Nurse Burnout Research literature/Synthesis

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Burnout is a syndrome that results from chronic workplace stress that leads to unhappy nurses when not successfully managed. Three dimensions characterize feelings of energy depletion or exhaustion; increased mental distance from one's job, feelings of negativism or cynicism related to one's job; and reduced professional efficacy (Burnout an "Occupational Phenomenon": International Classification of Diseases, 2019). Nurse burnout and the overall resilience of nursing have been prominent in the last three years. Nurse resilience describes a nurse's ability to adapt positively to stress and adversity (KIM & CHANG, 2022). Nursing is not a profession that goes without many hitches. During and after, Covid has shown many in the job how unappreciated they are. Nurses are called heroes yet treated as though their well-being is not a priority. Nursing is difficult, but many nurses have realized it's not just difficult but mentally draining and takes a toll on your personal life. Unfortunately, many employers give out parties and Wawa cards instead of compensation or, more importantly, easily accessible resources to help deal with burnout. The paper will present a literature search strategy, review current research evidence, and synthesize seven peer-reviewed sources on nurse burnout. The report will compare outcomes to identify potential ways to help nurse burnout and resilience with available literature that raises opportunities for future research

**Search Strategy**

To address the issue of nurse burnout and resilience, an extensive literature review was undertaken to raise awareness of the crisis happening in the nursing world. The search includes CINHAL, PUBMED, and Google scholar. The search terms included were: "burnout", "nurse", "resilience", “anxiety, "compassion, "PTSD", “Fatigue”. The following limits were placed: English, abstract, 2018- 2022. Using the keywords and limits resulted in 23,000 articles. To further dwindle the numerous results down by adding more limits such as the type of article and include citations, and keywords “outcomes”, “change”, self-sacrifice” and “patient safety”. The inclusion criteria for the studies included research solely focusing on active bedside nurses, and exclusion criteria were researched focusing on all nurses.

CINHAL yielded 73 articles using keywords and limitations. PUBMED yielded 58 articles using keywords and limitations. Google scholar yielded 223 articles using keywords and limitations. Switching the databases to show the most relevant articles and reviewing abstracts for exclusion helped obtain seven articles pertinent to the research. Seven articles were chosen because they met all criteria needed and contained the most current qualitative and quantitative data addressing the issue of burnout while posing the question of the need for more data on what to implement to help burnout.

**Synthesis of Literature**

The national average nurse turnover rate was 18.2% in 2017(Hedgspeth, 2020). A contributing factor to nursing turnover rates was nurse burnout and compassion fatigue (Hedgspeth, 2020). Organizations go through a constant change that causes fatigue in the nurses, which is indicative of change fatigue. Change fatigue has been described as overwhelming feelings of stress, exhaustion, and burnout fueled by feelings of ambivalence and powerlessness associated with rapid and continuous change in the workplace (McMillan & Perron, 2020). A quantitative study by Ribeiro et al. shows that burnout syndrome influences the outcome of quality of life of nursing professionals (2021). Burnout not only affected the result of the nurses' quality of life, but in a study by Dev et al., greater burnout predicted greater barriers to compassion (2018).  A qualitative study by Hancock et al shows burnout has an impact on their family and home life, and a decrease in compassionate patient care (Hancock et al., 2020). Nurse burnout is an issue that can affect the quality-of-care nurses give, leading to unsatisfied patients or, worse, sicker patients. Organizations should be promoting ways to help their nurses through burnout and build resilience. Establishing supportive relationships through positive feedback, peer support, debriefing following challenging situations, open and concise communication, and positive role-modeling were considered protective factors against burnout (Gribben & Semple, 2021a).Organizations profiting from tired, overworked nurses should be able to offer support and conditions that helps the nurse maintain their psyche and passion for the profession. Arnetz et al. found through qualitative research that healthcare institutions should provide opportunities for nurses to discuss the stress they are experiencing, support one another, and make suggestions for workplace adaptations (2020). Researchers pinpoint a problem through quantitative and qualitative models and have all concluded that burnout is an issue that doesn't just affect the nurse. All research concluded that more research is needed for additional ways to combat nurse burnout.

**Conclusion**

Nurse burnout is a solvable issue. Nurses gaining access to resources to help with mental health should be the first line of defense. Nurses are the backbone of healthcare yet are treated like they aren't needed. The implications of nurse burnout are so significant that it should be considered a crisis. Further research into creating helpful resources for nurses, such as a 24-hour hotline to discuss issues weighing on them or provide free counseling after traumatic events, should be implemented by employers. Without nurses, healthcare will struggle. At this time, there is an opportunity to research ways to help a profession that always gives but never receives.

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