

# **Evidence-Based Practice (EBP) - E181**

**Poster**

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## **Abstract Title:**

**A Stressful Work Environment Causes Distress on the Trauma Team**

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## **Background & Purpose:**

Job related stress is pervasive in the healthcare workforce. Increased demands can lead to illness and injury. Stress at the frontline of care impedes patient safety and increases cost for the employer. When the team lacks adequate resources to manage stress; burnout, increased turnover rates and staff dissatisfaction become the end products. The project aim of this study was to describe the causes and effects of stress experienced by clinical and non-clinical staff in an academic level 1 trauma center. The objective was to measure and describe everyday stressors with the goal of providing resources and support for staff that would increase retention rates as well as satisfaction.

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## **Study/Project Design:**

A survey was sent to staff December 2011 and data was collected for 1 month

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## **Setting:**

An Academic Level 1 Trauma Center

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## **Sample:**

A convenience sample was used for the survey obtaining a 58% response rate

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## **Procedures:**

In collaboration with the employee assistance program (EAP), an anonymous RedCap survey was sent to all staff working in an academic level 1 trauma unit including patient care technicians, nurses medical receptionists, physician residents and physician faculty. The data was collected for 1 month by the EAP coordinator who aggregated the data and prepared it for review by the trauma manager. The survey had multiple questions using various techniques. A 3 point Likert scale was used for rating feelings of stress, coping and support services. Ranking questions were used to choose areas for additional support and services. Free text options were available for further expression of ideas or experiences. The data was then analyzed and the results were shared with the staff to determine necessary support services and programs.

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## **Findings/Results:**

A total of 96 responses were received for a response rate of 58%. When asked "I am under \_\_\_ stress", 30% reported being under much stress or burned out. Another 54% reported being under some stress. When asked, "How well are you coping with your current stress load?", 25% reported having trouble coping at times and 2% reported trouble coping often, with 70% coping well. A ranking system was used to notate the top stressors felt by staff. The top 5 answers were: 1) Not enough sleep 2) Not being paid enough 3) Dealing with patient families 4) Patient demands 5) Psychological demands of the job. Of the respondents, 3% worked on the unit 6 months or less, 4% had 6 to 12 months experience, 50% had 1 to 3 years experience and 43% had 4 or more years experience on the unit. Free text responses yielded the need for administrative support and recognition, as well as better communication from all leadership. Results confirmed that stress can lead to low morale, burnout and low staff satisfaction rates.

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## **Discussion/Conclusions/Implications:**

All disciplines of medicine experience stress. The effect that stress has on healthcare providers and the organization could impede the safety and care of our patients. Working in a high stress environment, increases the risk of adverse outcomes such as burnout, compassion fatigue, sleep deprivation, illness and injury. A more focused support program for providers working in these environments is key. Resources need to be integrated into trauma programs to maintain a healthy team. Building a curriculum or annual competency for recognizing and combating burnout, compassion fatigue and conflict management would be useful in retaining healthy and satisfied staff.