

## section 8.2: recognising the risk of burnout and implementing protective strategies

### recognising stressors

“The ability to cope with dying patients does not come easily. Society has not prepared one for such interaction.”<sup>1</sup>

Opportunities for personal replenishment can occur when working with palliative patients, but it is also important to recognise the weight of the demands. Some of the questions that arise include:

- how can we sustain ourselves, knowing that we face multiple workplace stressors?
- how do we maintain the human side of our role without exposing ourselves too much?
- what is burnout?

### burnout - definitions

- to deplete oneself
- to exhaust one’s physical, emotional and mental resources
- “to wear oneself out by excessively striving to reach some unrealistic expectations imposed by oneself, others or by the values of society”<sup>2</sup>

### signs and symptoms of burnout

<b>Emotional symptoms</b>	<b>Behaviour-related symptoms</b>
anger/emotional outbursts	distancing/isolation
boredom	cynicism, critical attitudes to others
self doubt	impaired judgment, reasoning
Hopelessness	Frustration
	decreased empathy
<b>Physical symptoms</b>	lack of initiative
headache	difficulty communicating with others
exhaustion, feeling run down	
GI disturbances	<b>Team related symptoms</b>
sleep disturbance	demoralization
weight loss	frequent conflict
loss of libido	absenteeism
increased sick leave	

Adapted from Table 1 in Therapeutic Guidelines, Palliative Care, version 2 (2005). Page 14

## protective characteristics and strategies

Sustaining ourselves requires awareness, planning and giving priority to protective strategies. These may include:

### for the health provider:

- appropriate training and education – up-skilling as necessary to maintain a sense of mastery in your workplace
- building an awareness about work and our commitment to it – some useful tools to help you reflect include:
  - confronting personal mortality – End of Life/Palliative Education Resource Centre (EPEC): Fast Fact and Concept #31 can be used as a useful tool for personal reflection and may be accessed at <http://www.eperc.mcw.edu/>
  - Extended Work Ethic<sup>3</sup>: a questionnaire which provides insights into your views and commitment to work
  - The Life Priorities calculator<sup>4</sup>: a tool to assist in ordering your priorities in life and manage stress
  - Compassion Satisfaction and Fatigue Test<sup>5</sup>: a self test to help estimate your compassion status and risk for burnout and compassion fatigue
- being clear about your own professional boundaries and professional limitations
- having a good understanding of your own personal philosophy:
  - appreciation of the spiritual or religious dimensions of life
  - personal resilience through positive self regard
  - self-awareness
  - capacity for intimacy
  - ability to live in the present
- optimising physical health – focusing on exercise, nutrition, sleep
  - perception of being well supported through our personal relationships and family and our role as a valuable part of an effective team
- identification and utilization of the skills of team members
- avoidance of clinical isolation, actively seeking feedback and support from your colleagues
- early identification of difficult clinical or emotionally charged practice situations and involvement of a team approach to management
- regular use of reflective practice
- using a proactive, reflective approach to managing stress and lifestyle
- being familiar with your organisation's stated responsibility for occupational stress in the workplace

### for the work environment:

- good interpersonal communications including the use of humour
- collaboration and teamwork
- clear definition of roles

- supportive conditions of employment
  - including regular opportunities for debriefing<sup>6</sup>, particularly after a critical event or challenging clinical situations
  - opportunities for mentoring and clinical supervision
- opportunities for review and reflection are supported by the organisation, with an emphasis on junior or newly appointed staff
- appropriate staffing structure with appropriately qualified staff
- access to employment assistance scheme and counselling as required

## strategies for the workplace

Team related exercises that provide an opportunity to explore our own beliefs, values, methods of communicating and personality style can be extremely useful and can provide “light bulb moments” of self-awareness. They may be integrated into team meeting schedules and can play a valuable role in contributing to our resilience in a challenging workplace. Some suggestions include:

- Enneagram – indicates nine distinct personality types and uses a forced answer system to indicate personality and communication style
- Myers Briggs Personality Type – the sixteen personality types which are used in the assessment are based on the research of Carl Jung, Katharine C. Briggs, and Isabel Briggs
- 360° feedback – a process whereby an individual is given information on their performance from a variety of people with whom they work including managers, peers, staff who report directly to them and clients
- Edward De Bono 6-hat game – a model that can be used for exploring different perspectives of complex or difficult clinical issues<sup>7</sup>
- including team health on regular meeting agendas

For additional assistance speak with your:

- direct line manager
- staff development officer
- human resource team.

## related resources and information

***Therapeutic Guidelines - Palliative Care***, Version 2

### CareSearch

The website contains sections which relate to self care resources and information for:

- palliative care
- cancer professionals and others dealing with end of life issues
- nurses
- medical practitioners
- isolated practitioners.

## Relevant literature

- Wilson P. *The Quiet*. Australia, Penguin Books, 2006.
- Wilson P. *Calm at Work*. Australia, Penguin Books, 1997
- Hill-Jones, S (2005) A self care plan for hospice workers. *Palliative Medicine*, 22: 125-128.

## references

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- <sup>1</sup> Leming M, Dickinson G (2002). *Understanding dying, death and bereavement*. Harcourt College, Fort Worth Publishers, Texas, 177.
  - <sup>2</sup> Fruedenberger H, Richelson G. *Burnout; The High Cost of High Achievement*. New York. Doubleday & Co.1980, pg 16.
  - <sup>3</sup> Wilson P *Calm at Work*. Penguin Books, Australia 1997, pg 38.
  - <sup>4</sup> Wilson P *Calm at Work*. Penguin Books, Australia 1997, pg 92.
  - <sup>5</sup> Figley C.R (1995) *Compassion Fatigue*, New York: Brunner/Mazel, Traumatic Stress Research Group, 1995 –1998.
  - <sup>6</sup> A Snapshot of Palliative Care in Australia (2003), Australian Government Department of Health and Ageing, Commonwealth of Australia, ACT, recommendation pg 26.
  - <sup>7</sup> Kenny L (2003) Using Edward De Bono's six hat game to aid critical thinking and reflection in palliative care. *International Journal of Palliative Nursing*. (9) 3:105-112.