

# [Nurse moms case study](https://assignbuster.com/nurse-moms-case-study/)

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A registered nurse moms to Barnes-Jewish (or any other) hospital after extensive training in human health and patient care. But one of the major challenges facing a nurse is not a matter of deploying technical skills; it is how to cope with the day-in, day-out experience of witnessing patients’ suffering and sometimes death. Especially during periods when several of their patients have poor outcomes, nurses can feel worn down by the stress.

They can suffer “ compassion fatigue,” experienced as sadness, despair, and reduced empathy. At worst, nurses’ health suffers, and they find homeless avoiding certain patients and perhaps failing to deliver quality care when they fail to notice or correctly interpret patients’ needs. A commitment to high-quality care and concern for its nurses’ well-being has led Barnes-Jewish to offer training in how to cope with stress and avoid or recover from compassion fatigue.

The issue first received attention when three nurse managers agreed they had a problem with high turnover and poor patient satisfaction with nursing care in the oncology unit. Because patients with cancer can become very ill, caring for them can pose a heavy motional and physical strain. Nurses seemed to be coping by detaching themselves emotionally, which patients experienced in a negative way.

With this evidence of a problem, the nurse managers asked Barnes-Jewish director of research for patient care services and the head of its patient and family counseling program to help.

They interviewed nurses and concluded that the issue was compassion fatigue, so they suggested a program to help the nurses cope. The hospital contracted with Eric Sentry, a psycho-therapist with a specialty in teaching disaster responders and emergency physicians how to manage stress. He developed a program suitable for use with the nurses and other staff members at the hospital. The course describes symptoms of compassion fatigue and activities that promote resiliency in the face of stress.

According to the course, caregivers will be more resilient if they take five steps: (1) self-regulation, or simple exercises such as deep breathing to lower the physical response when they perceive a threat; (2) intentionality, which means reminding themselves to follow their values and original motivation, rather than Ewing overwhelmed by other people’s endless demands; (3) self-validation, in which they keep in mind the positive impact they have on patients; (4) formation of a support network; and (5) self-care so they do not burn out.

The hospital first tried the program in a pilot test with 14 oncology nurses. After five weeks of 90-minute sessions once a week, the nurses saw an improvement in their coping ability. The hospital decided to make the program available to all the oncology nurses. Gentry trained 25 hospital staffers-including physician assistants, psychologists, chaplains, ND social workers-to deliver the course.

Seeing the impact on the oncology elephantine, others in the hospital became interested in the training, so Barnes- Lewis recently made it available to the entire staff, including doctors, nurses, and support personnel.

Nurses who have participated in the training say parts of it have felt strange. Not everyone was eager to gaze into a partner’s eyes and state affirmations, and male employees were sometimes mystified by an exercise that involved relaxing pelvic-floor muscles (a muscle group that tends to tighten under tress). However, after completing the program, nurses have reported feeling more positive about their profession and better able to cope with the stress that goes with it.