



"The terror and the pride": a theoretically informed, mixed methods study of the impact on redeployed nurses of working in ICU during the pandemic

Dr Pam Ramsay PhD, RN

Senior Lecturer

School of Health Sciences

University of Dundee



Background

Redeployed nurses (RDNs) typically had:

- Little or no critical care experience^{1,2}
- Limited choice or warning of their redeployment¹
- Widely variable opportunities for training, support & supervision²

N.b. Data collection: May 2021-2 (waves 2 and 3 of the pandemic)

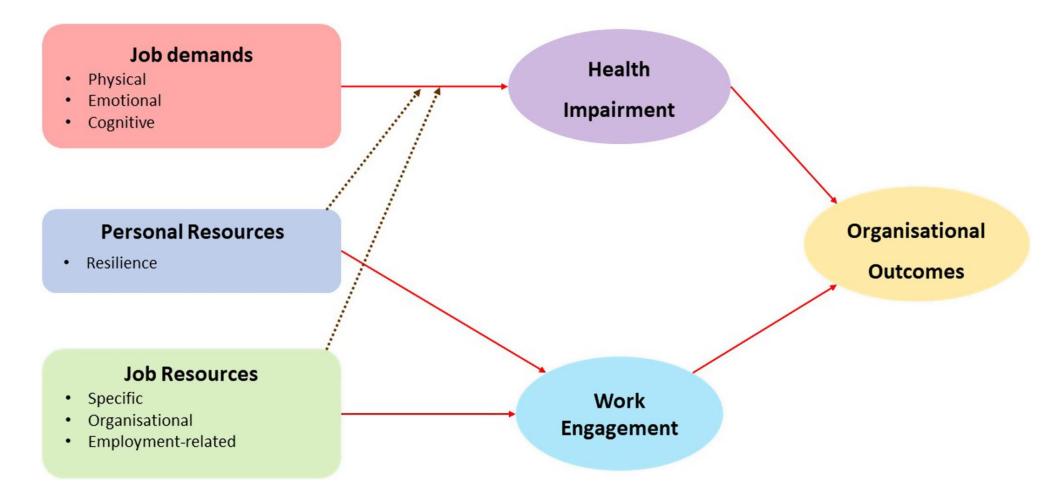
Aims

To understand the impact of the critical care pandemic work environment on **redeployed nurses** in terms of:

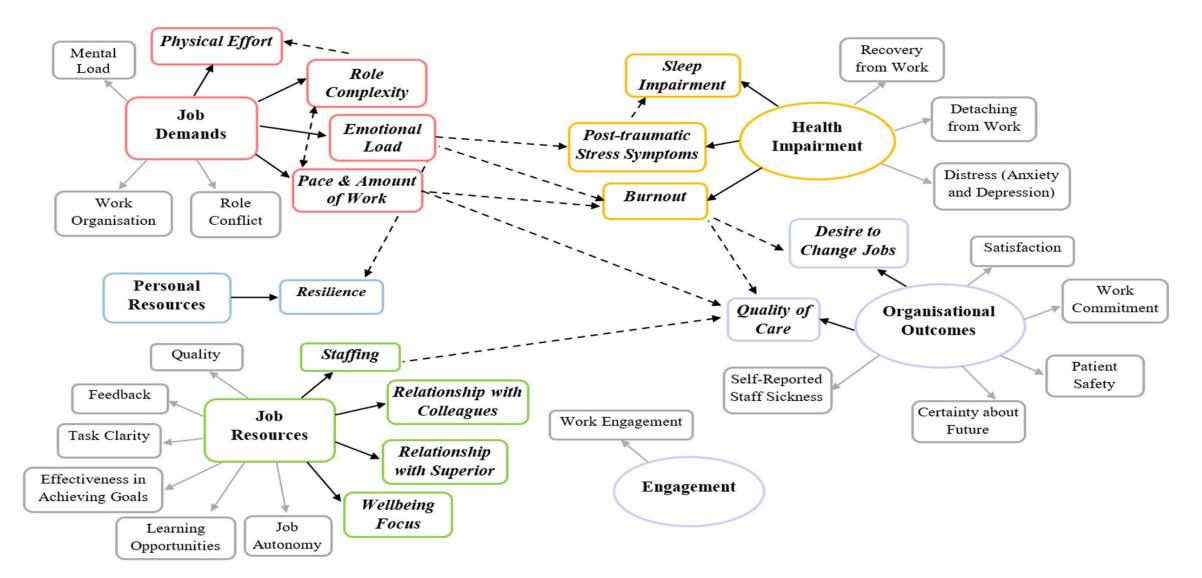
- Job demands
- Job resources
- Health impairment
- Organisational outcomes

Job Demands-Resource model³

Theoretical framework



Job Demand-Resources Model³



- → Salient themes for CCNs.
- Grey arrows indicate JD-R components that did not feature as salient themes for CCNs.
- ---► Bi-directional dotted arrows demonstrate a relationship between themes.

Methods

Survey (n=187)

 Raft of validated questionnaires aligned to the Job Demands-Resources Model

Interviews (n=16)

- Online or telephone interviews
- Topic guide structured around the Job Demands-Resources Model
- Interviews lasted 39-119 minutes

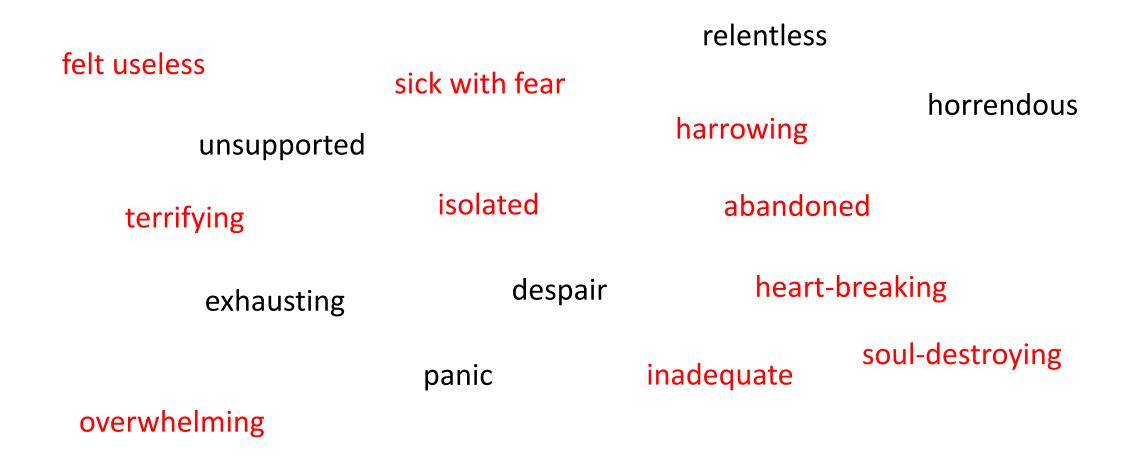
Data collection: May 2021-2 (waves 2 and 3 of the pandemic)

Participants

	Survey	Interview
Number of participants	187	16
Age (Mean (SD))	43 (11)	45 (9)
Gender: % Female	94%	75%
Nursing experience (years; mean (SD))	17 (11)	17 (11)
Band 5	63%	31%
Band 6	24%	31%
Band 7+	13%	38%

Inclusion criteria: Registered Nurses redeployed for ≥2 shifts

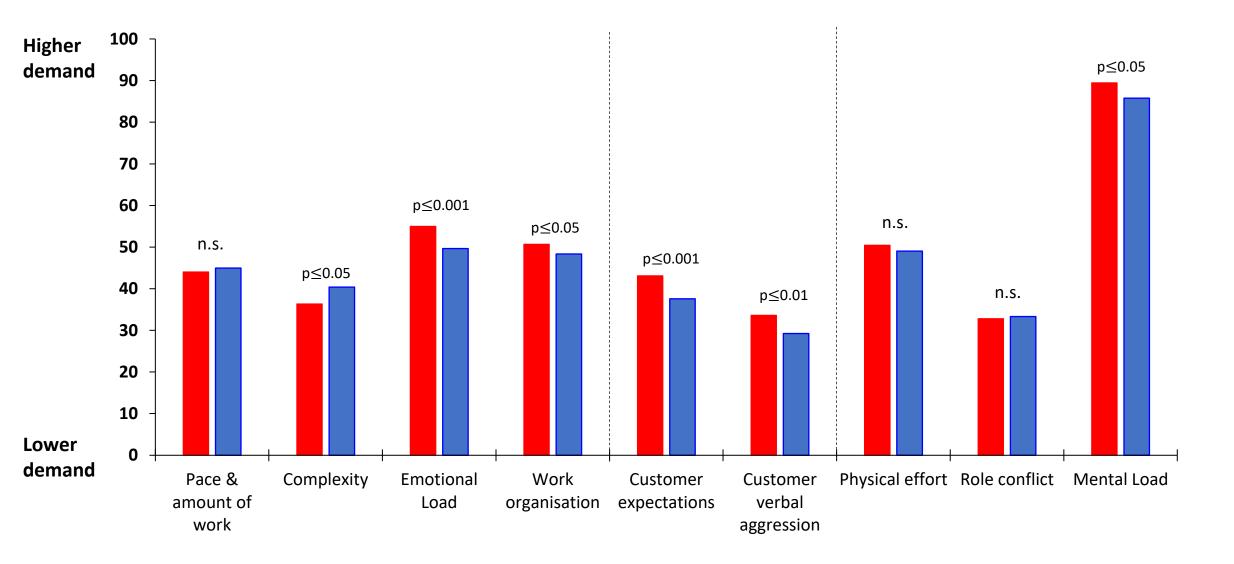
Free text survey responses: worst shift



Free text survey responses: best shift



Job demands: CCNs v's Redeployed nurses



Job demands

My anxiety was all around about *not knowing what I was doing*...with *new equipment, not having the training, or the prep*...just to have been thrown in there with two patients...

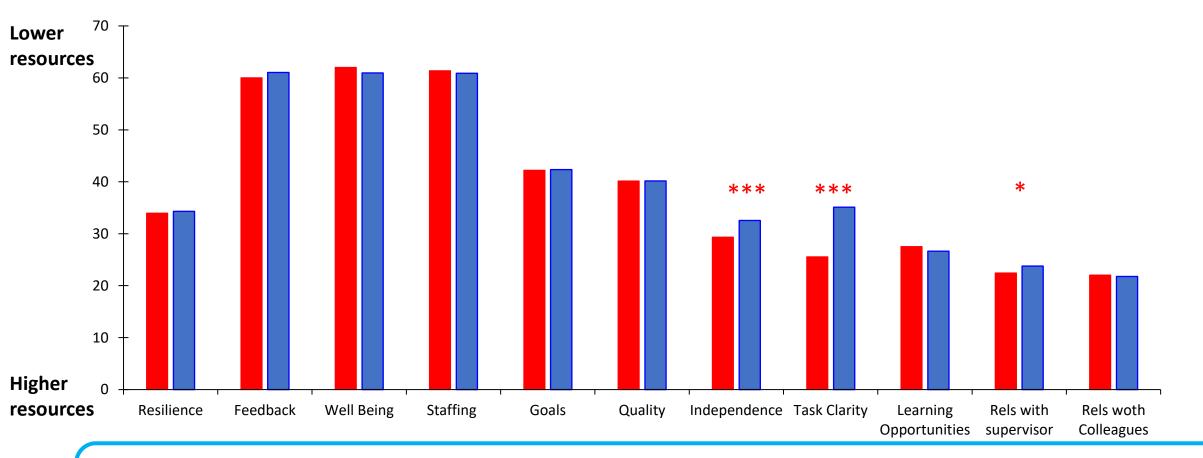
"I was double-checking, double-checking... *constantly...double-checking, double-checking.* I went home and night and thought, "I've done it wrong. Oh my God, what's going to happen?" *I doubted myself, every single minute*".

I hadn't been clinical (previous ICU nurse) for five years....I went in for my first half shift, I obviously hadn't done IV drugs, hadn't been near a ventilator or a haemofilter. That day, I was supernumerary with someone who was really sick, on a filter, on a ventilator, with a nurse who I seemed to know more than. Which was pretty scary."

Job demands

"...it's difficult to process a death, more so when you don't know if you contributed to it, in a sort of indirect way. *It's still my biggest struggle...I* don't know how many people I have inadvertently or indirectly caused harm or death to, purely because of what I didn't know, and the lack of time and support I had".

Job Resources in CCNs v Redeployed nurses



Redeployed nurses reported:

- The same level of resource on 8 out of 11 resources measured
- Lower resource on task clarity, less independence in their work and relationship with supervisors

Job resources

"...being split up as a team was really, really hard, *because wherever we got sent we were the only one*. So we never had a friend, an ear, someone to moan to, someone to understand...*I don't talk about my experiences a lot with other people because they don't understand"*.

"...hand on heart, it was one of the most wonderful experiences of my life. I saw people *so* sick, but I saw *staff who absolutely cared, not only about the patients but about us.*"

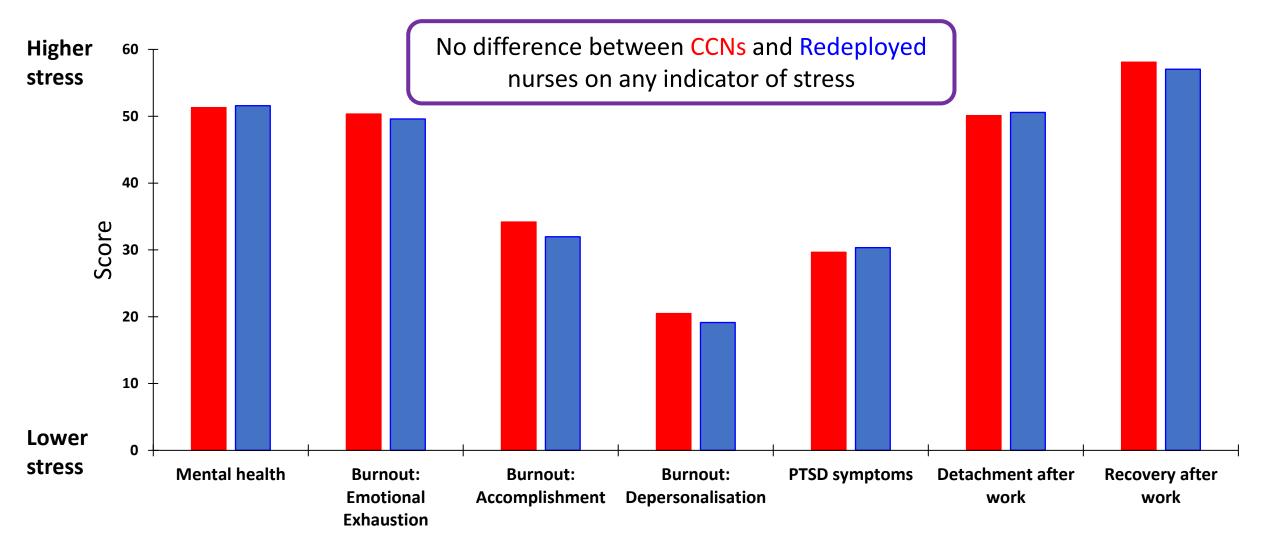
"some of them were...*you felt like you were almost a hinderance* to them. But definitely, we felt like *invaders* at times

Job Resources

"I was angry that I'd been put in that position. With no support. It was really tough. I couldn't go back in that situation...*I spoke to my senior charge nurse who was patronising, as if to say, I couldn't cope. And to this day, I still feel, well, a failure.*

"The senior charge nurse was wonderful and the unit manager also came down two or three times...especially at the start, to check that I was okay. *Both made it clear that if I had any issues, if there was any problems, that they were there*..

Health impairment in CCNs v's Redeployed nurses



Health impairment

"I cried a lot. It was the whole experience - I just hated it. I hated how I felt when I was at work, unsafe and just exhausted..."

"It was...extremely difficult to detach (from work). I didn't sleep, *I couldn't sleep, I would sleep for maybe four hours at a time*. *I wasn't eating,* I lost a stone in weight...*I was sick with worry and anxiety"*.

"I went at it with a really pragmatic attitude...we had endless patients pass away and I just thought, if I let myself get too emotionally involved, I'll just cry every day. But lately, I find myself...a bit stressed...less calm, and I've got less time for peoples' bullshit"

Health impairment

"...this has completely changed me as a person. When I first went back to the ward, I was uncontrollably upset...I think I was actually mourning myself as well as all the people that died, because I'm no longer that person...and I don't know if I ever will be the same person again".

Acknowledgement & support

"It felt like *we were a bank of staff to be sent anywhere*...and they just kept asking more and more from us. ITU were heroes, A&E were heroes...*but nobody acknowledged or recognised us*"

"... even just offering proper support or acknowledging that you did what you did would be a start...I'm not asking for like a red carpet and a hero badge, but just some compassion and some understanding would be nice."

References

- 1. Ballantyne H & Achour N (2023). The Challenges of Nurse Redeployment and Opportunities for Leadership During COVID-19 Pandemic. *Disaster Medicine and Public Health Preparedness, 17,* E134. doi:10.1017/dmp.2022.43
- Kennedy E Kennedy P, Hernandez J et al (2022) Understanding Redeployment During the COVID-19 Pandemic: A Qualitative Analysis of Nurse Reported Experiences. SAGE Open Nursing 8: 1-10. DOI: 10.1177/23779608221114985
- 3. Bakker AB & Demerouti E (2017). Job demands—resources theory: Taking stock and looking forward. Journal of Occupational Health Psychology, 22(3), 273—285. <u>https://doi.org/10.1037/ocp0000056</u>
- 4. Miller J, Young B, McCallum L et al (2023). "Like fighting a fire with a water pistol": A qualitative study of the work experiences of critical care nurses during the COVID-19 pandemic. Journal of Advanced Nursing doi.org/10.1111/jan.15773
- 5. Rattray J, McCallum L, Hull A, et al (2021) Work-related stress: the impact of COVID-19 on critical care and redeployed nurses: a mixed-methods study. BMJ Open doi: 10.1136/bmjopen-2021-051326