

Descriptive Study to assess the Level of Perceived Burnout among the Staff Nurses Working at Guru Nanak Hospital Amritsar

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Abstract

Context: Burnout in nurses is prevalent in healthcare, and it can lead to serious consequences. When the stress of the job causes physical, mental, and emotional fatigue, this phenomenon is called nurse burnout. The majority of nursing professionals experience nurse burnout at some point in their careers.

Aim: The present study focused to assess the perceived burnout level among staff nurses working in Guru Nanak Dev Hospital at Amritsar.

Setting and Design: A descriptive study design was adopted to achieve the objectives of the study.

Methods and Material: A sample of 30 staff nurses were selected for the study by using purposive sampling technique. The tool consists of demographic variables and Copenhagen burnout inventory which include personal burnout, client burnout and work-related burnout.

Statistical analysis used: The data collected were organized and analyzed by using descriptive and inferential statistics.

Results: The result showed that majority 20(66.7%) of staff nurses had mild burnout and some of them 10(33.3%) had moderate burnout. Majority of staff nurses had experienced greater extent of personal burnout (46.94) and work burnout (41.42) followed by client burnout (38.94).

Conclusion: The study concluded that most of the nurses had personal and work-related burnout which affected their quality of life. This research study helps to find suitable interventions and coping strategies to reduce burnout and to provide healthy work environment to staff nurses.

Keywords: Perceived Burnout; Staff Nurses.

INTRODUCTION

Burnout is a consequence of long-term harmful stress in the workplace. If the individual lacks

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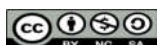
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resources to deal with this situation, the response made may be maladaptive and prolonged. (Montgomery A. *et al.* 2015)¹ In nursing, highly complex tasks must be performed and decisions are taken in situations that are often difficult and stressful. Moreover, appropriate attention must be provided not only to patients but also to visiting family members. The working environment can include long days, rotating shifts, a severe emotional burden, and sometimes aggression expressed by patients, their families, or even colleagues. (Fiabane E, *et al.*, 2013)²



Statement of the problem

Descriptive study to assess the level of perceived burnout among the staff nurses working at Guru Nanak Hospital Amritsar, Punjab.

AIM OF STUDY

To assess the perceived burnout level among staff nurses working in Guru Nanak Dev hospital in Amritsar.

OBJECTIVES OF THE STUDY

- Find demographic variable among staff nurses working in Guru Nanak Dev Hospital, Amritsar.
- To assess the level of perceived burnout among staff nurses working in Guru Nanak Dev Hospital, Amritsar.
- To determine the association between the level of perceived burnout with the selected personal variables.

Hypothesis

H₁: There is significant association between the level of provided burnout with selected personal variables.

MATERIALS AND METHODS

Research approach: A quantitative research survey approach was used in this study.

Research Design: In this study descriptive cross sectional research design was used (Suresh K Sharma 2021).³

Research Setting: The present study was conducted at Guru Nanak Dev hospital, Amritsar.

Sample Size: 30 staff nurses.

Sampling Technique: Purposive sampling Technique.

Sampling Criteria

Inclusion criteria

- Staff nurses who are registered with state nursing council.
- who are willing to participate in the study

Exclusion Criteria

- who are not available at time of data collection.

Description of Research Tool

The research tool divided into two parts.

Part I: Demographic Profile

Socio demographic variables consist of 7 items such as Age (in years), Gender, Marital status, Education, Years of experience, Working hours per day, Area of working.

Part II: The Copenhagen Burnout Inventory (Kristensen, T.S., et al., 2005)⁴ is a standardized tool for burnout measurement and includes three different sub scales:

1. Personal burnout
2. Work related burnout
3. Client related burnout

Scoring of Copenhagen Burnout Inventory

1. Personal burnout scoring:

Response categories: Always, Often, Sometimes, Seldom, Never/almost never. Scoring: Always: 100, Often: 75, Sometimes: 50, Seldom: 25, Never/almost never: 0.

Total score on the scale is the average of the scores on the items.

2. Work-related burnout scoring:

Response categories: Three first question: To a very high degree (100), To a high degree (75), somewhat (50), to a low degree (25), to a very low degree (0).

Last four question: Always, often, seldom, Never/almost never. Reversed score for last question.

3. Client-related burnout Scoring:

Response categories: The four first question: To a very high degree, To a high degree, Somewhat, To a Low degree, To a very low degree.

The two last question: Always, often, Sometimes, Seldom, Never/almost never.

Scoring as for the first two scales. If less than three questions have been answered, the respondents are classified as non-responder.

Validity of Tool

Validity refers to the degree to which on instrument measures what it is supported to be measuring. It was submitted to the guide and requested judge the tool for clarity, relevance, appropriateness, relatedness and meaningfulness for the purpose of the study and to give their opinion necessary modification were made as per guide advices.

Reliability of Tool

Reliability of standardized tool Copenhagen Burnout Inventory show work related burnout (r=0.79, p<0.001), Copenhagen personal burnout (r=0.69, p<0.001) and Client Burnout (r=0.68, p<0.001).

Data Collection Procedure

The data collection was done in month of July 2023 at Guru Nanak Dev Hospital, Amritsar. Staff nurses selected for the study by using purposive sampling technique permission is taken

from Medical Superintendent of Guru Nanak Dev Hospital. Prior to data collection informed consent was obtained from the participants. The data was collected from the staff nurses by using Copenhagen Burnout inventory and demographic variables. Collected data were coded and analyzed by using descriptive and inferential statistics.

Plan for Data analysis

The data analysis is done according to study objectives by using descriptive and inferential statistics. The plan of data analysis could be follows:

Data Analysis	Method	Objectives
Descriptive Statistics	Frequency, Percentage, Mean, Standard Deviation	1. To assess the level of burnout among staff nurses. 2. Find demographic variables among staff nurses.
Inferential statistics	Chi-square test	3. To determine the association between the level of perceived burnout with the selected personal variables.

RESULTS AND DISCUSSION

Objectives 1: To find demographic variable among staff nurses working at Guru Nanak Dev Hospital, Amritsar.

The present study result showed that majority of nurses (43.4%) were belong to the age group 28-31 years. (Table 1)

- Majority of nurses (100%) are females.
- Majority of nurses (66.7%) are married.
- Majority of nurses (66.7%) are B.Sc Nursing.
- Majority of nurses (40%) having 3-4 years experience.
- Majority of nurses (100%) doing 6 hours duty.
- Majority of nurses (86.7%) are working in ward.

Table 1: Frequency and percentage distribution of demographic variables

Demographic Variables	N=30	
	Frequency	Percentage
Age in years		
20-23 years	0	0
24-27 years	10	33.3
28-31 years	13	43.4
More than 31 years	7	23.3
Gender		
Male	0	0
Female	30	100

Marital status		
Unmarried	10	33.3
Married	20	66.7
Widow	0	0
Divorced	0	0
Education		
M.Sc Nursing	1	3.3
GNM	9	30
B.Sc Nursing	20	66.7
Years of experience		
Less than 1 year	1	3.3
1-3 years	9	30
3-4 years	12	40
More than 5 years	8	26.7
Working hours per day		
6 hours	30	100
8 hours	0	0
12 hours	0	0
Area of working		
Emergency	3	10
Ward	26	86.7
OT	1	3.3
ICU	0	0

A similar study was conducted by Kirsten Siig Pallesen et al., (2022)⁵ to investigate burnout and resilience among hospital-based nurse managers post COVID-19. Results revealed that ward managers who responded to the survey are

predominantly female with a wide span in terms of age and numbers of employees and most have more than 5 years of experience as managers.

Objectives 2: To assess the level of burnout among the staff nurses working in Guru Nanak Dev Hospital, Amritsar.

The present study result showed that majority that 20 (66.7%) had mild burnout and 10 (33.3%) had moderate burnout with median score was 42 and mean score was 42.36 and standard deviation was 12.51 (Table 2 & Fig. 1).

Table 2: Distribution Level of Perceived Burnout among Staff Nurses

Perceived burn out	F	%	Mean	Median	SD
Mild	20	66.7			
Moderate	10	33.3	42	42.36	±12.51
Severe	0	0			

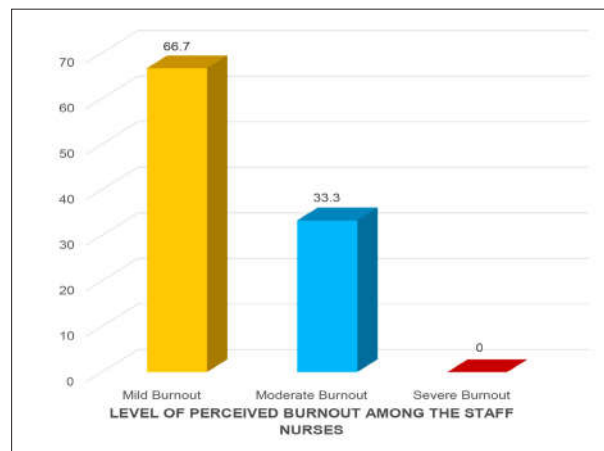


Fig. 1: Distribution of level of perceived burnout among the staff nurses

The distribution of perceived burnout among the staff nurses revealed that majority of staff nurses had experienced more on personal burnout (46.94) followed by work burnout (41.42) and client burnout (38.94) (Table 3 & Fig. 2).

Table 3: Distribution of areas of perceived burnout among the staff nurses

Areas of burnout	Median	Mean	SD
Personal burnout	45	46.94	± 16.19
Work burnout	42	41.42	± 14.36
Client burnout	41	38.94	± 16.04

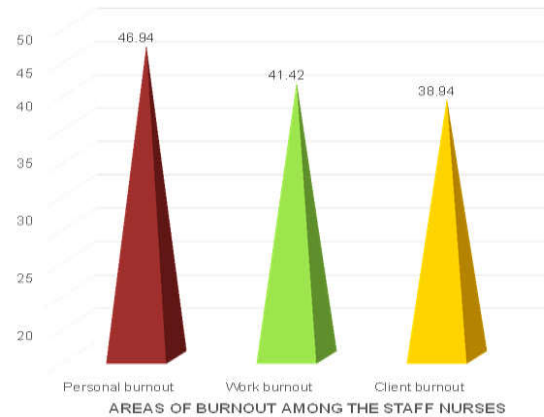


Fig. 2: Distribution of areas of perceived burnout among the staff nurses

A similar study was conducted by A Abeynayake et al., (2022)⁶ to determine the level of burnout among 346 psychiatric nurses in National Institute of Mental Health Sri Lanka and used validated tool Copenhagen Burnout Inventory (CBI). Highest mean score was seen in Personal burnout which was 40.75 (+18.76SD) with a 95% CI of 38.60-42.90. Work related burnout had a mean score of 29.24(+17.76SD) with a 95% CI of 27.22-31.28. Client related burnout was 29.53(+16.97SD) with a confidence interval of 27.59-31.47.

Objective 3: To determine the association between the level of perceived burnout with the selected personal variable.

The study depicts that association between level of perceived burnout among the staff nurses and selected demographic variable which was tested by using chi-square test. Result showed that age, gender, marital status, education, year of experience, working hours per day and area of working were found non-significant at $p < 0.05$ with level of perceived burnout among the staff nurses. There is significant association between the level of perceived burnout with selected personal variables. So H_1 hypothesis is rejected.

A similar study was conducted by Annu et al., (2020)⁷ to assess the perceived burnout symptoms and coping strategies among staff nurses in selected hospitals of Delhi NCR with a view to develop informational guidelines on burnout management. Findings revealed that there was no association present between the level of perceived burnout symptoms with selected personal variables of staff nurses like age, gender, marital status, education, years of experience, working hours per day, area of working, timing of duty, attended continuing education program and extra duty hours at $p < 0.05$ level.

CONCLUSION

The study concluded that majority of staff nurses 20(66.7%) had mild burnout and 10(33.3%) had moderate burnout. Most of staff nurses had personal and work-related burnout which leading to stress in their life. This research study helps to identify burnout level in staff nurses and helps to develop coping strategies to reduce burnout in staff nurses.

Nursing Implications

The investigator has drawn the following implications from the studies which are of vital concern in the field of nursing practice, nursing education, nursing administration and nursing research.

Nursing Research

Nursing personnel should take initiative not only in conducting research regarding burnout level in nursing but also apply this information in health practice. As per the research knowledge, the study conducted by Indian nurses are few in this aspect. It is need of time all nursing personnel should join their hands to provide scientifically tested material through research regarding assess burnout level among staff nurses.

Nursing Practice

The nurse can utilize the study findings in nursing practice to detect the problem related to burnout level among staff nurses. If nurses know about coping strategies & methods to reduce burnout level then level of burnout is reduced up to some extent.

Nursing Administration

The administration can plan organize and conduct hospital based health education, workshops, seminars can be conducted to make nurses aware about level of burnout and coping strategies.

DELIMITATIONS

There are some delimitations of present study which are given below:

- The study was limited to registered staff nurses only.
- The study was limited to only Guru Nanak Dev Hospital, Amritsar.

RECOMMENDATIONS

The similar study can be conducted to assess the perceived burnout level among staff nurses in large scale and long duration.

Acknowledgement

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Conflict of interest

This study is self-funded research work. So, there is no conflict of interest.

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