Compassion fatigue is a complex phenomenon emerging from prolonged exposure to physical, emotional, and psychological stress. Burnout, secondary trauma, and compassion satisfaction play a vital role in the development of compassion fatigue. Compassion fatigue is a significant threat to clinician wellbeing and patient safety. Amid the 2020 COVID-19 outbreak, critical care nurses face unique challenges which place them at an even greater risk of developing compassion fatigue.

### Introduction

Compassion fatigue is a significant threat to clinician wellbeing and patient safety. Amid the 2020 COVID-19 outbreak, critical care nurses face unique challenges which place them at an even greater risk of developing compassion fatigue.

### Objectives

**Purpose:** The purpose of this quality improvement project was to implement an evidence-based, multi-modal mindfulness program to mitigate the effects of compassion fatigue in critical care nurses.

**Aim 1:** Implement and assess the effectiveness of a multi-modal, evidence-based mindfulness program in mitigating compassion fatigue in critical care nurses by measuring the Professional Quality of Life Scale (ProQOL-5) at 0 and 10 weeks.

**Aim 2:** Evaluate participants’ perceived benefit of mindfulness practice with the use of a 4-point Likert scale to be administered at 10 weeks via Qualtrics.

### Methods

**Six Sigma methodology was chosen to guide evidence translation through the process of define, measure, analyze, improve, and control.**

**Evidence-Based Intervention:**

- The Professional Quality of Life Scale (ProQOL-5) was measured pre- and post-intervention at 0 and 10 weeks via Qualtrics.
- Nurses’ perceived benefit of mindfulness practice was measured at 10 weeks using a 4-point Likert scale via Qualtrics.

**Statistical Analysis:**

- The Wilcoxon signed-rank test was used to evaluate change in ProQOL-5 scores.
- The Mann-Whitney U test was used to assess the distribution of ProQOL-5 scores between units as well as across categories of mindfulness use.

**Participants** demonstrated moderate levels of secondary trauma (73.2%) and burnout (78.2%) according to the ProQOL-5 scales.

**Aim 1 Findings:**

1. At 10 weeks, compassion satisfaction increased (32), burnout decreased (27), and secondary trauma was unchanged (27) though statistical significance was not reached.

**Aim 2 Findings:**

1. Regular use of mindfulness techniques was reported by 48% of participants.
2. More than 78% of participants found mindfulness-based practice to be helpful.

### Results

**Compassion** satisfaction was influenced by unit (Al Barmawi et al., 2019; Wijdenes, Baget, and Sheppard, 2019). In contrast to existing literature, this project identified lower compassion satisfaction and higher secondary trauma among nurses with ten or more years of critical care experience when compared to less experienced nurses (Al-Majid et al., 2018; Conversano et al., 2020; Copeland and Henry, 2018).

**Future considerations for practice include evaluating the factors contributing to secondary trauma and compassion fatigue in nurses who float to critical care and assessing the lived experiences of nurses during COVID-19 who have more than 10 years of critical care experience.

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