Self-Care Environment

Poor provider health and clinical staff burnout remain a threat to quality patient care (Dyrbye et al., 2017). A meta-analysis of studies about nurse burnout reported the following estimates about nurses in clinical practice: 31% had high emotional exhaustion, 24% demonstrated high depersonalization, and 38% had low personal accomplishment (Molina-Praena et al., 2018).

In this issue of the *Clinical Journal of Oncology Nursing*, Hand, Margolis, and Staffileno (2019) report their impressive results about nurses practicing self-care during work breaks by using mechanical massage chairs. By choosing to practice this stress-reduction strategy, these nurses have an accessible way to promote nurse well-being and combat the reality of nurse burnout.

Hand et al.’s (2019) effective massage chair initiative demonstrates a concrete and creative way that clinical oncology nurses are practicing self-care. Their efforts support the goals championed by many professional healthcare associations promoting provider self-care.

A similar effort is being made with the THRIVE program, started in 2016 by nurses at The Arthur G. James Cancer Hospital and Richard J. Solove Research Institute at the Ohio State University. According to Lisa Blackburn, MS, APRN-CNS-BC, AOCNS®, clinical nurse specialist and coordinator of THRIVE, the program emphasizes relationship-based self-care strategies that build resilience and combat compassion fatigue.

“The responsibility for this work is a shared one: Organizations must offer a variety of programming that will meet the goal of raising staff resilience; an even greater challenge, perhaps, is the responsibility of the staff to engage in this work and develop good self-care habits. Most think of self-care as manis, pedis, and massages, but self-care includes many practices that can be engaged in right in the middle of the work day and can even lead to a more robust life outside of work.”

Blackburn is particularly positive about a THRIVE self-care method using brief, 10-minute sessions of chair-based yoga, performed midday at the nurses’ station or a nearby hallway. So, what is the secret sauce that allows the THRIVE program to be sustainable?

“We talk a lot about personal protective equipment in oncology nursing—that which can protect us against known work hazards, such as exposure to body fluids or chemotherapy,” Blackburn says. “We need to realize that self-care and resilience is our own personal protective equipment for the traumatic experiences we stand in the midst of with our patients on a daily basis. Healthy, strong nurses with a positive mindset are more engaged and more satisfied with their work, make fewer mistakes, create less turnover, and take better care of their patients. This work is critical in oncology.”

How laudable that these nurses have taken to heart the challenge of self-care and health in the workplace. But are we all taking on this challenge? Are you? What type of self-care initiatives are on your unit or in your workplace? Or, better yet, as you take better care of yourself, how are you spreading the word to your colleagues? Have you or any of your like-minded work colleagues explored ways to practice self-care at work—regularly and consistently?

As you read this, appreciating for many these therapeutic days of summer, what better time to walk the talk of self-care and establish your own version of a healthy nurse work environment? As evident by the examples of these self-care oncology nurse trailblazers, it can be done.

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REFERENCES


KEYWORDS

burnout; compassion fatigue; nurse self-care