatic patient events effect on nurses¹⁰
 - PTSD, Anxiety, Nightmares¹⁰
- Findings demonstrate a lack of support and education for nurses related to traumatic events, death, and grief
 - Studies showed that to improve resiliency and coping, more resources for nurses need to be available

METHODS

- Pre Assessment** - Professional Quality of Life (PQOL) Scale⁴ distributed to 12 RNs on PICU and 20 on the Pediatric unit.
 - 11 RNs on PICU and 17 on the Pediatric unit completed the survey
- Implementation** - Chaplain attends PICU and Pediatric staff meetings and provides information/ activities to nurses to build resiliency
 - i.e. Employee Assistant Program (EAP), Labyrinths, power pose, exercise
- Post Assessment** - PQOL Scale distributed to 15 nurses on the Pediatric unit for post assessment outcome.
 - Note: PICU RNs not resurveyed- no new implementation on unit
 - 8 RNs on the Pediatric units completed the survey

RESULTS



BARRIERS

- Barriers to study include: limited amount of nurses who participated in surveys, pastoral care missing two Pediatric staff meetings, and staff experiencing several events that may have impacted the post-surveys

NEXT STEPS

- Pastoral care will attend pediatric monthly meetings to present exercises on mindfulness and continue to come to PICU monthly staff meetings
- Staff will be reminded at each staff meeting of other resources provided by the hospital to prevent burnout

CONCLUSIONS

- Traumatic events and stress lead to nurse burnout and prevents the development of resiliency in nurses
- Nurse resiliency tools are needed on LVHN Pediatric and PICU units to lessen nurse burnout
- Lower burnout rates, lower stress rates d/t traumatic events, and higher compassion satisfaction on the Pediatric unit was noted with interventions

REFERENCES

- Conte, T. M. (2011). Pediatric Oncology Nurse and Grief Education: A Telephone Survey. *Journal Of Pediatric Oncology Nursing*, 28(2), 93-99. doi:10.1177/1043454210377900
- Maloney, C. (2012). Critical Incident Stress Debriefing and Pediatric Nurses: An Approach to Support The Work Environment and Mitigate Negative Consequences. *Pediatric Nursing*, 38(2), 110-113.
- McCloskey, S., & Taggart, L. (2010). How Much Compassion Have I Left? An Exploration of Occupational Stress Among Children's Palliative Care Nurses. *International Journal of Palliative Nursing*, 16(5), 233-240.
- Meyer, R. M., Li, A., Klaristenfeld, J., & Gold, J. I. (2015). Pediatric Novice Nurses: Examining Compassion Fatigue as a Mediator Between Stress Exposure and Compassion Satisfaction, Burnout, and Job Satisfaction. *Journal Of Pediatric Nursing*, 30(1), 174-183. doi:10.1016/j.pedn.2013.12.008
- Polat, S., Küçük Alemdar, D., & Gürol, A. (2013). Paediatric nurses' experience with death: The effect of empathic tendency on their anxiety levels. *International Journal Of Nursing Practice*, 19(1), 8-13. doi:10.1111/ijn.12023
- Stayer, D. (2016). LIVING WITH DYING IN THE PEDIATRIC INTENSIVE CARE UNIT: A NURSING PERSPECTIVE. *American Journal Of Critical Care*, 25(4), 350-356. doi:10.4037/ajcc2016251
- Hart, P. L., Brannan, J. D., & De Chesnay, M. (2014). Resilience in nurses: an integrative review. *Journal Of Nursing Management*, 22(6), 720-734.
- Kellogg, M. B., Barker, M., & McCune, N. (2014). The Lived Experience of Pediatric Burn Nurses Following Patient Death. *Pediatric Nursing*, 40(6), 297-300
- Conte, T. M. (2011). Pediatric Oncology Nurse and Grief Education: A Telephone Survey. *Journal Of Pediatric Oncology Nursing*, 28(2), 93-99.
- Czaja, A. S., Moss, M., & Mealer, M. (2012). Symptoms of Posttraumatic Stress Disorder Among Pediatric Acute Care Nurses. *Journal Of Pediatric Nursing*, 27(4), 357-365.
- Keene, E., Hutton, N., Hall, B., & Rushton, C. (2010). Bereavement debriefing sessions: an intervention to support health care professionals in managing their grief after the death of a patient. *Pediatric Nursing*, 36(4), 185-189.
- Austin, W., Kelecevic, J., Goble, E., & Mekechuk, J. (2009). An overview of moral distress and the paediatric intensive care team. *Nursing Ethics*, 16(1), 57-68. doi:10.1177/0969733008097990

© 2014 Lehigh Valley Health Network