



Factors Influencing Nurse Burnout and Recommendations- A Quality Improvement Capstone Project

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INTRODUCTION

- Nurses are more susceptible to fatigue and burnout, due to the fact of working in highly stressful environments and caring for people in their most vulnerable state (Gomez-Urquiza, De la Fuente-Solana, & Albendin-Garcia, 2017).
- Many nurses leave the bedside prematurely or seek other areas of nursing, due to the increased level of stress and burnout health care provider's experience (Cimiotti, Aiken, Sloane, & Wu, 2012).

PROBLEM

- Nurse burnout has increased negative effects on patient outcomes, leading to extended hospital stays and increased morbidity and mortality rates.
- Factors influencing nurse burnout, such as stress, elicits increased turnover rates, decline in critical thinking abilities and negative patient outcomes.

PURPOSE/SIGNIFICANCE

- The purpose of this quality improvement project is to identify factors influencing
- nurse burnout and to examine how nurse burnout can be prevented through recognition of stress, coping and adaptation strategies.

LITERATURE REVIEW

- Myhren et al., (2013) study revealed that experienced staff members were less vulnerable and as expected, poor job satisfaction had a direct correlation with higher incidences of burnout
- Mealer et al., (2014), study educated intensive care unit (ICU) nurses on compassion fatigue, increased signs and symptoms of compassion fatigue signs and symptoms, in order to combat fatigue.

THEORETICAL FRAMEWORK



Richard Lazarus Stress, Coping, and Adaptation Theory (McEwen & Wills, 2014).

CAPSTONE PROJECT ACTIVITIES

- Project investigators obtained Collaborative Institutional Training Initiative (CITI) Certification.
- Institutional Review Board (IRB) approval received to conduct Quality Improvement (QI) project.
- Obtained copyright licensure to reproduce and use Maslach Burnout Inventory (MBI) 22 question tool.
- MBI tool distributed via survey monkey
- MBI identified 3 subscales to assess nurse burnout: emotional exhaustion (EE), depersonalization (DP) and personal achievements (PA).
- Email sent out to PVAMU graduate students to obtain interest to participate in QI project.
- Interested participants emailed investigators regarding interest, and then signed consent.
- Candidates sent link to complete survey.
- Data obtained, interpreted and utilized to determine correlation of subscales and nurse burnout.

EVALUATION/OUTCOMES

- Limited emotional exhaustion, a strong sense of identity and achieving personal goals minimizes burnout.
- The Pearson correlation coefficient (Pearson r) identifies a strong positive correlation between the independent variable (IV), factors influencing nurse burnout.

OUTCOMES

Correlations

		Personal Accomplishment Mean	Emotional Exhaustion Mean	Depersonalization Mean
Personal	Pearson Correlation	1	-.309	-.257
Accomplishment	Sig. (2-tailed)		.091	.162
Mean	N	31	31	31
Emotional Exhaustion	Pearson Correlation	-.309	1	.814**
Mean	Sig. (2-tailed)	.091		.000
	N	31	31	31
Depersonalization	Pearson Correlation	-.257	.814**	1
Mean	Sig. (2-tailed)	.162	.000	
	N	31	31	31

** Correlation is significant at the 0.01 level (2-tailed).

CONCLUSION

- This study maintains that limited emotional exhaustion, a strong sense of identity and achieving personal accomplishments minimizes burn out.
- Future studies should identify the role of cognitive demands in healthcare professionals, in relation to burnout; further exploring how cognitive demands play a major role in nurse burnout and decreased nurse retention.