

Overcoming the Holistic Effects of Compassion Fatigue as a Pediatric Oncology Nurse



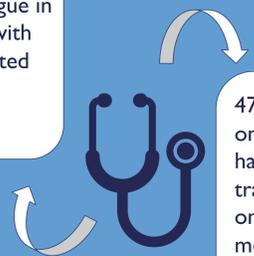
Stephanie Sullivan, Davis & Henley College of Nursing
Thomas More Honors Program

Introduction. Each year, approximately 15,780 children from birth to the age of 19 years old are diagnosed with cancer in the U.S. and 1 out of each 6 of those children do not survive five years (ACCO, 2022). Pediatric oncology nurses experience opportunity to care for children with a wide range of conditions and needs, many of which feeling ill-equipped to assess and respond to the difficulties in this specialty. The emotional impact and uncertainty that accompanies pediatric oncology nursing can lead to an abundant amount of stressors contributing to a hindered ability to provide compassionate care for their patients that are experiencing suffering, due to compassion fatigue. Compassion fatigue occurs because of long-term self-sacrifice within prolonged exposure to difficult situations, causing negativism, outbursts, feelings of hopelessness and depression, and a higher turnover rate (Zhang et al. 2018; Sullivan et al., 2019; Upton, 2018). Compassion fatigue not only affects nurses, but their patients, coworkers, and healthcare community, showing higher practice errors, increased patient mortality, and higher infection rates contributing to a reduction in patient safety and care (Finley & Sheppard, 2017). Nurses choose this job to care for children and assist in beating the diagnosis originally given to them, but it is difficult to care for others without resources needed for self-care. Healthcare organizations have the option to replace nurses leaving their jobs due to compassion fatigue or to provide the resources needed, along with mental health professionals to provide support services.

Research Question: Should hospitals be responsible for providing resources for pediatric oncology nurses who experience compassion fatigue?

Overall prevalence rate of compassion fatigue in nurses is 52.55%, with higher rates reported among oncology departments

(Zhang et al., 2018)



47% of pediatric oncology nurses do not have any coping skills training, and 17% have no on-site resources for mental health support

(Finley & Sheppard, 2017).



DEVELOPING A CULTURE WHERE SUPPORTIVE INTERVENTIONS ARE ENCOURAGED AND PROVIDED CAN RESULT IN HEALTHCARE SAVINGS, WHILE PRESERVING THE MENTAL AND PHYSICAL HEALTH OF PEDIATRIC ONCOLOGY NURSES.

Evidence.

- ❖ Nurses have been highly receptive to respite rooms, furnished with comfortable furniture with the opportunity to devote time to mindfulness, meditation, or prayer. Per the participants requests, respite rooms were permanently incorporated into the construction plan for new inpatient units at the St. Jude Children's Research Hospital in Memphis, Tennessee (Sullivan et al., 2019; Gee & West, 2018)
- ❖ 5-minute interventions were used among nurses with compassion fatigue, including meditation, journaling, gratitude, and outside breaks. After study completion, many nurses showed interest in continuing the use of the feasible and brief interventions (Copeland, 2020).
- ❖ Oncology nursing has a 31% turnover rate, with the estimated costs of replacing one clinical nurse falling between \$40,300 and \$64,000 (Finley & Sheppard, 2017; Lockhart, 2020).
- ❖ A more cost-effective solution, ranging between \$97 and \$447, was "The Resiliency Solution" which offers services specifically for healthcare organizations to build resilience, one of the protective factors in the prevention of compassion fatigue (Jefferies, 2022).
- ❖ If resources are provided and effective, healthcare facilities can save an average of \$270,840 per 1% change in RN turnover (NSI, 2022).

Methodology

- ❖ CINAHL, PubMed, APA Psycinfo, ScienceDirect
- ❖ Key terms: Pediatric oncology, compassion fatigue, compassion satisfaction, nursing turnover, self-care interventions, resiliency
- ❖ There is a pattern of focus on the importance of education and awareness of compassion fatigue and ways to address it.

Themes:

- ❖ Education about compassion fatigue is lacking – it can be reduced or prevented if nurses are able to personally recognize symptoms and take advantage of resources provided
- ❖ The negative effects of compassion fatigue were mitigated with feasible self-care interventions, resiliency building, and when a cohesive teamwork environment existed

Zhang et al., 2018; Copeland, 2020



For the Future.

It is essential that healthcare facilities provide support for their nurses physically, emotionally, and mentally. The prevention of hopelessness, lessened compassion toward others, and intrusive thoughts related to patient suffering is out of reach if proper interventions are not put into place (Sullivan et al., 2019). It is imperative that compassion fatigue is general knowledge because many do not know what it is and how it can negatively affect a unit as a whole. With education and advocacy of those in higher positions, pediatric oncology nurses can be able to provide the care needed for their patients while also enhancing their own well-being.

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