

Preventing Nurse Burnout

Heidi Holtz PhD, RN

Barnes-Jewish College
Goldfarb School of Nursing
BJC HealthCare

1



Objectives

- Introduce Nurse Burnout and its impact on nurses' mental and physical health and patient care
- Present strategies for preventing and supporting nurses with burnout

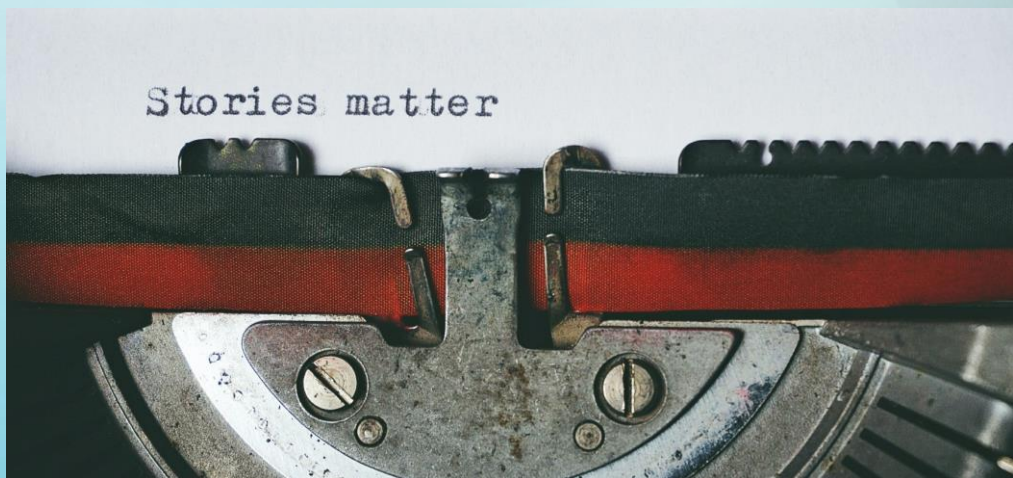
2

“People choose to become nurses for a variety of reasons, often influenced by personal values, experiences, and aspirations.”



3

My Story



4

“I think when I was a younger nurse, being numb was the thing, like you’re strong if you don’t let it affect you, but it always finds its way back. If you shut it behind a door, it does not go away. I was not bawling, but I was letting’ it out.”



5



“The reason it was so traumatic and stressful for me was I felt like I couldn’t save the patients, and I was just watching them slowly die in front of me.”

6



What makes nurses vulnerable to burnout?

How does it impact the care they provide?

7

Critical care nurses experience psychologically and morally challenging situations as part of their work.

Challenges in the Critical Care Workplace



CRITICAL CARE NURSES' MORAL RESILIENCE, MORAL INJURY, INSTITUTIONAL BETRAYAL, AND TRAUMATIC STRESS AFTER COVID-19

By Guy M. Weissinger, PhD, RN, Deborah Swavely, DNP, RN, Heidi Holtz, PhD, RN, Katherine C. Brewer, PhD, RN, Mary Alderfer, MSN, RN, CNML, Lisa Lynn, MSN, RN, CCRN, Angela Yoder, MSN, RN, CNL, CCRN-CMC, PCCN, EBP(CH), Thomas Adil, LPC, Tom Wasser, PhD, MEd, CIM, Danielle Cifra, BSN, RN, and Cynda Rushton, PhD, RN

8

Open communication and clear decision-making, along with valuing nurses' health and well-being, become necessary features of leadership character.

Ineffective communication skills and lack of transparency can diminish trust, which is vital to successful, sustainable working relationships.

Despite their challenges, nurses spoke about how they felt gratitude for acknowledgment from self and others and emotional support from peers and family.



TABLE 1: Summary of key themes

Key theme	Relevant participant responses
Not enough	"I was at this hospital for close to 45 years. I felt underappreciated the last 10-15 years. I did not feel nurses are valued." "I was there 39 years, and I did not feel appreciated." "I felt like I was being reprimanded for spending a little extra time with a patient."
Unsafe practices	"We had so many agency nurses who didn't know the procedures and protocols, which impacted nursing staff." "Too much expected, starting to become unsafe for the patients and the staff." "Frequently told to take unsafe patient ratios, which dramatically increased my stress during work." "It felt very unsafe and that I was being put into scenarios with little to no education, as were others."
Lack of leadership support and recognition	"I did not feel upper management was responsive to what was happening with my department. There were concerns, but they only gave the lip service, and I did not see any measurable changes made." "Manager did not follow through on concerns that I expressed. She lacked integrity and confidentiality." "Lack of support from management and was never appreciated as an RN by management or the hospital." "I felt like management did not adequately listen to employees' complaints and did not change in regards to complaints."
Insufficient resources	"I felt the facility was lacking in certain equipment and supplies for patient care." "Understaffed almost every shift." "Extremely hard to work 12-hour shifts when also have young children at home. There was no flexibility to work shorter hours." "I would be required to work a lot of overtime, which negatively impacted my work-life balance."

Institutional Factor: Workplace Violence



11

➤ [Health Care Manage Rev.](#) 2025 Jan-Mar;50(1):44-54. doi: 10.1097/HMR.0000000000000424.

Workplace violence: Insights from nurses' lived experiences

Gregory N Orewa, Ifeyimika O Ajaiyeoba, Nero Edevbie, Marla L White

Purpose: The purpose of this study is to understand the experiences of nurses with WPV and examine the scope and impact of this violence based on nurse's recollections.

Methodology/approach: Using qualitative interpretive meta-synthesis and the job demands-resources framework, we examined patterns in nurses' experiences of WPV. Our analysis (N = 401) of nurses' accounts from diverse sources-patients, colleagues, and supervisors across various locations and health care settings-provides deep insights into WPV dynamics.

Results: Four main themes were identified: (a) it comes with the job-patient and family violence are normal, (b) a vulnerability in nurse safety, (c) sexual harassment, and (d) poor treatment within the organization.

Conclusion: WPV against nurses is a deeply ingrained issue that impacts their psychological health and job performance. A stark need for health care systems to address and mitigate WPV is evident.

12



LATEST NUMBERS

Nonfatal injuries and illnesses, private industry:

2,569,000 Total recordable cases: in 2023

Fatal work-related injuries:

5,283 Total fatal injuries (all sectors): in 2023

13

Workforce Education Trends Report: Healthcare's Defining Moment: Retention, Education, and the Skills to Meet the Future

A Healthcare Workforce at a **Crossroads**



Beyond Burnout

Five years after the peak of the COVID-19 pandemic, the healthcare system is still feeling the aftershocks. Burnout remains high, turnover is accelerating, and the demands on workers have only intensified.



AI Reshapes Care With Promise and Pressure

At the same time, technology and AI are transforming the way care is delivered — offering promise, but also creating new skill demands and anxieties.



Demand Amid Strain

An aging Baby Boomer population is driving unprecedented demand for care, even as economic pressures squeeze both organizations and their employees.



Keeping Healthcare's Heart Strong

In this moment, the industry faces a defining question: how do we retain, support, and prepare the people at the heart of healthcare to meet both today's challenges and tomorrow's opportunities?



14

Healthcare's Retention Crisis Is Here

Healthcare employees aren't just burned out — they're planning their exit.

MORE THAN

HALF 

(55%) admit that they'll look for job openings, interview for, or switch to a new role in the next year, either inside (38%) or outside their organization (40%)

Employers report that younger, early-career employees and nursing assistants / personal care aides are the hardest individuals or roles to retain (43% and 42%, respectively).



Top Reasons for Planning Their Exit

Those that plan to look for a new role cite the following reasons:



inadequate compensation and benefits



burnout or emotional fatigue



a lack of career advancement, personal development, or education opportunities

The talent pipeline is leaking fastest among Gen Z and Millennials — those most critical to the industry's future.



This isn't a future threat. It's already happening, and means an overburdened system that Americans depend on:

The U.S. is projected to have a shortage of nearly

700,000

critical healthcare workers, including physicians, RNs and LPNs by 2037.

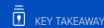
(HRSA, 2024)

Page 6

15

Retention Starts with Investing in Employees' Future

In 2025, healthcare employees aren't just looking for a paycheck. They're looking for a path forward.



Career development is no longer just a nice perk, but rather a loyalty driver.

ONLY

1 in 5

employees feel their employer is very invested in their long-term career success beyond their current role



AMONG THOSE WHO FEEL THAT THEIR EMPLOYER IS LESS INVESTED

55%

say that besides pay or salary, they feel this way because their employer doesn't offer or fails to communicate upskilling or education opportunities



YET, NEARLY

2 in 5

agree workforce training / education benefits are a reason they stay with their employer — a figure that rises to 61% among Gen Z



Page 7

16



Strategies to Prevent Nurse Burnout

- ✓ Peer Support
- ✓ Institutional Approaches
- ✓ Personal Approaches

17

Peer Support



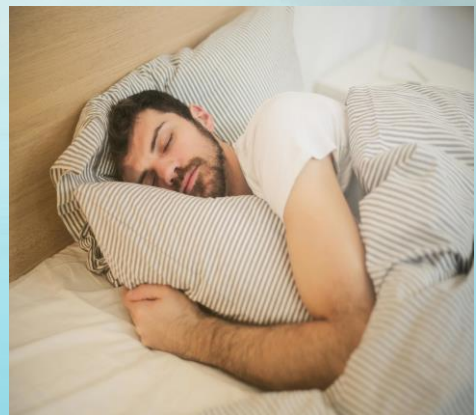
18



Institutional Approaches

19

Personal Approaches



20

You Are Amazing!



21

References

- Melnyk, B. M. (2020). "Burnout, Depression and Suicide in Nurses/Clinicians and Learners: An Urgent Call for Action to Enhance Professional Well-being and Healthcare Safety." *Worldviews Evid Based Nurs* **17(1): 2-5**.
- Holtz, H., et al. (2025). "Critical care nurses' perspectives on organizational betrayal by health systems during the COVID-19 pandemic." *Nurs Manage* **56(3): 33-42**.
- Holtz, H., et al. (2025). "Voluntary nurse turnover: An exploratory study of exit survey data." *Nurs Manage* **56(6): 30-36**.
- Strategic Education Inc. & The Harris Poll. (2021). Healthcare's Retention Crisis: Survey Shows High Turnover After Pandemic. Retrieved from [WorkforceEducationReportSep2025.pdf](#)

22