

Compassion fatigue and burnout are well-established experiences for oncology nurses, often resulting in distress and reduced job satisfaction and prompting nurses to leave the profession altogether. Multiple interventions have been developed to better support nurses experiencing these phenomena, with varying success.

#### AT A GLANCE

- In the complex care of patients with cancer, more resources are needed to support the health and well-being of oncology nurses.
- Psychiatric mental health advanced practice RNs can develop programs that address resilience, coping, moral distress, and compassion fatigue.
- A nurse-led interprofessional approach can support the emotional health and well-being of oncology nurses.

#### KEYWORDS

oncology nursing; mental health; compassion fatigue; advanced practice nurses

#### DIGITAL OBJECT IDENTIFIER

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# Caring for Staff

## The role of psychiatric mental health advanced practice RNs in supporting oncology nurses

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**Y**ears of nursing research have provided compelling evidence of the pressing need for healthcare organizations to intervene to prevent and mitigate the symptoms of burnout and compassion fatigue among oncology nurses (Potter et al., 2010). Burnout has been defined as a stress response to physical and mental demands of patient care (Braunschneider, 2013). Compassion fatigue, which is closely associated with burnout, develops when a nurse absorbs the pain and suffering of patients and subsequently suffers from their distress (Henry, 2014). Oncology nurses, who continually are exposed to the intense physical, mental, and emotional suffering of their patients, are particularly vulnerable to developing the characteristic symptoms of emotional exhaustion, cynicism, and depersonalization or emotional detachment (Braunschneider, 2013; Wentzel & Brysiewicz, 2018). These symptoms, which result from chronic distress, not only erode the well-being of nursing staff, but they also have been shown to negatively affect the quality of patient care (Henry, 2014; Spence Laschinger & Leiter, 2006). At the James Cancer Hospital and Solove Research Institute in Columbus, Ohio, the need to prevent and mitigate the impact of nursing burnout and compassion fatigue has been addressed through the development of a dedicated team of psychiatric mental health advanced practice RNs (PMH APRNs) solely to support staff.

#### The PMH APRN Team

A team of four APRNs was developed to support the psychosocial care of staff throughout a hospital system consisting of 316 beds, 8 ambulatory sites, and more than 1,500 nurses. Prior to the development of the team, PMH APRNs served as consultants for patients in the hospital and outpatient clinics. Eventually, patient demand for the team's services exceeded its capacity, resulting in the development of a new consultation model. Concurrently, the hospital administration recognized an increasing need for education and coaching of nurses on self-care practices for resiliency, creating a new opportunity for the PMH APRN team. This team has been supporting staff in this capacity since 2016.

PMH APRNs are recognized as advanced practice experts in the direct care of patient populations, nurses, nursing staff, and organizational systems (American Psychiatric Nurses Association, 2018; National Council of State Boards of Nursing APRN Advisory Committee, 2008). With expertise in mental health and years of experience as PMH APRNs within healthcare systems, the PMH APRN team is uniquely qualified to recognize, plan for, and respond to psychosocial and wellness issues on an individual or a systems level. The hospital's professional practice model, relationship-based care (RBC), is foundational for this role.

The role of the PMH APRN team is to enhance the knowledge, understanding, and practice of RBC, which informs and guides nursing care throughout the