COLLEGE OF REGISTERED NURSES OF BRITISH COLUMBIA



# Fitness to Practice

The challenge to maintain physical, mental and emotional health



COLLEGE OF REGISTERED NURSES OF BRITISH COLUMBIA **STORE BCC 2855** Arbutus Street, Vancouver, BC V6J 3Y8 Tel 604.736.7331 or 1.800.565.6505 www.crnbc.ca Copyright CRNBC/May 2008 Pub. No. 329

### Contents

Contents
Introduction4
Stressors in the Work Environment5
The Effect of Employee Stress on Employers5
Responses to Stressors
EMOTIONAL RESPONSES TO ACUTE STRESS
How Nurses Become Physically and Emotionally Exhausted: The Road from Caring to Apathy 8
SELF-ASSESSMENT FOR SIGNS OF CHRONIC STRESS
Healing from Chronic Stress
CARING FOR YOURSELF.12PHYSICAL SELF-CARE12PSYCHOLOGICAL SELF-CARE12EMOTIONAL SELF-CARE13SPIRITUAL SELF-CARE13WORKPLACE AND PROFESSIONAL SELF-CARE13
Creating a Personal Meaning for Nursing14
Resources15
CRNBC
Other15

### Introduction

Nursing is a stressful profession. Caring for clients — individuals, families, groups, populations or entire communities — with multiple, complex and distressing problems can be overwhelming for even the most experienced practitioner. Add to this the uncertainty of health care changes and fewer resources, the challenges of providing nursing care can sometimes seem unreasonable and even unmanageable. Nurses regularly face physically and emotionally charged situations and encounter intense interpersonal and interprofessional situations and conflict in the workplace while trying to make appropriate and safe decisions.

Taking care of ourselves in this challenging environment is not easy. By accepting CRNBC's <u>Standards of Practice</u> (Professional Standards, Practice Standards, Scope of Practice Standards), CRNBC registrants have said they want to be sure that they can maintain their physical, mental, emotional (and spiritual) well-being. We know that if we, as nurses, experience problems in any of these areas, our cognitive functioning, decision-making, reaction time, judgment and ability to be flexible and handle stress may be negatively influenced. This can jeopardize client care. Just as we are committed to safe, competent and ethical care for all of our clients, we as nurses have to pay attention to nurturing and sustaining ourselves.

### Stressors in the Work Environment

Some work environment stressors experienced by nurses:

- Inadequate staffing patterns and lack of clarity in role definitions
- Lack of appropriately educated/trained staff
- Inadequate opportunities for communication among staff members
- Conflict among health care providers
- Lack of support in dealing with ethical issues in client care
- Critical, unappreciative or disruptive clients
- Verbally abusive clients or health professionals
- Inadequate environmental, physical and technological resources
- Unresponsive nursing and agency leadership
- Inadequate system supports

### The Effect of Employee Stress on Employers

The effects of chronic stress on nurses can be felt by the organization employing them. Some of the implications for organizations:

- Absenteeism
- Low morale
- Poor work performance, including errors in clinical judgment
- Poor communication patterns and systems
- Conflicts

### **Responses to Stressors**

Stressors and their subsequent conflicts can initiate a variety of responses in us, including:

### EMOTIONAL RESPONSES TO ACUTE STRESS

- Denial (an unconscious defense mechanism)
- Disbelief
- Shock
- Anger
- Anxiety
- Restlessness
- Confusion
- Self-doubt
- Forgetfulness
- A physical fight or flight response with feelings of fear, anger and excitement

### EMOTIONAL RESPONSES TO CHRONIC STRESS

- Mental blocks
- Hopelessness, frustration
- Boredom
- Feelings of entrapment
- Reduced feelings of empathy
- Chronic fatigue
- Chronic anger, cynicism, pessimism
- Depression
- Nervousness
- Self-hate
- Guilt

#### PHYSICAL RESPONSES TO CHRONIC STRESS

- Gastrointestinal upset
- Sleep disturbances
- Headaches
- Back pain
- Lethargy
- Muscle pains
- Decreased libido
- Eating disorders too much or too little
- Susceptibility to physical illnesses (colds)

#### **BEHAVIORAL RESPONSES TO CHRONIC STRESS**

- Mistakes or judgment errors
- Impulsiveness
- Inappropriate or aggressive communication
- Apathy
- Prone to accidents
- Defensiveness
- Increased drug or alcohol use
- Withdrawal, isolation
- Blaming others

# How Nurses Become Physically and Emotionally Exhausted: The Road from Caring to Apathy

Nurses start out their careers eager and excited about practicing nursing and providing nursing care to their patients. They usually have ideals and are confident they can make a difference in the lives of those to whom they provide care. The change from caring to apathy can be subtle and occurs slowly over time.

Does any of the following sound familiar? Watching clients suffer or die with inadequate care is more than you can tolerate. Working short-staffed with insufficient supplies or equipment sometimes makes you feel like you are just barely giving minimal care. You start to feel as if you are supposed to single handedly manage all of the clients' problems and make up for the deficits in the work environment. When this goes on over time, you begin to feel that there is only one way to protect yourself from overwhelming feelings of frustration and inadequacy. You decide not to put yourself out anymore. You decide not to feel. You decide to just go through the motions of the job, avoiding interactions with clients and their problems as much as you can.

As these feelings progress, you find new strategies to avoid emotional involvement with your work. You may find yourself labeling or stereotyping clients. You may use derogatory language or think of clients as diagnoses rather than human beings. You abbreviate their lives into one dimensional problems to be solved rather than as people to be cared about. By the time you have burned out, this invisible barrier between you and your clients has become a form of relief, and you are no longer aware of the painful and distressing feelings you are protecting yourself against.

### SELF-ASSESSMENT FOR SIGNS OF CHRONIC STRESS

(adapted from Smythe, *Surviving Nursing*)

Review the Emotional Responses to Chronic Stress listed earlier. Check the signs or symptoms below that you have frequently experienced (more than twice a week) or that interfere significantly with your job functioning or your personal life. The more checks you have, the more likely you are to be experiencing chronic stress.

- Disliking or feeling annoyed with clients
- □ Avoiding co-workers
- Calling clients by labels or referring to them by diagnoses
- □ Feeling apathetic and lacking interest
- □ Feeling like you are just going through the motions:putting in time
- □ Frequently calling in sick
- □ Focussing attention on paper work, non-client-related tasks
- □ Wanting to be left alone/not bothered by anyone at work
- □ Avoiding talking with clients and families
- □ Feeling work is meaningless
- □ Reduced productivity
- □ Feeling negative about everything at work
- □ Procrastination or forgetfulness
- Disillusionment with the profession
- Generalized irritability
- □ Job accidents, mistakes or omissions
- □ Low frustration tolerance
- □ Constantly feeling critical of co-workers
- □ Working below your potential
- □ Inability to concentrate or solve problems
- □ Feeling as if your job is destroying your personal life
- **Questioning your own competence as a professional**
- □ Feeling as if you have nothing to offer

### WHAT DOES IT MEAN IF I HAVE CHRONIC STRESS?

If you reflect on the list above and believe you may be experiencing stress, don't be alarmed and, above all, don't be too critical of yourself. Remember, to become burned out or be chronically experiencing stress, you had to have been a caring and compassionate nurse at one time. You would not have built up protective barriers to the suffering and frustration if, at one time, you were not enthusiastic about your job and concerned for your clients. If you identify yourself as physically and emotionally exhausted, remember that underneath the surface of what you see today is a warm and responsive nurse who needs some healing.

In an attempt to deal with chronic stress or burnout, many nurses develop self-destructive ways to ease the discomfort and take care of themselves. Although these ways appear to protect from the initial pain, the behaviors associated with burnout become sources of pain themselves. Unresolved burnout can lead to self-neglect, familial and social isolation, clinical depression, and unsatisfactory to incompetent performance in the workplace and at home.

### EXAMPLES OF MALADAPTIVE COPING STYLES

- Continually criticizing yourself while not noticing your strengths and achievements.
- Avoiding co-workers or clients so that you won't feel burdened with their problems.
- Avoiding any hassles by going along with everyone and everything.
- Blowing off steam by putting co-workers and clients/families in their place in an attempt to get them off your back.
- Blaming other people for your emotions, mistakes and problems.
- Playing the "ain't it awful game" and constantly complaining about work.
- Using or misusing drugs, alcohol and other substances regularly to relieve tension or stress.
- Using sleep medication regularly.
- Retreating into too much or too little sleep, food, sex, fantasies and daydreams, work, exercise.
- Taking out your frustrations behind the wheel by driving carelessly or aggressively.
- Becoming overly involved and believing only you can solve or attempt to solve the problems at home and work.
- Spending most of your free time with co-workers or conserving your energy for work by not socializing with family and friends, exercising or engaging in entertainment and hobbies.
- Avoiding and being afraid of commitments as a result of feeling exhausted and a fear of failure.

### AVOID SELF-DESTRUCTIVE COPING

It is common to cope with intense emotional and physical exhaustion and pain by developing selfdestructive habits, such as misusing and abusing substances. Although addressing these kinds of selfdestructive issues can initially make us feel shameful, embarrassed and guilty, recognition of the problem is a beginning step toward healing. Resources are available for those who have slipped into selfdestructive coping patterns.

### Healing from Chronic Stress

While it is easy to write about and prescribe strategies, it is clear that these activities take effort, time and a willingness to move from experiencing emotional and physical pain to healing and balance.

### CARING FOR YOURSELF

To heal from this mental and physical exhaustion or stress, you need to learn how to nurture yourself. Some people find that it is important to become your own best friend instead of your own worst enemy. Just as you teach others to care and help themselves, you also need to practice self-care. Conduct a nursing assessment on yourself and look at your physical, mental, emotional, social and spiritual situation and needs. Make a treatment plan (be honest and realistic) and carry it out. Do it and then evaluate what you've done. If it is not working, modify the plan and do it again.

### PHYSICAL SELF-CARE

- Eat regularly.
- Eat healthily.
- Choose some form of physical activity dance, swim, sing, badminton, baseball, volleyball, cycle, bowl, walk, rollerblade, jog. If you are not motivated, get someone to join you or join a team or a centre.
- Get enough sleep.
- Do some spontaneous fun things go on a picnic or to a museum, watch the sunrise.
- Take a vacation, even if it is a short one (and don't be responsible for everything and everyone).
- Take a course and learn stress reduction techniques, effective and assertive communication techniques, and conflict management techniques.

### **PSYCHOLOGICAL SELF-CARE**

- Make time for self-reflection regularly. Give yourself time alone to recharge your "batteries."
- Keep a journal. Write down your thoughts as a way of reflecting and sorting out feelings, of making meaning and resolving situations, and discovering the very private you.
- Take time to clarify your values, beliefs and goals; being aware of these can help provide a thread of consistency and direction.
- Read material that is unrelated to work as well as material containing new ideas and learning that can help you to improve your work situation.
- Monitor and balance or say no to extra unnecessary responsibility.

#### EMOTIONAL SELF-CARE

- Be aware of your strengths and acknowledge them regularly.
- Spend time with others whose company you enjoy.
- Stay in touch with important people in your life.
- Identify comforting activities, objects, people, relationships, places, and actively seek them out.
- Find things that make you laugh.
- Express your frustration by participating in social and professional actions, protests and marches; write letters; make donations.
- Find simple ways to enjoy family time together.
- Come to an understanding that you can't necessarily change other people only how you can react to them or the situations you find yourself.
- Use your employee assistant program, self-help groups and counseling.

### SPIRITUAL SELF-CARE

- Make time for reflection.
- Spend time with nature.
- Find a spiritual connection or community that is meaningful for you.
- Cherish your optimism and hope.
- Meditate, pray, sing.

#### WORKPLACE AND PROFESSIONAL SELF-CARE

- Take time and the opportunity to appreciate your work and the work of your co-workers, especially if there are few opportunities for your manager to give you and your colleagues positive feedback.
- Develop good communication systems amongst your colleagues to problem-solve difficult clinical and management situations, and formally learn and exchange ideas with each other.
- Clear the air about work-related conflicts. Learn conflict management techniques and understand how you can be part of the ways to solve problems.
- Participate in professional development activities.
- Set limits.

When we are hurting and exhausted, it is tempting to create reasons so that we do not or cannot change our situation. Feeling stuck or immobilized can create feelings of helplessness and deflect a sense of personal responsibility. In owning our feelings by using "I can" concepts and statements, we can shift from avoiding responsibility to developing a sense of personal control. As we replace "disowning" language with personal awareness and acknowledge our feelings, intentions, strengths and commitments, we become energized and can start to shift, grow and heal.

## Creating a Personal Meaning for Nursing

Try to honestly reflect on your beliefs and values about nursing. You may rediscover those same thoughts and feelings that once inspired you. Some of these can be brought back into your present belief system. Within the workplace, there are many "givens" that we cannot control. The goal is to unhook from futile battles and to maintain our own fitness to practice in order to contribute to the well-being of our clients or patients while striking a balance between what is real and what is possible.

### Resources

### CRNBC

### Helen Randal Library

CRNBC's Helen Randal Library is available to registrants to assist with any additional information needs. Current journal articles can be requested. Contact CRNBC's Reference Librarian by telephone at 604.736.7331 (ext. 116) or toll-free in Canada 1.800.565.6505 or e-mail your query to <u>reflib@crnbc.ca</u>

#### **Practice Support**

CRNBC provides confidential nursing practice consultation for registrants. Registrants can contact a nursing practice consultant or nursing practice advisor to discuss their concerns. Telephone 804.736.7331 or 1.800.565.6505 (ext. 332).

### OTHER

By contacting your agency human resources or occupational health department you can be in touch with your confidential Employee Assistance Program.

The Kaiser Foundation's BC Addiction Information Centre website <u>www.kaiserfoundation.ca</u> includes a directory of programs, organizations and agencies offering alcohol and dry services in your community.

The Red Book Directory of Services for the Lower Mainland is an excellent resource of organizations. Available online at <u>www.vcn.bc.ca/isv/redbook.htm</u> or call 604.875.6381. It can also be found in most libraries and health units.

Community resources include the library, community recreation and sport centres, religious or spiritual centres, community self-help groups (usually listed in the local community resource directory), public social andmental health teams, and private therapists.