

# NURSING THE NURSES

NECESSITY OR NUTTY??

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# PRINCIPLES

- ◉ Nurturing, like trust, respect, and those positive things, is a two-way street
- ◉ Without nurturing, we would be unable to nurture babies and their families
- ◉ There's much more to nurturing neonatal nurses than chocolate!
- ◉ (Tho' chocolate is a very good place to start!)

## THE REALITY

- ◉ The Business Model
- ◉ Corporate bullying & cascade of bullying
- ◉ Micromanagement of nursing
- ◉ Loss of compassion (patients & families recognize & hate that!)
- ◉ Apparent devaluation of our roles
- ◉ Deskilling of nurses, and loss of intuition in nursing
- ◉ Negative perceptions of nurses & nursing

# THE REALITY FOR NURSES

- ◉ Loss of job satisfaction
- ◉ Poor work-life balance
- ◉ Increased absenteeism
- ◉ Increased potential for errors
- ◉ Detachment from patients and families
- ◉ **Detachment from each other**
- ◉ Compassion Fatigue
- ◉ Burnout
- ◉ PTSD

# DEFINITIONS

- ◉ Compassion fatigue
  - ◉ Refers to the deep emotional and physical wearing down that takes place when helping professionals are unable to refresh and renew (Figley, 1995)
- ◉ Secondary Traumatic Stress
  - ◉ Result of being witness to a traumatic event, or series of events, which can lead to PTSD-like symptoms (Figley, 1995)
- ◉ Vicarious trauma
  - ◉ Describes profound negative changes in world view due to exposure to traumatic context of clients/patients (Saakvine & Pearlman, 1990)
- ◉ Burnout
  - ◉ Has to do with stress & frustration caused by the workplace (Saakvin & Pearlman, 1990)

## THE RESEARCH SAYS

- ⦿ All manifestations of the same thing!
- ⦿ Smaller, sicker, more complex babies
- ⦿ Under the business model, we get less and less out – just money!
- ⦿ Vicious circle of having to put more & more in



◉ *“a sequence of reciprocal cause and effect in which two or more elements intensify and aggravate each other, leading inexorably to a worsening of the situation.”*

VICIOUS CIRCLE

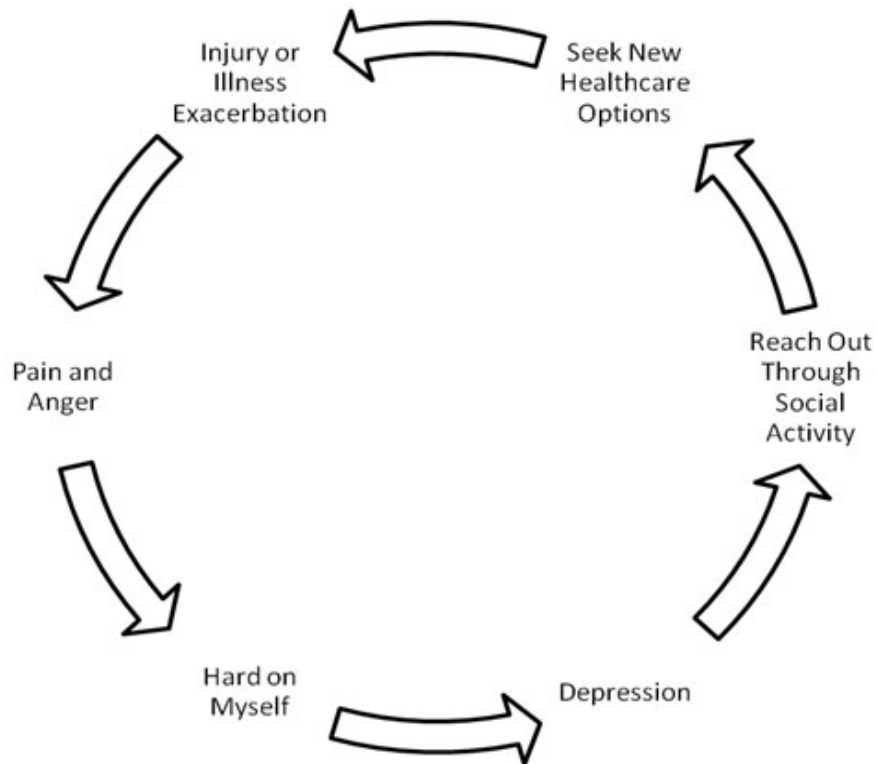
## WHAT HAPPENS?

- ◉ Exposure to event(s)
- ◉ Intrusion or re-experiencing (dreams, flashback)
- ◉ **Avoidance**
- ◉ Changes in mood or cognition
- ◉ Arousal and hyperactivity - hypervigilance, irritability, aggressiveness, recklessness, poor sleep, poor concentration



# WHAT THAT MEANS FOR A NURSE

- You could spend your whole career running around THIS circle!
- Let's look at it more closely - a solution might be found, in the gaps!
- Any or all of these stages may be present at once
- Some or all of these things may not necessarily be related to PTSD, etc.
- **DO SOMETHING!!**





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HOW DO WE GET OFF THE WHEEL?

# BULLYING

- ◉ Bullies aren't born - they are made
- ◉ The business model is the most efficient bully nursery I have ever encountered!
- ◉ We are all victims, and perpetrators of bullying, it is so endemic in our hospitals
- ◉ The victim is the one who most needs to change behaviour in order to counter
- ◉ ***The DHBs have no idea how to deal with it***

## WHO IS RESPONSIBLE FOR OUR WELFARE?

- ◉ Employer (H&S issue, if nothing else!)
- ◉ We are - take leave, do debriefs, etc
- ◉ And don't forget to write incident reports!!!
- ◉ Our colleagues - that is what collegiality is!
- ◉ Message to all - get involved, it's difficult, but we need to confront issues, not hide from them.
- ◉ As we "Boomers" leave, you will need to find new ways to deal these issues

THAT'S YOU!



## ISSUES-BASED SOLUTIONS

- ◉ **Get your GP on side**
- ◉ **Get involved**
- ◉ **Get together**
- ◉ **Recognize and cease avoiding behaviours**
- ◉ **Dealing with bullying**
- ◉ **NZNO needs to take some risks on behalf of individuals/small groups**
- ◉ **So does DoL!!**





BUT IF ALL ELSE FAILS – LET US EAT CAKE ANYWAY!

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