Abstract

Background and Purpose

Burnout leads to job dissatisfaction, poor quality of life, and negative patient outcomes. There is limited data on APRN burnout. The lack of early recognition and intervention for burnout among APRNs is detrimental to their health. The purpose of this project is to evaluate the impact of a 12-week evidenced-based burnout education program for inpatient pediatric APRNs.

Methods

A pre/posttest intervention design comparing physical and emotional symptoms of burnout at baseline and after the intervention was utilized. The interventions were a burnout PowerPoint presentation and increased leadership presence. Pre- and post-intervention surveys were administered to assess participant’s level of burnout. A Likert scale and a validated assessment tool was used to measure burnout in medical professionals.

Results

40 participants who met inclusion criteria volunteered. All participants completed the pre- and post-intervention surveys. Each aim was considered statistically significant. Physical and emotional symptoms of burnout were more easily recognized after completing the intervention. Increased leadership presence created a positive response.

Conclusions

Findings suggest a burnout program with leadership presence is a key component in having APRNs recognize burnout symptoms and intervene early. Completing a PowerPoint about burnout led to APRNs easily recognizing physical and emotional symptoms of burnout. Increasing leadership presence improved relationships with APRNs.

Implications

The COVID pandemic limited this project. The selection of participants was limited to one division due to limiting amount of staff in meetings, divisions cutting APRNs hours, and the project site limiting the amount of student projects during the pandemic. The division for this project site has a patient population with higher acuity and end of life care. This division also has less APRN independence. It would be important to include other divisions at the project site for future studies to determine if patient acuity and independent practice impacts burnout as the literature suggests.

Keywords: Burnout, APRNs, pediatric hospital, Maslach Burnout Inventory, barriers