Learning Objectives

• Discuss the impact of burnout among healthcare professionals
• Describe the risk factors associated with burnout
• Discuss preventative measures at the organizational and provider level
Burnout: What is it?

Syndrome as a result of stress

- Resources
- Demands
What does it looks like?

- Emotional exhaustion
  - Instability
- Depersonalization
  - Cynicism
  - Inability to commit
- Sense of low personal accomplishment
  - Feeling of failure
What does it feel like?

“Terrible things happen in front of me and I feel nothing.”

“There is something wrong with me.”

“I don’t care anymore.”

“Alone.”

“There are things happen in front of me and I feel nothing.”
You just don’t talk about it.
What makes ICU, EC/ER, and EMS at risk?

• End of life issues
• High risk environment
• Frequent exposure to traumatic and/or high stress situations
• Conflicts
• Lack of recognition
• Responsibility overload
• Job dissatisfaction
Who is affected?

- ICU
  - Nurses
  - Physicians
- ER
  - Nurses
  - Physicians
- EMS providers
  - EMT
  - Paramedics
The Sizzle Across Disciplines

- Advanced practice providers
- Clinical pharmacists
- Respiratory therapists
- Physical therapists
- Occupational therapists
- Dieticians
Impact on Organizations

- Poor quality health care delivery
- Increased turnover
- Increased costs
- Errors

Poor quality health care delivery
Risk Factors

- Center-Related
- Patient-Related
- Caregiver-Related
Center-Related Factors

• Higher percentage of female caregivers
• Pediatric population
• Number of beds/unit; workload
• University/Teaching based hospital
• Fire based agencies
• Conflicts with co-workers
• Conflicts with patients
• Lack of positive feedback
• Lack of control of schedule
• Lack of fixed day schedule
• Lack of participation in research groups/work groups both in and out of the ICU
Patient-Related Factors

- Mortality rate
- Conflict with patients/families
- Decision making related to foregoing life-sustaining treatment
Caregiver - Related Factors

- Gender – conflicting data
- No children
- Living alone
- Age – younger age; ≤ 40 years
- Years of experience
- Education background – conflicting data
Putting out the fire!

- Personal approaches
- Organizational approaches
• Personal approaches
  • Stress reduction training/techniques
  • Communication skills
  • Relaxation techniques
  • Time management
  • Assertiveness training
  • Meditation
• Placing emphasis on family, hobbies and social activities
• Rest, exercise, and healthy eating habits
• Organizational approaches
  • Increasing awareness
  • Understanding risk factors
  • Development of strategies

Poor quality health care delivery

- Increased costs
- Increased turnover
- Errors
Putting out the fire, cont.

- SCCM and the ALCCM
  - Recognized and acknowledged disconnect between current and desired supply of intensivists and nurses due to the stress and demands of critical care
  - Values the multiprofessional ICU team
    - High functioning team
    - Standardized expectations and professionalism
    - Mitigates patient care conflicts
    - Addresses financial issues
Putting out the fire, cont.

• SCCM and the ALCCM
  • Staffing models
    • Nurse: patient ratio ➞ 1:2
    • Use of APPs with ratio of 1:3 to 1:8
    • Physician: patient ratio ➞ 1:14
  • Alternative staffing models
    • Telemedicine
    • Residents/Fellows
• Ensuring diversity in the workforce
• Succession planning
Putting out the fire, cont.

• SCCM and the ALCCM
• Other considerations
  • Volume and timing of clinical work
  • Efforts to enhance worker well being
  • Cultivate community at work
  • Align values and strengthen culture
  • Promote work flexibility
  • Work-life integration
• Creating a Healthy Work Environment
  • American Association of Critical-Care Nurses
  • Based on 6 standards
  • Offers resources including assessment tool
Summary

• Burnout: the sizzle IS real
• Three dimensions:
  • Emotional exhaustion
  • Depersonalization
  • Decreased sense of personal accomplishment at work
• Personal strategies can be useful in preventing burnout; however,
• Operational strategies are more effective in preventing burnout
• SCCM and AACN offer strategies to improve the work environment and decrease the risk of burnout
Learning Assessment Question #1

• Question 1: Characteristics of burnout include which of the following:
  a) Emotional exhaustion
  b) Depersonalization
  c) Diminished personal accomplishment
  d) All of the above

• Answer B is the correct answer because burnout includes all three of the above features.
Learning Assessment Question #2

• Question 2: Practitioner-based interventions to prevent and treat burnout are more effective than organizational-based interventions.
  a) True
  b) False

• Answer B is the correct answer because evidence has shown that strategies aimed at organizational changes/processes are more effective in preventing and treating burnout than strategies which focus on the individual.
The SCCM Texas Chapter is a multidisciplinary organization composed of critical care practitioners, whose purpose is to foster collaboration among caregivers at a state level for the enhancement of patient care.

The Texas Chapter’s mission is to provide its members with educational opportunities, professional resources and a chance for networking with other critical care professionals from across the region in order to improve the quality of critical care.