

Moral injury and compassion fatigue: The fall-out from a deployment in NYC

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Presenters



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Scenes from a homeland deployment



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Capt Christina Hewett



- Captain Christina 'Chris' Hewett has been active duty enlisted, a 349th Aeromedical Staging Squadron (ASTS) en route patient staging system (ERPSS) nurse as a traditional reservist, and is currently a 349th ASTS critical air transport team (CCATT) nurse.
- She has deployed twice: once to Bagram, Afghanistan and once to NYC, NY. She is currently the 349th ASTS CCATT en route critical care (ERCC) coordinator.
- She completed her DNP in Leadership May 2021 with her Doctoral thesis work published on Compassion Fatigue in Critical Care Nurses, is currently a veteran Emergency Department nurse of 11 years, and teaches nursing students at a local community college in Northern California.
- Capt Hewett is married, has one daughter and two sons, three dogs, and lives in Northern California.



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Lt Col Laura Haver



NYC, NY



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- Lt Col Haver has been active duty, an individual mobilization augmentee (IMA), and a traditional reservist (TR), and has deployed four times: once to Balad, Iraq, twice to Bagram, Afghanistan and once to NYC, NY.
- She is currently working for AFPC in the Exceptional Family Member Program as the program manager for the medical branch, and is the Chief Nurse for the 349th ASTS, Travis AFB, CA.
- Her background is medical/surgical nursing, she has taught nursing in a BSN program, and she also works in hospice PRN.
- Lt Col Haver is married, has two daughters and two dogs, and lives in Georgia.

Disclosures



- Lt Col Laura Haver and Capt Christina Hewett have no relevant financial or non-financial relationships to disclose relating to the content of this activity.
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Learning Objectives

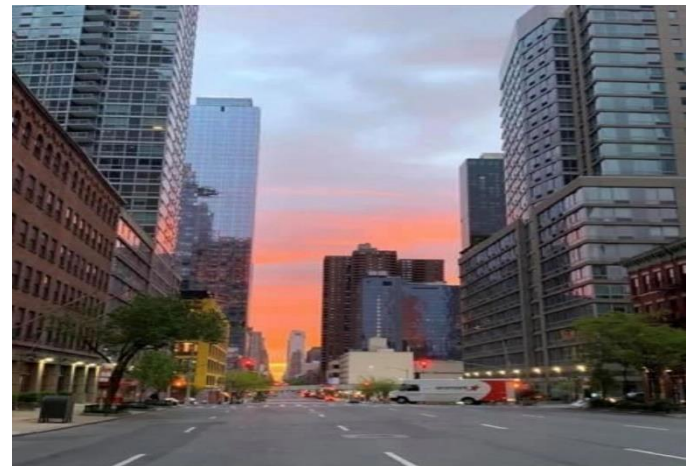


At the conclusion of this activity, participants will be able to:

1. Define the difference between compassion fatigue (CF) and moral injury (MI).
2. Choose three healthy options to help combat CF.
3. Discuss how nursing contributes to CF.
4. Explain how to make positive changes in the work environment.

Compassion Fatigue (CF)

- CF is “the emotional residue or strain of exposure to working with those suffering from the consequences of traumatic events...Compassion Fatigue can occur due to exposure on one case or can be due to a ‘cumulative’ level of trauma.” (The American Institute of Stress, 2019, p. 1)
 - ❑ Why don’t I care?
 - ❑ Am I bad nurse?



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Signs and symptoms of CF



■ Physiologic

- Irritability/hostility/agitation
(Van Mol et al., 2015)
- Anxiety
- Depression
- Self isolation
- Apathy/emotional numbness
- Anger
- Hopelessness
- Self-medicating/drinking
(Cragun et al., 2016)

■ Physical

- Hair loss/Weight loss, gain
(Portnoy, 2011)
- Headaches
- Low back pain
- Stomach ailments
- Sleep disturbance
(Van Mol et al., 2015)

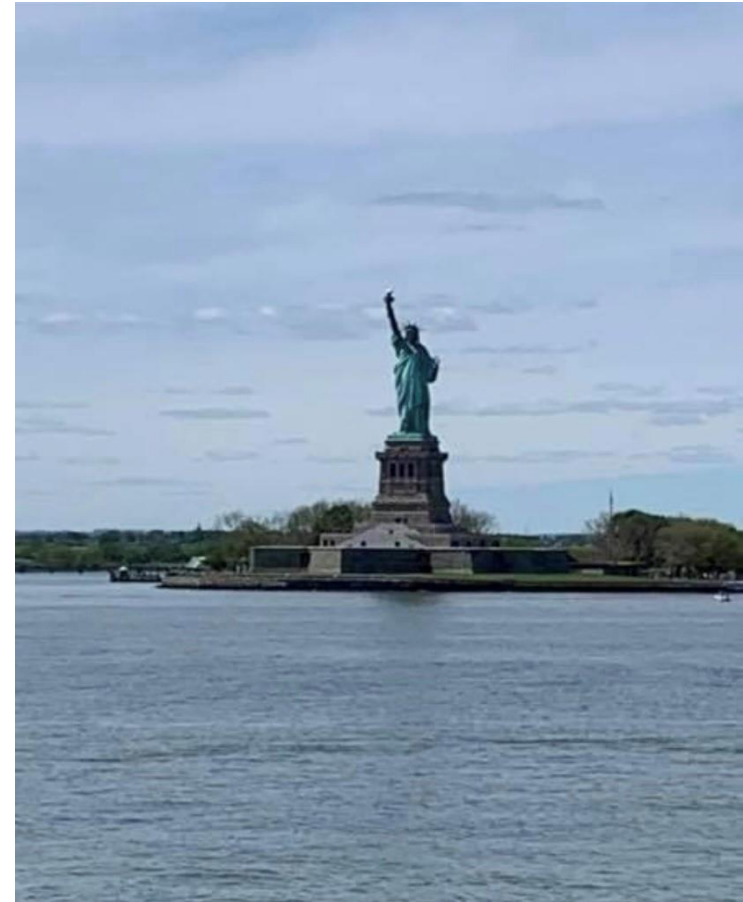
Moral Injury (MI)



- Originated in the military
- Describes the challenge of simultaneously knowing what care patients need but being unable to provide it due to constraints that are beyond our control.
(Dean, Talbot & Dean, 2019)
 - This is not what I learned in nursing school
 - I know this is wrong but I have to do it

Signs and symptoms of MI

- Guilt
 - Shame
 - Disgust
 - Anger
 - Inability to self-forgive
 - Self-sabotage
- (Norman & Maguen, n.d.)



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Is it CF or is it MI?



- Lt Col Haver's experiences
- Capt Hewett's experiences
- What led us to experience CF and MI?
- Should we find another career?



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What led us to CF and MI?

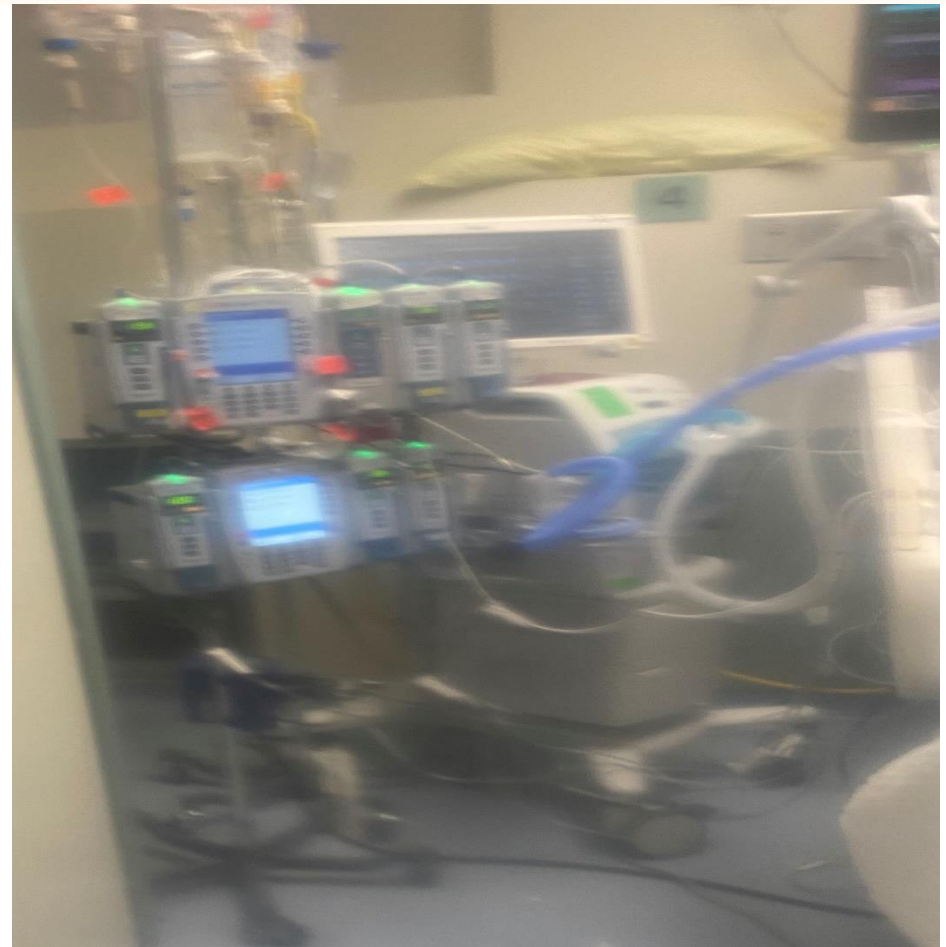
- So many sick
- Scared to get sick
- Not enough hands
- Not enough rooms
- Not enough staff
- Not enough supplies
- Not enough time



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Nursing outside the box



Some CF statistics (You are not alone!)



- 48% of the work force in the US encounters high CF (Gaille, 2017)
- The highest percent of US workers that develop CF are nurses at >40% (Gaille, 2017)
- The average cost of turnover for a single RN is \$36,000 to \$57,300 or \$729 million across the U.S. (Sorenson et al., 2017)

Capt Hewett's CF DNP Thesis results



- In a small survey of 19 Critical Care (CC) nurses at John Muir Health CC I found that 73.7% of those nurses had moderate levels of burnout and 52.6% had moderate levels of secondary traumatic stress (STS). Both burnout and STS make up CF (Hewett, 2020).
- Nurse demographics



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CF and the military nurse



Why should we worry about it?

- How does CF translate in our professional/personal lives?
- Does CF define us as military members?
- Can we spot the signs and symptoms of CF in ourselves and our peers?
- Have you witnessed CF in your daily activities at home or at work?

Why are nurses at a higher risk?

- Higher acuity patients in COVID-19 patient populations
- High risk of mortality in COVID-19 patient populations
- Task saturation in COVID-19 patient populations
- High intensity work environments

How can you help your coworkers and more importantly YOURSELF overcome CF??



- If you see something, say something
- Resiliency/Mindfulness
- Education
- Self-care
- Critical Incident Stress Debrief
- Be a good Wingman
- Talk about it
- Stop “Eating our Young!!”



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Conclusion



- CF is not an anomaly—it does not mean that you are a bad nurse
- Realization and understanding of CF is key to solving it
- Take care of yourself...and each other
- MI is due to actions beyond your control → talk about it, don't hide it
- Give yourself grace
- Share with others
- It is time to challenge the paradigm that CF is an expectation of our job and missions as nurses

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5. After completing the posttest at 80% or above, your certificate will be available for print or download.
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