



Barriers to Self-Care and Combatting Compassion Fatigue Among Oncology Nurses



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Background

Oncology nursing practice is accelerating quickly with treatment development and increasing patient acuity, leading to compassion fatigue and burnout.

- Interventions are needed to combat stressors leading to compassion fatigue.
- Improving working conditions and enhancing self-care through management support is one strategy to prevent nursing burnout and improve nursing satisfaction.
- This was a two-phase project, implementing a self-compassion toolkit for two oncology units at an urban teaching hospital.

Purpose and Methods

Purpose

The toolkits aimed to improve nursing compassion scores and decrease burnout scores, but several barriers arose during the project implementation

Methods

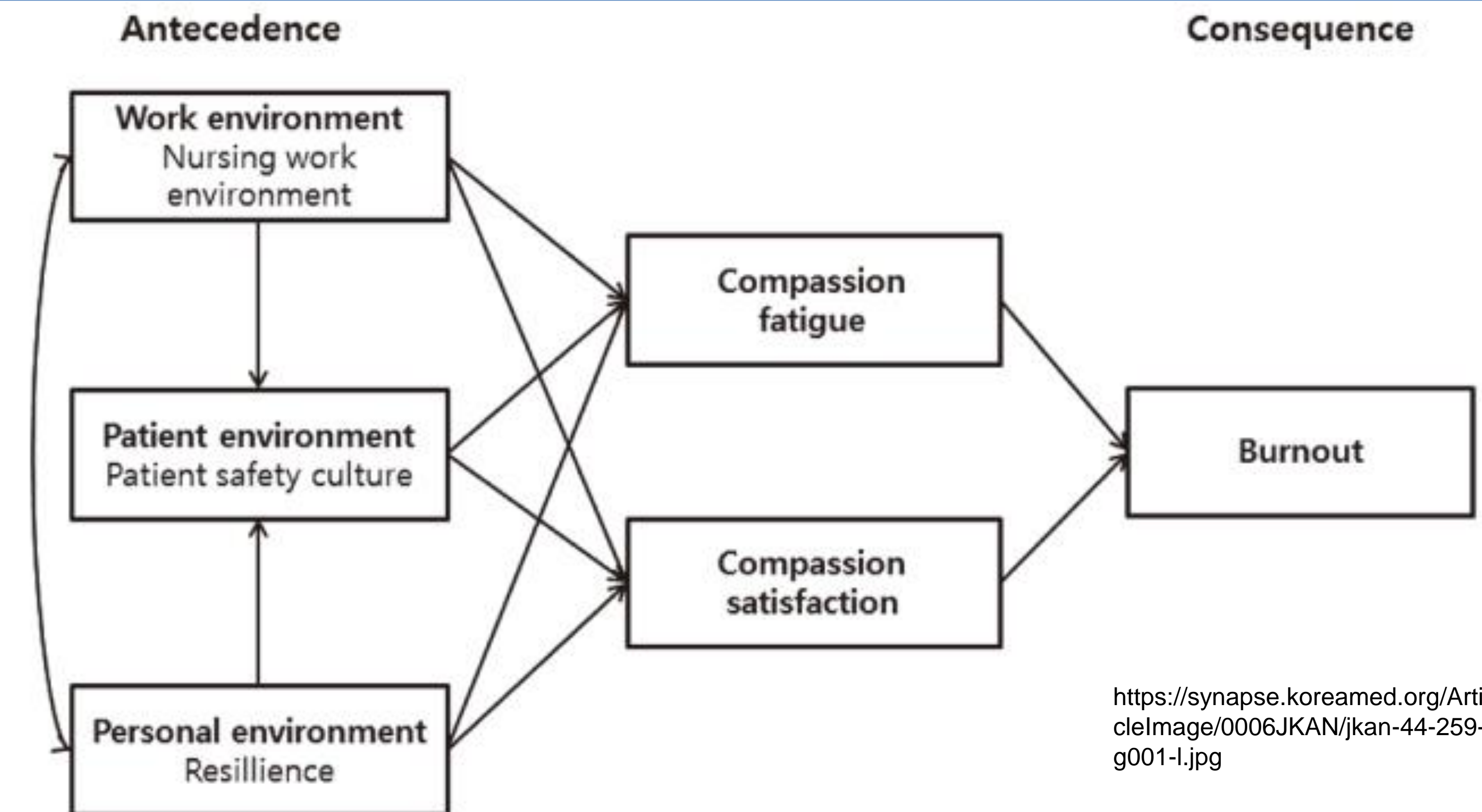
a. The main tool used to evaluate project efficacy was the ProQOL® scale was initially developed to assess compassion fatigue among hospice nurses, but its use has since expanded to evaluate all healthcare providers.

B .Nurses completed surveys on self-care practices and work environment to create personalized toolkits.

i. These included unique resources available to each unit, suggestions for self-care, as well as institutional resources within the hospital organization.

ii. The toolkits were freely available and located in the nurses station.

Interaction of Compassion Fatigue and Satisfaction Leading to Burnout



Data Results

ProQOL Measure	Unit 1 Average	Unit 2 Average
Compassion Satisfaction	38.6	43.5
Burnout	23.5	19.05
Traumatic Stress	23.2	19.3

Key to Professional Quality of Life Score	
Compassion Satisfaction/Burnout and Traumatic Stress	Score
Low	43 or less
Average	around 50
High	57 or more

Leadership	Work Schedule	Acuity and Staffing	Personal Barriers
<ul style="list-style-type: none">• Lack of support• Poor proactivity in preventing staffing shortages	<ul style="list-style-type: none">• Home location• Long and rotating shifts	<ul style="list-style-type: none">• Increased stress and burden• Difficulty recovering from poorly staffed shifts	<ul style="list-style-type: none">• Guilt performing self care while neglecting family• Placing friends and family over self

Discussion

Low follow-up response rates and low utilization rates prompted open discussion questions completed by a focus group of 10 staff nurses.

- Responses to the open discussion questions fell into four main categories: Leadership, Work Schedule, Acuity and Staffing, and Personal Barriers.
- Respondents felt that a lack of support for off-shifts and time off work negatively impacted self-care.
- Self-care activities were limited by difficulty accessing services if it required significant travel from home, in addition to balancing working long, rotating shifts.
- High acuity and poor staffing required nurses to work additional hours, leaving little time for self-care or toolkit utilization.
- Most often, nurses reported feeling guilty for performing self-care and self-compassion activities that impacted their time with their friends and loved ones.

Conclusions and Implications

- Combatting compassion fatigue and burnout must incorporate the input and opinions of the frontline staff, who can create a positive atmosphere and positive change through shared decision making.
- Future interventions to improve satisfaction should be developed with an engaged team with goals to have safe workloads and clear expectations, enhance the sense of community in the unit, recognize staff achievement, and transparent decision making.

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References Available Upon Request