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Self-Care Practices for Advanced Practice Nurses: Burnout and Fatigue Prevention

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1 minute Mindfulness

Breathing in, I know I am breathing in.

Breathing out, I know I am breathing out.

Breathing in, I notice my in breath has become deeper.

Breathing out, I notice that my out-breath has become slower....

Breathing in, I calm myself.

Breathing out, I feel at ease.

Breathing in, I smile.

Breathing out, I release.

Breathing in, I dwell in the present moment.

Breathing out, I feel it is a wonderful moment.

Thich Nhat Hanh



Welcome and Introduction

- Have you ever experienced burnout in your professional life?
- How do you know when its time to rejuvenate? Take time off? Charge your battery?



Introduction

Statistics:

- 2021 Advanced Practice Registered Nurse Health and Well Being Study found that **33.3% reported that they had formally experienced burnout and 26.3% reported that they were currently experiencing burnout.**

Advanced practice nurses in various high demand work environments frequently care for patients and families with various life-threatening illnesses/diseases.

These situations may contribute to:



Compassion satisfaction used to identify positive emotions resulting from the nurse's work experience in caring for a patient (Stamm, 2002; 2010).



Burnout a “syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment”(Maslach, 1982, p. 3).



Secondary traumatic stress describes the negative thoughts, feelings, and behaviors experienced after learning about or being involved in supporting others' traumatic experiences (Ogińska-Bulik et al., 2021).



Compassion fatigue defined as invasive stress that begins to interfere with the ability to function (Joinson, 1992).

Understanding Burnout and Compassion Fatigue in APNs

A 2021 study by JAANP found that among 433 APRNs:

- 40.4% (175) reported never experiencing burnout.
- 33.3% (144) had experienced burnout in the past.
- 26.3% (114) were currently experiencing burnout.

Practice Environments

Abraham et al. (2021) investigated burnout among 396 primary care NPs from New Jersey and Pennsylvania. With a mean age of 49, these NPs averaged 38.9 work hours weekly, primarily focused on direct patient care and predominantly practicing in physician-owned clinics.

- Burnout Prevalence 25.3%
- Better relationships with physicians, independent practice support, professional visibility, and positive administration relations reduced NP burnout risk by 51%, 56%, 51%, and 58% respectively.

Subspecialty Practice Environments

Stamm et al. (2021) investigated the prevalence of compassion satisfaction, compassion fatigue, and secondary traumatic stress among advanced practice registered nurse subspecialties. Overall prevalence of compassion satisfaction 46%, burnout 51% and STS 40%.

- Older APRNs with experience (>15 yrs) had the highest mean for CS and lowest burnout/STS scores
- APRNs in psychiatric settings reported the highest mean burnout scores (23.6)
- APRNs in critical care settings reported the highest mean STS scores (22.5)



Specialty Areas of Practice

ED Providers (Ashooh et al., 2019).

- Younger & control-oriented ED providers report higher accomplishment than other healthcare workers, while older providers & those with children experience lower accomplishment & higher depersonalization.

VAD Programs Providers: Nurse Practitioners and Work Quality (Casita et al., 2019).

- NPs in mechanical circulatory support programs reported high burnout (personal, work-related, client-related). **Work-related burnout** most strongly predicted lower work quality of life, indicating that NPs with work-related burnout have significantly lower job satisfaction and well-being.

Practice Post COVID-19



APN Burnout and Stress Post-COVID (Stallter & Gustin, 2021)

Pilot study examined burnout and stress management among 154 Virginia APNs, post-COVID.

Findings:

- High burnout: 27%
- Moderate burnout: 69.5%
- Younger APNs and NPs reported higher burnout.
- Specific workplace setting (inpatient/outpatient) was not linked to burnout.

COVID-19 Risks for Pediatric APRNs (Peck & Sonney, 2021)

A survey of 796 pediatric APRNs found:

- 34% reported moderate/extreme burnout.
- 25% felt nervous/anxious.
- 15% felt depressed/hopeless.
- Pediatric APRNs face high risks of burnout and compromised mental health due to the pandemic.

Unique challenges faced by minority NPs

Brooks Carthon et al. (2023) explored health inequity, racism and burnout in Black NPs (n=16) working in Philadelphia. All participants reported caring for patients with health disparities. The study identified 4 key themes:

- **Addressing Inequities:** NPs witnessed & addressed systemic inequities in access & patient treatment
- **Emotional Strain & "Minority Tax":** Advocating for change caused emotional exhaustion. The burden of diversity work & microaggressions added stress.
- **Risks & Rewards:** Being a Black provider offered opportunities but also faced resistance
- **Uneven Engagement:** Organizations' DE&I efforts were perceived as performative, lacking real commitment.

These factors, coupled with limited organizational support, contribute to disproportionate burnout in minority NPs.



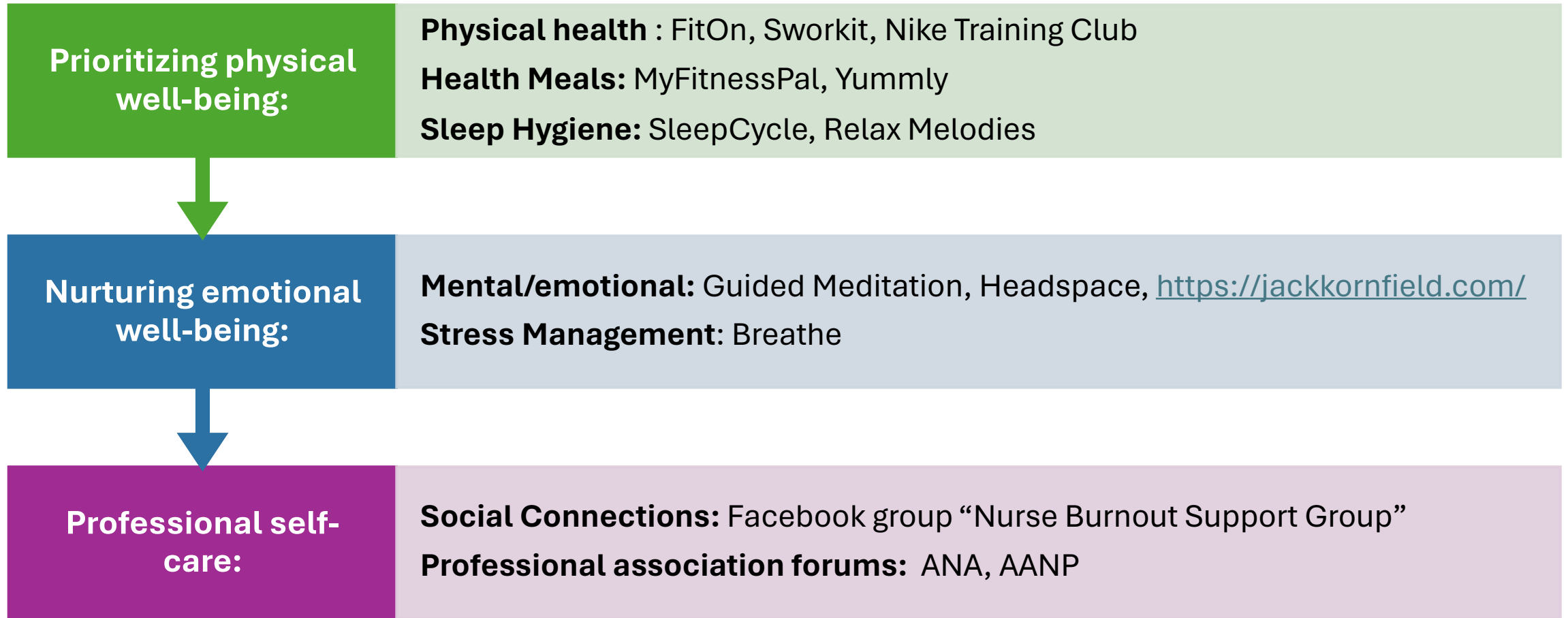
Risk Factors for Burnout & Fatigue in APRNs

- Early Career APRNs
- Practice Setting
- Poor Work Quality of Life
- Poor Organizational/Administrative Support



Self-Care Strategies for APNs

Potential Individual-level strategies for APNs



Personalized Self-Care Strategies

01

Self-
leadership

02

Facilitates
self-
determination

03

Autonomous
motivation

04

Participation
in self-
leadership
intervention

05

Intrinsic
motivation

(van Dorssen-Boog, P., et al., 2021)

Personalized Self-Care Strategies

- Mantra-based AMI Meditation Training (n=54)
 - 5-Day intervention training
 - Daily practice guided mantra-based AMI meditation
 - 20-min CD or MP3 recording
 - Monthly motivational letter

(Pettus, M., et al., 2023)



Personalized Self-Care Strategies

- Mindfulness in Motion (MIM) (n=275)
 - 8-week program
 - Week 1-8: Theme, Breath, Activity, Homework
 - Average respiration rate was reduced from 13.24 to 9.69
 - Perceived Stress (10-item scale; score range: 0-40) slight reduction
 - Week-1 (17.52 ± 6.25) → after Week-8 (13.52 ± 6.04).

(Merrigan, J. J., et al., 2023)



Personalized Self-Care Strategies

Three sessions classical music intervention and virtual reality (VR) (n=96)

VR session for 5 minutes during assigned work breaks in a private, dedicated space

Professional Quality of Life
(ProQoL)

- Decrease in burnout and secondary traumatic stress
- Increase compassion satisfaction

Anxiety (State-Trait Anxiety
Inventory)

- Decreased in anxiety score

Caring ability

- Increased knowing and courage

(Hayakawa, J., et al., 2022)



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Application

- Mindfulness App → HeadspaceTM (Chu et al., 2022)
- Sleep hygiene and mindfulness (Dai et al., 2023)
- HRV (Kim et al., 2018) → ex. HeartifyTM

Pet Therapy (n=149)

- Stress reduction
 - Burnout reduction
 - Improve well-being
- (Stallter & Gustin, 2021)



Organizational-Level Strategies: Addressing APRN Stress from the Frontlines

A 2020 study (Kline et al.) surveyed 754 APRNs (mostly female NPs & PAs) on work stress and work-life balance. They identified key strategies for reducing stress:

- **Reduce Job Stress:** Less ambiguity, more autonomy (scheduling, influence, patient time), and workload management (reduced pressure, support, breaks).
- **Improve Leadership:** Better communication, responsible leadership, efficient workflows, and staffing.
- **Promote Wellbeing:** Professional development, positive work relationships, work-life balance support (benefits, stress management)

Workplace resources for APNs

Organization Resources

- Employee Assistance Programs (EAPs)
- Available Wellness Programs
- Flexible Work Arrangements

Leadership Resources

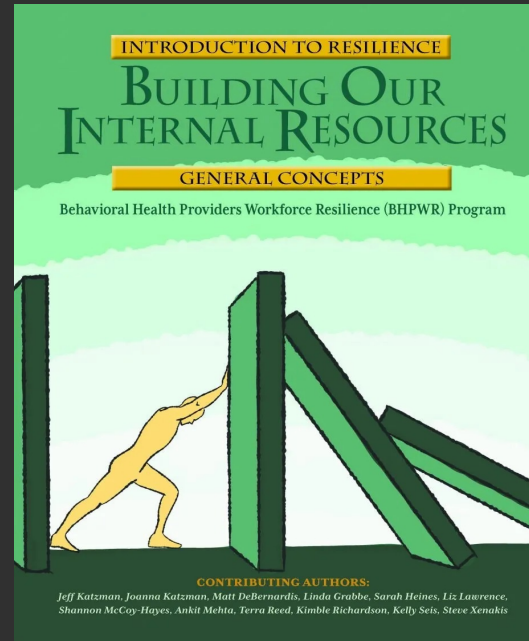
- Institute for Healthcare Improvement (IHI) Open School for Healthcare Leadership:
 - ["What Matters to You?" Conversation Guide for Improving Joy in Work | Institute for Healthcare Improvement \(ihi.org\)](#)
- The Schwartz Center Healing Healthcare Initiative
<https://www.theschwartzcenter.org/hhi/>

Case Study

- Helen, a family nurse practitioner at a community clinic, has been married for a decade and has three school-age children. Although she enjoys her job, she is struggling with work-life balance. She has been feeling tired and burnt out lately, and her colleagues have noticed that she is having trouble focusing, calling in sick, and not feeling well.
- What immediate steps do you suggest Helen take to address this situation and ensure her well-being?



Free Resources



Weekly
Behavioral
Health
Providers
Workforce
Resiliency
Program
Sessions



Q&A



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