



Nurses fyi Magazine Content

Cover Story

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Features



Editor's NoteA comment from the editor By Rich Williams RN



Nurses who fail Are you failing your patients? By Rachel Kent Student Nurse



The Science of Nursing Care So much more than Bedpan Duty By Amanda Anderson, RN, BSN, CCRN



Nurses fyi Magazine Content



Married Nurse Entrepreneurs:

"Fail Forward"



By Wayne Nix MBA, RN RRT, Dawn Nix RN-BSN



How to Keep Loving What You Do, Burning Brightly

Don't become a disenchanted nurse

By Vidette Todaro-Franceschi, RN, PhD, FT



Fix It! Fitness Nurses™:

Heretics Fixing Ourselves First By Lori Minky Radcliffe RN



Sea Mercy

Bringing healthcare to remote locations
By Richard & Stephanie Hackett





Wikihospitals

Lady with the Lamp meets Australian Private Hospitals By Delia Scales RN



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Vidette Todaro-Franceschi

ow do we keep burning brightly instead of burning out in a health care world that is increasingly chaotic and in many places seems to be quite broken? I had resurrected that term 'burning brightly' in my 2012 work on compassion fatigue from a great 1982 article written by nurse Kathleen Magill.

Of late the term seems to be picking up momentum; I am glad. A lot of nurses are disillusioned and we are in a current crisis that I believe is unprecedented in the history of nursing. Not only are health care systems more complex and we are being required to do more with less as economic constraints magnify, it is also expected that the shortage of nurses will intensify, becoming worse than ever before. Add to this that a significant number of new nurses quickly become disenchanted, many leaving their first jobs within the first year, and a significant number of those same nurses then plan to leave the profession soon after. Still more nurses are nearing, or already are, at retirement age.

Incivility in our workplaces is rampant, and I am not only referring to nurse-to-nurse bullying. There is other downright nasty behavior that one would never *ever* expect to see happening in the purportedly caring professions. Interpersonal conflict and toxicity carry over to the bedside, and can make utterly impossible the provision of quality caring. And then there is the very serious syndrome of burnout.

I've been teaching undergraduate, graduate, and doctoral level nurses in a public university for about half of my 32 year nursing career. I also do quite a bit of speaking to inter-professional groups. So I interact on a regular basis with a large number of carers. I hear many stories—both good and bad—and for a long time now, the bad seem to outweigh the good. Some of the stories keep me up at night and I know that many of you carry stories around with you and are probably losing sleep too. I have been so concerned by what I have heard and experienced as a patient (and as the loved one of a patient) that for the past decade I have been saying the same thing wherever and whenever I can. We need to reaffirm our purpose in health care.

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My concern led me to develop a model to guide nurses (and other carers) to enhance their professional and personal quality of life with the hope of helping to reaffirm purpose in health care (no little dreams for me). Called the *ART* model (an acronym for *Acknowledging* feelings, *Recognizing* choices and taking purposeful action, and *Turning toward* self and others), I have been teaching it and have done research piloting the model with nurses. I took several years of my rare 'spare' time—stole precious time from loved ones, to lock myself in an office to write a book to detail it. That book, first published in late 2012 and dedicated to nurses everywhere, (entitled *Compassion Fatigue and Burnout in Nursing: Enhancing Professional Quality of Life)*, is now in over 25 countries throughout the world and is being translated into other languages. I haven't stopped there; I



Vidette Todaro-Franceschi

I donated 25 % of my first royalties and have dedicated 25 % of all my future proceeds to a charity called *Nurses House*, which helps nurses who are in trouble. Hell, I am on a mission.

I am not looking for book sales. They are nice, of course (and *Nurses House* gets more money along with my publisher), but all of the time and effort invested into my work over the years—well, money just doesn't drive me. So if the book doesn't fit in your budget (because the publishers set the price thinking it was/is a textbook instead of a must-read for every nurse) anyone can go to the nearest library and ask for it—it is in hundreds of libraries and can be requested through an interlibrary loan if need be. My goal is to inspire people who work in health care, especially nurses, to always love what they do and to know how important they truly are to society as a whole. I want to put the passion back in compassion.

Nurses are the *heart* of health care and that means without us there can be *no health care system*. I am so passionate about nursing and about caring for people that *my heart hurts* for the many nurses who are suffering because they cannot do the work the way they want to do it; hurting because they aren't being adequately supported to "care." Concomitantly, my heart hurts for the many people who are not receiving the quality caring that they should be receiving from us.

Nurses are the first and last line of defense. We care for people during some of the most vulnerable times of their lives and it is up to us to ensure that healing is facilitated. That is pretty important stuff. We have to appreciate ourselves and each other, know our own importance, individually and collectively, and remain true to our purpose us carers.

Nursing is hard work. It takes our whole entire being-our emotional, mental and physical being—to be the most important contributors in health care. We have to be there, *truly be there*, in each and every moment or we lose out. We lose out on opportunities to assist with healing, we lose out on opportunities to connect with others *and* we lose out on connecting with ourselves and our own authentic nature. Ultimately, we can lose our sense of purpose and then we do not really *live the life we have chosen*. After all—we chose to be nurses. We could have been anything we wanted to be. Becoming a nurse wasn't easy.

"I'd like to give a great big high five to all my nursing brothers and sisters out there who have overcome the decrease in LVN utilization." Compassion fatigue and burnout are syndromes that are related to how we go about *caring*. If you care so much that you are co-suffering with others—for instance being suddenly overwhelmed with a sense of "oh, my, I don't think I can do this now" you are likely compassion fatigued. Unfortunately most nurses keep going and doing whatever it is that is making them feel like that, instead of sharing it with coworkers and/or leadership folks. Rather than acknowledging there is a problem we just keep going and going and going... Let's face it, in many of the environments we work in, time is not available to do any self-healing. But, making time for healing using a model such as *ART* is crucial because if you have compassion fatigue and you



Vidette Todaro-Franceschi

ignore what is going on, you can wind up disconnecting entirely—it becomes a matter of survival. You detach yourself from your own feelings and the things that are making you feel heart heavy.

When you become disconnected—losing that sense of purpose (as a carer), you might just "go along to get along" ultimately becoming what I refer to as a "silent voice" or "silent witness." This is when moments are truly lost—we no longer see and no longer feel; it is when medication and other errors are more likely to happen, when "heartful" becomes "seemingly heartless," and when robotic motion replaces human connection.

Recently I did a talk at a conference for advanced practice nurses and as is usual, at the end of it there was a long line of folks who wanted to speak with me. One woman walked up to me with tears in her eyes and asked if I could sign her conference paper of key points so that she could post it on her wall at work to remind herself of my talk, because she said, "I have become a 'silent voice'." Have you become a silent voice or witness?

We all know burnt out nurses—nurses who have completely disconnected from the meaning and purpose of their work. Burnout is so serious that in some European countries it is a medical diagnosis and in the UK surveys have indicated that 40% of nurses display signs of burnout. In the U.S. we haven't gotten a handle on the numbers, but I suspect it is pretty high. In order to remain in this profession, and continue loving what we do, we have to be cognizant of the fact that *every* single day that we go to work, we irrevocably change the lives of those we care for; we have *enormous power*. That power wielded the right way can assist with healing; if it isn't used the right way, it can hinder healing. So, if and when you feel as if you are disconnecting from the purpose of your work—take some time to revisit your priorities. If your work place does not support quality caring, you always have choices. Remember that remaining and doing nothing is still a choice that you are making. Explore your options.

Nursing has been a wonderful career choice for me. I have worked with chronically, critically, and terminally ill patients and their loved ones. I have worked with all ages—from newborns in the NICU to adults in acute and long term care. I've worked at the bedside, as a clinical supervisor and as a clinical nurse specialist. I have worked with people who were unbelievably dedicated and yes, sometimes I have worked with staff and coworkers who were not very dedicated. I have worked with awesome students from all cultures and walks of life, who are the future of this *MOST* important, health care profession.

"I'd like to give a great big high five to all my nursing brothers and sisters out there who have overcome the decrease in LVN utilization."

We are a seriously wounded workforce—for many reasons, some of which are of our own making and others that are related to broken systems. It is time for us *to fix us* in order to be able to remain in nursing and to continue loving what we do. We need to know how to care for ourselves and each other so that we can take good care of others and burn brightly. We can do it by being mindfully aware and remaining connected to ourselves, each



Vidette Todaro-Franceschi

other, and our purpose as compassionate carers. I wish you all peace, love and light to guide your way!

References:

Todaro-Franceschi, V. (2013). *Compassion fatigue and burnout in nursing: Enhancing professional quality of life.* New York: Springer.

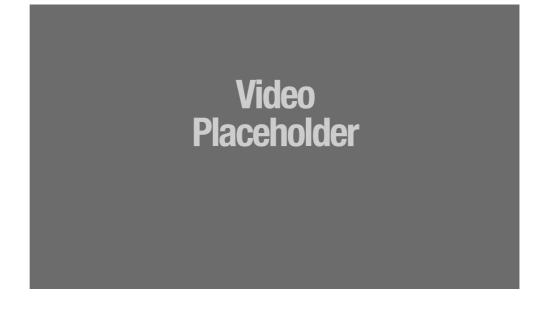
Vidette's Bio:

Vidette Todaro-Franceschi RN, PhD FT is the author of the seminal book Compassion Fatigue and Burnout in Nursing first published in 2012 and the book The Enigma of Energy (1999). An expert on end of life care and professional quality of life (compassion fatigue, burnout, moral distress and compassion contentment) and its relationship to quality caring, she has done a number of research studies, and has developed innovative pedagogy and a healing model using narratives.

A passionate speaker, Vidette has presented locally, nationally and internationally. She is a full tenured professor and the coordinator of the Clinical Nurse Leader graduate program at Hunter-Bellevue School of Nursing, Hunter College of the City University of New York.

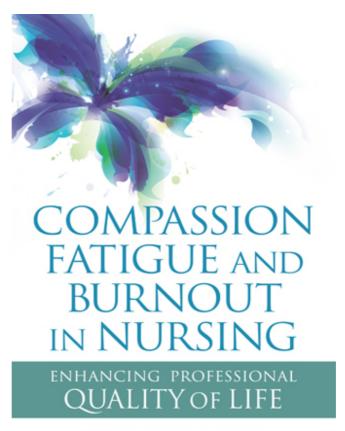
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A five minute video on the ART Model #compassion fatigue #burnout #healthcare #carer http://wp.me/P2Gwrh-N (Tap video below)





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TAP on Vidette's book cover to find out more