Building resilience

Summary

The nature of nurses’ work can take a heavy physical and emotional toll which, if left unchecked, can have a detrimental effect on patient care. Employers can promote staff wellbeing by providing appropriate support, leadership and supervision.

Nurses are vulnerable to burnout, but with support they can learn how to bounce back, says Erin Dean

Nurses are under huge pressure at work, making them vulnerable to physical, emotional and mental exhaustion - otherwise known as burnout.

Research published in the British Medical Journal last month revealed that nurses in the UK are at particular risk of work-induced stress, with 42 per cent describing themselves as burnt out. According to researchers at King's College London, this is one of the highest rates in Europe.

There is evidence that the pressure is building. According to a workforce survey conducted by the RCN in November 2011, 76 per cent of nurses said they were under more pressure than a year ago.

The Health and Safety Executive recognises the health and social care sector as a particularly stressful area to work and says healthcare staff have a three times higher than average incidence of mental ill health, stress, depression or anxiety.

For these reasons, building resilience in nurses is now recognised as an important factor in helping them remain caring and focused on their patients’ needs. It is one of the priorities of action identified by the Care campaign to tackle poor fundamental care.

National Nursing Research Unit director Jill Maben says the pressure faced by nurses is often unacknowledged. ‘Nurses are doing difficult, complex and emotional work, but the public do not want to engage with that. People do not want to talk about illness, gaping wounds, death and dying. But nurses have to deal with that every day.’

Giving nurses the opportunity to discuss difficult issues is important, says Professor Maben. Supervision, which is already used in midwifery, is one approach.

Peer support

Under such a system, all nurses would have their own supervisor with whom they could talk through, and reflect on, any difficulties they had at work.
This form of mentorship could be particularly useful during career transition points, such as the step up from student to registered nurse and newly recruited ward sisters, she says. Health think tank the King’s Fund has looked at the effects of stress on NHS staff and the impact it has on patient care. The charity's point of care director Jocelyn Cornwell says nurses have to balance the competing needs of patients in busy wards.

She adds that patients are getting sicker and lengths of stay shorter, meaning nurses are working in an increasingly stressful environment.

'Healthcare staff in hospitals have to deal with things that other people don’t,’ says Dr Cornwell. 'Nurses are exposed to other people's pain and distress on a routine basis, and also exposed to people who are nasty or rude to them. They have to do things that are not normally acceptable. They see people naked, touch people who are naked, and touch people of the opposite sex. Nurses break all the taboos. We expect them to do this and it is taken for granted.'

The stress and burnout of the work mean that nurses withdraw emotionally from their patients, says Dr Cornwell. 'Many nurses feel under enormous work pressure, but also feel they are not delivering the care they would like and are letting people down. If that goes on for an extended period, and there is no way of thinking or talking about it, it can be destructive. It leads to people shutting off and depersonalising patients.

'Unless nurses have support, it is most likely that they will have to rely on their own resources, and people’s levels of resilience and resourcefulness are different.

'As a result, you end up with nurses who are rude, unpleasant and uncaring. No one goes into nursing to be uncaring, but it is clear that this is what many patients experience.'

There is a fine line that nurses need to tread at work, says Dr Cornwell. 'There is a degree of professional detachment, so that a patient does not need to know what the nurse is feeling,' she says. 'But there is also a degree of detachment where the professional is cut off and that is damaging to the patient.'

There is a growing recognition of the relationship between staff wellbeing and patient satisfaction. The importance of staff mental and physical health in the delivery of good care for patients was emphasised by the NHS Health and Wellbeing Review, a 2009 study of the health of NHS staff by occupational health expert Steve Boorman. The report states: ‘There is a strong business case for investing in staff health and wellbeing. Organisations that prioritise it perform better, with improved patient satisfaction, stronger quality scores, better outcomes, higher levels of staff retention and lower rates of sickness absence.’
The report highlighted organisations where there were good health and wellbeing projects, such as access to gyms, sports clubs, weight loss groups and social activities. Dr Boorman’s findings have been backed by research here and in the United States. Recently, researchers at the University of Pennsylvania examined the impact of work environments on care. For all nurses, including nurses in England, better work environments reduce the rates of burnout and job dissatisfaction.

They were also associated with better care outcomes. Despite the clear business case for employers to look after their staff, the most recent RCN employment survey, published in November 2011, found that just over half the nurses reported that they had access to good occupational health services, a figure the college sees as too low. However, NHS Employers’ director Dean Royles believes the NHS does take staff health and wellbeing seriously. ‘[Staff health and wellbeing] start with good people management and includes areas such as employee assistance programmes, training and occupational health services,’ he says.

**Tips for keeping your stress in check**

- Talk to someone.
- Exercise.
- Choose a well-balanced diet.
- Limit alcohol consumption.
- Do activities you enjoy.
- Get enough sleep.
- Develop stronger relationships with families and friends.
- Recognise the warning signs of stress, such as anxiety, feeling sad, moodiness, changes in sleep patterns and/or becoming withdrawn.
- Keep a stress diary at work for two to four weeks, then review it for patterns and to spot triggers.
- Improve your self-esteem.
- Take the NHS Choices stress test

*Source: NHS Choices*

**Training managers**

Cary Cooper, professor of organisational psychology and health at Lancaster University, says managers are key to the levels of employee stress.

‘Organisations do not necessarily select the right people for doing the right management jobs and do not give them enough training. In the NHS, one improvement would be to ensure that the right people are recruited as ward sisters and receive the appropriate training when in post.’

He says the current upheaval caused by restructuring the NHS in England will contribute to employee stress. ‘Reorganisations are a major contributor
to workplace stress. The NHS is aware of the importance of health and wellbeing. They know the problem, but I suspect the resources are not there.’

Robertson Cooper, a university spin-off company co-founded by Professor Cooper, has developed an online tool to help people test their resilience. It allows employees to identify areas of strength and risk at work. Nursing Standard has joined Robertson Cooper to offer a free resilience resource.

For instructions on how to use this tool, click here

One approach to tackling the emotional burden of nursing is introducing staff meetings to allow nurses to discuss psychosocial and emotional aspects of caring for patients. This approach was developed in the US as Schwartz Center rounds and is being piloted in the UK by the King's Fund. Each meeting involves discussion of a single patient case.

Beverley Farrar, learning disability liaison nurse at Cheltenham Hospital, a pilot site for the scheme, says: ‘If you are not careful, you can carry issues around with you and think “I didn’t do this” or “I could have done that”. But to be able to say “I overlooked something”, in a safe environment, helps us learn.’

Evaluation of Schwartz Center rounds has revealed that day-to-day care benefits and teamwork have been strengthened. They are now operational in 11 hospitals and are about to be extended to hospices.

However, to prevent stress and burnout in the workplace, action is needed to tackle low staffing levels, says RCN senior employment relations adviser Kim Sunley. Effective occupational health teams are undermined if organisations are not providing enough staff, she says. ‘People can be supported towards leading a healthy lifestyle, but if there are not enough staff the problem will still be there.’

Psychological wellbeing at work is enhanced if employees feel their employer values their contribution, listens to their needs and offers them control over their working lives. This was confirmed by the RCN’s 2002 report Working Well: A Call to Employers.

Staff numbers

A survey of 2,554 nurses carried out by Nursing Standard in November 2011 found this still held true. When asked what would improve patient care, most respondents selected more staff, but the second highest vote was for their work being valued.

As evidence suggests that pressure is mounting on nurses in the NHS, Ms Sunley urges employers to do more. ‘Employers need to build resilience at organisational and individual level,’ she says. ‘Burnout is a serious threat to nurses and to quality care. There is a strong evidence base showing that
where staff feel supported and cared for by their employer, patient outcomes are better'.

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