

Exploring Vulnerability– Opportunities for Mindfulness and Reflection for Nurses Practicing in an Intensive Care Unit

Christine Joyce, BSN, RN, Jacqueline FitzGerald, BSN, RN, and Susan Holland EdD, MSN, RN

TAP TO GO BACK TO KIOSK MENU

Introduction/Problem

Merriam-Webster (2018) defined vulnerable as “capable of being physically or emotionally wounded” and “open to attack or damage.”

Patients and their loved ones are vulnerable, often having little control over the illness or injury that brought them to the hospital while placing their trust in healthcare providers who they have just met. Nurses may benefit from having the opportunity to discover their own vulnerability as caregivers in the hospital through the process of reflection.

The Code of Ethics for Nurses with Interpretive Statements of the American Nurses Association (ANA) states that “the nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth” (ANA, 2015).

Nurses are susceptible to burnout and compassion fatigue, often not being able to recognize it in themselves, however there are interventions that may help prevent it.

References

- American Nurses Association (2015). *Code of Ethics for Nurses, with Interpretive Statements*, Silver Spring, MD: American Nurses Association, Nursebooks.org, publishers.
 Merriam-Webster Dictionary (2018). Retrieved from: <https://www.merriam-webster.com/dictionary/vulnerable>

Aim/Goal

To describe several strategies to promote mindfulness and reflection for ICU nurses that compels them to explore their own vulnerability as caregivers.

To measure the effectiveness of interventions

The Team

- MICU/ SICU (Finard ICU) Nurses, Patient Care Technicians and Unit Coordinators
- Ann Anderson, BSN, RN, CCRN, Unit Based Educator
- Annie Banks, LICSW, Psychosocial support and Bereavement Programs
- Jessica D’Angio, M.Div., BCC, Department of Spiritual Care and Education
- Julie Knopp, NP, Associate Director, Inpatient Palliative Care Team
- Wendy McHugh, MS, RN, Clinical Nurse Ethicist
- Volunteer Services (Pet Therapy and Reiki Program)

The Interventions

Interdisciplinary palliative care rounds	Staff pet therapy sessions
Formal debriefing after a traumatic event	Staff therapy cart
Staff herbal tea cart	Nursing ethics sessions
Staff reiki sessions	Continuous quality improvement- sharing moments of excellence



(left) Pet Therapy Volunteers and Pet Therapy Dog Cosmo (right) Staff in the MICU/SICU East (Finard ICU) decompress with the Staff Therapy Cart provided by Chaplaincy Services

Progress to Date

- 2018 Employee Survey Concern: “The amount of job stress I feel is reasonable”
 Score: 3.15 (out of 5), lower score than overall hospital average
- 12 month average RN turnover: 4%

Future

2019 Employee Survey Results, RN Turnover, additional interventions and nursing research

For more information, contact:
 Christine Joyce, BSN, RN cmjoyce@bidmc.harvard.edu