

Introduction

A half-million older adults die in U.S. nursing homes (NHs) each year. However, only a few studies have been conducted on the experiences of the nursing home (NH) staff who provide this care.

Effective care during the end of life is important for the individual and their families. Yet, burnout among nursing home staff affects the ability to care for those in end-of-life care effectively.

Hypotheses

- We hypothesize that there is a relationship between grief support and burnout. Specifically, we think that:
- Low grief support results in higher levels of burnout among staff
- There is a difference between grief support and burnout among different categories of nursing staff

Methodology

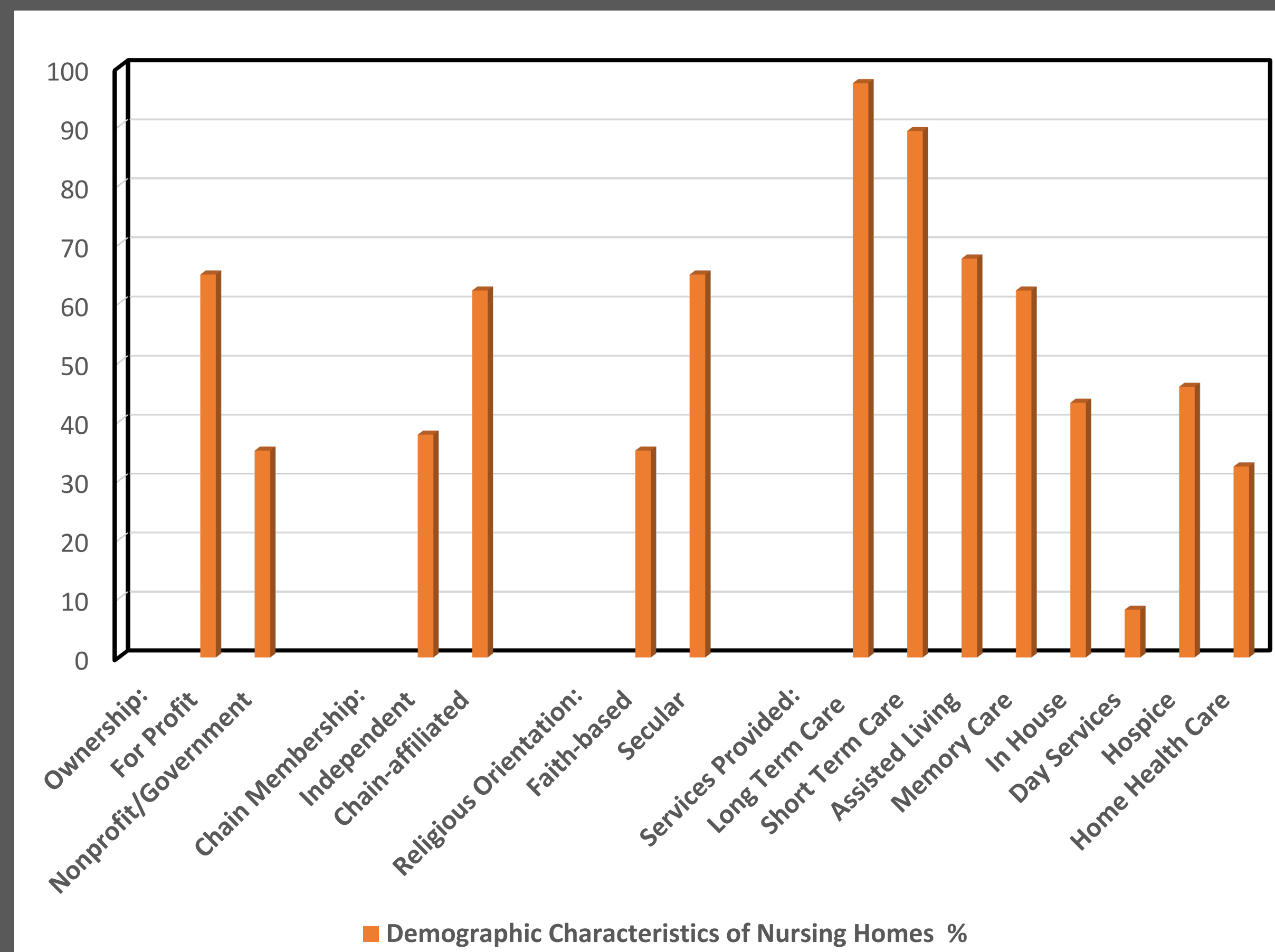
In the fall of 2022, data was collected from 555 NH staff to examine how their experiences with grief support affected their burnout level.

Grief support was measured by the Grief Support Health Care Scale.

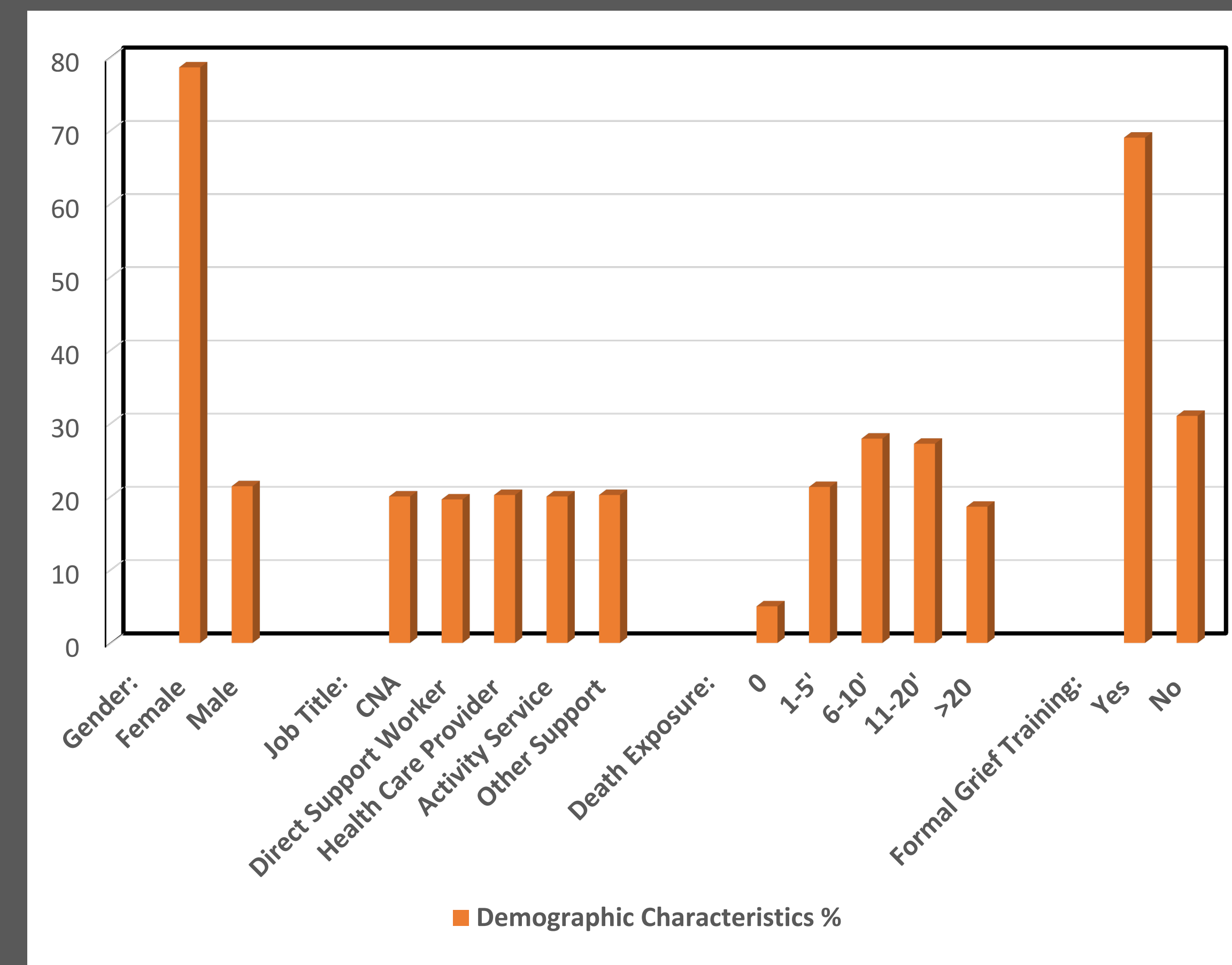
Burnout was measured by the Maslach Burnout Inventory (MBI), which includes 3 subscales: exhaustion, depersonalization, and personal achievement.

A Kaiser Family Foundation study categorized LTC workers into five groupings, ranging from most to least patient contact (True et al., 2020). To allow for the comparison of different workers based on frequency of contact with patients, we utilized this categorization as a basis for the sampling of our study.

Demographic Characteristics of Nursing Homes



Select Characteristics of Participants



Malasch Burnout Inventory (MBI) Scales of Burnout Experiences

Exhaustion

- I feel emotionally exhausted because of my work
- I feel worn out at the end of a working day
- I feel tired as soon as I get up in the morning and see a new working day stretched out in front of me
- Working with people the whole day is stressful for me
- I feel burned out because of my work
- I'm afraid that my work makes me emotionally harder
- I feel full of energy
- I feel frustrated by my work
- I get the feeling that I work too hard
- Being in direct contact with people at work is too stressful
- I feel as if I'm at my wits' end

Depersonalization

- I get the feeling that I treat some clients/colleagues impersonally, as if they were objects
- I have become more callous to people since I have started doing this job
- I'm afraid that my work makes me emotionally harder
- I'm not really interested in what is going on with many of my colleagues
- I have the feeling that my colleagues blame me for some of their problems

Personal Achievement

- I can easily understand the actions of my colleagues/supervisors
- I deal with other people's problems successfully
- I feel that I influence other people positively through my work
- I feel full of energy
- I find it easy to build a relaxed atmosphere in my working environment
- I feel stimulated when I been working closely with my colleagues
- I have achieved many rewarding objectives in my work
- In my work I am very relaxed when dealing with emotional problems

Grief Support & Burnout

	Exhaustion(%)		Depersonalization(%)		Personal Achievement(%)	
	Low (n=476)	High (n=77)	Low (n=144)	High (n=409)	Low (n=352)	High (n=201)
Grief support						
Low support (n=185)	84.32	15.68	20.54	79.46	75.14	24.86
Moderate support (n=190)	84.74	15.26	24.74	75.26	64.21	35.79
High support (n=178)	89.33	10.67	33.15	66.85	51.12	48.88
Chi²	2.32		7.74	*	22.65	***
Job title						
Healthcare provider (e.g., nurses, physicians)	77.68	22.32	16.96	83.04	67.86	32.14
CNA/Aide/personal care worker	83.78	16.22	18.02	81.98	75.68	24.32
Direct support (e.g., housekeeping, laundry, dietary)	88.89	11.11	33.33	66.67	79.63	20.37
Activity service (e.g., activities, pastoral care, social services)	92.79	7.21	33.33	66.67	42.34	57.66
Other support (e.g., admin, office staff, maintenance)	87.39	12.61	28.83	71.17	53.15	46.85
Chi²	12.13	*	15.00	**	46.78	***

Results

- 95% of sampled workers were exposed to at least one death at work
- 31% of workers reported not receiving any formal grief training
- High grief support is significant in predicting personal achievement and reducing feelings of depersonalization
- The highest percentage of workers with exhaustion and depersonalization ratings were health care providers (including RNs, nurse practitioners, and physicians) followed by CNAs
- The highest ratings of personal achievement were by pastoral care/social services/activities workers and the lowest ratings of personal accomplishment were by housekeeping/laundry/dietary workers
- The lowest ratings of depersonalization were reported by pastoral care/social services/activities workers
- Of those who reported they received low grief support, 79% reported high depersonalization toward patients

Discussion

The availability and quality of grief support (i.e., training) can impact the relationship between grief support and burnout.

Inadequate support or limited resources may exacerbate feelings of burnout, while comprehensive support programs can promote feelings of personal achievement.

Nursing home workers experience grief differently depending on their personal experiences, coping mechanisms, and the nature of their work.

Conclusion

These findings underscore the importance of addressing burnout and promoting staff well-being in nursing homes, through interventions such as workload reduction, increased job control, and access to support resources.