Background

Currently, as we all are aware, our society is fully run by the COVID-19 pandemic. The toll that COVID-19 has taken on nurses is unimaginable. The need for nurses has never been more necessary, and the numbers of nurses still working are rapidly decreasing. Due to the extreme shortage of nurses, the ones that are still left are being worked until they are beyond their emotional and physical limits. The COVID-19 pandemic is leading to extreme burnout in these remaining nurses. The US national survey indicated “burnout was the primary reason 1,260,000 registered nurses left their jobs and 670,000 were considering leaving” (Clinton et al., 2022). The nurses that participated in this survey expressed some of their feelings as to why they are becoming so burnt out so quickly. Many of the reasons were common across the board, beyond stressful work environments, inadequate staffing, lack of good leadership and management, overscheduling, and the need for better pay and benefits. In some local hospitals the nurse-to-patient ratio is sometimes 3:4x greater than what it should be. When nurses are being overworked emotionally as well as physically, they must ask themselves how well they are able to perform their jobs; these nurses are only human and can only do so much.

- Burnout can be defined as a syndrome of not only mental and emotional exhaustion, but cognitive exhaustion as well; burnout can be contributed and a consequence of chronic workplace stress (Stanovick et al., 2021).
- COVID-19 has changed the world in so many ways especially in the medical world, leading to an increase in burnout in nurses.
- Nurses reported working at least 2.5 hours more every week and were not adequately compensated for these efforts and services (Li et al., 2022). When nurses are increasing their hours with no compensation and extra rest time, this is where the burnout is occurring.
- From research collected it has shown, female healthcare workers have a higher incidence of mental health issues due to working on the front line of the COVID-19 pandemic.

Methods/EBP

An evidence-base practice review which was guided by the Johns Hopkins Nursing Evidence-Based Model was conducted to determine if nurses who practiced during the COVID-19 pandemic are experiencing burnout. The steps included identify the PICO question, literature search, selection, and analysis using the Johns Hopkins Nursing Evidence-Based Model. These steps of conducting the EBP review is shown in the following:

PICO
Nurses who worked during the COVID-19 pandemic
Assess burnout during the COVID-19 pandemic
Burnout incidences before the COVID-19 pandemic
Determine if burnout is increasing in nursing during the COVID-19 pandemic

Literature Search and Selection

- Databases used were EBSCO and CINHAL

- Keywords and phrases “nursing burnout and COVID-19”, “nursing burnout and patient safety”, and “nursing shortage and COVID-19”

- 10 scholarly articles were selected all ranging in publication dates from 2017 to 2021

- These 10 articles were then analyzed in publication dates from 2017 to 2021

- The purpose of this study is to answer the PICO question of “is the nursing staff who practice during the COVID-19 pandemic experiencing burnout?” 10 scholarly articles were found searching EBSCO and CINHAL databases using the key words “nursing Burnout”, “COVID-19 and Nursing Burnout”, and “Nursing shortage.” These 10 articles were then analyzed in publication dates from 2017 to 2021.

- The results show that COVID-19 has increased in nursing burnout during the COVID-19 pandemic. There is evidence of increased burnout during the COVID-19 pandemic. Factors that have been shown as the main causes are stressful work environments, inadequate staffing, lack of management or leadership, issues with scheduling hours, high nurse to patient ratios, little to no days off, the lack of compensation, and high incidence of patient death due to failure of patient treatment. The nurses who are practicing during the COVID-19 pandemic are experiencing burnout. The incidence of burnout has increased significantly compared to pre-COVID times. More research is needed due to how new COVID-19 is in the United States. More research on causes of burnout can be identified, and policies can be put in place to help decrease burnout.

Results

Throughout the literature all were consistent in results of that COVID-19 was causing an increase in nursing burnout in all areas and specialties. The factors that were outlined in the literature were stressful work environments, inadequate staffing, lack of management or leadership, issues with scheduling hours, high nurse to patient ratios, little to no days off, the lack of compensation, and a high incidence of patient death due to failure of patient treatment.

Significant Results

- Out of 262 ICU nurses in Turkey 62% reported moderate levels of occupational stress due to the factors of COVID-19 (Sahnilk, 2021).
- The stress factors identified were long working hours, high nurse to patient ratios, heavy workloads, and failure in patient treatment.
- In Taiwan 1499 nurses 55% reported burnout and 38% reported a new diagnosis of depression related to the COVID-19 pandemic (Li, Pien, Kao, Kubo, & Cheng, 2021).
- In Lebanon compared to a baseline study conducted before the COVID-19 pandemic the Copenhagen Burnout Inventory score for burnout had the results of p < 0.01. The incidence of burnout during the COVID-19 pandemic was statistically higher than the baseline study (Clinton et al., 2022).

Table #2: Overall Synthesis of Evidence

<table>
<thead>
<tr>
<th>Level of Evidence</th>
<th>Number of Studies</th>
<th>Summary of Findings</th>
<th>Quality Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>7</td>
<td>Factors of long hours, inadequate staffing, and lack of management has been proven to increase the incidence of nursing burnout leading to patient safety issues.</td>
<td>A</td>
</tr>
<tr>
<td>B</td>
<td>1</td>
<td>The nursing staff had moderate levels of occupational stress due to the factors from COVID-19. These levels were attributed to long working hours, high nurse to patient ratios, heavy workloads, and failure in patient treatment which were all caused by the COVID-19 pandemic.</td>
<td>B</td>
</tr>
</tbody>
</table>

Conclusions

Literature selected for this Evidence Based Practice study concluded nurses are in fact becoming burnout due to the COVID-19 pandemic. Evidence points out there are numerous other effects on nurses from the COVID-19 pandemic, but burnout being the number one toll taken. Many of the studies used similar data collection strategies and tools for gaining their knowledge on nurse’s burnout levels. The studies ranged from small to large in the number of participants.

Recommendations

More research is necessary due to how new COVID-19 is, especially in the United States. Most of the research in this Evidenced Based Study was from other countries across the world. More research for incidence of nursing burnout due to COVID-19 in the United States should be considered. Therefore the causes of the severe burnout can be clearly identified and policies can be put in place to help prevent or limit nursing burnout. Administrative healthcare facility also need to understand that things like pizza parties or meal vouchers for the hospital cafeteria are nice and appreciated but are not very helpful with burnout. Certain policies such as a set safe nurse-to-patient ratio could greatly decrease the incidence of nursing burnout.

References