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Mindfulness at Work

Virtual Mindfulness Program for Occupational Therapy Practitioners Experiencing Burnout: A Pilot Study

Sue Persia, OTD, OTR/L - Widener University, Amy Carroll, OTD, OTR/L - Thomas Jefferson University

Background

Job burnout is high among occupational therapy practitioners (OTPs)^{1,2}. Burnout impacts practitioner well-being and patient outcomes³. Mindfulness is an evidence-based approach to decreasing burnout, but the time burden for traditional mindfulness programs is high for professionals experiencing burnout⁴.

Mindfulness at Work is a brief, virtual program during which OTPs embed learned mindfulness strategies during their workday.

Purpose and Objectives

Evaluate **Mindfulness at Work** and the embedded *mindfulness strategies*

- Participants will demonstrate a decrease in their burnout level.
- Participants will find **Mindfulness at Work** and the *mindfulness strategies* (a) acceptable, (b) appropriate, and (c) feasible.
- Investigators will report on recruitment and retention capability.

Methods

The Jefferson IRB approved this study.

Study Design: Single group. Three cohorts. Pre/post-test for change in burnout; Post-test- only for acceptability, appropriateness, and feasibility of **Mindfulness at Work** and the embedded *mindfulness strategies*.

Inclusion Criteria: registered OT or OTA, ≥ one year of professional experience, English-speaking, and scored ≥ 44 on the Oldenburg Burnout Inventory. Those with formal mindfulness training were excluded.

Instruments:

Burnout: Oldenburg Burnout Inventory (OLBI)⁵

- 16 items, 4-point Likert scale: 1 (strongly disagree) to 4 (strongly agree). Burnout: mild (<44 low), moderate (44-59), high (>59). Valid and reliable⁶

Feasibility (3): Acceptability of Intervention Measure, Intervention Appropriateness Measure, Feasibility of Intervention Measure⁷.

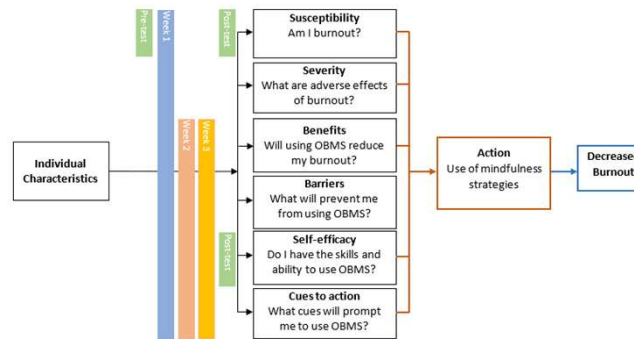
- 4 items, 5-point Likert scale: 1 (completely disagree) to 5 (completely agree). Valid and reliable⁷

Methods (continued)

Program Description: **Mindfulness at Work** was a three-week virtual mindfulness program during which OTPs learned mindfulness strategies to embed during their workday. Participants met weekly for a live 75-minute Zoom session. Between sessions, they used the learned strategies at work. Participants accessed handouts, shared experiences, and asked questions in a private Google Classroom.

At the end of the third session, participants received information on traditional mindfulness programs in their local area.

Figure 1: Conceptual Framework - Health Belief Model



Data Collection, Management & Analysis:

- Post-tests were completed at the end of the third Zoom session via Qualtrics software⁸
- Attendance logs were kept in a password-protected Excel spreadsheet
- Descriptive statistics analyzed each feasibility outcome (group M & SD)
- A Wilcoxon signed-rank test measured the statistical significance of the change in pre and post-test OLBI scores

References

- Scan QR Code for references.



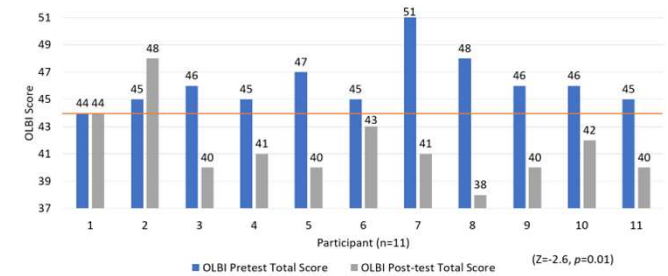
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Results

Demographics: 11 OTPs, female, from United States and Canada

Burnout: **Mindfulness at Work** elicited a statistically significant change in OLBI scores. **Pre-test median:** 46.0 (moderate); **Post-test median:** 41.0 (low).

Figure 2: Oldenburg Burnout Inventory Score Pre to Post test



Feasibility: 100% rated **Mindfulness at Work** as acceptable, with mean (M) scores of (M:4.7), appropriate (M:4.6), and feasible (M:4.6). 100% rated the mindfulness strategies acceptable (M:4.6), appropriate (M: 4.5), & feasible M:4.6).

Recruitment/Retention: Attendance: 100% for first two sessions; 82% for 3rd session.

Conclusions

- **Mindfulness at Work** and the embedded *mindfulness strategies* show preliminary promise of: (a) reducing burnout in OTPs and (b) being acceptable, appropriate, and feasible for OTPs.
- Implementation of **Mindfulness at Work** with larger populations is warranted.

Implications

Challenges & Limitations: (1) no OTAs, and (3) mostly school-based practitioners.

Implications for Future Research: (1) pilot with a larger and more diverse group of OTPs, (2) plan for participants who cannot attend sessions 2 or 3, and (3) follow-up survey one week after program completion.