

Abstract

Objectives: This quality improvement project aimed to introduce evidence-based mindfulness techniques for mitigating compassion fatigue among critical care nurses amidst the COVID-19 pandemic and to evaluate nurses' perceived benefit of mindfulness practices.

Methods: A multimodal mindfulness-based program that utilized the electronic Headspace application was implemented at Magnet-designated hospital located in the Midwestern United States. Participants were recruited electronically via stratified, voluntary response sampling. The Professional Quality of Life Scale (ProQOL-5) was measured at 0 and 10 weeks via Qualtrics, with nurses' perceived usefulness of mindfulness practice evaluated at 10 weeks using a 4-point Likert scale.

Results: Forty-one participants completed the initial ProQOL-5. Participant attrition was 44% at follow-up, which resulted in a total sample size of twenty-three. Results of the initial survey indicated that nurses who floated to critical care exhibited lower compassion satisfaction ($p = .002$) and higher secondary trauma ($p = .05$) than core critical care nurses. At 10 weeks, Compassion satisfaction increased (32), burnout decreased (27), and secondary trauma was unchanged (27). The difference between initial and repeat compassion satisfaction ($p = .765$), secondary trauma ($p = .986$), and burnout ($p = .640$) did not reach statistical significance. Additionally, 8.4% of respondents reported mindfulness techniques to be very helpful, 17.4% moderately helpful, 47.8% slightly helpful, and 21.7% not helpful.

Conclusions: Statistical significance was not achieved for ProQOL-5 scores; however, compassion satisfaction and burnout subscales improved, lowering the risk of compassion fatigue. Further evaluation of characteristics and interventions specific to nurses who float to critical care units is warranted.