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Stress First Aid Implementation to Address Stress Among Acute Care Nurses

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College of Nursing

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Executive Summary: Staff Education Project
Stress First Aid Implementation to Address Stress Among Acute Care Nurses
by
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Summary

Today's healthcare systems are increasingly challenged to maintain healthy nursing workforces, particularly in the often highly charged environments of acute care settings in which mental distress is a key issue (Efendi et al., 2021). A strategic initiative to implement the Stress First Aid (SFA) framework as a primary intervention modality for mental health issues among acute care nursing staff is suggested in this executive summary. SFA's approach includes the integration of the Stress Continuum Model as its central measurement tool in tandem with evidence-informed management processes specially designed for healthcare environments (Watson et al., 2020). The initiative typically transitions mental health support within an organizational setting from standard reactive crisis intervention to anticipatory intervention strategies.

Organizational Change Imperative

The necessity for implementing structured stress management interventions emerges from multiple converging factors that threaten both workforce stability and care delivery quality. Contemporary nursing workforce data reveal concerning patterns of psychological distress, with healthcare workers demonstrating significantly elevated rates of depression and anxiety compared to general population baselines (De Kock et al., 2021). The recent global health crisis intensified pre-existing occupational stressors while simultaneously revealing substantial deficiencies in organizational support infrastructure for nursing mental health maintenance (Labrague & De Los Santos, 2020).

Financial implications of nursing workforce instability present compelling organizational concerns. Current estimates position nurse replacement costs between

\$40,000 and \$100,000 per departure, encompassing recruitment, orientation, and productivity restoration expenses (NSI Nursing Solutions, 2022). Traditional employee assistance programming has demonstrated limited effectiveness in addressing the specialized stressor profile characteristic of acute care environments, necessitating targeted interventions designed specifically for healthcare contexts (Shanafelt et al., 2020).

Evidence Base and Community Context

Regional healthcare networks report parallel workforce sustainability challenges, with annual nursing turnover rates consistently exceeding 20% across comparable institutions (NSI Nursing Solutions, 2022). Community mental health utilization data indicates substantial increases in healthcare worker engagement, suggesting widespread psychological distress among regional healthcare personnel. Survey data from acute care nurses shows clinically significant anxiety symptoms in approximately 68% of respondents and depressive symptomatology in 58% of assessed individuals, substantially surpassing general population prevalence rates (De Kock et al., 2021).

Scientific Foundation for Intervention Selection

The selection of SFA as the first intervention approach is a product of a detailed consideration of evidence-based treatments for healthcare worker mental health. Watson et al. (2020) created the first framework for systematic early intervention procedures and systematic stress recognition, specifically for healthcare environments. Their research demonstrated measurable improvements to intervention if recognition of stress occurs early in the process of psychological distress onset to inhibit escalation to higher-severity

mental health issues. Peer support programs with standardized procedures have also demonstrated universal effectiveness in medicine. Rink et al. (2022) demonstrated enhanced healthcare worker mental resilience with systematic peer support programming, in which subjects demonstrated enhanced ability to cope and reduced symptomology of stress. In a similar case, Cohen et al. (2023) examined various healthcare systems' wellness intervention frameworks and showed cross-universally improved burnout minimization and occupational satisfaction optimization.

Logic Model Framework for Organizational Change

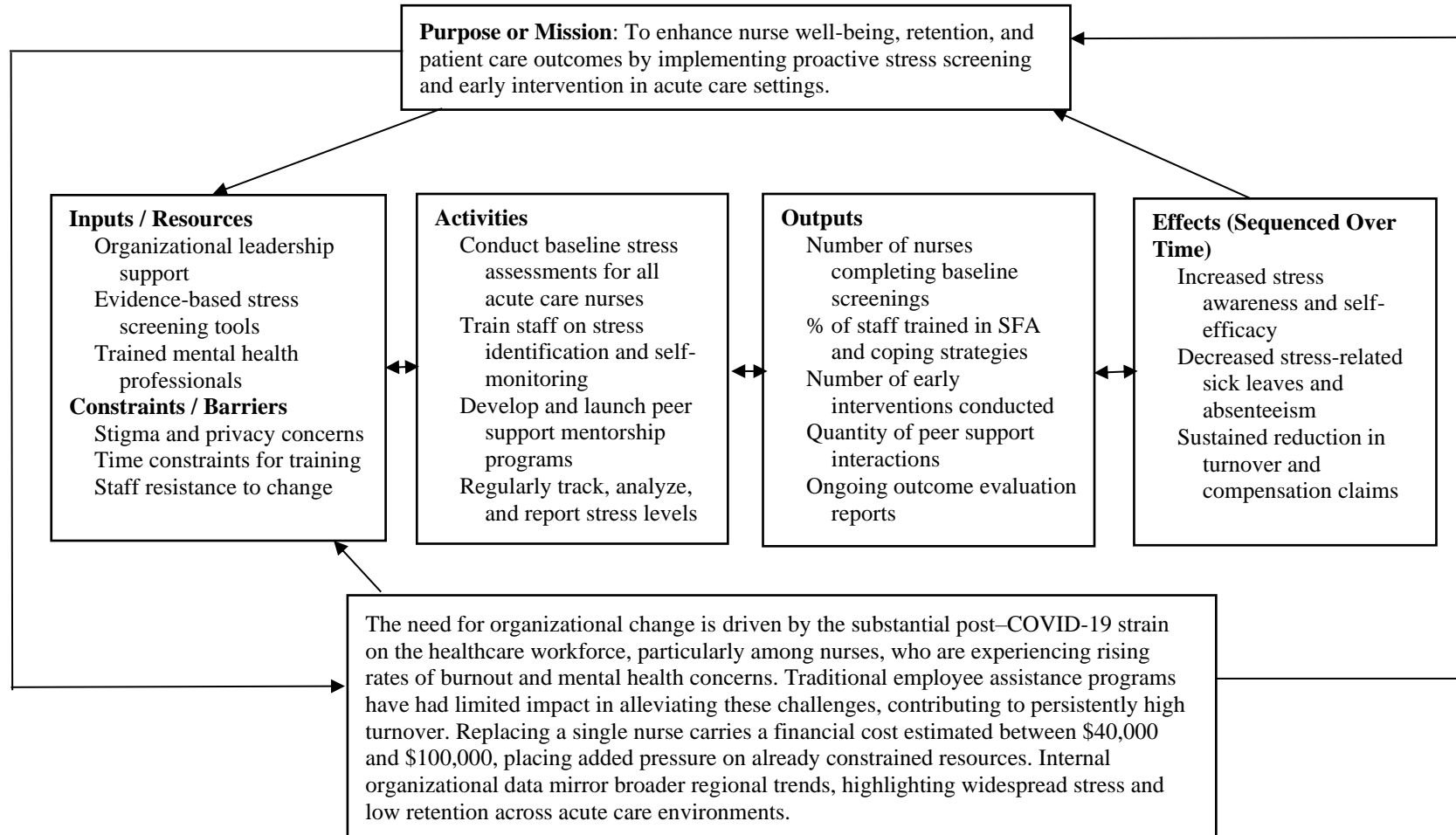
The SFA program adheres to a logic model framework, aligning inputs, activities, outputs, and outcomes to facilitate planned implementation and also assist with checking (see Figure 1). Leadership commitment and financial investment are essential inputs, along with stressed SFA procedures and relevant tests and measures for assessing them, full training packages and instruction modules suitable for nursing staff, functional information technology to aid in data gathering and tracking, and access to skilled mental health experts who are well-qualified to deal with stress (Watson et al., 2020).

Program activities encompass comprehensive baseline stress assessment using the Stress Continuum Model for all acute care nursing personnel, educational training sessions on stress recognition and self-assessment, peer support program development through train-the-mentor initiatives, regular monitoring of stress data and analytical processes, and evidence-based early intervention processes for nurses identified as at-risk for stress-related complications (Rink et al., 2022).

Expected short-term outcomes within 6 months include increased awareness of stress symptoms among nursing staff, improved self-efficacy for stress management, enhanced peer support relationships, reduced acute stress episodes, and increased utilization of available mental health resources. Medium-term outcomes between 6 and 8 months encompass measurable reduction in self-reported stress levels, decreased absenteeism, improved job satisfaction scores, reduced turnover intentions, and enhanced team cohesion across nursing units (Cohen et al., 2023).

Figure 1

Stress First Aid Program Logic Model Framework



Strategic Organizational Alignment

The proposed initiative demonstrates comprehensive alignment with core organizational priorities and foundational values. The institutional mission emphasizing safe, compassionate, high-quality care delivery receives direct support through this program, as psychologically healthy nursing staff demonstrate superior clinical judgment, enhanced patient interaction quality, and reduced medical error rates (Efendi et al., 2021).

Risk Analysis and Mitigation Planning

Implementing a program of this nature presents several challenges and requires proactive solutions. Staff resistance may arise due to concerns about privacy during mental health screening or fear of stigma associated with psychological assessment (Shanafelt et al., 2020). Inconsistencies in how the program is applied across nursing units can weaken overall fidelity and effectiveness, while training and early rollout phases may temporarily reduce productivity.

Operational risks also include limited capacity within mental health support services and the possibility of legal liability if psychological distress among staff is not managed effectively. Mitigation strategies should be multifaceted. These include consistent and transparent communication to emphasize privacy safeguards and the benefits of participation, phased implementation to allow for adjustment and refinement, and strong data security supported by thorough confidentiality training. Partnerships with community mental health providers can further expand support capacity (Cohen et al., 2023). Ongoing evaluation and outcome monitoring remain essential to identify risks

early, guide timely interventions, and maintain engagement from all stakeholders throughout the process.

Organizational Value Proposition

Implementing SFA represents a strategic investment with strong potential for financial return. Evidence suggests that reducing nursing turnover by 20% through effective stress management interventions could yield annual savings of more than \$400,000 in a 100-nurse acute care facility (NSI Nursing Solutions, 2022). A decline in stress-related workers' compensation claims, which otherwise significantly contribute to insurance premiums and productivity losses, results in additional cost benefits.

Increased nursing psychological well-being directly correlates with improved patient safety results and fewer medical error occurrences. Nurses who are psychologically distressed show a higher risk of medication error, impaired clinical observation accuracy, and reduced decision-making abilities (Efendi et al., 2021). The suggested program eliminates the quality and safety issues, and improves patient results and organizational reputation in the healthcare community.

Stakeholder Engagement and Role Definition

Effective program delivery requires cross-functional participation from stakeholders who possess complementary organizational authority and skills. Executive management provides administrative direction and approves program funds, which is necessary for aligning the program with institutional priorities and objectives. Nursing administrative personnel, including nursing directors and unit managers, contribute

invaluable frontline experience and are also important agents for staff participation and buy-in (Rink et al., 2022).

Mental health professionals, including psychologists, clinical counselors, and psychiatric nursing specialists, have expertise in evidence-based assessment and intervention necessary for successful program provision. Human resources staff add a special dimension of expertise concerning retention analytics, turnover cost analysis, and employee wellbeing policymaking and are still responsible for organizational metric tracking.

Information technology departments are responsible for creating and sustaining stress assessment sites and data monitoring systems and for adhering to security needs and accessibility standards (Watson et al., 2020). Frontline nurses in acute care are key program beneficiaries and supply important feedback on program acceptability and effectiveness, and training and development professionals create and facilitate inclusive education programming on the topics of stress recognition, self-monitoring skills, and SFA intervention techniques.

Technology Infrastructure and Educational Requirements

Project implementation requires strategic information infrastructure with systematic evaluation supporting data capture and intervention tracking functions. Investment needs for the organization involve evidence-based software platforms for stress screening with the current integration of existing electronic health records without compromising on data security and accessibility compliance levels. Mobile application technology forms a key element of connectivity supporting nursing interaction with SFA

procedures via user-friendly applications on smartphone platforms for completing assessments in break times (Labrague & De Los Santos, 2020).

Comprehensive educational programming encompasses multiple competency domains, including stress recognition and assessment methodologies, SFA intervention techniques, technology platform utilization, and peer support skill development. Training delivery employs diverse modalities accommodating varying learning preferences and scheduling constraints, including online educational modules, interactive workshop sessions, simulation-based training experiences, and mentorship programming pairing experienced personnel with newly trained staff members (Watson et al., 2020).

Regulatory and Legal Compliance Considerations

The implementation process needs to be thoroughly managed for regulatory, legal, and labor relations considerations to ensure program compliance and conflict prevention. Data gathering and storage procedures should adhere strictly to Health Insurance Portability and Accountability Act standards to ensure nursing staff's health information confidentiality and privacy. The program design focuses on nonpunitive practices to ensure the results of assessments are for aiding in resource distribution and provision of assistance and not for disciplinary or performance consideration purposes (Shanafelt et al., 2020).

Projected Outcomes and Impact Assessment

The SFA program anticipates key organizational and community outcomes across several different areas of measurement. Prospective organizational outcomes include 15%–20% reductions in nurse turnover rates, 25% improvements in job satisfaction

measures, 20% reductions in workers' compensation for work-related stress, and enhanced measures of patient safety through reduced numbers of medical errors due to stress (Cohen et al., 2023). Financial projections indicate a successful return on investment within a 12-month period through reduced turnover costs, reduced rates of absenteeism, and improved productivity measures. Stronger mental health and psychological well-being organizational culture increase recruitment success and professional standing within community healthcare settings (NSI Nursing Solutions, 2022).

Social Impact and Diversity Considerations

This program is a significant contribution to positive social change through deliberate resolution of healthcare workforce challenges impacting community health quality and access. This program encourages the values of diversity, equity, and inclusion through equal distribution of mental health services and support services to all of the nursing workforce regardless of experience, culture, or population characteristics (De Kock et al., 2021). The SFA framework identifies and responds to diverse nurse stressor interactions from varying cultural contexts, experience levels, and life circumstances. Educational initiatives incorporate culturally responsive practices of nursing workforce diversity to ensure equal assistance service delivery (Woo et al., 2020). Through assistance with workforce stabilization and a focus on enhancing job satisfaction, this project assists in broader healthcare equity through sustaining a healthy and motivated staffing to provide consistent quality care to all populations. The program's success

creates a replicable model for healthcare organizations to adopt, assisting in systemic improvement of healthcare worker well-being, and professional sustainability.

Implementation Summary

SFA for acute care nurses offers answers to workforce sustainability's fundamental challenges and moves healthcare settings closer to evidence-informed mental healthcare. Through systematic application of the Stress Continuum Model to mental health checking and selective management intervention, the program is a strategic workforce wellbeing investment. The program's sequential structure with technology integration, stakeholder interaction, education development, and outcome measurement permit systematic administration and ongoing improvement capacity. This program represents a significant shift towards promoting affirmative thinking in mental health, which supports the quality of patient care, enhances organizational sustainability, improves professional nursing practice, and fosters beneficial societal change while ensuring the sustainability of the nursing profession in acute care settings.

Conclusions

The SFA program for acute care nursing is a necessary and strategic workforce investment to address hard-wired problems of stress, depression, and anxiety in nursing practice. With systematic coverage of evidence-based stress assessment using the Stress Continuum Model and specifically matched management interventions, the program provides a strategic workforce investment in well-being for the benefit of the nurse, patient, and organization. This program is a necessary step towards preventative mental health care to enhance patient care quality, organizational sustainability, and professional

nursing practice while supporting positive societal change and nursing profession sustainability.

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