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Research Article

CAUSES OF BURN OUT AMONG NURSES AT PUNJAB INSTITUTE OF CARDIOLOGY, LAHORE

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Abstract:

Background: Burnout is a leading cause of mental health problems in nursing professions. Yet, very little has been studied about its development, and consequences. This study is enabled to provide a comprehensive insight into the variables in relation to the most influencing theories.

Methods: It is a quantitative empirical study which analyzed the relationship between burnout and work place factors among the nurses of Punjab Institute of Cardiology Lahore.

Results: Maslach Burnout Inventory (MBI) Scale was used to measure burnout. It was observed that high workload, value inequality, lack of job control, lack of decision making freedom, poor social climate/ social support, and low rewards can act as potential sources of burnout. Other contributing factors included insufficient staff, marathon duty hours, strict roster with no weekend offs, time pressure, unmet job demands, low task variety, poor role adaptation, no autonomy, tedious nurse-physician relationship, poor supervisor/leader support, poor leadership, negative team relationship, and job insecurity. Some of the consequences of burnout included poor performance, poor standard of patient care and safety, adverse events, patient negative experience, medication administration errors, super added infections, falls, and evasive behavior. **Conclusions:** The study revealed that negative aspects of the job such as high workload, insufficient staffs, marathon duty hours, and lack of autonomy are linked with burnout in nursing. The adverse effects for the patient and the nurses are highly detrimental. The findings are in accordance with Maslach Burnout Inventory.

Keywords: Burnout, Nursing, Maslach Burnout Inventory, workplace stress

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INTRODUCTION:

Lots of discussions have been undergoing since the past few decades to develop a work place policy and congenial environment in hospital settings and to assess their impact on nursing such as standard of patient care and safety, sick leaves, turnover and job unrest [1–4]. The term burnout was coined by Freudenberger in 1974 when he observed a lack of motivation and initiative among mental health volunteers [5]. Maslach Burnout Inventory (MBI), is an internationally accepted tool to gauge the burnout [6]. According to this theory burnout is a response to overwhelming work stress characterized by emotional exhaustion, depersonalization and loss of personal Accomplishment as a result a prolonged mismatch between a person and at least one of the following six dimensions of work [7–9]:

1. Workload and unable to retire.
2. Control: lack of autonomy to utilize the resources task accomplishment.
3. Reward: lack of incentives and positive reinforcement.

4. Community: lack of peer bonding and social support.
5. Fairness: unjust duty rosters and favoritism regarding workload and salary.
6. Values: demeaning integrity and core values of the organization.

METHODS AND DESIGN:

It is a quantitative empirical studies which analyzed the relationship between burnout and work place factors among the nurses of Punjab Institute of Cardiology Lahore according to the methodology outlined by Campbell et al. and Pare et al. [11, 12]. After formal approval from the relevant authorities 100 nurses were enrolled during August 2019 and September 2019 working in different department of Punjab Institute of Cardiology Lahore. A self-structured questionnaire was prepared after thorough literature search based on Maslach Burnout Inventory (MBI). Informed consent was taken and all the responses recorded and analyzed by SPSS 21. Privacy and confidentiality was ensured throughout the study.

| Items | Hypothesized by Maslach's Theory | Disagree | Agree |
|--|----------------------------------|-----------|------------|
| Do you feel emotionally exhausted? | | 7% | 93% |
| Is your burnout related to work life?? | √ | 24% | 76% |
| Workload? | √ | 18% | 82% |
| Job control, reward, values, fairness, community? | √ | 14% | 86% |
| Shift work and working patterns/hours? | √ | 6% | 94% |
| Demands and job complexity? | √ | 9% | 91% |
| Support factors, working relationships and leadership? | √ | 17% | 83% |
| Work environment and hospital characteristics? | √ | 19% | 81% |
| Job Security? | √ | 34% | 66% |
| Patient Care and Outcome? | √ | 13% | 87% |

RESULTS:

According to the above statistics it is observed that 93% of nurses working in Punjab Institute of Cardiology, Lahore feel burnt out. 76% of them attributed it to their work life. 82% stated that workload is the main cause of their emotional drain. 86% told that the lack of job control and autonomy is the main culprit. 94% blamed the working pattern.

91% thought nature of job complexity and its demands are the suspect. 83% and 81% felt hostile, poor interpersonal skills and lack of social support to be the prime cause respectively. Whereas 66% perceived job security to be the driving force and 87% recorded patient care and outcome to be the source of their draining out.

DISCUSSION:

This study was aimed to identify the potential sources of enigma of burning out among nurse working in high yield setups across the country such a Punjab Institute of Cardiology, Lahore. This hospital hosts hundreds of referrals across the province daily to provide state of the art cardiac support management. Therefore, it is imperative to look after the emotional well being of the nurses who are involved in round the clock patient care. The study revealed that most of the nurses 93% feel burnt out at their workplace and they attributed. 76% of them attributed it to their work life. 82% to the workload. 86% to the lack of job control and autonomy. 94% to working pattern. 91% to nature of job complexity. 83% and 81% to the hostile environment and lack of social support to be the prime cause respectively. Whereas 66% perceived job security to be the driving force and 87% recorded patient care and outcome to be the source of their draining out. These observations are homologous to Maslach's original theory of burnout.

Referring to the above gaps can provide a better interpretation of the nature, causes and potential repercussions of the burning out in nursing, so that evidence based solutions can be developed and boost up motivation in the workplace environment.

CONCLUSION:

Despite Maslach's plausible mechanism to explain the observed relationships limited research and inability to quantify some variables has made it difficult to design the evidence based interventions to reduce burnout. The study revealed that show that negative aspects of the job such as high workload, insufficient staffs, marathon duty hours, and lack of autonomosity are linked with burnout in nursing. The adverse effects for the patient and the nurses are highly detrimental.

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