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Appreciation Day for Clinical Staff at VNA Hospice

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Abstract

VNA Hospice of the Central Coast is a nonprofit that was created back in 1951. The staff at VNA are visiting about 75,000 homes per year. Throughout the years the staff have been seeing patients who reached the requirement of having 6 months or less to live. Working with Hospice patients can be hard for everyone but, the staff at VNA are seeing the patients from good days and bad days. Depression is known to negatively impact the clinical staff at VNA Hospice. Staff are working long hours which leads to sleep disturbance and chronic stress. Some staff are also experiencing misdiagnoses of their mental health. Which causes the staff to have lower work performance, burnouts and suffering from compassion fatigue. The project is creating an Appreciation Day package for all of the clinical staff at VNA, to decrease some depression. The findings of the results shows that with the Appreciation Day package clinical staff have decreased some depression. With some changes to the program it could be possible to decrease more than just some depression. One recommendation towards the future of this project is to edit the project just a tad. Instead of just a care package being delivered, maybe making Appreciation Day into a day of letting the staff do activities that are stress relievers.

Keywords: VNA, hospice, depression, clinical staff, appreciation day

Agency & Communities Served

VNA Hospice of Central Coast's mission is, "dedicated to providing the highest quality health care to residents of the Central Coast by meeting their individual needs in a caring, effective, honorable, and accessible manner" (CCVNA, 2019). They provide quality of care to all patients throughout the California central coast and make sure they are well taken care of for their end of life term. VNA has many programs, with one program being a "volunteer program" that gives patients comfort through companionship, quiet time or even a light touch (CCVNA, 2019). This creates a high quality of life for the patient through their end of life. Hospice all around the central coast has a total of 3,487 volunteers (CCVNA, 2019). More and more patients are being admitted to the hospice program and volunteers are always needed to provide support to the patient. VNA will provide companionship when the family and the patient feels like that is what is needed. Most patients love having volunteers because it helps them feel less isolated.

Overall VNA has more programs than just the volunteer section; they also provide Cardiac Care, Diabetic Care, a Connections Programs, Orthopedic program, and lastly the Palliative Care Program (CCVNA, 2019). All of these programs follow the mission statement of the highest quality of care for their patients. VNA also has some community services that they provide like home care, travel immunization, wellness at work, health promotion program and school health (CCVNA, 2019). VNA makes sure to not only provide needs for their patients but the community as well.

There is not much on the demographics specifically for VNA but, there are nearly 60% of Monterey County residents who are Hispanic or Latino and 14% of the overall population is over the age of 65 (Vossel, 2020). Overall VNA hospice takes in all patients who meet the

criteria no matter the age, ethnicity or culture. All clinical staff are taking in about 75,000 patients each year.

Problem Description

Depression is usually focused on the patients in hospice, but the caregivers can also have major depression themselves. About 40% of hospice clinical staff are suffering from depression due to working with the dying (Ladner C, & Cuellar, 2003). Most staff in hospice are working with patients who have 6 months or less to live and this can take a toll on them. Family caregivers are usually misdiagnosed or ignored when it comes to their mental health (Ladner C, & Cuellar, 2003). It is hard for caregivers to receive treatment for depression when they are not taken seriously about their diagnoses. Only about 17% of hospice staff are treated for depression as of 2003 (Ladner C, & Cuellar, 2003). Clinical staff in hospice are not being diagnosed and treated for their mental health and this can affect their jobs.

Even though depression in hospice clinical staff is overlooked there are signs that can show the risks of the staff receiving depression disorders. The factors that contribute to depression in hospice staff is due to sleep disturbance, chronic stress and being misdiagnosed. Some consequences that staff face when dealing with depression is lower work performance, burnouts and compassion fatigue. When the clinical staff are going through depression this can affect the highest possible care they can give to their patients. Hospice patients are supposed to receive the best quality of care, but if the staff are depressed it is hard for them to provide that care.

Contributing Factors

Sleep Disturbance

When clinical staff are working long hours throughout the week where they are working day to night and sometimes on call. This causes the hospice staff to feel stress which causes insomnia at night for the staff (Carter, Dyer, & Mikan, 2013). Insomnia is a big deal for nurses who are working for hospice because it affects their inability to provide the best care for patients. Sleep is important to the clinical staff because it mediates stress, anxiety, tension and helps the staff regain concentration and energy for providing a better work performance (Carter, Dyer, & Mikan, 2013). When the hospice staff are having a poor sleep schedule it can make it harder to maintain positive energy for daily tasks.

Chronic Stress

When clinical staff at hospice are not experiencing an adequate amount of sleep this can lead to a high amount of chronic stress. Sleep is very important to mediate stress for nurses who are working long hours (Carter, Dyer, & Mikan, 2013). Stress can be from working an overload of cases or even just working with a dying patient who they have bonded with. Stress has shown contributing to nurses' burnouts to being absent from work (Hawkins, Howard, & Oyeboode, 2007). When the hospice staff is going through stress their mental state is being affected to where daily work tasks with patients are not being met.

Misdiagnosis of Mental Health

Hospice staff are being ignored or misdiagnosed when it comes to their mental health (Ladner C, & Cuellar, 2003). The reason that staff are not taken seriously when it comes to their mental health is because most people are only looking at the patient itself. Treatment and

diagnosis for caregivers for hospice are being underdiagnosed due to neglect (Ladner C, & Cuellar, 2003). Most of the staff at hospice are experiencing depression and are not receiving treatment for it. Depression causes the clinical staff to be in a sad mood or even lose interest in the work they are providing (Ladner C, & Cuellar, 2003). When nurses are not at their 100% it would be impossible for them to provide adequate care for the patients in hospice.

Consequences

Lower Work Performance

During the times that the hospice staff are going through depression, facing sleep deprivation and stress their work performance is not at 100%. They are going through the loss of interest towards their jobs and their patients (Ladner C, & Cuellar, 2003). When losing interest in their patients or their jobs this can affect the hospice mission statement to provide the patients the best quality of care. The nurses will work less hard, have short memory loss due to stress and will only provide less than 100% to the care of their patients (Ladner C, & Cuellar, 2003). It is hard to provide care to a dying patient when the nurses themselves are not being cared for physically, mentally or emotionally.

Burnouts

The nurses will feel burnouts when working during times of stress or depression because of the amount of energy they are using to work long shifts. Without adequate sleep or treatment they will experience very low energy during their work shift (Carter, Dyer, & Mikan, 2013). When working it is expected that every employee does their job correctly and making sure that the patients feel like you love your job is important. With low energy levels this causes the staff to feel worthless, have difficulty in thinking, concentration or even decision making (Ladner C,

& Cuellar, 2003). When working with hospice patients it is important to have the ability to concentrate and have good decision making because it is another person's life in their hands.

Compassion Fatigue

When clinical staff are feeling compassion fatigue it means they have absorbed all of the patients distress, trauma and fear (O'Neil, N.A). What this means is that there is only a certain amount of times that nurses can absorb so much compassion for patients before it starts to affect them personally. The hospice staff are always having empathetic responses to patients' pain and suffering and this can cause a lot of mental health issues for them (O'Neil, N.A). Hospice staff are supposed to have empathetic responses, but there is only so much compassion that can be given before it takes a toll on the clinical staff.

Problem Model

Contributing Factors	Problem	Consequences
Sleep Disturbance	Depression in Clinical Staff at VNA Hospice	Lower work performance
Chronic stress		Burnouts
Misdiagnosis of mental health		Compassion fatigue

Capstone Project Description and Justification

Capstone Project

The project addresses the issue of depression in hospice clinical staff; it is called “Appreciation Day” the project would have volunteers show up with long lasting gifts for the patient, staff and nurses. The volunteers will be able to spend some time with the patients and it will give the family a little break as well. The patient will receive some companionship outside

of the family which can build their quality of care. The capstone project would consist of a care basket individually made for each patient, nurse and staff. The supplies will be determined after a survey is conducted to understand what each person is interested in. The project will help promote more volunteers and companionship for the patients. Then there will be a post-survey to see if “Appreciation Day” was effective in increasing happiness and appreciation for patients, staff and nurses. Lastly, the project will help patients, staff and nurses feel appreciated and decrease depression within VNA.

Project Purpose

The purpose of “Appreciation Day” is to address depression in hospice clinical staff. It will increase the quality of life for patients and also show nurses and staff that their hard work does not go unnoticed. It would help staff feel appreciated for their hard work and show empathy towards the rewarding work they are doing. The clinical staff will have a day where they feel appreciated for the work they do and decrease any depression they may have. “Appreciation Day” main purpose is to decrease hospice staff's depression and create a more happiness effect. The items in the care package will initiate laughter, smiles and the feeling of a warm heart. It will help the clinical staff take a breather break for the long hours they are working to feel less burnt out. It will hopefully help the staff feel less compassion fatigue because they are having a nice happy moment. This package will help the staff feel appreciated, the feeling of comfort and worthiness.

Project Justification

The “Appreciation Day” idea would create a happy environment for the clinical staff and increase their quality of life. With hospice staff receiving an appreciation gift this can show that

their efforts are not going unnoticed (O'Neil, N.A). When the staff feels like their work is being noticed this can help increase their work performance. With the care package it can show that the nurses are feeling the staff appreciation and support from their fellow co-workers and supervisors (O'Neil, N.A). With an unexpected gift on “Appreciation Day” the staff and nurses will likely have decreased in depression. Staff and nurses tend to do the same thing everyday and they also see a lot of patients come and go through the program. With a gift dedicated to them, it will make their day just a little brighter.

Assessment Plan

The plan on measuring effectiveness is making a pre survey that asks if anyone has experienced depression within the year. Then compare the results with the post survey after the project is implemented to be sure that the staff and volunteers enjoyed their gifts and if it helped decrease depression. The survey will ask questions about their mental state to understand if depression decreased during this project, if they felt any positive feelings towards the project and if they would like to continue it. Creating a side by side chart for comparison of the pre and post survey to determine if the project was successful.

Expected Outcomes

The expected outcome will be decreasing clinical staff depression and increasing emotions like happiness and appreciation. Out of 250 clinical staff and volunteers the expected outcome is to see about 20% or more showing that the project was a success in decreasing depression. It is important to make sure everyone who is receiving a care basket is feeling more appreciated throughout that day. Overall, the results from the survey should say that it did

decrease depression and that the clinical staff would like to continue this project throughout their time at VNA.

Project Implementation

The project will first be implemented through a PowerPoint presentation on the project itself. The presentation will be presented to the Chair of VNA for approval, hopefully over the summer around July 2021. The project was approved earlier than expected, May of 2021 and was set to begin. A survey will be created through the website Survey Monkey for clinical staff and volunteers at VNA Hospice to understand if depression is an issue within that population. The survey will first be approved by Quinn Junghans the volunteer mentor by June 1st. The survey was then actually approved in May 2021 and was sent out right away by Quinn to all staff and Volunteers. The survey asks questions to determine the interests of all clinical staff and volunteers in the “Appreciation Day” care package and also asks them about their mental state. Quinn and Melody will adjust care packages accordingly once we are able to receive around 20 responses to the survey.

This will also begin the search for items which can either be purchased or find organizations that are willing to donate to the project. If it can not receive donations the project will be funded by either a grant or VNA can absorb the cost itself. The project was able to be absorbed through VNA with Quinn’s help and part of the project was also donated through Home Depot. Quinn and Melody sent a donation letter to Home Depot to donate about 17 succulents. This donation was approved in Oct 2021 and was able to be picked up by Quinn. The supplies that were absorbed by VNA itself were homemade cards, candy, flower pots, soil, moss and wrapping paper. Quinn and Melody sent an email to set up a weekly schedule for 2 Saturday

mornings for creating homemade cards and assembling the package. There were about 7 volunteers who showed up to help create 250 homemade cards. The cards took longer than expected so the volunteers, Quinn and Melody took about a handful of cards home to work on before the next Saturday when assembling the packages.

Quinn and Melody requested volunteers to help put all of the items together for the care package. The same amount of volunteers showed up the next Saturday and Quinn and Melody set up stations for the volunteers to be able to work efficiently. There was a station for flower pots, soil and succulents and there were 3 volunteers working on just that station itself to create 250 succulent pots. The next station was working on putting the flower pots in the wrapping paper with candy surrounding it. There were about 2 volunteers working on this station. The next station was 2 volunteers putting the homemade card in the envelopes and putting a hole punch in the card itself. This station was also in charge of tying the card around the package and placing them in boxes. The last station was Quinn and one other volunteer working on some last minute homemade cards that were not finished.

At the end it took about 7-8 volunteers that showed up and helped make this project possible in 4 hours. The package was then delivered to 3 different office locations for VNA clinical staff and volunteers. Quinn and Melody were able to set up a table full of the packages and pass out the gifts to the clinical staff working that day as well. Any left over packages were left at the office for those who did not receive one to pick up on their own time. At the end of the project Melody will create a post survey using the Survey Monkey website once more to send to Quinn, she will then send out the survey to prove if the project was successful/effective in

decreasing any depression that the clinical staff and volunteers had. A more detailed implementation plan and timeline can be seen in the Scope of Work in Appendix A.

Project Results

The expected outcome was reaching at least 20% of decreasing depression in the clinical staff at Hospice VNA. Using a survey through Survey Monkey with a minimum of 5 questions for the pre and post survey. One question showed the amount of clinical staff at VNA that responded to the survey was over 50%. In the pre survey question it asked if the staff at VNA have had some depression within the past year and the results showed about 56% said yes. As for the post survey it showed that the project “Appreciation Day” reached the expected outcomes by over 47% according to the pie chart in Appendix B. The question in the post survey was if the gift decreased some of the staff's depression within the past year. About 68% of the clinical staff at VNA respond that yes it has decreased some or all of the depression they acquire in the past year in the Appendix B. Overall, the expected results for this project was a success in decreasing depression in the clinical staff at VNA Hospice.

Conclusion & Recommendations

Overall, the project has decreased some depression in the staff at VNA hospice. Some improvements to better the projects is finding ways to reduce the stresses that the clinical staff are facing everyday, would be to show more acknowledgement for their work. For example, providing space for VNA staff to take a break and relieve their stress by arts and crafts or even just plotting plants. Making sure the clinical staff feel appreciated for their hard work will help improve work performance and help the staff mentally and emotionally.

Personal Reflection

1. Personal/professional growth: Discuss what you learned about the problem, issue or need addressed by the project, the planning and implementation of it, and contributions the project made to the agency in its efforts to address the identified problem, issue or need.

What I feel like I learned about the issue in depression on hospice clinical staff is that they feel like the things they do are going unnoticed. For all the work that the staff does they would like to feel acknowledged and appreciated. With the project itself it really addressed the issue well on letting the staff themselves know that they are worthy and appreciated by VNA hospice. What I didn't expect from the project itself is how long it would take to plan out the entire project and get everything together. When planning it was hard to decide whether which population was easier to access but, when it was decided it was still a very high amount of the population at VNA. The implementation was not very hard, but mostly very time consuming. We had to create 250 homemade cards on top of planting the pots of succulents and putting together the entire care package. Overall, I think the project did well in addressing the issue at VNA hospice according to the feedback I have received.

2. Strengths/successes: Discuss the strengths or successes of your project design, activities or methods that contributed to the outcome(s).

Some strengths that I noticed that helped address the issue is that I designed it in a way that the clinical staff knew it was from our hearts. For example I made sure the project was specifically hand made instead of just a bought gift. It makes the care package feel more personal and creates a better feeling for the staff to be acknowledged.

3. Limitations/challenges: Discuss the limitations/challenges to your project design, activities or methods and how you addressed them.

I think the hardest part of this project was making 250 homemade cards, plotting succulent plants and packaging them all together. We only had around 7-8 volunteers willing to help in the project and I felt like it was a lot of work for the small amount of volunteers. But we were able to split the workload and created an assembly line to make it more efficient to get 250 homemade cards, potted plants and packages together.

4. Broader social significance:

- a) Please identify the broader health or social problem/issue/need that your project relates to and reflect on how your project addresses (even in a small way) this broader health or social problem/issue/need.

The issue directly was working on decreasing depression in the clinical staff at hospice VNA. I think this project really helped decrease just a small amount of depression that the staff had. I think it helps promote a better work environment for them and heals a little of their mental health.

- b) Please discuss what more could/should be done (beyond what your project was able to accomplish) to address this broader health or social problem, issue or need.

I think what could be done more with this issue is providing needs or events for the clinical staff at VNA hospice. Making sure every few months they are recognised for their hard work.

- c) Please provide advice that you think would be beneficial for future capstone students working in your agency and/or on this type of project.

Some advice I would give future capstone students working at VNA hospice is making sure that you compliment the staff once in a while for the work they do. A compliment goes a long way in the death and dying field. Make sure to check in with your fellow co-worker or volunteers because compassion fatigue is serious. Also know that you're doing something that a lot of people cannot handle and we appreciate you for being there.

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Appendix A

Scope of Work

Activities	Deliverables	Timeline/Deadlines	Supporting Staff
Presentation for “Appreciation Day”	Presentation google doc	May	Quinn Jughans, Melody Nguyen and Chair of VNA
Pre-Survey	Survey Monkey	May 27, 2021	Quinn Jughans and Melody Nguyen
Created hand made cards for staff with volunteers	Hand crafted with art supplies	Oct 9, 2021	Quinn Jughans, Melody Nguyen and Volunteers
Requested a donation letter from one of the board directors at VNA	Donation Letter	Oct 12, 2021	Quinn Jughans, Melody Nguyen and Volunteers
Sent in a donation letter to the manager at Home Depot	Succulents	Oct 12, 2021	Quinn Jughans and Melody Nguyen
Got approved by Home Depot for succulent donations	Succulents	Oct 13, 2021	Quinn Jughans, Melody Nguyen, Home Depot Manager
Set up an assembly workshop with volunteers	Building the package	Oct 16, 2021	Quinn Jughans, Melody Nguyen and Volunteers
Set up pick up tables at VNA office for staff to receive their package	Pick-up goods	Oct 18, 2021	Quinn Jughans, Melody Nguyen and Volunteers
Post-Survey	Survey Monkey	Oct 20, 2021	Quinn Jughans and Melody Nguyen

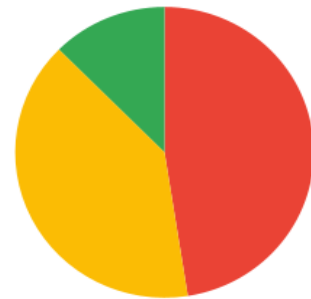
Appendix B

PRE: Q1.What is your connection to VNA?



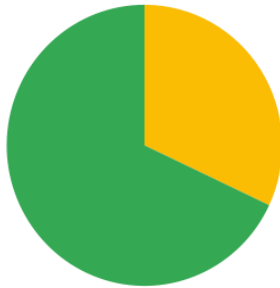
● I am a Volunteer for VNA - 45.83% ● I am a Nurse for VNA - 33.33%
● I am part of the Staff for VNA - 20.83%

POST: Q1.What is your connection to VNA?



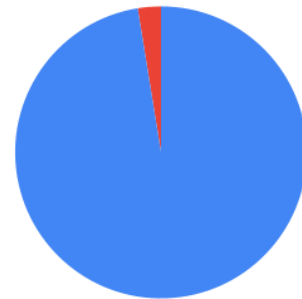
● I am part of the staff at VNA Hospice - 47.50% ● I am part of the Clinical Staff at VNA Hospice - 40% ● Other - 12.50%

Pre: Q2.How would you feel receiving an Appreciation Day package from VNA?



● don't think it would be necessary - 32% ● That would be awesome! - 68%

POST: Q2. Did you enjoy your gift that you received from VNA Hospice?



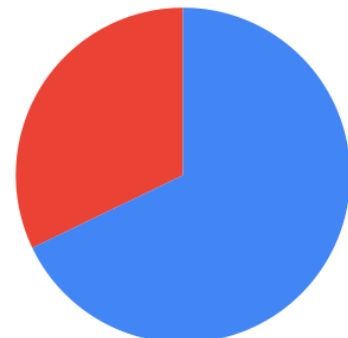
● Yes - 97.44% ● No - 2.56%

PRE: Q3. Have you experience any type of depression in the last year?



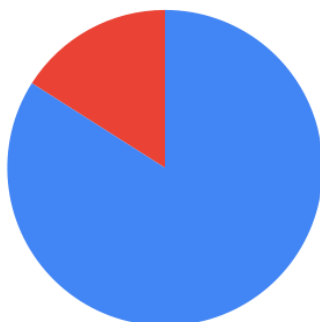
● Yes - 56% ● No - 44%

POST: Q3.Did it decreased some of your depression?



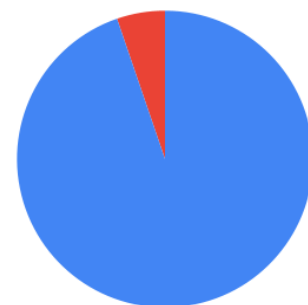
● Yes - 67.86% ● No - 32.14%

PRE: Q4.Would you like Appreciation Day to be done annually?



● Yes - 84% ● No - 16%

POST: Q4.Would you like to continue having Appreciation Day in the future at Hospice VNA?



● Yes - 94.74% ● No - 5.26%