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Increasing Primary Care Nurse's Recognition of Symptoms Related to Job-Related Stress

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Walden University 2020

Abstract

Increasing Primary Care Nurse's Recognition of Symptoms Related to Job-Related Stress

by

Beverly Butler

MS, Walden University, 2016
BS, University of Texas at Arlington, 2013

Project Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Nursing Practice

Walden University

November 2020

Abstract

Many nurses become accustomed to stressful situations and often do not recognize the signs of stress until it has in some form affected them. Nurses often lack education for recognition of signs regarding job-related stress. The practice-focused question for this doctoral project addressed whether knowledge of stress recognition increase in nurses after an evidence-based educational program (EBP) regarding signs of job-related stress." The purpose and significance of this project was to develop, deliver and evaluate an EBP regarding recognition of signs regarding job-related stress. The project was guided by the Job Demands-Resource (JD-R) theory and Lewin's Change Theory to focus on job demands that lead to stress and the 3 stages of change. A literature review of evidence-based practices to recognize signs of job-related stress was conducted. A synthesis matrix was used to organize the data and SPSS was used to analyze the evidence. The findings of the project were collected from 20 participants using a 10question pre- and post-survey. The significance threshold was set at 0.05 = 5%. P value = <.001. A paired t- test was conducted to determine if there was an increase in knowledge of stress recognition in primary care nurses by comparing the pre- and postsurvey results. The results suggest that nurses' knowledge of signs regarding job-related stress increased after participating in the project. This project will benefit primary care nurses who lack knowledge to recognize signs regarding job-related stress in hope that they will implement stress management strategies to reduce stress, resulting in positive social change.

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Dedication

This project is dedicated to my grandmother, Louise Wyatt-Hadnot who believed in me from the beginning. I owe her my all. She is not here on earth to witness this moment (gone too soon), but her presence is felt. Because of her faith, prayers, small talks, disciplinary, nurture and guidance, I am a better person. Thank you for the many opportunities that you provided me in life. I am the practitioner that I am today because of you. Thank you!

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My husband, Ronnie, I thank you for your constant support mentally and spiritually. My children LoTonia, Brianna and Jaylon, thank you for always giving me a reason to push harder and a reason to smile daily. My mother, Brennet, I thank you for giving me life. Dreams do come true! My grandmother, Louise, was my inspiration in doing all of this. It was her love, daily nurture, prayers, discipline and more prayers that changed my life forever. I owe it all to her. Gone too soon but, I know that she is smiling and that she is proud of me. Lastly, my spiritual leaders, Bishop James Coutee and Elect Lady Caniche Coutee, thank you both for always believing in me. Thank you for your prayers, words of encouragement and steadfast faith. You both are special to my heart and I can never forget all that you both have invested in my life. I am a witness that hard work pays off, dreams do come true and key people are instrumental in all that I do.

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Section 1: Nature of the Study

Introduction

Job-related stress can lead to nurse shortages in primary care. According to Nursing Solution, Inc. (2018), the average turnover rate in primary care clinics is 18.2%, the highest turnover rate recorded in the last decade. Nursing Solution, Inc. (2018) suggests turnover rates in primary care averaged 14% annually as of 2015, due to job-related stress.

Job-related stress experienced by nurses working in primary care has become a matter of increasing concern for many nurses and stakeholders. The impact of stress in nursing can lead to job dissatisfaction, decline in quality of care and ultimately, a shortage of experienced nurses working in primary care (Elizabeth, Elizabeth, & Susan, 2018).

Nurses who provide direct care had a higher job dissatisfaction rate and reported an increase burnout rate than nurses who worked in other industries such as pharmaceuticals (U. S. National Library of Medicine, 2014). Nurses confess that they love their profession but The U. S. National Library of Medicine (2014) suggests three out of five nurses state that their job has caused them an increase in stress and that two out of five nurses state that they have considered other professions due to job related-stress.

Chang & Chan (2015) suggests that some stress is beneficial but too much stress can cause mental and/or physical illness. An initial step to controlling stress is to recognize the signs and symptoms of stress (Chang & Chan, 2015). Many people become

accustomed to stressful situations and often does not recognize the signs of stress until they reach their breaking point (National Library of Medicine, 2014). The nature of this educational, evidence-based doctoral project was to focus on nurse's recognition of signs and symptoms of job-related stress. By implementing an educational, evidence-based project (EBP) that focus on recognizing signs of job-related stress, primary care nurses increased recognition of signs regarding to job-related stress.

Walden's University literature review matrix was the approach used to organize information collected from this EBP. The purpose of the matrix is to organize sources based on the strength of evidence, evidence quality, management technique, outcome and future practice implications (Walden University, 2010). Using this matrix, I created the EBP.

According to a lead family nurse practitioner, who worked at the clinic where the EBP was implemented, the average nurse hired in the clinic had terminated employment within 6 to 8 months due to job-related stress according to documented exit interviews. This personal communication also revealed that the clinic had lost more than \$45,000 a year in hiring and training new nurses and had no budget for nursing retainment at the time of communication. For these reasons, I felt that this project was needed at this local clinic to assist current employed nurses with recognizing signs of stress and positively affect the nurse's retention rate at the local site.

This project may impact social change for primary care nurses working at the clinic and the profession by providing education that focus on recognizing signs of jobrelated stress and suggesting implementation of self-care interventions to reduce levels of

stress. Nurses with increased recognition regarding job-related stress can seek self-care interventions on stress reduction (McEwin & Willis, 2014). The need for nurses to be well educated regrading stress on the job, as suggested by McEwin & Willis (2014), will support positive social change and enable complex clinical decisions when job-related stress is decreased.

As the needs of healthcare in populations change, so too has the requirements of training and education to increase recognition of job-related stress. Utilizing education that can assist nurses with recognizing signs of job-related stress was the goal of this EBP. To minimize potential risks and long-term effects of stress, nurses were educated on recognizing signs regarding work-related stress.

Problem Statement

The problem statement addressed in this educational, evidence-based doctoral project at the Primary Care Clinic (PCC) was the lack of education provided to nurses to increase recognition regarding work-related stress. The clinic did not utilize any educational resources to increase recognition of signs of stress in the workplace.

Therefore, retention rates of experienced nurses were impacted. Due to job-related stress, primary care nurses were terminating their employment causing experienced nurse's retention rates to decrease (see Miyata, Aria & Suga, 2015).

Purpose

The purpose of this doctoral project was to develop, deliver and evaluate an evidence-based education program regarding recognition of signs regarding job-related stress for primary care nurses. After completion of the project, nurses reported an

increase in knowledge to recognize signs and symptoms related to workplace stress. In addition, nurses reported education in the workplace is important for recognition of signs regarding job-related stress.

Gap in Practice

The gap in practice that this evidence-based doctoral project addressed was the lack in nurse's knowledge to recognize job-related stress. A gap in practice exists in nurse's current knowledge base to recognize symptoms of stress (Dyess, Sherman, Pratt & Chiang-Hanisko, 2016). Information obtained from nurses working at the project site indicated that their current knowledge to recognize signs of job-related stress relied on previous education that they received in nursing programs. Resources were not readily available at the local clinic to provide current nurses with education or training to recognize job-related stress.

Practice Focus Question

The guiding practice-focused question for this doctoral project was, "Does knowledge of stress recognition increase in nurses after an evidence-based education program regarding signs and symptoms of job- related stress?"

Addressing the Gap-in-Practice

Addressing the gap-in-practice through education regarding recognizing signs of job-related stress can promote a healthier work environment (McEwin & Willis, 2014). An educational, EBP means that scholarly literature and tools were utilized to gain an understanding of recognizing job-related stress. This project was important because no other approaches had been implemented at the project site.

Nature of the Doctoral Project

According to communication with leadership at the practice site, current nurses reported that the PCC ability to retain experienced nurses was challenging due to nurses not recognizing the onset of signs related to job stress. Documented exit interviews at the clinic is an indicator that job-related stress is a common factor for many nurses who made the decision to leave the clinic. This EBP was beneficial for this clinic because there is a lack of education regarding recognizing signs of job-related stress. In a previous study, education to recognize signs of job-related stress increased nurse's knowledge and promoted retention and positive outcomes in the primary care setting (Idress & Abdul-Sattar, 2015).

Sources of evidence that was collected to meet the purpose of this doctoral project was participants pre- and postsurveys, nursing literature from nursing association and professional publications to gather best evidence-based practices, articles from the Walden Library, peer-reviewed journals, professional organization publications including the American Nurses Association, The Advisory Board, Organization of Nurse Leaders and Walden University databases including EBSCOhost and Cumulative Index of Nursing and Allied Health (CINAHL).

Summarizing Approach

Analyzing this EBP was achieved through utilization of Statistical Package for the Social Sciences (SPSS). The SPSS program is used for complex statistical data analysis. Literature was organized using the Walden University's literature review matrix (Walden University, 2010) and evidence was evaluated by pre- and postsurveys. Findings from the

pre- and postsurvey evaluations concluded that nurses reported increase knowledge of recognition regarding job related-stress due to the educational program.

Purpose Statement

According to the Bureau of Labor Statistics (2016), by the year 2022, approximately 1.05 million novice nurses will be needed to fulfill the nursing shortage because experienced nurses will continue to leave the profession due to increase levels of job-related stress (Bloomfield, Gordon, Williams & Aggar, 2015). Because the shortage is so great in the United States, stakeholders and healthcare managers must focus on opportunities to educate nurses to recognize signs regarding job-related stress in primary care settings. The purpose of this doctoral project was to develop, deliver and evaluate an evidence-based education program regarding recognition of signs regarding job-related stress for primary care nurses. As the result of educating nurses on the signs of job-related stress, nurses reported increased recognition of signs regarding job related stress.

Significance

The significance of this evidence-based project was to educate nurses of signs regarding job-related stress once they are recruited in primary care. The cost of turnover rates in nurses impacts a facility's profit margin. Turnover costs for a nurse averages between \$37,700 to \$58,400 dollars according to Dailypay (2018). Research studies of employee turnover costs show that it cost employers 6 to 9 months of a nurse's salary on an average (Dailypay, 2018). For example, a nurse that makes \$40,000 a year will cost a facility approximately \$20,000 to \$30,000 in expenses to recruit and train that nurse (Dailypay, 2018). The nurses at the primary care practice were educated on signs

regarding job-related stress to increase their knowledge of recognition regarding signs of job-related stress.

Stakeholders

When experienced nurses leave the nursing profession, stakeholders, hospitals, primary care clinics and patients are all negatively impacted (Harshbarger, Ahlers-Schmidt & Lippoldt, 2016). This EBP contributed education that influenced nurses to recognize job related stress and to seek strategies to reduce risks of stress. This EBP could be used in a similar practice such as hospice or the ICU where nurses experience high levels of job-related stress (see Harshbarger et. al., 2016).

Stakeholders consist of nurse staff, nurse managers, nurse practitioners and patients. A positive impact on nursing staff can be achieved if nurse managers promote education to increase knowledge regarding recognition of signs regarding to job related stress. Nurse managers and practitioners may benefit from employees that report increase recognition of job-related stress and enhanced coping strategies previously deferred. Ultimately, patients are stakeholders who may experience the greatest impact from the EBP. Bratianu (2015) suggests that the ability of a nurse to manage job-related stress may enhance patient's self-care engagement, lead to better patient experiences and promote positive patient outcomes opposed to a nurse with poor coping skills.

Contributions to Practice

Job-related stress experienced by primary care nurses remains problematic in many facilities. Educating primary care nurses regarding recognizing signs of stress may contribute to nursing practice by increasing retention of experienced nurses and

promoting longer tenure (Bratianu, 2015). Placing the focus on primary care staff nurses as the targeted population for stress recognition education will provide insight into other areas of practice that experience similar issues (see Bratianu, 2015). It may be a true statement that stress is common in health care practice. However, education regarding recognizing signs of job-related stress should be embraced to aid nurses in early interventions. In 2014, the Advisory Board released a statement questioning if facilities offered job-related stress trainings that recognize signs of job-related stress. Developing an EBP for primary care nurses aligns with the recommendations made by the Advisory Board (2014).

Potential Transferability

The development of this education EBP focused on recognition of signs regarding job-related stress and provided a framework to guide similar programs at other facilities. Nurses indicated that receiving education on recognizing the signs of job-related stress promoted stress management interventions. Potential transferability of this EBP exists in similar practice organizations seeking to implement EBP for recognition of signs regarding job-related stress, including acute care settings.

Implications for Positive Social Change

This doctoral project implicated positive social change within the practice site because it addressed job-related stress that was currently not recognized by primary care nurses working at the site. Positive social change for the society through promoting an education EBP that recognize signs of job-related stress has the potential to promote stress management strategies in primary care. Nurses who are proficient in recognizing

signs of stress will promote stress management skills and increase retention rates (Gellasch, 2015).

Summary

Experienced nurses are leaving primary care facilities due to job-related stress. The impact of experienced nurses leaving the profession for other career opportunities creates a shortage of experienced nurses working in primary care. According to Gellasch (2015), experienced nurses are the backbone in healthcare because they are resourceful, convey power, and have a wealth of knowledge that assists new nurses from novice to expert. Gellasch (2015) also suggests that because of the expertise of experienced nurses, they should be included in decision-making for strategies to recognize signs regarding job-related stress.

Nurses become disengaged when they experience job dissatisfaction (Dempsey & Reily, 2016). Utilizing education to increase recognition of signs regarding job-related stress will likely promote stress management skills and retention of experienced nurses. According to American Nurses Association (2016), the nursing profession continue to be a highly ranked trusted profession and retaining experienced nurses are crucial to sustaining the nursing professional, promoting positive outcomes and safety for patients. Fackler (2019) also suggests that retaining nurses that have 1 or more years of clinical experience contribute to promoting quality of care delivered. This EBP was conducted to increase primary care nurse's knowledge regarding recognition of signs regarding job-related stress. In Section 2, concepts and theories used to support this EBP, background and context, relevance to nursing practice and role of DNP student are addressed.

Section 2: Background and Context

Introduction

Patients expect to receive the best care from their healthcare providers (Gellasch, 2015). Healthcare is constantly changing while primary care facilities continue to struggle with nurses who can provide safe and quality care (Gellasch, 2015). When best evidence-based practice is applied in primary care, Dempsey & Reily (2016) suggest that patients are living longer with complex comorbidities and require more primary care visits. Therefore, educating nurses to recognize signs and symptoms regarding job-related stress will decrease nurses leaving the profession early and increase experienced nursing staff to provide care to patients and mentor new nurses.

The guiding practice-focused question for this doctoral project was "Does a nurse's educational program increase knowledge to recognize signs of job-related stress?" The purpose of this doctoral project was to develop, deliver and evaluate an EBP regarding recognition of signs regarding job-related stress for primary care nurses.

Society will benefit from this EBP as nurses become knowledgeable about more ways to recognize stress. This section discusses concepts, models and theories that were used in this project, relevance to nursing practice, local background and context and the role of the DNP student.

Concepts, Models and Theories

Bakker (2017) Job Demands-Resource Theory suggests that job demands can lead to stress when certain resources are not present. The local site did not have resources in place that educated nurses on recognizing signs of stress. Guiding this project required

more than a single theoretical framework, However, JD-R theory integrated nursing process consistent with assessment, diagnosis, planning, outcomes, implementation and evaluation that supported this doctoral project (see Bakker, 2017). According to Boyd & Stinson (2010), nursing theories provide foundation and the principals that support nursing practice. This project that focused on recognizing signs regarding job-related stress was influenced by the JD-R theory through educating nurses on recognizing the signs of job-related stress.

Job Demands-Resource Theory

In 2001, Bakker expanded the JD-R theory utilizing the job design and stress theory components from the job demands-resource model (Bakker, 2017). This theory offers an explanation about how increase job demand and limited resources may affect job -related stress and the employee's ability to perform effectively. One strength of this theory that impacted the guidance of this EBP is the application's flexibility.

Job characteristics and work environments can be grouped into two categories, job resources and job demand (Bakker, 2011). Bakker & Demerouti (2015) suggests that job demands encompasses social, physical, psychosocial aspects associated with a psychological response and organizational. Job demands that can have a negative impact includes high pressure work environments such as primary clinics and emotionally demanding interactions (Bakker, 2011). A barrier to performance is created when a nurse must consistently utilize extreme efforts to meet patient's demands and does not have resources to assist with replenishing (Bakker, 2017).

Job resources category encompasses aspects such as reducing job demands, psychological costs, stimulate development and personal growth and enhance function in achieving goals (Bakker & Demerouti, 2015). Applying the JD-R model to nursing has been documented through studies focusing on stress, nursing engagement and utilization of resources. A multilevel study using the JD-R model was conducted by Montgomery, Spanu, Baban and Panagopoulou (2015) to research teamwork and nursing engagement in seven countries. Laschinger, Grau, and Finegan (2012) used the JD-R model to study the transition of new nurses into the workforce and to determine the contributing factors to their stress. Gao, Newcombe, Tilse, Wilson and Tuckett (2014) used the JD-R model as a theoretical basis for predicting turnover in nursing. All of these are examples of studies that used the JD-R theory as a framework to enhance the practice of nursing. It is important to retain the expert nurse to promote positive outcomes, patient's safety, patient's satisfaction and provide the best quality care (Benner, 1982).

Lewin's Change Theory

Kurt Lewin developed the Lewin's Change Theory in 1951 (McEwin & Wills, 2014). Lewin is known as the "father of social psychology" (McEwin & Wills, 2014). Lewin's change theory suggests three stages (unfreezing, change and refreezing; McEwin & Wills, 2014). The theory implies the need for change with both, diabetic patient's self-care and health care professionals (McEwin & Wills, 2014). The change model creates a perception that there is a need for change, a move towards the change and finally, solidifying the change (desired behavior) as a new norm. According to McEwin & Wills (2014), utilizing Lewin's change theory can provide support to the nurses through the

transitions of the three stages and identify areas of their weakness and strengths prior to and after the three stages of transition.

Relevance to Nursing Practice

Nurse's job satisfaction, work environment and experiences are all relevant to nursing practice. As an experienced nurse, the task of recognizing signs of stress and utilizing stress coping skills are key components to reducing job-related stress (Health and Safety Executive, 2017). Contributing factors including lack of education can cause an experienced nurse to change jobs and/or profession. Harr (2013) suggests that when symptoms of stress begin, nurses may experience mood swings and poor self-care. Recognizing symptoms of stress will reduce negative results including staff shortages in primary care (Perregrini, 2019).

Lewin's model is relevant to this doctoral EBP. According to McEwin & Willis (2014), healthcare professionals are affected by job-related stress. This is relevant because the theory focuses on change and flexibility which relates to balance between the external and internal triggers that produces job-related stress (McEwin & Willis, 2014). There is a lot of research on recognizing signs and symptoms regarding job-related stress but, not all nursing specific. Studies suggest that stress is an associated factor for high turnover rates but, do not include recommendations to enhance education that will increase knowledge of recognition regarding signs of job-related stress (Harr, 2013).

History

The topic of job-related stress in relation to primary care nurses have been addressed in research. When doing literature searches, I found articles and surveys dating

back to the early 1990s that focused on the impact of stress in primary care nurses (VanBogaert, Timmermans, Weeks, VanHeusden, Wouters, Franck, 2014). The nursing practice has evolved since VanBogaert et. al., (2014) did an in-depth literature review and found that the emotional cost of distress increase when nurses lack recognition of stress and stress management strategies.

Current State of Practice

According to Idress & Abdul-Sattar (2015), nursing can be described as emotionally draining due to challenges that can increase levels of stress. Strategies that focus on recognizing stress may vary by organization. Job-related stress faced by nurses are viewed as a common occurrence within the role (Mohamed, 2016). Researchers who examined job-related stress suggests that experienced nurses play an important role in preparing less experienced nurses to recognize signs of job-related stress (Dyess et. al., 2016).

Filling the Gap in Practice

This EBP filled the gap in practice associated with recognizing symptoms of stress. Literature reviews suggests there is a high prevalence of stress increasing in primary care environments (Idress & Abdul-Sattar, 2015). Primary care nurses who lack knowledge of stress recognition will facilitate a cycle of high turnover rates and retention challenges (Dyess et. al., 2016). This project contributed to filling the gap in practice through developing an education EBP for primary care nurses regarding recognizing signs of job-related stress.

Local Background and Context

Gellasch (2015) has predicted that many nurses will leave the profession by 2030 leaving the field of nursing short of experienced nurses. Many local Texas primary health care facilities are networking to identify strategies that can be implemented to retain experienced nurses and minimize the impact that job-related stress can cause (see Gellasch, 2015). The nature of primary care clinics in Texas, nurses are at high risk for job-related stress. This results in a financial burden for the project site, loss of mentors for new nurses, and loss of experienced nurses who have built a rapport with both patients and physicians. The project site is a primary care clinic located in rural Deep East Texas.

Summary of Local Relevance

According to staff at the project site, recognizing job-related stress is a topic that has only been addressed in team meetings and acknowledged as an issue only at the office manager level. There is a lack of formal training on recognizing the signs of stress (HRC, 2016). An open forum by nursing staff reports lack of formal education to increase knowledge of stress recognition regarding job-related stress.

The current focus of the project site involves reducing job related stress. This project was relevant to increase nurse's knowledge to recognize signs of job-related stress. This EBP was beneficial to the local primary organization because the retention rates of experienced nurses were decreasing due to the lack of knowledge regarding recognition of signs regarding job-related stress. Strategies that could be persuasive for experienced nurses to stay in current roles are to implement evidence-based education

programs regarding recognition of job related stress and to promote working environments that reduce job-related stress (see Idress & Abdul-Sattar, 2015).

Institutional Context

This EBP focused on a primary care clinic that employs 28 nurses (composed of RNs and LVNs) and 10 credentialed medical staff. The organization provides service for approximately 120 patients daily, Monday through Friday and has clinical affiliations with a local hospital that launched a women's clinic January 2020. The project site covers 7 counties for indigent care patients and includes partnerships with multiple individual provider entities.

The mission of this project site consists of delivering comprehensive physical and mental health care of the highest standard in the most accessible and affordable possible method. According to staff at the facility, the issue of job-related stress was heightened after three key nurse terminated employment in October 2019. The fact that the project site has gone through two different ownerships since January 2019 have added job-related stress to staff. During the first transition of ownership, all medical assistances were terminated. This resulted in additional responsibilities for nurses. Approximately 8 months later, another transition of new owners took place and a new electronic health record system was introduced adding more stress to staff. No warning was provided to staff prior to the second transition of owners and there were many employees that reported job in-security. Staff reported that stress levels increased because of ownership changes and role changes.

Role of the Doctor of Nursing Practice Student

With ongoing changes in healthcare, it is important that primary health care facilities and nurses understand the latest evidence-based practices to recognize signs of job-related stress (Chang & Chan, 2015). As a DNP student, seeking the best evidence to educate nurses on recognizing symptoms of job-related stress was a priority. Nursing is a demanding role (see Chang & Chan, 2015). Primary care nurses are vulnerable to job-related stress. This project had personal relevance because of my previously experiences as a primary care nurse. Although I am not an employee at the project site, the challenges of the nurses somewhat mirror those challenges that I encountered when working in primary care. The goal of the EBP was to provide education that assist with recognizing the signs of stress. This EBP can be utilize as a resource to impart knowledge to staff who may benefit from stress reduction strategies.

Role in the Doctoral Project

The DNP student's role within the doctoral project was to develop, deliver and evaluate an educational program that can assist primary care nurses with recognizing the signs of stress. The DNP student served as the project manager and compiled all evidence based on best practices that focused on recognizing signs of job-related stress. These practices were synthesized into an educational program. In this doctoral project, coordinating an educational program to increase nurse's knowledge regarding recognizing signs of job- related stress was the highest priority. A demographic survey, pre-survey to determine baseline, an educational brochure to recognize signs regarding job-related stress and a post-survey were implemented and evaluated to determine

whether nurse's knowledge to recognize signs regarding job-related stress increased after an education program.

Motivation

As a primary care nurse for more than twenty years, caregiving itself was emotionally draining. This in combination with working with many different personalities also was stressful. Not having the knowledge to recognize symptoms of job-related stress in certain nursing roles influenced me to seek other roles completely out of primary care nursing. The motivation behind this EBP was to foster the development of an educational program that will assist other primary care nurses regarding recognition of signs related to stress in hope that they will seek stress management strategies instead of vacating the role of a primary care nurse. The goal for this doctoral project was to develop and deliver an educational program that nurses at the primary care clinic can utilize to recognize signs related to job related stress.

Potential Bias

One goal of effective practice is to identify one's own bias in a situation that can facilitate a compassionate approach (Idress & Abdul-Sattar, 2015). It is difficult to predict potential biases. I have worked both staff nurse and provider nurse experiencing aspects of each role. However, potential biases are always possible when introducing a new project. These biases were addressed by an objective review of literature to develop the project. In addition, other sources of information were utilized including peer reviewed literature and national nursing organization. The information was reviewed and

monitored by the assigned lead staff. Any information obtained from literature that could be considered bias was excluded from the EBP.

Role of the Project Team

There was no formal project team used for this EBP. The nurse practitioners at the primary care clinic were the collaborating team that managed the scheduling for the primary care nurses who desired to participate in the project. Nurse managers under the direction of the nurse practitioners collected the pre- and post-survey results in a locked staff comment box to ensure that all participant's information remained anonymously. Staff nurses attended a presentation to receive the education provided in the program without the presence of stakeholders which included the nurse managers, nurse practitioners, physicians, and human resource staff. The role of the Walden University IRB was to ensure that the tool used to collect pertinent information for the EBP met the standards of ethics and did not violate the rights of the participants and/or regulatory standards.

Summary

The role of nursing can be stressful. The role of nurse managers is to ensure that experienced nurses are educated and retained in a safe work environment (Buffington et. al., 2012). This doctoral project addresses the gap-in-practice through education regarding recognition of signs of job-related stress. In Section 3, an analysis and synthesis of evidence for this project to determine if knowledge of primary care nurses increase after an educational program regarding recognizing signs of job-related stress is presented. Also, Section 3 focus on sources of evidence that supported the development

of the EBP, a list of databases, key search terms, provide an overview of EBP participants and describe the analysis and synthesis that was used in the EBP.

Section 3: Collection and Analysis of Evidence

Introduction

Integrating the best evidence-base practice in primary care can increase nurse's knowledge in the practice setting (Dempesy & Reily, 2016). Many experienced primary care nurses leave their current role for other opportunities because they are not educated on recognizing signs of job-related stress and have no stress coping or management skills. The purpose of this doctoral project was to develop, deliver and evaluate an education based EBP regarding recognizing the signs of job-related stress for primary care nurses. As a result of this EBP, primary care nurses reported increase knowledge of recognizing signs of job-related stress. It was most important to complete this project because there are no other resources readily available at the local clinic to provide current nurses with education or training to recognize job-related stress.

The project was guided by the JD-R and Lewin's theory, which were used to focus on job demands that lead to stress on an individual when there are no available resources to destress and the three stages of unfreezing, change and refreezing. My role in this EBP was as project manager consisting of compiling and synthesizing evidence-based best practices which focused on developing an educational program to recognize signs of job-related stress.

Practice-focused Question (s)

The local nursing practice problem that was the focus of this doctoral project is, "Does knowledge of stress recognition increase in nurses after an evidence-based education program regarding signs and symptoms of job- related stress?" Educating

nurses on recognizing the signs of stress are beneficial to implementing stress coping strategies and stress management skills. As a result, knowledge of how to recognize jobrelated stress will increase.

A gap in practice in this EBP was the lack of knowledge regarding recognizing signs of job-related stress. According to Dyess, et. al., (2016), a gap in practice may exist in the knowledge base that one possesses to identify daily job-related stressors. Stress is experienced at different levels (Dyess, et. al., 2016). Ongoing stress without interventions may eventually lead to burnout (Dyess, et. al., 2016).

Alignment

This EBP will close the gap in practice through the development of synthesized evidence-based best practice job-related stress education for primary care nurses. The practice-focused question for this EBP was "Does knowledge of stress recognition increase in nurses after an evidence-based education program regarding signs and symptoms of job- related stress?" The purpose of synthesizing evidence-based best practices was to develop, deliver and evaluate an education program that may enhance primary care nurse's ability to recognize signs of job-related stress. The objective aligns with the practice-focused question through development of an evidence-based education program providing nurses knowledge about signs of job-related stress that may negatively impact their daily practice.

Collection and Analysis of Evidence

Primary care nurses lack knowledge to recognize signs of job- related stress and is identified as the local nursing practice problem for this EBP. Buffington et. al., (2012), asserts that many primary care nurses receive no training on the importance of stress recognition when dealing with job-related stressors. The practice question addresses whether knowledge of stress recognition increase in nurses after an EBP regarding signs of job- related stress. Job-related stress potentially has a negative impact on nurses affected by it or other manifestation caused by it such as poor self-care (Dyess, et. al., 2016).

Evidence was collected from selected sources including peer-reviewed publications from professional journals, published studies and professional nursing organizations. Peer-reviewed professional journals included Nursing Management, Journal of Nursing Administration and Journal of Nursing Research. Professional Organizations included the American Nurses Association, the Organization of Nurse Leaders and the American Organization of Nurse Executives. All published studies were reviewed for appropriateness for the topic and transferability of the findings.

A synthesis matrix was used to organize the data collected and SPSS was used to analyze the evidence. The matrix allowed evidence to be categorized and sorted based on outcomes. The outcomes demonstrated characteristics of specific, measurable, and observable as suggested by White & Dudley-Brown (2012). The findings of the project were used to measure whether the educational component resulted in increased

knowledge to recognize job-related stress though analyzing data in SPSS. A 10-question presurvey was used during the project to evaluate participants knowledge base of signs regarding job-related stress before and after an educational program. The pre- and postsurvey is a sliding scale workplace stress survey with attribution to the American Institute of Stress used to determine if an individual recognize stress and how well an individual handle stress in the workplace (The American Institute of Stress, 2019). The relationship to this evidence was used to determine if primary care nurses with education-based training report increase knowledge to recognize signs of job-related stress compared to nurses with no education-based training.

Sources of Evidence

In this section, sources of evidence used for this EBP will be discussed. This EBP provided positive outcome indicators that demonstrate change that are specific, measurable, and observable (White et.al, 2012). The project findings were used to evaluate if an educational component results in an increase of knowledge to recognize symptoms of stress through pre- and postsurvey. The relationship to the purpose of this EBP was to provide education that can be utilized to recognize symptoms of job-related stress in primary care nurses.

An educational search strategy was electronically conducted to capture the most recent and relevant research on educating primary care nurses on recognizing signs of job-related stress from the McKee Library, ProQuest, PubMed, CINAHL, Medline and EBSCO between the years of 2013 and 2019. The key search terms included but not limited to signs of job-related stress, stress in nurses, symptoms of stress, nurse leader

stress, evidence-based stress education, identifying job-related stress, stress coping strategies and stress management.

A recent search of articles revealed 1,668 citations using "recognizing signs of stress and job-related stress" and 349 citations using the words "signs of job-related stress" and "symptoms of job-related stress". Six peer-reviewed journal articles between the years of 2013 and 2019 from the list of articles were selected. The articles were used in the EBP to focus on job-related stress. Articles older than 6 years were discarded unless they added additional relevance to the EBP.

The articles chosen such as Canadas-De la Fuente et. al., (2015) and Chang and Chan (2015) were both cross-sectional quantitative research study with the goal of recognizing signs of job-related stress leading to burnout and implementing appropriate interventions. Harshbarger et. al., (2016) conducted a quantitative and qualitative focus group study with the goal of determining precipitating factors that produce stress through sharing participants opinions and thoughts. Davis, Lind and Sorensen (2013) research study was conducted using a quantitative, cross-sectional study with the goal of evaluating nurses from other settings and to determine if there was a correlation between demographic factors, job satisfaction and coping strategies.

Another quantitative, cross-sectional study was conducted by Mohamed (2016) with the goal of investigating the relationship between job-related stress, nurse's role overload and managerial coping strategies to determine nurse's knowledge of signs leading to job-related stress. Alexander, Rollings, Walker, Wong, and Pennings (2015) conducted a research utilizing an experiment study design. The goal of this study was to

determine whether interventions such as yoga and other interventions can prevent and/or decrease job-related stress when identified.

Evidence Generated for the Doctoral Project

Participants

The participants who contributed evidence to address the practice-focused questions were composed of 28 nurses, both LVNs and RNs who worked in a primary care clinic in Texas. The nurses are not identified by their name in this project, only a number. All nurses had the opportunity to be a participant regardless of their length of employment with the facility. Relevance of these participants to the practice focused questions are, they service a busy primary care clinic that has the potential to lead to job-related stress.

John Hopkins Medicine (2017) suggests that positive relationships and collaborative partnerships are necessary to recognize signs of stress and to minimize experienced nurse's risk of job-related stress. Job-related stress is a major contributing factor impacting experienced nurse retention (Dempsey & Reily, 2016). Patient's safety and positive outcomes are compromised if there are not adequate experienced nurses (Davis & Maisano, 2016).

Procedures

Results of a 10-question pre-survey was collected in a locked suggestion box by the office manager during the project to determine participant's knowledge base of stress recognition. Results of a 10-question postsurvey also was collected by the office manager in a locked suggestion box after the evidence-based educational presentation to determine

knowledge gained to recognize signs of stress after education. Archival data from the preand postsurvey was provided to me in an anonymous form by the project's site office manager.

Protections

The role of the Walden University IRB was to ensure that the tool used to collect pertinent information for the EPB met the standards of ethics and does not violate the rights of the participants and/or regulatory standards. In addition, approval from the Medical Director designee of the facility was obtained prior to any data collection or staff interaction. Another role of the Walden's University IRB was to obtain ethics approval and to preapprove consent forms for anonymous surveys and evidence generated for the project. I did not work at the facility or collect any patient information. All employee's information collected was kept in a secure place and not used for any other purpose.

All 28 nurses were assigned a number and signed a consent form to participate to ensure ethical protection in the doctoral project. Strategies for recruiting and developing working relationships with participants included a formal presentation explaining project and ensuring understanding and desire to participate. At any point in the project, participants had the option to withdraw without further obligation.

Analysis and Synthesis

The analysis of the pre/post survey results were to demographically compare the groups and their knowledge base before and after an educational program designed to recognize signs regarding job-related stress. An educational literature review was completed to synthesize evidence for this EBP and arranged on a literature review matrix.

Databases included but not limited to McKee Library, ProQuest, PubMed, CINAHL, Medline, the internet (Google Scholar) and EBSCO between the years of 2012 and 2019.

In addition, professional journals, published studies and professional nursing organizations was thoroughly researched. Peer-reviewed professional journals included Nursing Management, Journal of Nursing Administration and Journal of Nursing Research. Professional Organizations included the American Nurses Association, the Organization of Nurse Leaders and the American Organization of Nurse Executives. The key search terms included but not limited to recognizing signs of job-related stress, stress in nurses, symptoms of stress, nurse leader stress, evidence-based stress education, identifying job-related stress, stress coping strategies and stress management. The review consisted of a look back period of 6 years (2013-2019). Evidence integrity was demonstrated by documenting and grading all sources reviewed on the literature review matrix.

Summary

The EBP addressed recognition regarding signs of job-related stress in nurses working in the primary clinic. The practice-focused question for this EBP was "Does knowledge of stress recognition increase in nurses after an evidence-based education program regarding signs and symptoms of job- related stress?" In addition, this project demonstrated that nurses who receive education on recognizing the signs and symptoms of stress will increase knowledge that can reduce stress. The sources of evidence were organized using a literature review matrix and evaluated using a pre- and postsurvey. In

Section 4, the project's findings, any recommendations made and a plan to disseminate all findings are discussed.

Section 4: Findings and Recommendations

Introduction

The purpose of this doctoral project was to develop, deliver and evaluate an evidence-based education program regarding recognizing the signs of job-related stress for primary care nurses. Nurses at the local clinic were not educated to identify job-related stress until they made the decision to terminate employment. The gap in practice that this EBP addressed was the lack of education that primary care nurses received to recognize signs of job-related stress. The aim of this EBP was to address this gap in practice by recognizing evidence for the synthesis, development and implementation of an educational program which was designed to increase the knowledge base of primary care nurses recognition regarding signs related to work stress.

During the formal presentation, the components of the project were explained to ensure participant's understanding and the desire to participate. Several primary care nurses verbalized the collective need for education related to recognition regarding signs related to stress in the primary care settings. The practice-focused question guiding this project was the following: "Does knowledge of stress recognition increase in nurses after an evidence-based education program regarding signs and symptoms of job-related stress?"

To address the project question, I conducted a literature review of evidence-based practices to recognize signs of job-related stress. Evidence was collected from selected sources including peer-reviewed publications from professional journals, published studies and professional nursing organizations published from 2013 to 2019. A synthesis

matrix was used to organize the data and SPSS was used to analyze the evidence. The findings of the project which was collected from a 10- question pre- and postsurvey during the project was used to measure whether the educational component resulted in increased knowledge to recognize job-related stress. In this section, I present the project's findings, implications for practice, goals and objectives, the project's strengths and limitations and self-analysis in relation to the development of the EBP.

Findings and Implications

A power point educational program was presented for 3 consecutive weeks, 3 days each week during both traditional and untraditional work schedules. A 10-question pre- and postsurvey was administered to each participant to determine knowledge of jobrelated stress before and after education (Appendix A). A number from a sliding scale 1-10 was used to describe the participant's response. If the participant score totaled between 10-30, participant recognized and handled job-related stress well; between 40-60, participant recognized and handled job-related stress moderately well; between 70-100, participant was encountering problems recognizing and handling stress that need to be resolved.

The sample size included 20 participants composed of primary care licensed vocational and registered nurses. There were 7 men 35% and 13 women 65% who participated in the program. The group was a diverse group in ethnicity. There were 10 Whites, 5 African Americans, 1 Asian and 4 Hispanics that made up the total of 20 participants. The demographic question that would have collected the level of education for each participant was deleted because the nurse manager feared that such question

would initiate conversations between participants concerning individuals pay rates and possibly cause conflict in the office for some of the register nurses.

Table 1 *Gender*

| | | | | | Cumulative |
|-------|--------|-----------|---------|---------------|------------|
| | | Frequency | Percent | Valid Percent | Percent |
| Valid | Male | 7 | 35.0 | 35.0 | 35.0 |
| | Female | 13 | 65.0 | 65.0 | 100.0 |
| | Total | 20 | 100.0 | 100.0 | |

Table 2

Ethnicty

| | | | | | Cumulative |
|-------|------------------|-----------|---------|---------------|------------|
| | | Frequency | Percent | Valid Percent | Percent |
| Valid | White | 10 | 50.0 | 50.0 | 50.0 |
| | African American | 5 | 25.0 | 25.0 | 75.0 |
| | Asian | 1 | 5.0 | 5.0 | 80.0 |
| | Hispanic | 4 | 20.0 | 20.0 | 100.0 |
| | Total | 20 | 100.0 | 100.0 | |

Table 3

One-Sample Test: Pre-education

| | Sig. (2- | | | | 95% Confidence Interval of the Difference | | |
|---------------|----------|----|---------|-----------------|---|-------|--|
| | t | df | tailed) | Mean Difference | Lower | Upper | |
| Pre-Education | 14.591 | 19 | .000 | 68.250 | 58.46 | 78.04 | |

Note. Test value 10.

Table 4

One-Sample Test: Post Education

| | | | | | 95% Confidence Interval of the Difference | | |
|----------------|--------|----|-----------------|-----------------|---|-------|--|
| | t | df | Sig. (2-tailed) | Mean Difference | Lower | Upper | |
| Post-Education | 11.816 | 19 | .000 | 42.750 | 35.18 | 50.32 | |

Note. Test value 10.

Presurvey data for 20 participants were accounted for and included in the analysis. The pre- and postsurvey scores were placed in SPSS (Appendix C). The significance threshold was set at 0.05 = 5%. P value = <.001. The paired t test was conducted to determine if there was an increase in knowledge of stress recognition in primary care nurses by comparing the pre- and postsurvey results. The results suggest that nurse's knowledge of recognizing symptoms related to work-place stress increased after participating in the EBP. Participants knowledge in recognizing signs regarding jobrelated stress increased significantly after the EBP. The presurvey mean score was 78.25 with a standard deviation of 20.918 which indicated participants were encountering problems recognizing job-related stress. The postsurvey mean was 52.75 with a standard deviation of 16.180 which indicated that after the EBP, there was an increase in the participant's knowledge to recognize signs of job-related stress.

Unanticipated limitation

An unanticipated limitation of the project was the social distancing and stay-at-home order that was executed during week three of the project, due to the COVID-19 pandemic. All 28 participants were fortunate enough to attend the project's power point presentation but only 20 participants were able to complete and return the postsurvey that

was evaluated and analyzed before the clinic closed for furlough. These eight missing surveys that would have impacted the total results could have possibly resulted in a profound change in the scores outcome.

The implications of the EBP included providing primary care nurses with education to increase knowledge for recognizing symptoms of job-related stress. Before the project, there was no formal education readily available to the individual nurses that focused on stress recognition of job-related stress. By offering an educational presentation in a convenient setting and during untraditional times, primary care nurses were able to access education to increase their knowledge of signs regarding stress recognition. Educational programs can be a driving force to improve nursing practice (Idress & Abdul-Sattar, 2015). Facilities that elect to implement a synthesized educational EBP to increase nurse's knowledge of recognition regarding signs of job-related stress can potentially provide positive social changes such as increase retention rates.

Recommendations

The goal of this EBP was to determine if primary care nurse's knowledge increased regarding recognizing signs of job-related stress after an educational EPB. The proposed recommendation is to use an evidence-based educational training to increase knowledge in primary care nurses regarding recognition of signs regarding job-related stress. The findings are consistent with both, the JD-R theory that offered an explanation about how increase job demand and limited resources may affect job-related stress and the Lewin's change theory which created a perception that there is a need for change, a move towards the change and finally, solidifying the change (desired behavior) as a new

norm. I recommend that the project site include an educational EBP in their annual competencies for nursing staff. Therefore, the hope is that primary care facilities will consider using educational trainings to increase the knowledge of primary care nurse's recognition of signs regarding job-related stress and to promote stress coping strategies to handle stress.

Strengths and Limitations of the Project

The strength of the educational EPB was the support provided by the nurses and management team to ensure that everyone who wanted to participate in the EBI was scheduled to do so. One unanticipated limitation of the project was that due to a world-wide virus (COVID-19), executive orders to stay at home were put in place which affected 8 out of 28 participants from completing the postsurvey to be included in the final results. The communication between the participants and office managers who were collecting the postsurvey played a significant role in the outcome of the project. Recommendations for future projects and similar topics is to add the learning material to a webinar for the convenience of participants that would like to participate but unable to physically do so.

Summary

The nurse managers were responsible for collecting all participant's pre- and postsurvey results in a locked suggestion box. 28 participants voluntarily attended the presentations and completed the presurvey, only 20 participants were able to complete the postsurvey. I was surprised to find that 20 of the 20 participants response to one question on the presurvey (I can't honestly say what I really think or get things off my chest at work) was the same answer, number one on the sliding scale. The post results revealed that there was an increase in knowledge of the primary care nurses to recognize signs regarding job-related stress after completing the EBP. The barrier that was identified was that the presentation was voluntary. Therefore, out of 45 nurses working at the clinic, only 28 nurses chose to participate in the project. Recommendations include making the educational training mandatory by adding the educational training to the clinic's nurse annual competencies check-off. A strength of the project was that all stakeholders and staff (even those that chose not to participate) were supportive and offered their assistance to ensure that the project was a success. A limitation of the project was that the project was limited to a smaller primary care facility and a smaller scale of primary care nurses. Further research is needed to identify other strategies to increase knowledge of nurse's recognition regarding signs related to job-related stress.

Section 5: Dissemination Plan

Institutional Level

The plan for dissemination related to the DNP project included a 1-hour oral presentation for the stakeholders (Physicians, Nurse Practitioners and Nurse Managers) at the project site. The purpose of the presentation was to provide the site's leadership an opportunity to hear the experience gained during the EBP and the results of the evaluation. A poster board in the staff's meeting room was useful to disseminate information and highlight the results of the EBP. A complete manuscript of the power point education presentation was submitted so that the education can be utilized by current and future nurses annually in competency trainings moving forward.

Analysis of Self

During the DNP studies and project, I experienced growth in understanding research and disseminating research into practice. The dissemination of an educational EBP is the driving force for delivering information so that health care staff, researchers and policy makers can obtain knowledge. With increased recognition of signs regarding job-related stress, health care providers (such as myself) will have the necessary tools readily available to improve self-care, patient care, and impact positive social change. Practicing as a nurse leader and a scholarly practitioner, I was able to increase my knowledge of stress recognition, improve my skills as a nurse leader, promote collaboration with other health care providers, and positively impact outcomes of others who were guided by an evidence-based practice project.

Practitioner

In my professional practice, educating nurses has always been a calling. I have watched many great and experienced primary care nurses terminate roles and leave the nursing professional due to high levels of job-related stress and the lack of knowledge to recognize signs of job-related stress. Throughout the doctoral project, I have gained an increase knowledge of planning initiatives, organizational operations, research and implementation of evidence-based practices.

My original DNP project proposal was based on a small privately-owned clinic that changed ownership shortly after receiving an approval of the project's premise. What seem to be a setback turned into a comeback for the project's targeted population. Not only did the project impact primary care nurses at the project site, other collaborating physician's primary care nurses also benefited from the project through word of mouth of actual participants. Networking with nurses and stakeholders from other facilities was not an intended goal for this project but became a positive outcome. Although the primary care nurse's roles are similar, the manner in how each facility address recognition of signs regarding job-related stress is different. Prior to the project, I found that many primary care clinics are not anticipatory. As a DNP student, I find that being able to anticipate challenges and plan accordingly decreases job-related stress and other staff issues.

Project Manager

The role of the project manager is a learning experience. Although this was not the first time that I was the lead person on a project, it was the first time that I was the lead on a project with this number of staff, stakeholders, and level of professional investment. My project location is not a facility that I am familiar with in the terms of facility policies and procedures. The staff was helpful in explaining how their facility operated systematic and navigated through day to day challenges. Doing this project, I learned that similar problems exist in other local facilities and that this project might impact many primary care nurses locally.

Working with the staff required me to have an open mind and learn about different practices that are currently in place. Presenting drafts of the project facilitated rapport between myself and the staff members. They were excited that I listened to their jobrelated concerns, incorporated their feed-back and allowed them to fully participate in the completion of the project.

Scholar

The role of the scholar in the project required utilizing all cumulative knowledge obtained through education and job experiences leading up to implementation of this project. Conducting the DNP project was different from all other projects that I have been a part of in both, professional and personal. Conducting a literature review was not a new task but was different than any other because of the DNP guidelines.

This was the first time that I had collected, organized and evaluated evidence for the purpose of a project. This project was initially challenging for me because it was easier for me to be critical of my own work than it was of another individual's work. In addition, I found it challenging to implement all components of the criteria which included determining if quality and strength of the literature was appropriate. Although

throughout the program's coursework, assessing levels of evidence was implemented into assignments, using a matrix was a tasking effort.

Project Completion

Completing this project faced very few challenges. One challenge that I predicted was developing a synthesize educational plan that assist primary care nurses with increase knowledge related to recognizing signs of job-related stress. This was a challenge because individuals had a different learning style and to identify one teaching style that will cater to all learning styles was not an easy task.

Thinking about the completion of this project produced some mild anxiety. However, the thought of delivering a quality project to the participants and stakeholders who invested in me offered a sense of self-fulfillment. I understand how important time and resources are. My goal was to complete a high-quality final project. Collaborating with the nurse managers were imperative to ensure that a foundation for a well-rounded project was established to meet the needs of the practice site. This experience enhanced my skills in research, collaboration and provided an EBP plan that increased the knowledge of nurses to recognize signs of job-related stress. Although completing this project came with some challenges, the reward of the experience was greater.

Summary

The nursing profession is stressful and has some job-related stressors. Creating an educational EBP to increase the knowledge of nurses regarding recognition of signs regarding job-related stress will bridge the gap between 1) nurses learning in a structured setting to recognize job-related stressors and 2) how nurses handle job-related stress.

After completing a thorough literature review on recognizing signs of job-related stress, I created an EBP to increase primary care nurse's knowledge of recognizing signs regarding job-related stress. The stakeholders were excited about the project that was incorporated into their facility and the change that it promoted in the staff's morale. According to Advisory Board (2017), educational modeling of an EBP is essential to prepare nurses to handle job-related stress.

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Appendix A: Workplace Stress Survey with attribution to the American Institute of Stress

| Enter a number from the sliding scale below, which best describes you. | | | | | | | |
|--|--|--------------------------------|---------------------------------|--|--|--|--|
| 1 | 2 3 4 | <u>5 6 7</u> | 8 9 10 | | | | |
| STRO | NGLY DISAGREE | AGREE SOMEWHAT | STRONGLY AGREE | | | | |
| If you | score between 10-30, y | ou recognize and handle str | ress on your job well; between | | | | |
| 40-60, | 40-60, moderately well; 70-100 you are encountering problems that need to be resolved. | | | | | | |
| 1. | I can't honestly say what I really think or get things off my chest at work. | | | | | | |
| 2. | My job has a lot of res | sponsibility but, I don't have | e very much authority | | | | |
| 3. | I could usually do a m | uch better job if I were give | en more time | | | | |
| 4. | I seldom receive adequ | uate acknowledgement or ap | ppreciation when my work is | | | | |
| | good. | | | | | | |
| 5. | In general, I am not pa | articularly proud or satisfied | with my job | | | | |
| 6. | I have the impression | that I am repeatedly picked | on or discriminated against at | | | | |
| | work | | | | | | |
| 7. | My workplace environ | nment is not very pleasant o | r safe | | | | |
| 8. | My job often interfere | s with my family and social | obligations, or personal needs. | | | | |
| 9. | I tend to have frequent | t arguments with superiors, | co-workers or customers | | | | |
| 10 | . Most of the time I feel | I have very little control ov | ver my life at work | | | | |
| Add u | Add up the replies to each question for your TOTAL JOB STRESS SCORE | | | | | | |

Appendix B: Survey Results

| Participant's ID | Pre / I | Post Survey Scores |
|------------------|---------|--------------------|
| Participant #1 | 75 | 45 |
| Participant #2 | 100 | 60 |
| Participant #3 | 70 | 30 |
| Participant #4 | 80 | 60 |
| Participant #5 | 85 | 40 |
| Participant #6 | 85 | 75 |
| Participant #7 | 70 | 50 |
| Participant #8 | 100 | 60 |
| Participant #9 | 25 | 25 |
| Participant #10 | 60 | 55 |
| Participant #11 | 100 | 70 |
| Participant #12 | 90 | 75 |
| Participant #13 | 90 | 60 |
| Participant #14 | 80 | 55 |
| Participant #15 | 85 | 70 |
| Participant #16 | 75 | 55 |
| Participant #17 | 70 | 45 |
| Participant #18 | 30 | 30 |
| Participant #19 | 100 | 25 |
| Participant #20 | 95 | 70 |
| | | |

Paired Samples Statistics

| | | Mean | N | Std. Deviation | Std. Error Mean |
|--------|-----------------------|-------|----|----------------|-----------------|
| Pair 1 | Pre-Education Results | 78.25 | 20 | 20.918 | 4.677 |
| | Post-Education | 52.75 | 20 | 16.180 | 3.618 |

Paired Samples Correlations

| | | N | Correlation | Sig. |
|--------|-------------------------|----|-------------|------|
| Pair 1 | Pre-Education Results & | 20 | .583 | .007 |
| | Post-Education | | | |

Paired Samples Test

Paired Differences

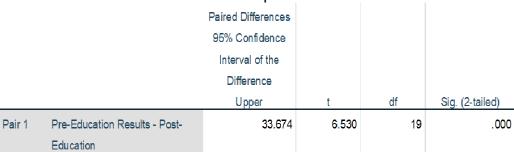
95% Confidence
Interval of the
Difference

Mean Std. Deviation Std. Error Mean Lower

Pair 1 Pre-Education Results - 25.500 17.464 3.905 17.326

Post-Education

Paired Samples Test



Paired Samples Statistics

| Mean | N | Std. Deviation | Std. Error Mean | |
|-------|----|----------------|-----------------|--|
| 78.25 | 20 | 20.918 | 4.677 | |
| 52.75 | 20 | 16.180 | 3.618 | |

One-Sample Test

| Test Value = 10 | | | | | | | | |
|-----------------|----|-----------------|-----------------|-------------------|----------|--|--|--|
| | | | | 95% Confidence | Interval | | | |
| | | | | of the Difference | | | | |
| t | df | Sig. (2-tailed) | Mean Difference | Lower | Upper | | | |
| 14.591 | 19 | .000 | 68.250 | 58.46 | 78.04 | | | |

One-Sample Test

| | Test Value = 10 | | | | | | |
|----------------|-----------------|----|-----------------|----------------------------|------------|-------|--|
| | | | | 95% Confidence Interval of | | | |
| | | | | | Difference | | |
| | t | df | Sig. (2-tailed) | Mean Difference | Lower | Upper | |
| Post-Education | 11.816 | 19 | .000 | 42.750 | 35.18 | 50.32 | |