# Reducing and Preventing Compassion Fatigue in Nurses Through Mindful-Self Compassion Practices Salomé M. Loera, BSN, RN, PCCN, CCRN-CMC, Pamela Mulligan, BSN, RN, NBC-HWC, Marie Cockerham MSN, RN, CCRN, Deborah Busch, DNP, CPNP, IBLC, CNE, FAANP

## Introduction and Background

- Healthy work environments that support the well-being of nurses have been recognized by the American Nurses Association and the American Association of Critical Care Nurses as an important issue in contemporary nursing<sup>1</sup>.
- Critical care nurses are at increased risk for compassion fatigue (CF), compounded by COVID-19 pandemic<sup>2</sup>.
- Compassion fatigue contributes to diminished caring behaviors, increased turnover, and impaired coping abilities among nurses<sup>2</sup>.
- Increased levels of self-compassion (SC) and mindful self-compassion (MSC) training are associated with reduced measures of compassion fatigue<sup>3,4</sup>.
- Nurses working within a medical-oncology intensive care unit (ICU) at a large academic medical center during the **COVID-19 pandemic** were identified as being at risk for compassion fatigue.

## **Purpose and Aims**

- The purpose of this DNP scholarly project was to increase measures of SC and reduce levels of CF among medicaloncology ICU nurses through **brief, unit-based MSC practices** delivered over 30 days.
- Aim 1: Increased levels of SC among nurses, as measured by the Self-Compassion Short Form (SC-SF).
- Aim 2: Decreased levels of CF among nurses, as measured by Compassion Fatigue Short Scale (CF Short Scale).

## Methods

- Quality-improvement project with a longitudinal single-group pre/post study design.
- Informed by an **integrative review on the relationship** between CF and SC among nurses.
- Five-minute audio practices developed using key concepts from **Neff's Theory of SC** and **MSC training**, with a **unique emphasis on healthcare experiences**<sup>5</sup>.
- Mindful self-compassion practices offered in-person to all staff **during the night and day shift** over 30 days.
- Flip cards with QR code links to the practices placed in common staff areas to support sustainable access to the practices.
- Pre, post, and 30-day post surveys completed by eligible nurses included SC-SF, CF-Short Scale, and open-ended questions about nurses' experiences.
- Related-samples Wilcoxon Signed Rank non-parametric **test** for statistical analysis of pre/post SC and CF scores.
- Friedman non-parametric test for statistical significance of SC and CF scores at all three intervals of measurement.



47 pre-survey responses **12 paired pre/post responses** 6 matched responses for all three surveys

Staff participated in intervention 90 times 75% of participants were night shift nurses



Mindful Self-Compassion Practices Introduction



Self-Compassion for Clinicians An Infusion of Kindness





A Compassionate Body Scan A Bair Hug for Clinicians

Intervention accessed via QR code 54 times

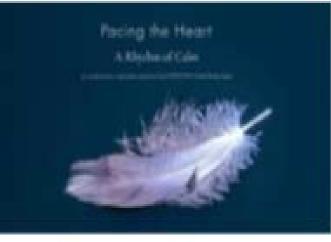
**Resuscitation for Clinicians** A Space to Restore



Lovingkindness Practice for Clinicians A Slow Push of Compassion



Embracing the Good Infusing the Moment with Gratitude

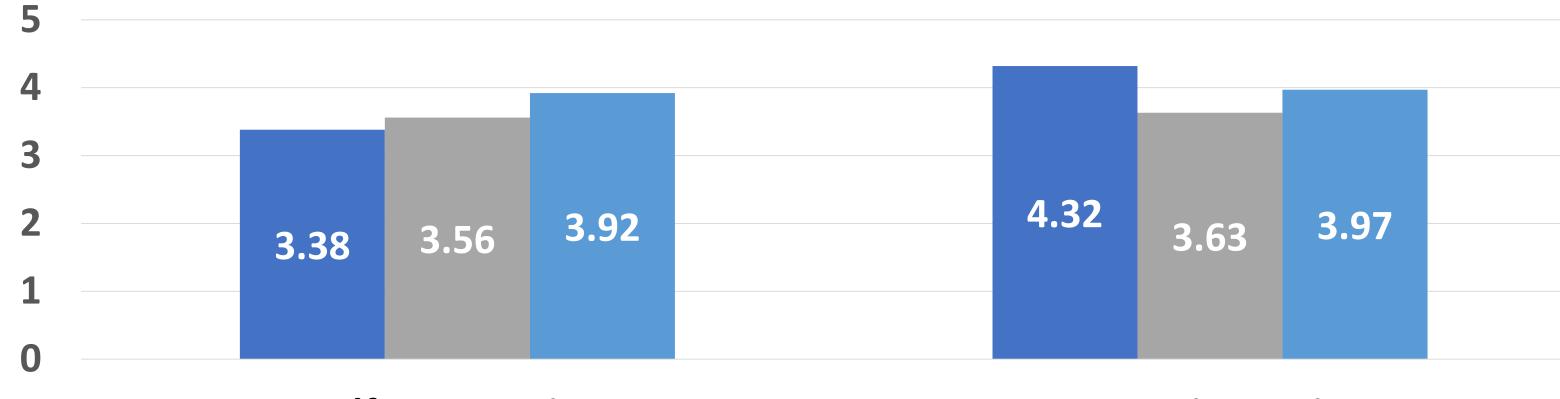


Pacing the Heart A Rhythm of Calm



Compassionate Movement A Volume Expander for Clinicians

### Self-Compassion and Compassion Fatigue Group Mean Scores



Self-Compassion Pre-Intervention

Note: Data shown for matched responses at all three periods of measurement (N=6).

### Nurses' Impressions and Experiences of Mindful Self-Compassion Practice Intervention

**Desire for Increased Access to Intervention** 

**Difficulty Intergrating Intervention into Routine** 

Integrated Intervention or Similar Practices into Routine

Help Me Cope with Anxiety/Stress Related to Work

**Effective Approach to Reset/Rejuvenate** 

Help Me Practice Self-Compassion & Mindfulness

### Selected Responses from Nurses: Impact of the the MSC Practice Intervention

"They are a a nice way to slow down and breath during my shifts" "They allowed me to take a deep breath and step away from work for a minute to care for myself lovingly."

"They reminded me to slow down and take time for myself ... instead of powering through and putting my patients' needs always before my own." "They really help to decrease my stress level and reset, especially during a tough shift."

## Results

### Aim 1: Self-Compassion

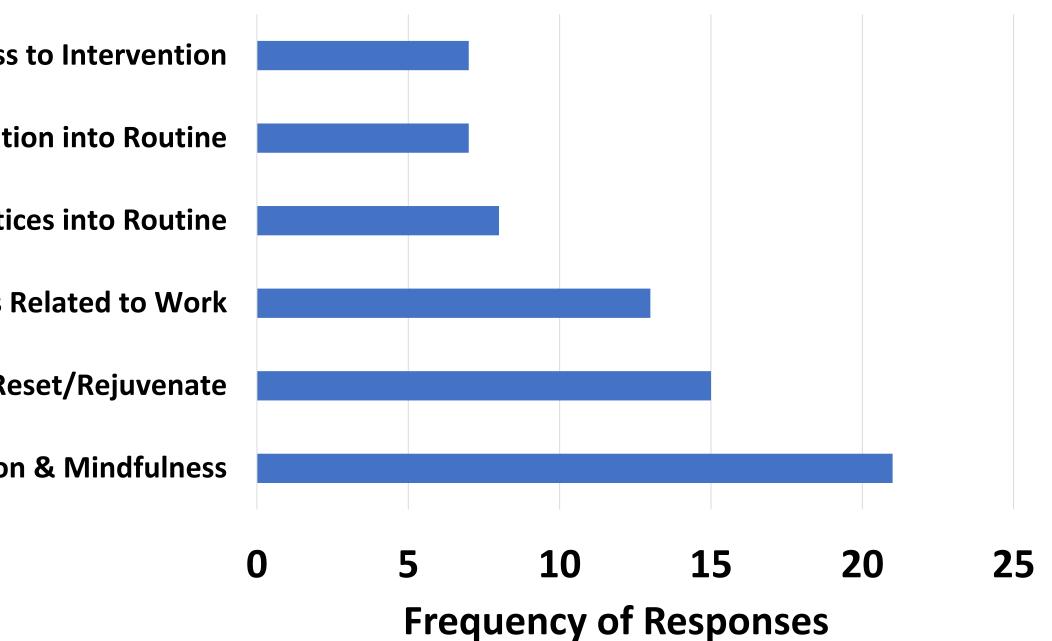
• Decrease in SC-SF scores among paired pre/post test respondents (N=12) with preintervention mean score of 3.24 and post-intervention mean score of 3.10 (p = .969); related to outlier scores for two survey participants with little or no participation in the intervention. • Sustained increase in SC-SF scores for matched responses at all three periods of **measurement** (N=6) with pre-intervention mean score of 3.38, post-intervention mean score of 3.56, and 30-day post-intervention mean score of 3.92 (p = .115).

### Aim 2: Compassion Fatigue

Decrease in CF-Short Scale scores among paired pre/post test responses (N=12) with preintervention mean score of 4.96 and post-intervention mean score of 4.44 (p = .126). • Sustained decrease in CF from pre to 30-day post intervention for matched responses at all three periods of measurement (N=6) with pre-intervention mean score of 4.32, postintervention mean score of 3.63, and 30-day post-intervention mean score of 3.97 (p = .135).

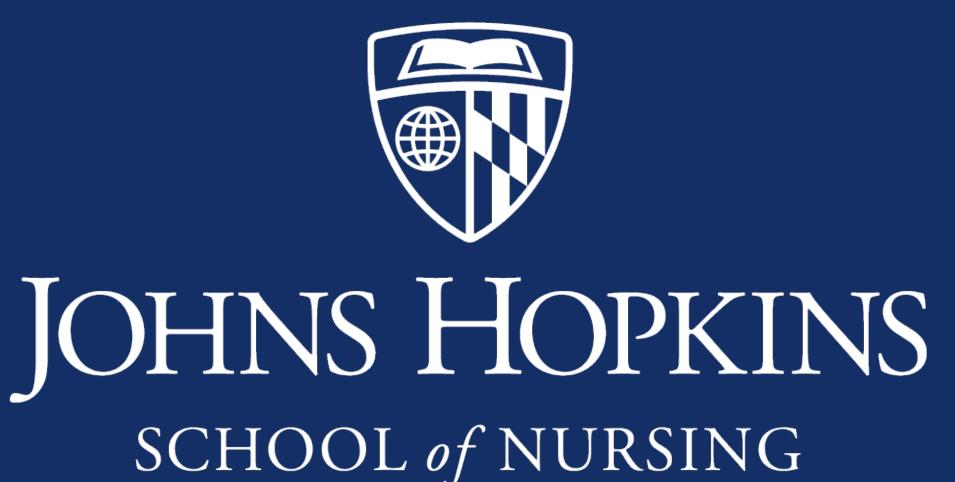
### **Compassion Fatigue**

### Post-Intervention 30-Day Post-Intervention



### **Pre/Post** Age Cate 18-29 ye 30-39 ye 40-49 ye 50-64 ye Gender l Male Female Hispanic, Yes No Race, n (% Asian, A White, Caucasiar

well-being-initiative/ The Guilford Press.



## Demographics

Survey Participants	(N = 12)
gory, n (%)	5 (42)
ears	4 (33)
ears	
ears	2 (17)
ears	1 (8)
dentity, n (%)	3 (25.0) 9 (75.0)
'Latino Ethnicity, n (%)	
	2 (17)
	10 (83)
%)	2 (17)
sian-American	10 (83)
Caucasian	10 (00)

## Conclusions

 Clinical leaders and healthcare organizations may find brief MSC practices to be an **ideal approach to reducing** CF and supporting the wellbeing of caregivers.

• 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 Future QI initiatives should ensure the MSC intervention is delivered with a **focus on feasibility and accessibility** to support nurses' participation.

• **Try it** : Scan the QR code and experience 5 minutes of mindful self-compassion practice



## Dissemination

 This QI project was selected for poster presentation at the National Association of Clinical Nurse Specialists (NACNS) annual conference in 2021.

 This project will be submitted for poster presentation at the American Association of Critical Care Nurses (AACN) National Teaching Institute (NTI) 2022 conference. • This project may be published within a peer-reviewed journal.

## Citations

1. American Nurses Association. (2021). Well-being initiative. https://www.nursingworld.org/practicepolicy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/the-

2. Alharbi, Jackson, & Usher (2020). The potential for COVID-19 to contribute to compassion fatigue in critical care nurses. Journal of Clinical Nursing, 29 (15-16), 1-3. https://doi.org/10.1111/jocn.15314 3. Delaney, M. C. (2018). Caring for the caregivers: Evaluation of the effect of an eight-week pilot mindful self-compassion (MSC) training program on nurses' compassion fatigue and resilience. PLoS One, 13(11). https://doi.org/10.1371/journal.pone.0207261

4. Regan, T. A. (2017). Effect of mindfulness and self-compassion training on stress and compassion fatigue in nurses [Doctoral dissertation, Saybrook University] ProQuest LLC.

5.Germer, C., & Neff, K. (2019). Teaching the mindful self-compassion program: A guide for professionals.