

Prevention Actions of Burnout Syndrome in Nurses: **Quality Improvement**

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(10/01/2021)

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Burnout is a prominent psychosocial issue within healthcare, especially for nurses who work in stressful environments. *Burnout* is a term that emerged in the 1970s. *Burnout* is physical and emotional fatigue that results in demotivation that can evolve into total exhaustion and leave healthcare workers with a sense of failure. Burnout is significant to nursing practice because nurses strive to provide quality care to patients. However, prolonged stressors can lead to a breakdown in emotional and physical well-being, which leads to poor patient care. Quality improvement aims to improve and enhance the healthcare system by continuously tracking the results of nursing processes and utilizing improvement methods to analyze and design changes (QSEN Institute, 2020). The use of knowledge, skills, and attitudes/behaviors is a criterion used to monitor, measure continuously, and evaluate the quality of service provided by the healthcare system (QSEN Institute, 2020). Knowledge criteria outline strategies for the outcome of care and demonstrate the significance of measurement and variation when assessing the quality of care. The knowledge criteria also facilitate different approaches to improving care quality (QSEN Institute, 2020). The use of tools to limit ambiguity in care processes and quality measurements to interpret performance while providing quality improvement information in the healthcare setting are all a part of the skills criteria (QSEN Institute, 2020). Lastly, attitudes and behavior criteria seek to view healthcare situations through the patient's eyes. It values measurement and its role in providing adequate patient care and continuously improves the individual expression of values, preferences, and needs (QSEN Institute, 2020). The significance of the QSEN competencies of quality improvement is to improve the quality and safety of the healthcare system.

The purpose of the article "Prevention Actions of Burnout Syndrome in Nurses" is to address factors that lead to burnout syndrome in nurses and identify actions that help prevent nurse burnout (de Oliveira et al., 2019). The article evaluates that nurses who work in inpatient settings, especially those working in critical care and emergency departments, are at the highest risk for burnout syndrome (de Oliveira et al., 2019). Research shows that prolonged stressors in the work environment lead to depersonalization, reduction in personal fulfillment, and emotional exhaustion (de Oliveira et al., 2019). Because nurses work in a setting full of competitiveness, death, and caring for ill patients, they are at the most significant risk for emotional exhaustion, which is the number one cause of burnout. This article is linked to impact nursing practice because it directly correlates with patient care and satisfaction. If there is a reduction in job satisfaction due to emotional exhaustion, there will be a reduction in the quality of patient care (de Oliveira et al., 2019).

"Stress is a system of adaptation of the individual to any unforeseen situation and prepares them for a quick and effective action" (de Oliveira et al., 2019). If the nurse is experiencing exhaustion physically or emotionally, there is a reduction in adaptation to stress. By identifying and offering methods to reduce burnout, there will be an improvement in the quality of care provided. QSEN's competency of quality improvement seeks to aid in the reduction of negative factors that lead to inadequate patient care (QSEN Institute, 2020).

The implementation of quality improvement is applicable in most healthcare settings. However, burnout is mainly associated with inpatient care. Therefore, it would benefit the most from implementing the quality improvement plan. The research article identified several interventions that can reduce burnout in nursing care—breaking each intervention into three categories based on the type of intervention. The first is personal, which the nurse can do on their own; yoga,

cognitive evaluations, coping strategies, and stress management techniques—group interventions such as communication skill training, psychosocial evaluations, spiritual pain assessments, and group meditation courses. Lastly, organizational focuses on how the organization can improve nurse's well-being, teamwork building exercises, and implementing strategies that improve job satisfaction and manage stress. The research found that 80% of interventions used help reduce burnout among healthcare professionals. Resources that need to be available during the pre, intra, and post-implementation stages are the National and Local quality improvement toolkits that provide a framework for the quality improvement strategy (Institute for Healthcare Improvement, 2021). The suggested change will not only improve nursing satisfaction with their jobs but increase patient satisfaction as well. If the nurse is satisfied with their job, this leads to stress reduction, and thus patient care is improved. Nurses who are emotionally and physically well are better adept at providing better care and increasing patient and nursing safety. There are surveys that patients can fill out after their stay in the hospital; the surveys consist of patient satisfaction. If the patient is not satisfied with their care, the hospital does not receive reimbursement. Medicare is one of the central hospital reimbursement agencies that will pay hospitals for providing excellent care to Medicare patients (Centers for Medicare and Medicaid Services, 2021).

References

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