Abstract

**Background:** Compassion fatigue and its impact on nurses, healthcare organizations, and patients is an urgent problem, particularly within the context of the COVID-19 pandemic. This quality improvement project sought to evaluate the impact of brief, unit-based mindful self-compassion (MSC) practices on measures of compassion fatigue (CF) and self-compassion (SC) among nurses working within a medical-oncology intensive care unit (ICU).

**Methods:** This project utilized a single-group pre-post study design to evaluate changes in measurements of CF and SC among nurses obtained through pre, post, and 30-day post intervention surveys. Post surveys included open-ended questions about nurses’ experiences of the intervention. The intervention consisted of five-minute audio practices based on key concepts from MSC training and Neff’s Theory of Self-Compassion, which were provided in-person to medical oncology ICU staff over a 30-day period.

**Results:** A convenience sample of 47 nurses were recruited to complete pre-surveys. Of these participants, 12 post-survey responses were paired and six participants had matched responses at all three periods of measurement. Although not statistically significant, there was a sustained decrease in group mean CF scores and an increase in group mean levels of SC among those with matched 30-day post-intervention responses. Nurses indicated that the intervention encouraged them to practice self-care but participation in MSC practices during busy shifts was challenging.

**Conclusions:** This quality improvement project found that brief, unit-based MSC practices may decrease measurements of CF and increase levels of SC among nurses. Further research is necessary to determine the minimum amount of MSC practice required to produce a significant impact on levels of CF and SC among nurses. Healthcare organizations may promote nurses’ wellbeing through MSC interventions focused on access and feasibility.