

An On-Site Self Care Break to Decrease Stress and Promote a Culture of Wellness

Cathy Alvarez, MA, RN, CNML, HNB-BC

Education Specialist

Yale New Haven Hospital

Conflict of Interest Disclosure

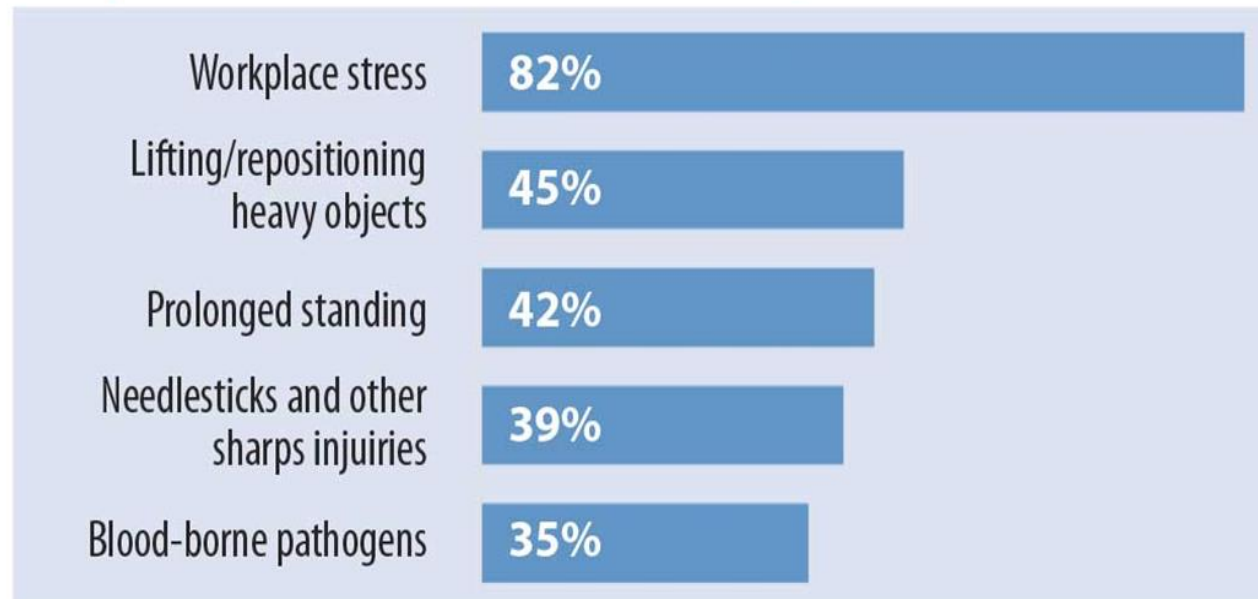
The presenter has no conflict of interest to disclose related to this presentation.

Learning Outcomes

- **Describe the structure and processes used to design an on-site wellness program for nurses**
- **Evaluate feasibility of a Replenish at Work™ program**

Top Concerns

Top health and safety hazards



- 68% of nurses stated health and safety of their patients took priority above their own
- Despite growing wellness initiatives in healthcare organizations, burnout continues to worsen

Background

- Physical, mental, emotional exhaustion
- A framework to amplify rewards and diminish stress
- Increased urgency to create a positive work environment where employees feel supported and valued



REPLENISH at work

Wind Down - Restorative
Hold this moment with ease



Pause, notice your breath and remember the interconnectedness of your mind, body, and spirit. Inhale to a count of 4, feeling the space around your heart expand. Exhale the same count of 4, feeling the body gently soften and release.

Heart Power!
Inhalation & Exhalation
Reach arms overhead
Bend knees through feet
Raise up through fingers
Inhale lift chest
Exhale relax jaw

Mountain Pose
Stand on the left foot
Left foot forward
Right foot back
Right knee lifted
Right hip lifted
Inhale expand both chest
Exhale soften, relax back
Repeat other side

Warrior II
Stand on the left foot
Right foot forward
Right knee lifted
Right hip lifted
Inhale expand both chest
Exhale soften, relax back
Repeat other side

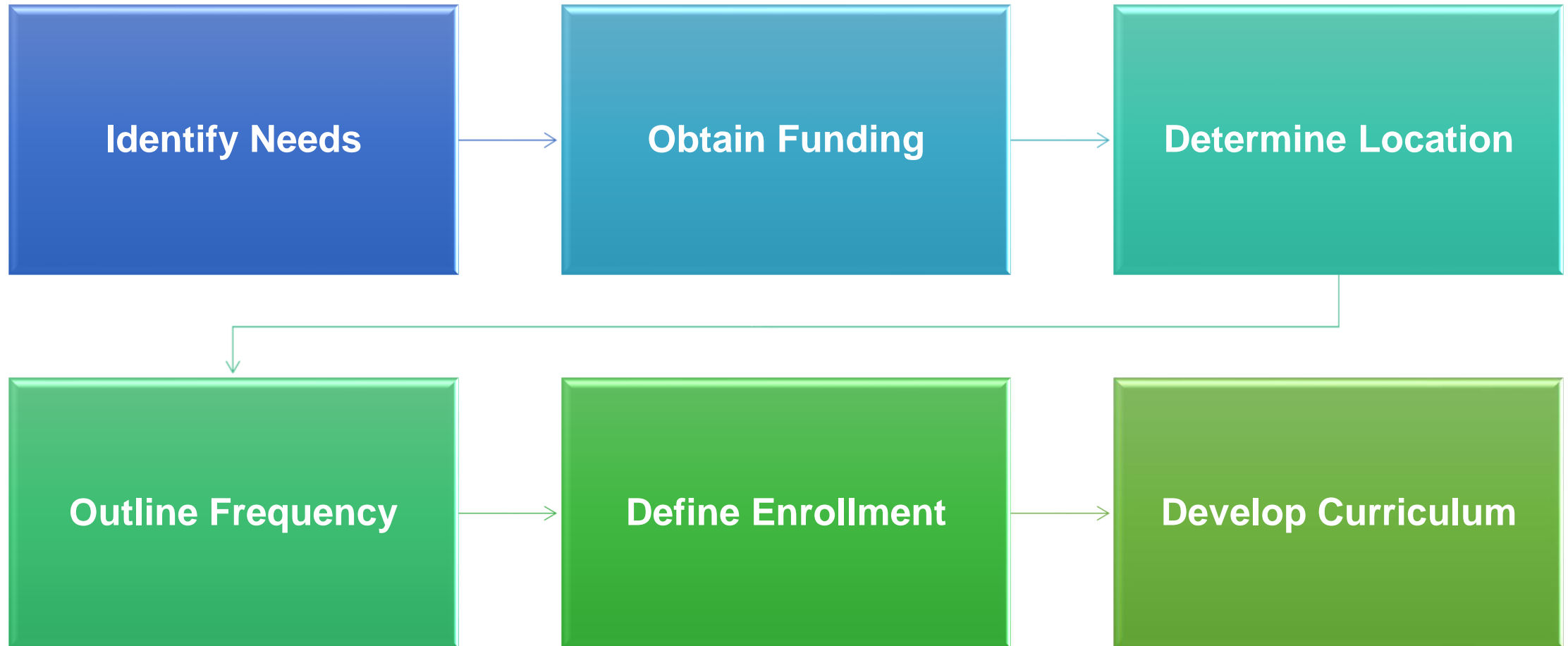
Child's Pose
Sit on the floor
Knees together
Hips to heels
Forehead to floor
Repeat other side



Breathe
Replenish
mind • body • spirit



Planning

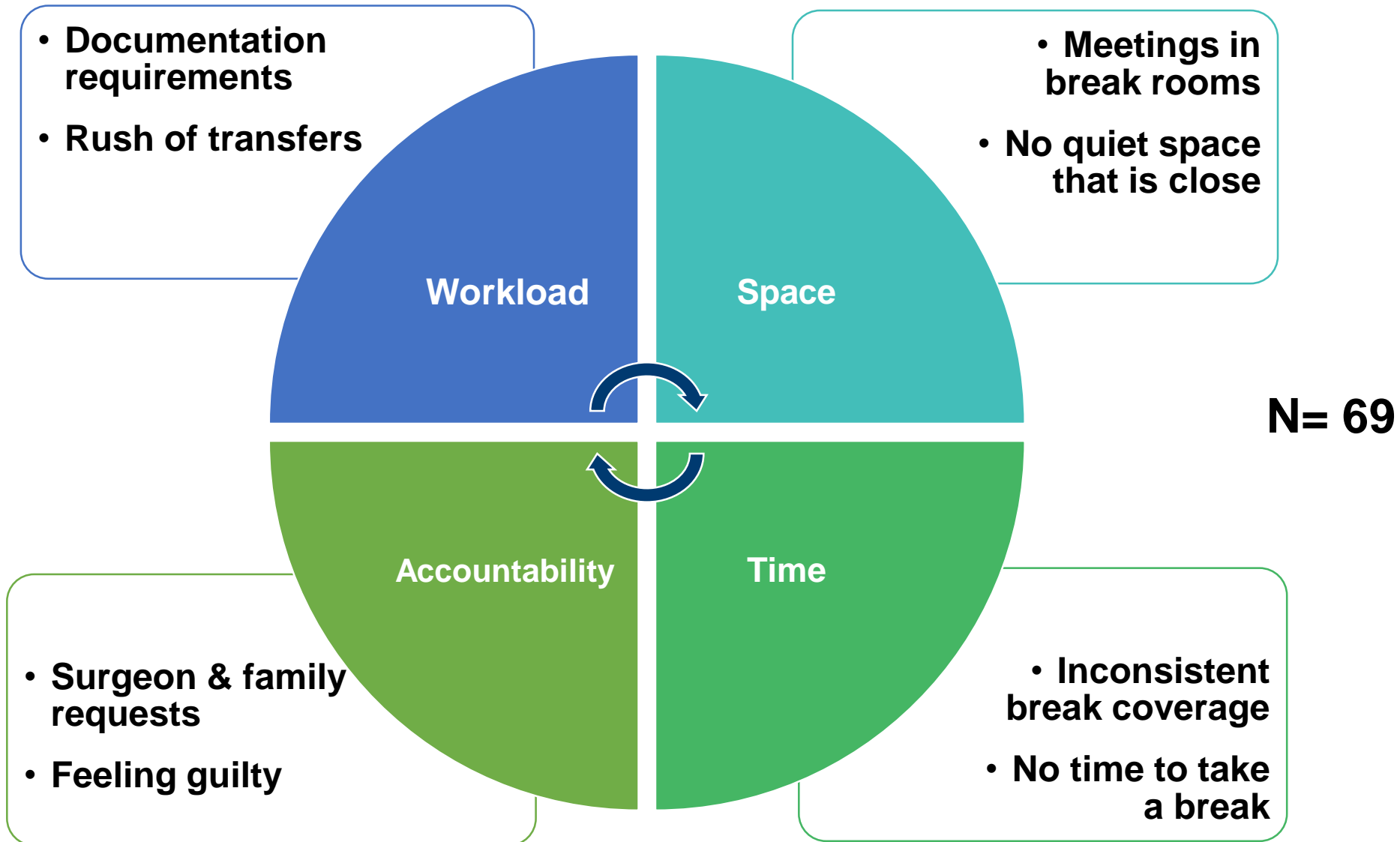


Theoretical Framework

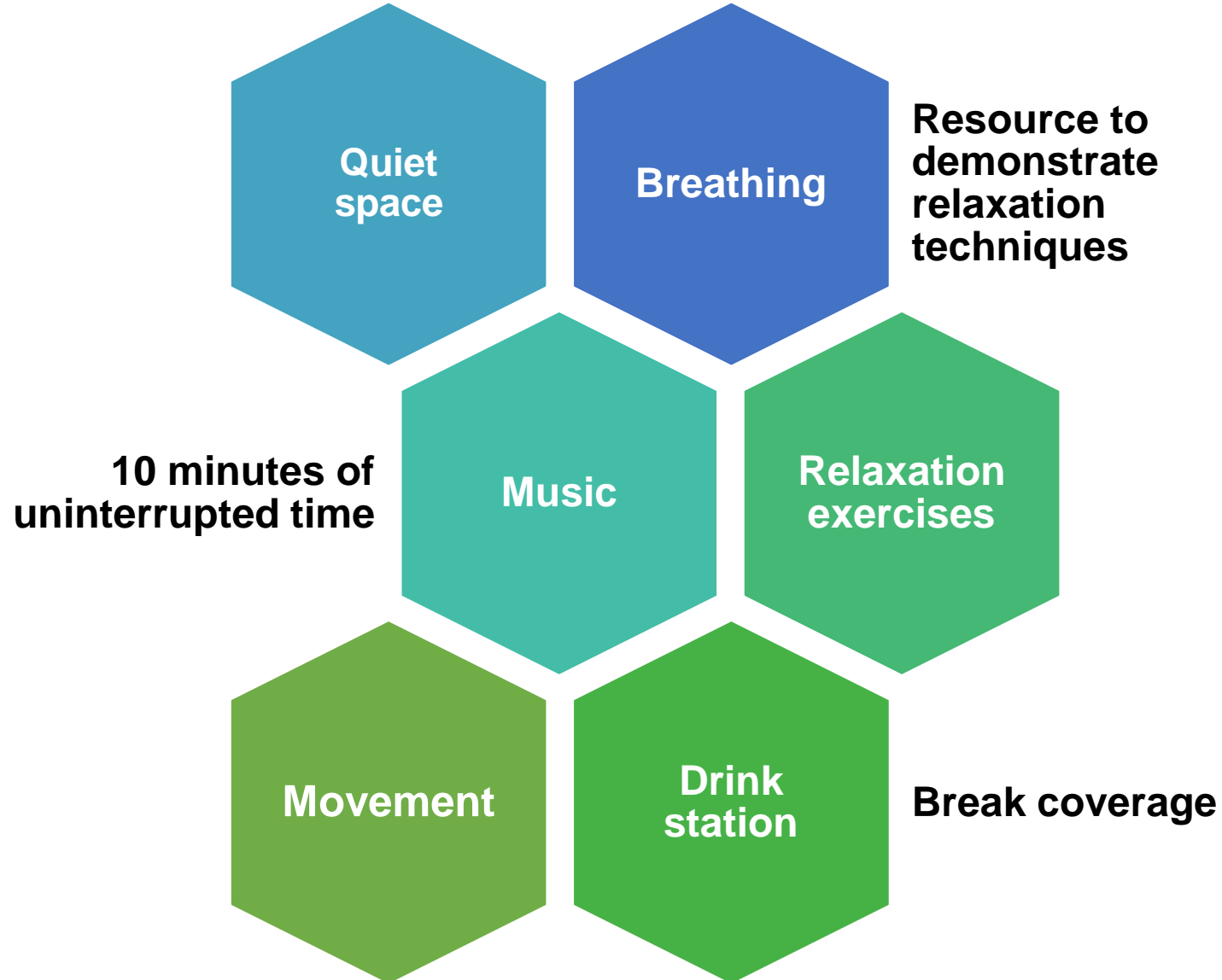
- **Challenges nurses to identify self-care practices and interconnectedness of body-mind-spirit**
- **Self-care improves overall well-being**
- **Healthier staff = better patient outcomes**



Needs Assessment



Unit-Specific Requests



Phase 1: 30 minutes

- **1:3 instructor to staff**
- **Opportunity to acknowledge individual challenges/barriers at work**
- **Importance of self-care and self-reflection**
- **Introduction to Replenish at Work™ curriculum**

Phase 2: 10 minutes

**1:1 up to 1:3
instructor/staff**

- **Mind-body intervention
tailored to individual
needs**

Program Outcomes

- **93% of CTICU staff (N=86) participated in the program**
- **60% participated in 1-2 10-minute sessions**
- **40% received more than 3 10-minute sessions**
- **60% of staff completed a post-program evaluation to assess feasibility of the program**

Program Evaluation

Question 1. What did you think of the intervention?

- **62% responded positively, referring to the intervention as refreshing, helpful, enlightening, and relevant to practice**
- **100% of staff were grateful someone could relieve them while participating in the intervention**
- **35% still felt compelled to return to their job as soon as possible**

Program Evaluation

**Question 2. Was the program effective in improving your ability to better do your job and take care of patients?
Why?**

- **65% stated after taking care of their self-care needs, they were more efficient and could better handle surgeon, patient and family demands**

Program Evaluation

Question 3. What parts of the intervention would you hope to improve upon if it were to be repeated in the future?

- **Private and quieter place to conduct the intervention**
- **Increase the frequency of intervention**
- **Continue to provide personnel coverage for the intervention as well as routine break times**

Program Evaluation

Question 4. Would you recommend this intervention to other colleagues in other units and why?

93% affirmed the Replenish at Work™ program should be shared across all departments:

- **Helpful in promoting self-care practices**
- **Improvement in stress levels**

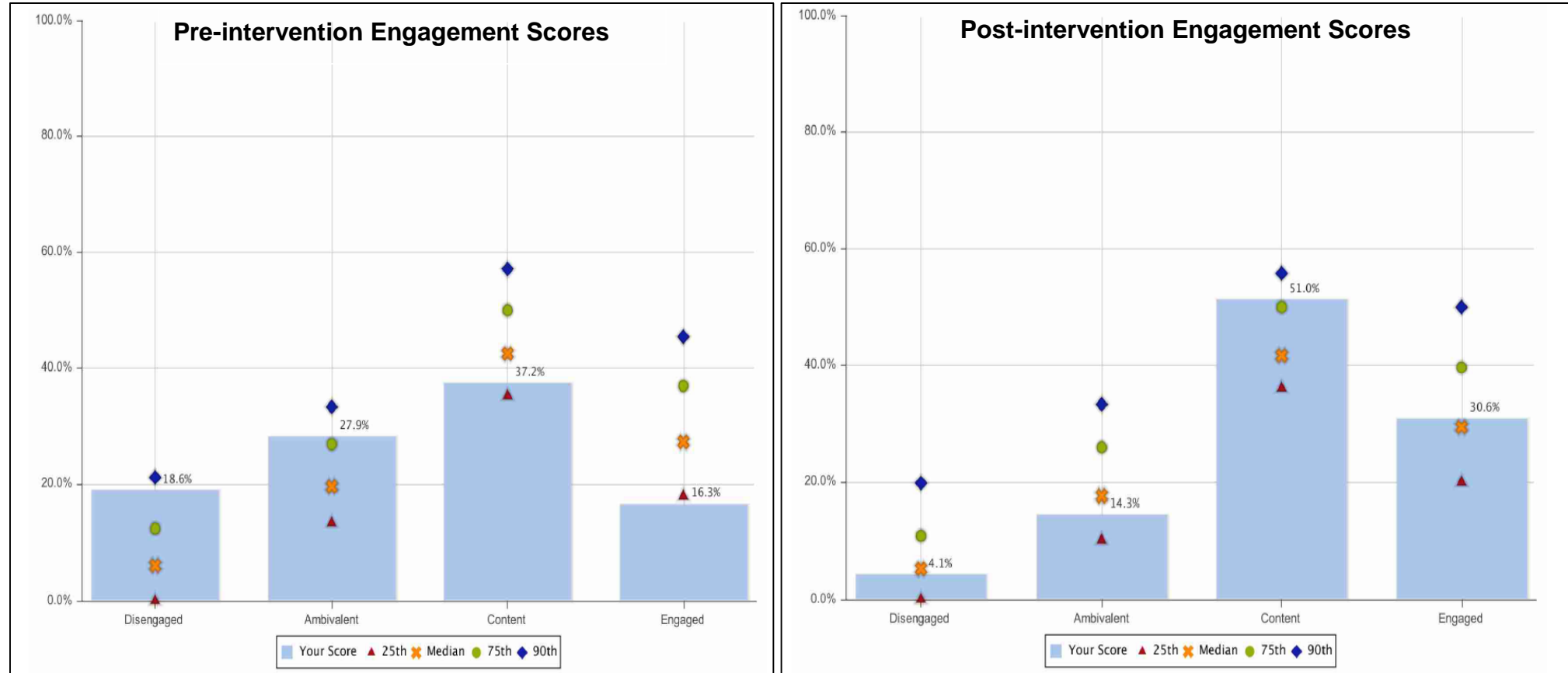
Post-Program Evaluation

“I think the sessions were very helpful. Even though 10 minutes seems like a long time if you have a lot of tasks at hand, it was helpful to step away from the stressful environment and it decreased my stress level for the rest of the shift.”

“I thought it was helpful. The most beneficial part was just reminding me to be aware of myself. I think the interventions taught are easy to practice and I will incorporate them in my routine.”

“It felt good to know that someone cares about us and recognizes that without change, stress and burnout will continue.”

Impact on Engagement



An institutional employee engagement survey conducted 2 months post intervention showed significant improvements compared to the previous year

Implications for Practice

- **There is a strong interest in wellness programs among staff**
- **Self-reflection is crucial to establishing and maintaining self-care practices**
- **Wellness programs can be beneficial to all members of the healthcare team**
- **Leadership support is crucial to implementing wellness programs**

Next Steps

- Continue to offer on-site wellness programs
- Collect formalized data on stress levels and engagement



References

- American Nurses Association. (2017). Executive Summary American Nurses Association Health Risk Assessment. Retrieved July 31, from https://www.nursingworld.org/~4aeceb/globalassets/practiceandpolicy/work-environment/health-safety/ana-healthriskappraisalsummary_2013-2016.pdf.
- Gauthier, T, Meyer R, Greife D, et al. (2015). An on-the-job mindfulness-based intervention for pediatric icu nurses: A pilot. *Journal of Pediatric Nursing*. 30(2):402-409.
- Klatt, M. et al. (2015). Mindfulness in Motion (MIM): An Onsite Mindfulness Based Intervention (MBI) for Chronically High Stress Work Environments to Increase Resiliency and Work Engagement. *Journal of Visualized Experiments*, 101(e52359). <http://doi.org/10.3791/52359>
- Press Ganey. (2018). *Burnout and resilience: A framework for data analysis and a positive path forward*. South Bend, IN: Press Ganey Associates, Inc.
- Rock, D. (2012). The healthy mind platter. *NeuroLeadership Journal*, 4:1-23.
- Steinberg B., Klatt, M., Duchemin, A.(2016). Feasibility of a mindfulness-based intervention for surgical intensive care unit personnel. *American Journal of Critical Care*. 26(1):10-18.
- Watson, J. (2011). *Human Caring Science: A Theory of Nursing* (2nd ed.). Boston: Jones & Bartlett.

Contact Information

Cathy Alvarez, MA, RN, CNML, HNB-BC

Catherine.Alvarez@ynhh.org

www.replenishmbs.com

203-506-5026

