

# Burnout: The Sizzle is Real



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# Learning Objectives

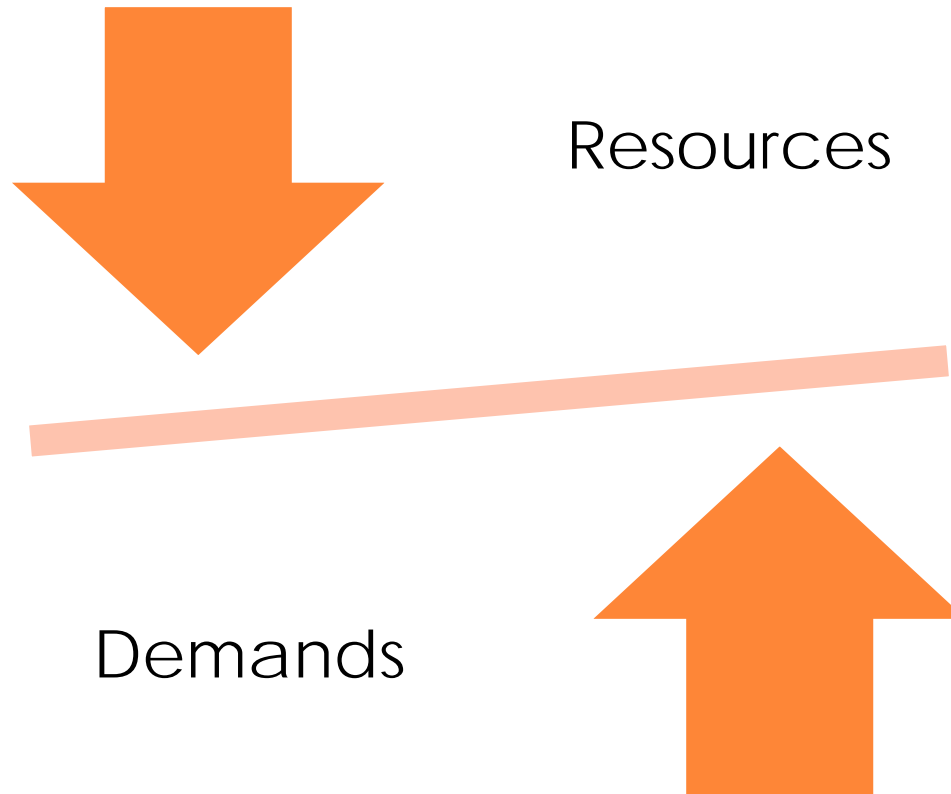
- Discuss the impact of burnout among healthcare professionals
- Describe the risk factors associated with burnout
- Discuss preventative measures at the organizational and provider level





# Burnout: What is it?

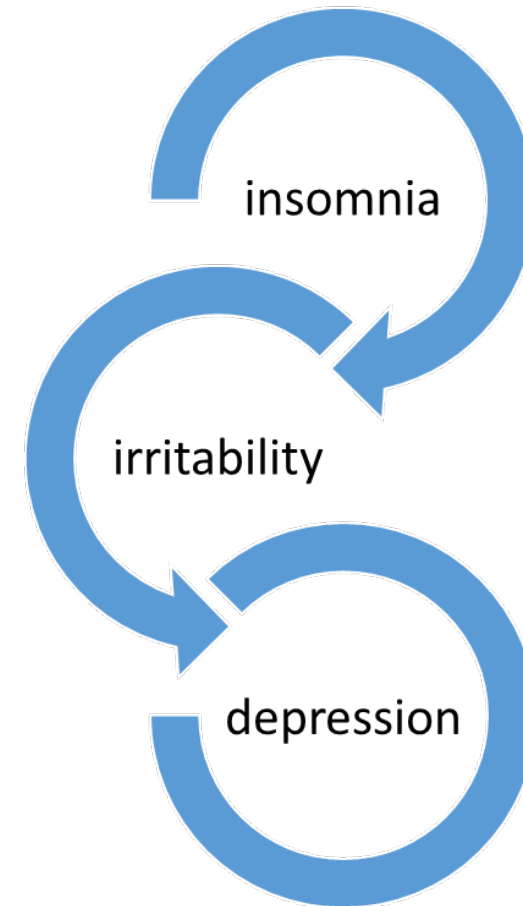
Syndrome as a result of stress





# What does it look like?

- Emotional exhaustion
  - instability
- Depersonalization
  - Cynicism
  - Inability to commit
- Sense of low personal accomplishment
  - Feeling of failure





# What does it feel like?

"Alone."

"I don't  
care  
anymore."

"There is  
something  
wrong with  
me."

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



## Experiencing Loss Without Experiencing Grief

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



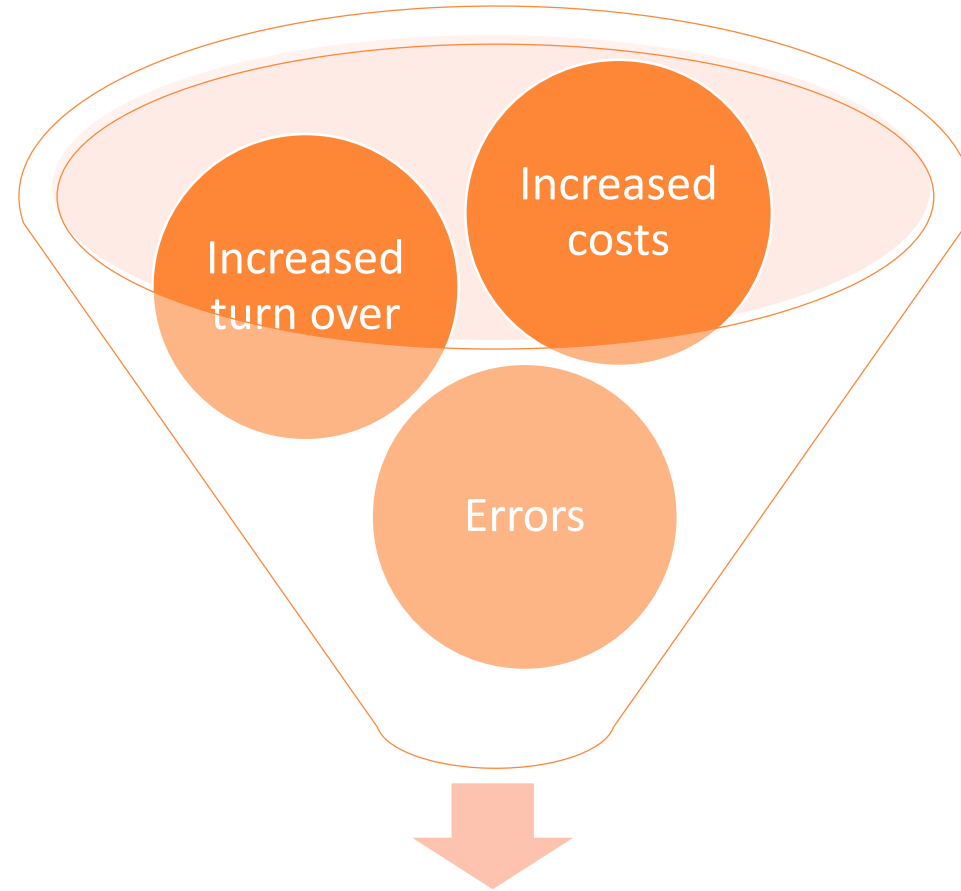


# The Sizzle Across Disciplines

- Advanced practice providers
- Clinical pharmacists
- Respiratory therapists
- Physical therapists
- Occupational therapists
- Dieticians



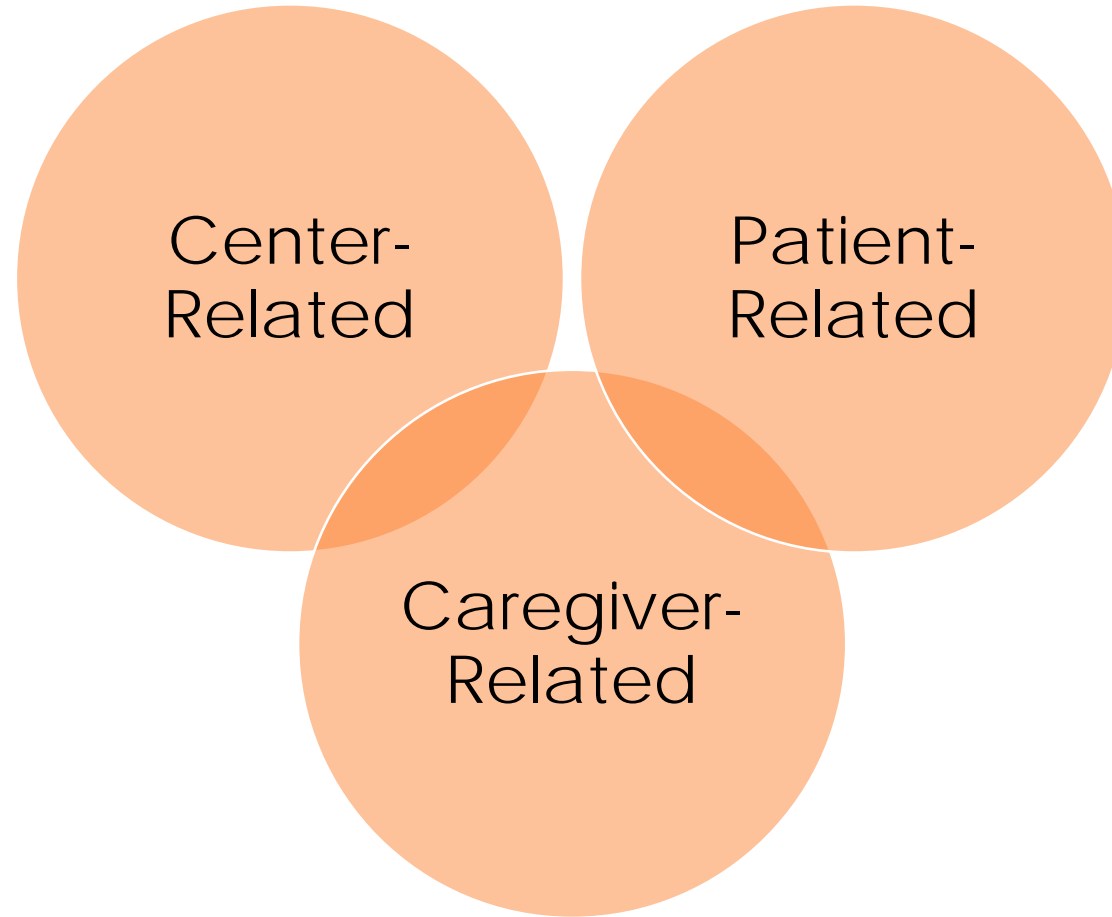
# Impact on Organizations



Poor quality health care delivery



# Risk Factors





# 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;  $\leq 40$  years
- Years of experience
- Education background – conflicting data



# Putting out the fire!

- Personal approaches
- Organizational approaches





# Putting out the fire, cont.

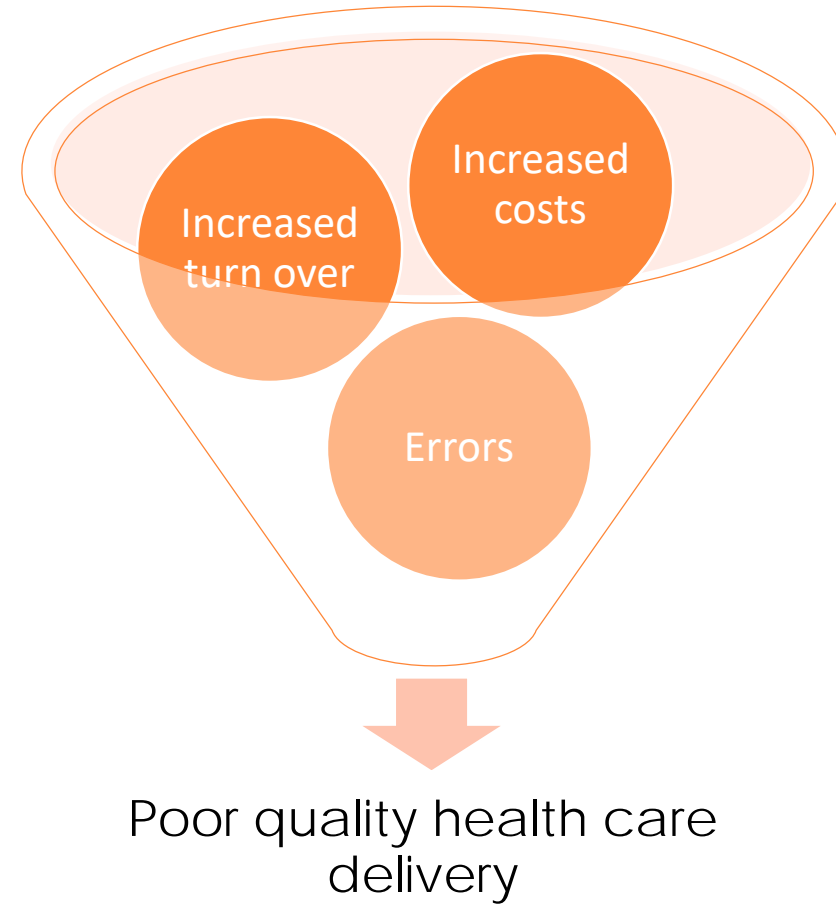
- Personal approaches
  - Stress reduction training/techniques
  - Communication skills
  - Relaxation techniques
  - Time management
  - Assertiveness training
  - Meditation
  - Placing emphasis on family, hobbies and social activities
  - Rest, exercise, and healthy eating habits





# Putting out the fire, cont.

- Organizational approaches
  - Increasing awareness
  - Understanding risk factors
  - Development of strategies





## 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.

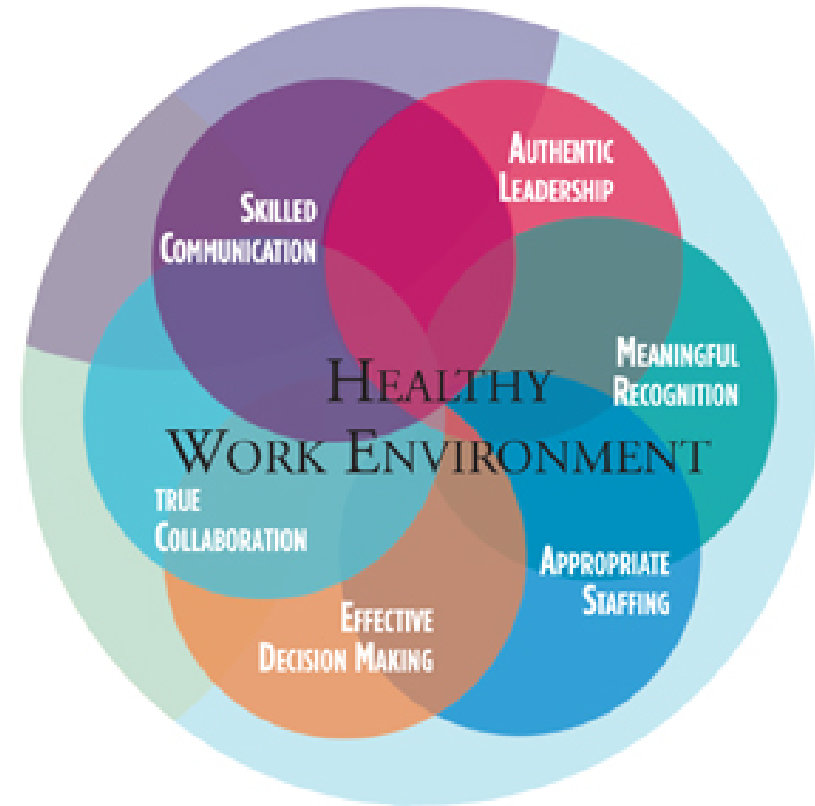


- SCCM and the ALCCM
  - Other considerations
    - Volume and timing of clinical work
    - Efforts to enhance worker well being
    - Cultivate community at work
    - Align values and strengthen culture
    - Promote work flexibility
    - Work-life integration



# Putting out the fire, cont.

- 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.





# Society of Critical Care Medicine - Texas Chapter

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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.

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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.

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