

# ESRT for Critical Care

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## Overview

This project endeavored to improve social and emotional wellness of adult critical care staff at UCSF Health through Enhanced Stress Resilience Training (ESRT), a mindfulness-based training program. We offered this course to all frontline staff – from nurses to hospitality workers – with the goal to reduce burnout. The five week class was led by a certified ESRT instructor via Zoom and offered at multiple times to maximize accessibility.

## Data Snapshot

Before receiving ESRT training, 67% of participants presented high burnout by at least one burnout scale and 13% by all three scales. After the five-week ESRT training, 65% of the participants improved their resilience score and 78% showed improvements in one of three burnout scale scores. The mean personal accomplishment score increased by 9% and the mean depersonalization and emotional exhaustion scores decreased by 26% and 14%, respectively. These findings indicate that ESRT may contribute to improving resilience and reducing burnout among clinical care staff.



“[This program] really showed me the power of my reactions”  
-ESRT Participant

“This program brought a new desire to my life...”  
-ESRT Participant

## Project Details

This project aimed to improve social and emotional wellness of adult critical care staff at UCSF Health through Enhanced Stress Resilience Training (ESRT). The stress of caring for patients in intensive care units (ICU) was amplified for all frontline staff – from nurses to hospitality workers – during the COVID-19 pandemic.

Unaddressed stress leads to emotional exhaustion, burnout, and thoughts of leaving the profession. Mindfulness meditation is known to enhance resilience to stress. Training programs, such as ESRT, were successfully adapted for clinicians. While most of the effort to reduce burnout is focused on clinicians, less is known about the impact of ESRT on non-clinical staff who play a pivotal role in healthcare. We offered ESRT to ALL our ICU staff.

This five-week course was led by a certified instructor on Zoom and offered two different times weekly to accommodate scheduling. From February to June 2023, 65 critical care clinicians across three campuses (Parnassus, Mt. Zion, and Mission Bay) participated in ESRT training. Participants included a diverse group of rehabilitation therapists (32%), nurses (29%), respiratory therapists (10%), providers (6%), and other clinicians (10%).

## Project Challenges

Class delivery via Zoom was intentional to reach the most possible number of participants. Selecting an “ideal time” that suited the needs of multiple different provider types across a division of over 800 people was difficult. The feedback we received regarding the class centered around class time (preferred a different time), delivery via Zoom (preferred in person), and acceptability/usefulness of the content. ESRT was developed for surgical trainees and has specific class content for that population and has not yet been adapted for nursing, which drove some acceptability feedback. Given the complex nature of our schedules, we also had several participants miss classes due to schedule conflicts.

## Lessons Learned

Preliminary participant feedback was overwhelmingly positive and corroborated by data suggesting that 65% of participants improved their resilience, and 78% of participants improved on burnout metrics. We leveraged this work to apply for, and received a Clinical Nurse Research grant to conduct a more rigorous evaluation of the ESRT intervention in critical care nurses. We also learned that separating managers from their direct reports is essential and that diversity of participant disciplines was well received. We also made all sessions available online after class ended and allowed participants to attend either time weekly, which improved attendance.