

HOW CAN THE WELLNESS NEEDS OF EMERGENCY CLINICIANS BE MET IN A DIVERSE, COMPLEX AND DYNAMIC ENVIRONMENT?

Karen Gerrard¹, Julie Shepherd¹, Rajesh Sendev², Vinay Gangathimmaiah², Cate Nagle^{1,3}

- 1. Centre for Nursing and Midwifery Research, James Cook University
- 2. Emergency Department, Townsville University Hospital
- 3. Institute of Health Research and Innovation, Townsville University Hospital

Contact: Karen.Gerrard@jcu.edu.au

Background

Emergency Departments deliver care in intense and chaotic environments providing services ranging in diversity, complexity and acuity; the degree of which is often unknown until the patient presents to the department.¹⁻³ This work causes emergency clinicians to experience occupational stress, burnout, violence, and other stressors, which are compounded by internal problems such as hospital overcrowding, access block, and staff shortages.

Why are wellness interventions required?

- To improve clinician wellbeing
- To create workplaces that support healthy behaviours
- To have a positive effect on staff retention & decision making
- To deliver compassionate patient care

Objective

To collate, tabulate and report the elements of wellness programs that have been evaluated in Emergency Departments (ED) and to report clinicians' experiences of the interventions.

Questions guiding the review

What are the experiences of the Emergency Department clinicians regarding workplace wellness activities?

What are the features of interventions that improve Emergency Clinicians wellbeing?

Inclusion Criteria

Peer reviewed articles, no date or language restrictions were applied

Exclusion Criteria

Grey literature, commentaries, reviews, editorials, and letters to the editor were excluded

Methodological Framework

Arksey & O'Malley modified by Levac and informed by Pollock.⁴⁻⁶

Qualitative Analysis was guided by Braun and Clarke's reflexive thematic analysis method.⁷

Databases Searched

MEDLINE
CINAHL
PsycInfo
SCOPUS

Search Terms

Clinicians: Nurses & Doctors working in ED

Keywords: Wellness, Emergency & Clinicians

Settings

Nine Studies from - USA (4), Australia (3), Sweden (1) and Ireland (1).

Results -Quantitative

Participant numbers: Across the studies 357 participants were recruited. Study designs comprised of 4 qualitative studies, 1 quantitative and 4 mixed method design.

Interventions were: Mindfulness-based, Tactile massage & hypnosis, Mantra Meditation, ED Healthy Workplace Initiative & The Happiness Practice (THP).

Findings: Reduced RN vacancies by 100%, decline in staff turnover by 12% & increased staff satisfaction from 81 to 94%.⁹ Mindfulness was of personal value 50%, and of value to the ED 60%.¹⁰ Satisfaction with THP study resulted in low satisfaction with the program.¹¹

Results -Qualitative

Three Themes identified: The Value of Mindfulness; One Size doesn't fit all; and Enablers and Barriers.

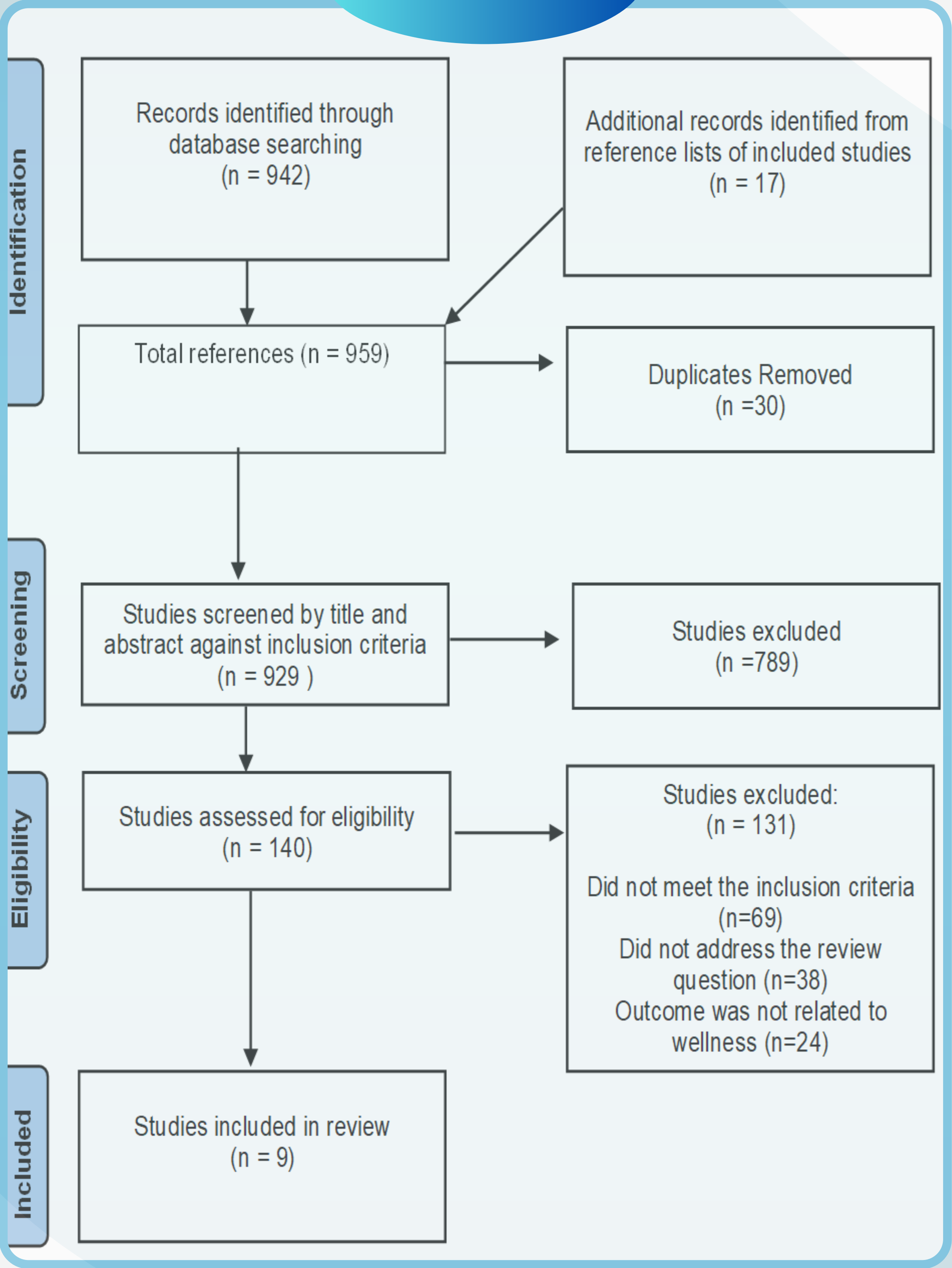
Mindfulness interventions resulted in positive changes in the ED, feeling a sense of community and improved the resilience and wellbeing of the ED workforce.

Interventions didn't suit everyone due to clinician variable rosters and shift work. Some liked video based apps and others preferred face to face interventions. Enablers included understanding the ED environment and ED specific challenges. Barriers included time pressures and lack of protected time to attend interventions.

Implications for Practice

- Provides an indication of interventions to improve wellbeing in ED.
- Being able to relax and relieve anxiety and tension gave staff more energy and improved attitudes towards patients.
- Creation of a sense of shared community, understanding and team empowerment.
- Evidence to inform future research in the design and evaluation of clinician wellness in ED settings.

PRISMA⁸



Reference List



Publication

