Texas Hospital Association Foundation

NUGGETS OF KNOWLEDGE

Presented by Infection Control Consultants of New Mexico

ICCNM
Infection Control Consultants of New Mexico

Welcome

IC Nuggets of Knowledge Series are monthly one-hour learning sessions using a web-based format to share information, network, and opportunity to address questions and concerns with ICCNM Consultants

When: 1:00 to 2:00 pm

2nd Thursday of the month

If you have feedback on this learning opportunity or have suggestions for future learning opportunities, feel free to reach out to me at any time!

- ncostilla@tha.org

Introductions

- Infection Control Consultants of NM (ICCNM Consulting)
- New Mexico based consulting company
- Consultants are certified in Infection Control (CIC)
- Presenters for this series
  - Kerry Flint, PhD
  - Terri Kangas-Feller
  - Barbara Mooney

- www.iccnm.org

Burnout

June 16, 2022

Presented by Infection Control Consultants of NM

Kerry Flint, PhD

Learning Outcomes

- Describe how burnout has impacted IPs.
- Discuss the association between burnout and HAI.
- Identify strategies for self-care.

Burnout

- Psychological syndrome emerging as a prolonged response to chronic interpersonal stressors on the job
- 3 primary characteristics
  - Overwhelming exhaustion
  - Feelings of cynicism & detachment
  - Sense of ineffectiveness & lack of accomplishment

World Psychiatry 2016;15:103–111

Moral Injury

"a deep soul wound that pierces a person's identity, sense of morality and relationship to society"

Diane Silver

- Moral injury
  - the challenge of simultaneously knowing what care patients need but being unable to provide it due to constraints that are beyond our control.
  - Moral distress has been known to manifest as physical ailment and/or psychological suffering.
    - Muscle tension, headaches, gastrointestinal upset, and fractured sleep
    - Feelings of exhaustion, frustration, helplessness, guilt, shame and worry

Williams, R. D., Brundage, J. A., & Williams, E. B. (2020).

Dean, W., Talbot, S., & Dean, A. (2019).

Burnout Vs. Moral Distress

- Burnout suggests that the problem resides within the individual, who is in some way deficient. It implies that the individual lacks the resources or resilience to withstand the work environment. Since the problem is in the individual, the solutions to burnout must be in the individual, too, and therefore, it is the individual's responsibility to find and implement them.

- Moral injury locates the source of distress in a broken system, not a broken individual, and allows us to direct solutions at the causes of distress. And in the end, addressing the drivers of moral injury on a large scale may be the most effective preventive treatment for its cumulative effects among health care providers.

Dean, W., Talbot, S., & Dean, A. (2019).

Healthcare Worker Burnout

- Drivers
  - Work overload
  - Lack of control
  - Insufficient reward
  - Breakdown of community
  - Absence of fairness
  - Conflicting values

COVID-19 & Burnout (pandemic fatigue)

- Limited resources, longer shifts, disruptions to sleep and to work-life balance, and occupational hazards associated with exposure to COVID-19 have contributed to physical and mental fatigue, stress and anxiety, and burnout.
- 4 major contributors to COVID-19–related occupational fatigue and burnout identified:
  - occupational hazards
  - national versus locally scaled response
  - process inefficiencies
  - financial instability.

Sasangohar, F., Jones, S. L., Masud, F. N., Vahidy, F. S., & Kash, B. A. (2020).

IP Burnout

RESEARCH ARTICLE Open Access

A cross sectional study of organizational factors and their impact on job satisfaction and emotional burnout in a group of Australian nurses: infection control practitioners

Katie Page[1*] and Nicholas Graves[2]

Abstract

Background: Infection control practitioners (ICPs) are a group of specialized nurses fundamental to effective healthcare infection prevention and control initiatives. Relative to other groups of nurses much less is known about their working conditions. Organizational factors may impact ICPs' levels of job burnout and, subsequently, their quality of practice. We measure a range of c working conditions of ICPs and show how these are linked to job satisfaction of Australian ICPs.

Methods: We conducted a cross sectional study using an online survey. All e public hospitals in Australia were invited to participate. One hundred and fift

Results: ICPs are moderately to highly satisfied with their job but show high pressure and cognitive demands. Low job satisfaction was associated with les organizational support and poor communication. In contrast, emotional burn pressure and cognitive demands coupled with poor communication.

Discussion: This study provides new evidence about the organizational cont factors that impact on job satisfaction and emotional burnout. These findings infection prevention and control programs to suit local organizational contex determine the precise nature of these relationships and the downstream imp outcomes.

Conclusions: Organizational context and factors are important to consider w implementation of infection control programs.

Keywords: Infection control, Nurses, ICP, Organizational factors, job satisfactic

Predicting Job Burnout

$R = 0.61$ ($R^2 = 0.37$), $p < .001$

High time pressure and cognitive demands coupled with poor communication and low job control predict job burnout in ICPs.

Variable	Beta
Perceived org support	-.103
Time pressure	.333***
Job control	-.139+
Communication	-.270*
Safety climate	-.012
Cognitive demands	.157*
Support senior mgt	.097
Age	.119

+ p < .10* p < .05; ** p < .01; *** p < .001

IP Well Being Survey 2021

- APIC & Ohio State University
- Survey May-July 2021
- Respondents
  - APIC Members
  - 93% Female
  - 86.8% Non-Hispanic White
  - 77% between 35 and 64 yrs
  - 58.2% worked 9-10 hrs day
  - 68.1% Acute care setting
- Negative Health Outcomes
  - Burnout 65%
  - Stress 70%
  - Low PROQOL 83%
  - Depression 22%
  - Anxiety 30%
- CDC Healthy Lifestyle Guidelines
  - ≥7 hrs sleep 34%
  - ≥ 150+ min exercise/week 18.8%
  - ≥ 5 servings fruit/vege 7.3%

Bernadette Melnyk et al., Associations among infection prevention professionals' mental/physical health,lifestyle behaviors, shift length, race and workplace wellness support during COVID-19. Prevention Strategist Spring 2022 15(1). pg. 13

Drivers of Burnout in the IP

Work overload

- Growing oversight of infection prevention measures; surveillance and reporting requirements;

Lack of control

- Lack of administrative oversight of individuals and systems

Insufficient reward

- Not always respected. Viewed as the 'police'

Breakdown of community

- Non-membership in facility communities
- Lack of coworker and supervisor support

Absence of fairness

- Managing program with limited resources

Conflicting values

- Priorities of hospital administrators do not match the advised course of action

Contributing Factors

- The Job
  - Caring for the 'facility'
  - On-call
- Life
  - Work balance
  - Home stressors
- Character traits
  - Workaholic
  - Superhero
  - Perfectionist
  - Lone Ranger
- Physician Burnout: Its Origin, Symptoms, and Five Main Causes -- FPM (aafp.org)

Addressing Burnout

"There's an underlying assumption in burnout discussions: that it can always be remedied with some notion of self-care. What's never spoken is that burnout is the remnant of a fire. I've never seen a piece of charred wood and thought that some time by itself and some water will restore it to its former state".

Sudhakar Nuti

Nov. 5, 2021

Has Covid burnout permanently changed part of me as a doctor? - STAT (statnews.com) Nov. 5Nov. 5, 2021, 2021

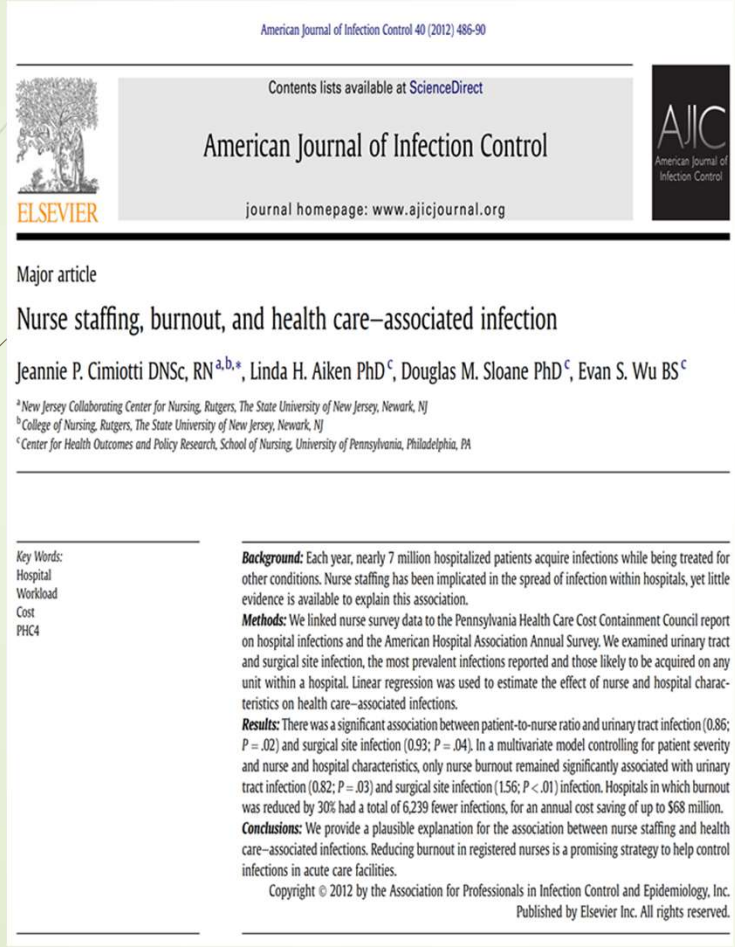
Responses to Burnout

- Decreased Job satisfaction
  - Leave the job/field
  - Absenteeism
- Increased alcohol and drug use
- Frictional relationships
- Depression
- Suicide

Coping Strategies

- Based on severity of syndrome
- Low severity
  - Work-life balance
  - 3 elements
    - Relief from stressors
    - Recuperation
    - Return to reality – perfection not required
- Relationships
  - Time with SO, family and friends
- Religious beliefs/Spiritual practice
  - Attention/Mindfulness
- Work
  - Finding meaning
  - Positive change
- Self Care Practices

Impact of Burnout: 2012



American Journal of Infection Control 40 (2012) 486-90

Contents lists available at ScienceDirect

American Journal of Infection Control

journal homepage: www.ajicjournal.org

Major article

Nurse staffing, burnout, and health care–associated infection

Jeannie P. Cimiotti DNSc, RN[a,b,*], Linda H. Aiken PhD[c], Douglas M. Sloane PhD[c], Evan S. Wu BS[c]

[a] New Jersey Collaborating Center for Nursing, Rutgers, The State University of New Jersey, Newark, NJ
[b] College of Nursing, Rutgers, The State University of New Jersey, Newark, NJ
[c] Center for Health Outcomes and Policy Research, School of Nursing, University of Pennsylvania, Philadelphia, PA

Key Words:
Hospital
Workload
Cost
PHC4

Background: Each year, nearly 7 million hospitalized patients acquire infections while being treated for other conditions. Nurse staffing has been implicated in the spread of infection within hospitals, yet little evidence is available to explain this association.

Methods: We linked nurse survey data to the Pennsylvania Health Care Cost Containment Council report on hospital infections and the American Hospital Association Annual Survey. We examined urinary tract and surgical site infection, the most prevalent infections reported and those likely to be acquired on any unit within a hospital. Linear regression was used to estimate the effect of nurse and hospital characteristics on health care–associated infections.

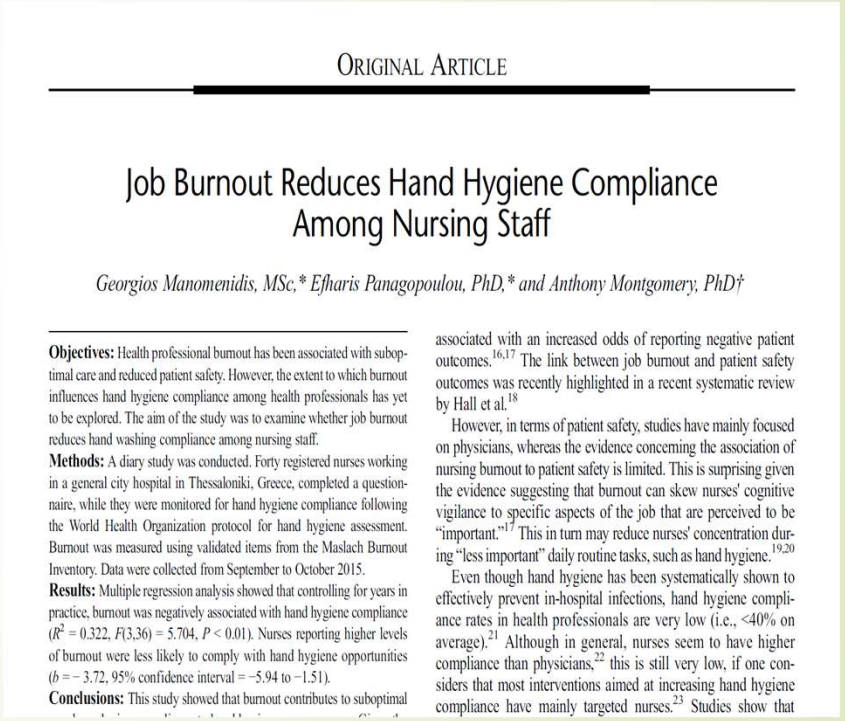
Results: There was a significant association between patient-to-nurse ratio and urinary tract infection (0.86; $P = .02$) and surgical site infection (0.93; $P = .04$). In a multivariate model controlling for patient severity and nurse and hospital characteristics, only nurse burnout remained significantly associated with urinary tract infection (0.82; $P = .03$) and surgical site infection (1.56; $P < .01$) infection. Hospitals in which burnout was reduced by 30% had a total of 6,239 fewer infections, for an annual cost saving of up to $68 million.

Conclusions: We provide a plausible explanation for the association between nurse staffing and health care–associated infections. Reducing burnout in registered nurses is a promising strategy to help control infections in acute care facilities.

- Burnout significantly associated with UTI and SSI
- Hospitals with reductions in burnout had 6,239 fewer infections and cost savings of $68m

Impact of Burnout on HAIs: Hand Hygiene

- Reduced adherence to hand hygiene
- Nurses reporting higher levels of burnout were less likely to comply($\beta = -0.453$, $P < 0.001$)
- Increasing risk of HAI



ORIGINAL ARTICLE

Job Burnout Reduces Hand Hygiene Compliance Among Nursing Staff

Georgios Manomenidis, MSc, Efharis Panagopoulou, PhD,* and Anthony Montgomery, PhD†*

Objectives: Health professional burnout has been associated with suboptimal care and reduced patient safety. However, the extent to which burnout influences hand hygiene compliance among health professionals has yet to be explored. The aim of the study was to examine whether job burnout reduces hand washing compliance among nursing staff.

Methods: A diary study was conducted. Forty registered nurses working in a general city hospital in Thessaloniki, Greece, completed a questionnaire, while they were monitored for hand hygiene compliance following the World Health Organization protocol for hand hygiene assessment. Burnout was measured using validated items from the Maslach Burnout Inventory. Data were collected from September to October 2015.

Results: Multiple regression analysis showed that controlling for years in practice, burnout was negatively associated with hand hygiene compliance ($R^2 = 0.322$, $F(3,36) = 5.704$, $P < 0.01$). Nurses reporting higher levels of burnout were less likely to comply with hand hygiene opportunities ($b = -3.72$, 95% confidence interval = −5.94 to −1.51).

Conclusions: This study showed that burnout contributes to suboptimal

associated with an increased odds of reporting negative patient outcomes.[16,17] The link between job burnout and patient safety outcomes was recently highlighted in a recent systematic review by Hall et al.[18]

However, in terms of patient safety, studies have mainly focused on physicians, whereas the evidence concerning the association of nursing burnout to patient safety is limited. This is surprising given the evidence suggesting that burnout can skew nurses' cognitive vigilance to specific aspects of the job that are perceived to be "important."[17] This in turn may reduce nurses' concentration during "less important" daily routine tasks, such as hand hygiene.[19,20]

Even though hand hygiene has been systematically shown to effectively prevent in-hospital infections, hand hygiene compliance rates in health professionals are very low (i.e., <40% on average).[21] Although in general, nurses seem to have higher compliance than physicians,[22] this is still very low, if one considers that most interventions aimed at increasing hand hygiene compliance have mainly targeted nurses.[23] Studies show that

Impact of Burnout on HAI: Reduced Teamwork

ELSEVIER

Intensive and Critical Care Nursing

Volume 34, June 2016, Pages 59-66

Original article

Relationship between job burnout, psychosocial factors and health care-associated infections in critical care units

Maura Galletta [a], Igor Portoghese [a], Ernesto D'Aloja [a], Alessandra Mereu [a], Paolo Contu [a], Rosa Cristina Coppola [a], Gabriele Finco [b], Marcello Campagna [a]

Show more

- High work demands lead to emotional exhaustion and cynicism
- Cynicism affected team communication
- Reduced team communication lowered team efficacy which correlated with more infections

Preventing Burnout – 3 Levels

Organizational Development Measures

- Work diversity
- Leadership style
- Conflict resolution
- Ongoing training
- Understanding duties
- Social support
- Flattening hierarchal structure
- Improving operational procedures

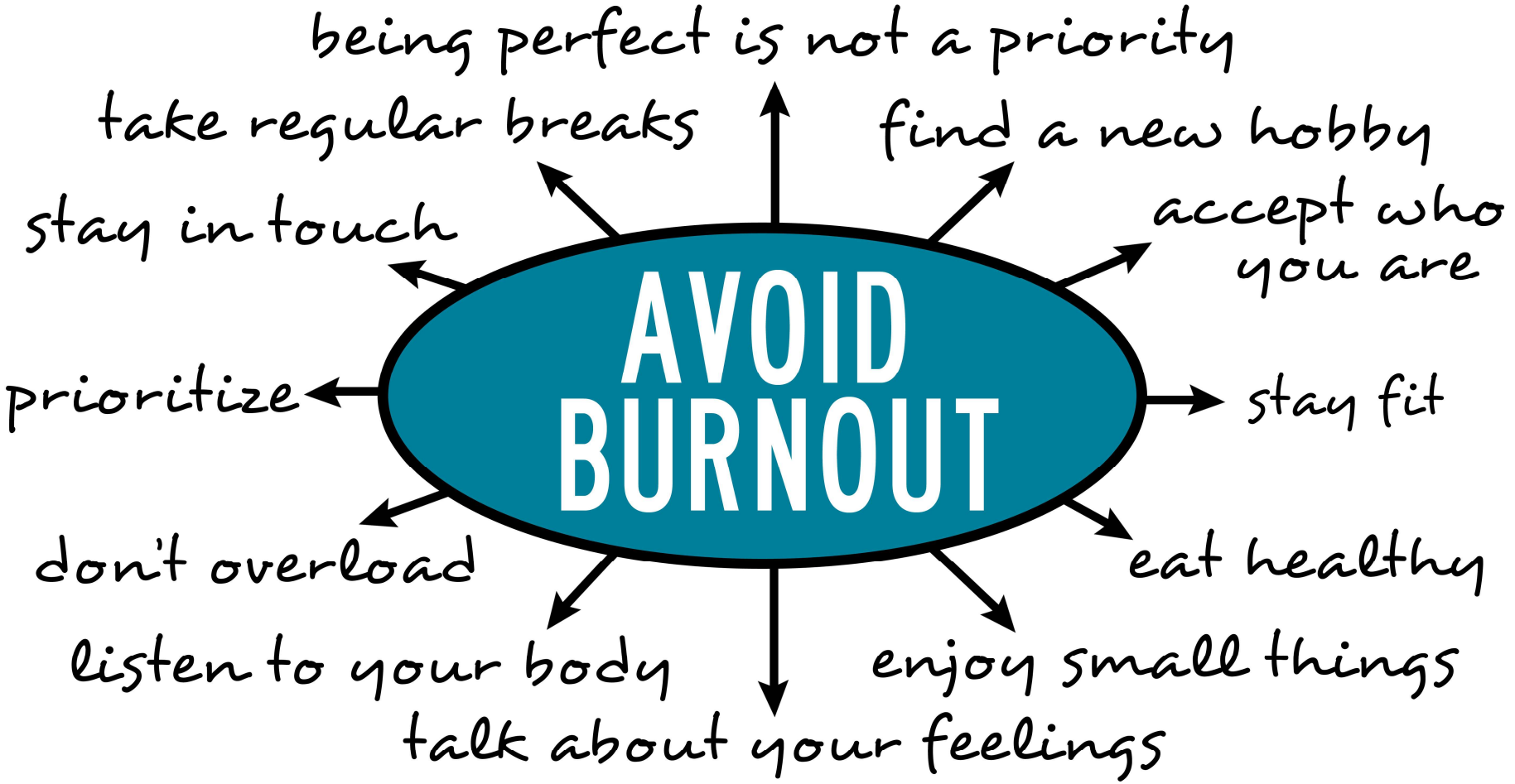
Organizational Behavior Prevention

- Open communication
- Discussion groups
- Cooperation
- Regular breaks
- Determine stress inducing factors
- Restructuring workplace
- Delegating responsibilities
- Participate in decision making

Individual Behavior Prevention

- Open communication
- Effective time management
- Making time for
  - Relaxation techniques
  - Skills training
- Group problem solving
- Coping skills
- Stress management programs
- Knowing own limits

https://healthmanagement.org/c/hospital/issuearticle/preventing-burnout-in-healthcare


being perfect is not a priority
take regular breaks
find a new hobby
stay in touch
accept who you are
AVOID BURNOUT
prioritize
stay fit
don't overload
eat healthy
listen to your body
enjoy small things
talk about your feelings

Thank You!

CNE: You will receive an email from me with information on how to get your credit.

Website: Nuggets of Knowledge

Next Session: July 14 at 1pm

IPC in Behavioral Health Settings

THANK YOU!!