



The Impact of Stress, Burnout, and Compassion Fatigue in Healthcare and the Role Coaching Plays in the Transformation to Resiliency, Engagement, and High Performance

written by
Tambre Leighn, MA, CPC, PCC, ELI-MP
for
The Institute for Professional Excellence in Coaching

Introduction:

The demands within the healthcare industry are expanding and accelerating with each passing year – increased legislation, greater regulations, expectations to respond to patient needs more quickly, and a growing number of people to care for across a full spectrum of care - all with fewer resources and shortages in key staffing areas.

These changes are not going to stop, nor will they slow down. They place pressure on the entire human system within healthcare – from organizational leadership to doctors, specialists, nurses, and health aides to in-home care and hospice care providers - with the ultimate impact being on the reduced efficacy and quality of patient care.

While the focus of care is traditionally directed at serving patient needs, the healthcare industry must now also take into account the quality of care being provided to the professional clinician/caregiver. This dynamic approach will not only serve to sustain clinician longevity and engagement, it will also have a significant impact at the organizational level in terms of retention, patient engagement, and patient satisfaction.

The research discussed will show how the unique impact of burnout and compassion fatigue in healthcare must be addressed to ensure not only an organization's health and performance but also a high quality of patient care. The research will further describe how a coaching-based approach focused on wellbeing as a pathway to high performance is an effective solution to increase resiliency and engagement throughout the system among all levels of care providers.

The Impact of Stress, Burnout, and Compassion Fatigue in Healthcare

Healthcare workers are among the most caring, dedicated employees in America and ironically this may be one of the biggest issues facing healthcare. Because healthcare workers spend an enormous amount of compassion and energy on caring for their patients and clients, they often experience far more stress and chronic emotional burnout than workers in other industries.

Exposure to psychosocial risks is particularly high in health care compared to the overall workforce. In 2005, the health sector featured prominently on the list of sectors with the highest prevalence of stress at work.¹

Burnout has been described as a specific kind of occupational stress-reaction among human service professionals, as a result of the demanding and emotionally charged relationships between caregivers and their recipients (Maslach & Schaufeli 1993). More specifically, burnout is most commonly defined as a syndrome of feelings of emotional exhaustion, depersonalization, and reduced personal accomplishment. (Maslach et al. 1996).²

Among more than 500 healthcare workers across more than 240 U.S. healthcare employers, 61% reported being burned out on their jobs and 21% always or often feel burned out. (Harris Interactive online survey for CareerBuilder conducted between February 11 and March, 6 2013)

A specific type of stress that occurs in healthcare, as well as with individuals like first-responders, who work directly with trauma victims, is called Compassion Fatigue (also known as vicarious trauma or secondary post traumatic stress disorder).

Compassion Fatigue has different characteristics from burnout, although it is often misinterpreted to mean the same thing as burnout. Burnout is associated with stress and hassles involved in a person's work; it is very cumulative, is relatively predictable and frequently a vacation or change of job helps a great deal.

Compassion Fatigue is very different in that it is a state of tension and preoccupation with the individual or cumulative trauma of clients. The emotional impact for the professional clinician can manifest in many ways including re-experiencing the traumatic event, avoidance/numbing of reminders of the event, and persistent arousal. Although similar to critical incident stress (being traumatized by something you actually experience or see), with Compassion Fatigue a healthcare worker is absorbing the trauma through the eyes and ears of their patients/clients.³

A study conducted in Florida found that 80% of 216 hospice nurses were at moderate to high risk for compassion fatigue.⁴

What are the Costs of Stress, Burnout, and Compassion Fatigue in Healthcare?

¹ How to create an attractive and supportive working environment for health professionals, Christiane Wiskow, Tit Albrecht and Carlo de Pietro, World Health Organization 2010

² A Model of Burnout and Life Satisfaction amongst nurses, E. Demerouti, PhD, A. Bakker, PhD, F. Nachreiner, PhD, W. Schaufeli, PhD, January 2000 <http://www.ncbi.nlm.nih.gov/pubmed/10964195>

³ www.ace-network.com; "Compassion Fatigue: An Introduction" by Charles R. Figley, 1995; "[Compassion Fatigue - Because You Care](#)". St. Petersburg Bar Association Magazine. February 2007)

⁴ Adrenoth, M. & Flannery, J. (2006) Predicting the risk of compassion fatigue. Journal of Hospice & Palliative Nursing, 8(6), 346-356

The tremendous expenditure of emotion and energy means that those who work in healthcare are themselves in dire need of support and appreciation from their peers and management, simply in order to refill their physical and emotional reserves. If these needs aren't met clinician personal and professional wellbeing can be compromised since unexamined emotions may lead to burnout, moral distress, compassion fatigue, and poor clinical decisions, which adversely affect patient care.

To truly understand the multi-layered impact of stress, burnout and compassion fatigue we must look at a number of metrics within healthcare:

- **Organizational Impact**

According to the [Compassion Fatigue Awareness Program](#), the symptoms and results of compassion fatigue in an organization include:

- Chronic absenteeism
- Increased Worker's Comp costs
- High turnover rates
- Constant changes in co-worker relationships
- Inability for teams to work well together
- Desire among staff to break company rules
- Outbreaks of aggressive behaviors among staff
- Inability of staff to complete assignments and tasks
- Inability of staff to respect and meet deadlines
- Negativism towards management
- Strong reluctances toward change
- Inability of staff to believe improvement is possible
- Lack of vision for the future

- **Quality of Patient Care/Medical Errors**

Work stress and burnout, associated with negative work attitudes and performance, threaten the quality of patient care and patient safety.⁵

It is estimated "...the annual cost of measurable preventable medical errors that harm patients to be \$17.1 billion..."⁶

⁵ The Impact of Nursing Work Environments on Patient Safety Outcomes The Mediating Role of Burnout/Engagement Heather K. Spence Laschinger, PhD, RN Michael P. Leiter, PhD

⁶ Jill Van Den Bos, Karan Rustagi, Travis Gray, Michael Halford, Eva Ziemkiewicz and Jonathan Shreve. The \$17.1 Billion Problem: The Annual Cost Of Measurable Medical Errors." Health Aff April 2011 vol. 30 no. 4 596-603.

In an investigation of the relationship between personal stress and clinical care, 225 physicians reported 76 incidents in which they believed patient care was adversely affected by their stress.⁷

- **Job Dissatisfaction**

Low job satisfaction and high staff turnover prevail throughout the nursing home industry, driving costs up and quality down...there is ample evidence that turnover rates for clinical care staff in nursing homes range between 55% and 75% (Castle, 2006).⁸

- **Increased healthcare costs/lost productivity**

According to the Centers for Disease Control, more than 75% of employers' health care costs and productivity losses are related to employee lifestyle choices. And a \$1 investment in wellness programs saves \$3 in health care costs, according to the Wellness Council of America.⁹ Other studies have indicated a return as high as 600%.¹⁰

- **Retention/Turnover**

The strongest predictor of nurse job dissatisfaction and intent to leave is that of stress in the practice environment.¹¹

Among more than 500 healthcare workers across more than 240 U.S. healthcare employers, 34% plan to look for a new job in 2013 (up from 24% in 2012). 82% said that while they are not actively looking for a job today, they would be open to a new position if they came across the right opportunity.¹²

⁷ Firth-Cozens J, Greenhalgh J. Doctors' perceptions of the links between stress and lowered clinical care. Soc Sci Med. 1997; 44(7):10117-22 [PubMed: 9089922]

⁸ End-of-life care in nursing homes: the high cost of staff turnover by Virginia P. Tilden, Sarah A. Thompson, Byron J. Gajewski, Marjorie J. Bott http://findarticles.com/p/articles/mi_m0FSW/is_3_30/ai_n58629193/

⁹ The ROI of Wellness, Tony Zook, Forbes.com, 2006 http://www.forbes.com/2006/04/21/wellness-programs-gold-standards-cx_tz_0424wellness.html

¹⁰ What's the Hard Return on Employee Wellness Programs?, Leonard L. Berry, Ann M. Mirabito, and William B. Baun, Harvard Business Review, December 2010. <http://hbr.org/2010/12/whats-the-hard-return-on-employee-wellness-programs/ar/1>

¹¹ Groff Paris, L., Terhaar, M., (December 7, 2010) "Using Maslow's Pyramid and the National Database of Nursing Quality Indicators™ to Attain a Healthier Work Environment" OJIN: The Online Journal of Issues in Nursing Vol. 16 No. 1. <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-16-2011/No1-Jan-2011/Articles-Previous-Topics/Maslow-and-NDNQI-to-Assess-and-Improve-Work-Environment.html>

¹² Harris Interactive online survey for CareerBuilder conducted between February 11 and March, 6 2013

A Canadian study reported negative effects associated with nurse turnover and communications, medications management, compromised follow-up, client disengagement, illness exacerbation, and added burdens of caregiving for families. (Minore et al., 2005)¹³

Turnover costs have been estimated to range between 0.75 to 2.0 times the salary of the departing individual (McConnell, 1999), while nurse turnover costs have been estimated at 1.3 times the salary of a departing nurse (Jones).¹⁴

The Paraprofessional Health Care Institute (2001) estimates CNA (Certified Nurse Assistants) turnover costs the industry \$2.5 billion per year. In one case study... a single California-based center conservatively estimated CNA replacement costs in 2006 at over \$100,000 a year due to a turnover rate of 94%. (Farrell & Dawson, 2007)¹⁵

- **Fiscal**

The [Bureau of Labor Statistics' research reports](#) that increasing job stress is responsible for an estimated annual cost of \$10,000 per worker and \$300 billion for the U.S. economy. These estimates use indicators such as absenteeism, diminished productivity, employee turnover, and accidents, medical, legal and insurance costs and workers compensation claims.

- **Personal Wellbeing of Clinicians**

A recent study found that nurses in overcrowded hospitals were more likely to be depressed than those with more manageable workloads.¹⁶

Another report indicates that female nurses reporting high levels of stress were up to 35% more likely to suffer the effects of heart disease than their non-stressed counterparts. The same may hold true for other healthcare staff including doctors, nurse practitioners, health aides and support staff.¹⁷

¹³ The Costs and Benefits of Nurse Turnover: A Business Case for Nurse Retention, Cheryl Bland Jones, RN, PhD, FAAN, Michael Gates, RN, PhD, OJIN: The Online Journal of Issues in Nursing Vol. 12 No. 3. <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume122007/No3Sept07/NurseRetention.aspx#Minore>

¹⁴ *The Costs and Benefits of Nurse Turnover: A Business Case for Nurse Retention, OJIN: The Online Journal of Issues in Nursing. Vol. 12 No. 3, Manuscript 4.*

<http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-16-2011/No1-Jan-2011/Articles-Previous-Topics/Maslow-and-NDNQI-to-Assess-and-Improve-Work-Environment.html>

¹⁵ End-of-life care in nursing homes: the high cost of staff turnover by Virginia P. Tilden, Sarah A. Thompson, Byron J. Gajewski, Marjorie J. Bott http://findarticles.com/p/articles/mi_m0FSW/is_3_30/ai_n58629193/

¹⁶ Nurses at crowded hospitals more likely depressed. *Journal of Clinical Psychology*, May 4, 2010.

¹⁷ Stressed Women Risk Heart Disease. *Nursing in Practice*, May 6, 2010

In an investigation of the relationship between personal stress and clinical care, 225 physicians reported 76 incidents in which they believed patient care was adversely affected by their stress.¹⁸

Morbidity and mortality due to stress-related illness is alarming. Emotional stress is a major contributing factor to the six leading causes of death in the United States: cancer, coronary heart disease, accidental injuries, respiratory disorders, cirrhosis of the liver and suicide.¹⁹

In a meta-analysis of 293 independent studies reported in peer-reviewed scientific journals between 1960-2001 with some 18,941 taking part, it is confirmed that stress alters immunity.²⁰

First Steps for Transforming Stress: Resiliency and Self-Care Strategies

One approach to mitigate the impact of burnout, stress and compassion fatigue is self-care, defined as a “cadre of activities performed independently by an individual to promote and maintain personal wellbeing throughout life”. The following strategies to mitigate stress and promote wellbeing are offered for physicians and palliative care specialists²¹:

Professional: Team Based

- Improve skills related to empathy for others.
- Balance empathy and compassion with objectivity. Utilize formalized structures, policies, and procedures to provide guidance with complex and difficult cases.
- Practice meaning based coping by sharing personal and professional sources of meaning and incorporating into daily practice.

Professional: Individual & Team Based

- Regularly appraise and regulate six areas of work life: workload, control, reward, community, fairness and values.
- Improve communication and management skills by seeking additional training.

Professional: Individual

- Create a network of peers and coworkers and stay connected with them on an ongoing basis. Avoid depersonalization (distancing from work both emotionally and cognitively).

¹⁸ Firth-Cozens J, Greenhalgh J. Doctors’ perceptions of the links between stress and lowered clinical care. Soc Sci Med. 1997; 44(7):10117-22 [PubMed: 9089922]

¹⁹ The Malaysian Journal of Medical Science, v.15(4); Oct 2008. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3341916/>

²⁰ Segerstrom SC, Miller GE. Psychological stress and the human immune system: A meta-analytic study of 30 years of inquiry. Psychol Bull. 2004;130:601–30. [PMC free article] [PubMed]

²¹ Caring for Oneself to Care for Others: Physicians and Their Self-care, Sandra Sanchez-Reilly, et al., The Journal of Supportive Oncology, June 2013

- Look for opportunities for engagement with organizational activities congruent with your work and interests.
- Strive to have increased self-awareness, share feelings and responsibilities, set limits to avoid overload of work.
- Practice reflective writing.

Personal

- Adopt a healthy lifestyle with regular exercise, vacations.
- Use recreation, hobbies, and exercise to promote life-work integration.
- Practice mindfulness and meditation.
- Enhance spiritual development to find greater meaning in personal and professional relationships.
- Prioritize personal relationships such as family and close friends.

Taking the Transformation to the Next Level: Infusing Wellbeing, Engagement, and High Level Performance

The Coaching Intervention:

Nothing is more fundamental to transforming health care than the way professionals are educated but curricula are out our date and out of step with the transformations ahead. It is important... to prepare nurses to meet the demands of a new health system, including roles as navigators, case managers, and coordinators of care to support patient- and family-centered care²².

The terms 'leadership' and 'engagement' may sound more in alignment with the corporate business world than with healthcare. However, current research shows both components play a significant role in determining the kind of experience a clinician has in the workplace as well as having major impacts on areas of high concern for healthcare organizations.

The innovative approach is to provide a new model for generating resiliency and high performance in the workplace through a balanced combination of, not just engagement and leadership, but also wellbeing in all areas of life.

In working with Fortune 100 companies, professional athletes, and countless individuals, we have learned that true high performance in one area is simply not possible when other areas of

²² A Nursing Call to Action, National Expert Commission, Canadian Nursing Association, Page 44. <http://www.cna-aiic.ca/expertcommission/#.T-ZbGHAF-xE>

an individual's life are less than optimal. When people are struggling, conflicted, or feeling powerless in any aspect of their life, it impacts their overall performance and holds them back from accessing their greatest potential and energy in all areas. Even amongst the most engaged employees, "40% are suffering in their personal lives."²³

The coaching paradigm presumes the healthcare practitioner is the expert in their own wellbeing and their life, and the coach, as facilitator, guides practitioners to create their own answers. The coaching intervention helps program participants move from focusing on "what's wrong" to looking at and building upon "what's right," thus shifting perspectives, expectations, and ensuing experiences.

In brain research, it is this type of focus on solutions, not problems, that proves to be a better strategy for creating new brain connections. "These connections form mental maps of reality. Whatever we expect to experience is what we actually experience."²⁴

In any given situation these types of shifts from one perspective to another are possible. Coaching offers a valid approach to creating this type of perceptual shift.²⁵ Studies have shown it isn't what happens to people; it's how they construct and interpret those events that determine happiness.²⁶ (Schwarz & Strack, 1999)

In addition to the overall model of the coaching intervention, a key component is the scientifically based Energy Leadership Index™ Assessment (ELI). This assessment quantifies the way in which an individual perceives and approaches life and reacts to different circumstances and experiences. Research shows higher E-Factors are associated with greater success.

This profile helps participants identify their strengths and also uncover patterns of behavior that present when they are experiencing stressful situations. Armed with these insights, employees gain incredible control over their ability to self-monitor and self-coach their thoughts, emotions, beliefs, and behaviors in real time, eventually helping them to raise their level of energy or consciousness.

Individuals need to first become aware of their patterns so they can choose what they want to keep and what they want to shift. Next, they must determine what critical factors help them to engage at their best. Finally, individuals need a specific action plan to try out various approaches, evaluate what's working and what they want to alter, and receive ongoing support and feedback that enables them to integrate their new approaches, perceptions, and beliefs.

Why is this so important? The way in which people perceive the events around them shapes the way they will think, feel, decide, and ultimately act or respond. When people can access this kind of awareness, it gives them incredible control over their ability to self-monitor and self-coach their thoughts, emotions, beliefs, and behaviors in real time. As they become more facile

²³ Wellbeing: The Five Essential Elements, Tom Rath, Jim Harter, Ph.D., Gallup Press, New York, NY, 2010.

²⁴ Psychology Today, "How Brain Science Can Change Coaching," Ray B. Williams, February 2010.

²⁵ Evidenced Based Coaching Handbook, D. Stober/A. Grant, editors, "Positive Psychology: The Science at the Heart of Coaching", Carol Kauffman, John Wiley & Sons, 2006.

²⁶ Evidenced Based Coaching Handbook, D. Stober/A. Grant, editors, "Positive Psychology: The Science at the Heart of Coaching", Carol Kauffman, John Wiley & Sons, 2006.

at navigating challenging situations with less stress and greater ease, they are able to perform more optimally.

A 2011 study revealed people who scored higher (had a higher level of energy of consciousness) on the Energy Leadership Index™ Assessment were significantly more satisfied across 14 individual success indicators.²⁷ Increasing a professional clinician's score, and moving them from a lower energy level to a higher one through the Well Beyond This Program for Healthcare Practitioners, will help them to integrate new perspectives, purpose, and personal goals into their lives both personally and professionally.

Training organizational leaders can have a significant impact on creating effective, sustainable change. "Supervisors may be trained in adopting a coaching leadership style, to give adequate feedback about performance, and to avoid role conflicts. Performance feedback, leading to awareness about the quality of performance, seems to be a very important job resource."²⁸

Potential ROI for Your Organization

Overall life satisfaction is defined as the degree to which the experience of an individual's life satisfies that individual's wants and needs, both physically and psychologically (Rice 1984). Well Beyond This for Healthcare will not only improve the quality of life of the participants and their performance in the workplace, it can significantly impact the bottom line for healthcare organizations both directly and indirectly.

A model by Laschinger and Finegan (2005b) linked structural empowerment, work engagement, and health outcomes of staff nurses. "Empowerment had a direct effect on all areas of work life, with the exception of values congruence. In turn, all areas of work life except control had direct effects on burnout, which subsequently had strong direct effects on measures of physical and mental health."²⁹

Additionally, both engagement and wellness programs have been shown to directly and significantly improve employee health.³⁰ Indirect outcomes include reduction in:

- Absenteeism
- Employee turnover
- Healthcare costs and utilization of healthcare services
- Chronic illness
- Medical errors
- Injury

²⁷ Key Factor Revealed for Determining Success in Work and in Life, Karen A. Buck, MS and Diana Galer, Ph.D., CPC, ELI-MP, ACC

²⁸ A Model of Burnout and Life Satisfaction amongst nurses, E. Demerouti, PhD, A. Bakker, PhD, F. Nachreiner, PhD, W. Schaufeli, PhD, January 2000 <http://www.ncbi.nlm.nih.gov/pubmed/10964195>

²⁹ Workplace Empowerment, Work Engagement and Organizational Commitment of New Graduate Nurses
Julia Cho, MScN, RN, Heather K. Spence Laschinger, PhD, RN, Carol Wong, MScN, RN

³⁰ What's the Hard Return on Employee Wellness Programs? - Harvard Business Review, Leonard L. Berry, Ann M. Mirabito, and William B. Baun <http://hbr.org/2010/12/whats-the-hard-return-on-employee-wellness-programs/ar/1>

Indirect outcomes also include increases in:

- Productivity
- Quality
- Service Excellence
- Safety
- Commitment to organization and its mission
- Job satisfaction
- Employee morale
- Teamwork and cohesiveness
- Autonomy and empowerment
- Patient and family satisfaction

Nurses have been identified as a key connecting point through which systems, patients, and physicians work together to identify and prevent potential medical errors. They represent the key "people factor" in controlling healthcare quality.³¹

The statistical evidence demonstrating the financial savings generated through the investment in and implementation of training programs designed in alignment with an organization's culture is extensive.

If organizations increased investment in a range of good workplace practices which relate to engagement by just 10%, they would increase profits by \$2,400 per employee per year.³²

In a study done at Johnson & Johnson, it was noted that when strategically designed, investing in the social, mental and physical wellbeing of employees pays off.

J&J's leaders estimate that wellness programs have cumulatively saved the company \$250 million on healthcare costs over the past decade.³³

A single employer workplace study by Drs. Richard Milani and Carl Lavie showed,

³¹ Nurse Engagement Key to Reducing Medical Errors People more important than technology by Rick Blizzard, D.B.A. . December 2005, <http://www.gallup.com/poll/20629/nurse-engagement-key-reducing-medical-errors.aspx>

³² IES/Work Foundation Report) <http://www.thesocialworkplace.com/2011/08/08/social-knows-employee-engagement-statistics-august-2011-edition/>

³³ What's the Hard Return on Employee Wellness Programs? - Harvard Business Review, Leonard L. Berry, Ann M. Mirabito, and William B. Baun <http://hbr.org/2010/12/whats-the-hard-return-on-employee-wellness-programs/ar/1>

Every dollar invested in the intervention yielded \$6 in health care savings.³⁴

Finally, introducing innovative solutions to organizational and employee challenges can help healthcare organizations to stand out in the field.

Through the successful implementation of such retention strategies, HCOs may, in turn, incur certain downstream benefits of retention, such as becoming a nursing employer of choice.³⁵

This will become increasingly important as more and more baby boomers retire, leaving a highly anticipated shortage of trained, skilled and experienced healthcare workers.

Summary and Conclusion

Most people who enter a helping profession do so from a place of having great compassion for others and wanting to make a difference in their quality of life. Over time, workplace challenges can, essentially, bury this passion underneath layers of low energy, frustration, stress, and burnout, compassion fatigue ultimately leading to disengagement. Currently, healthcare practitioners go through a daily internal battle between wanting to deliver the ideal care to patients and what is realistic within the boundaries of their work situation.

Providing healthcare clinicians with new tools and demonstrating a commitment to improve their quality of life and create a healthy work environment will help them to reconnect to their original motivations for choosing this career path. When they feel they can deliver the kind of quality care and compassion that was always in their vision, while also experiencing a sense of balance, wellbeing, and engagement, the patient experience will also shift.

³⁴ What's the Hard Return on Employee Wellness Programs? - Harvard Business Review, Leonard L. Berry, Ann M. Mirabito, and William B. Baun <http://hbr.org/2010/12/whats-the-hard-return-on-employee-wellness-programs/ar/1>

³⁵ The Costs and Benefits of Nurse Turnover: A Business Case for Nurse Retention, Cheryl Bland Jones, RN, PhD, FAAN, Michael Gates, RN, PhD, OJIN: The Online Journal of Issues in Nursing Vol. 12 No. 3. <http://www.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume122007/No3Sept07/NurseRetention.aspx#Minore>