

# The Lived Experience of Critical Care Nurses During COVID-19

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## Introduction

- The Pandemic that started in December of 2019, COVID-19, will, forever and vividly, be remembered by all whom experienced it.
- Nurses in both COVID and non-COVID units were at higher risk of experiencing psychological distress compared to other groups of HCWs
- Ruiz (2020) compares front line HCWs to combat veterans. Like combat veterans, many HCWs experienced “war zones” for more than a year
- Nurses have been isolated and separated from loved ones, struggling with feelings of helplessness and self-blame for patient outcomes out of their control
- Current literature indicates that nurses who worked with COVID patients reported higher levels of psychological, behavioral, physical and emotional reactions such as:
  - ✓ posttraumatic stress disorder (PTSD)
  - ✓ depression, anxiety, acute stress disorder
  - ✓ complicated grief
  - ✓ negative affect
  - ✓ physical health problems
  - ✓ poor sleep quality

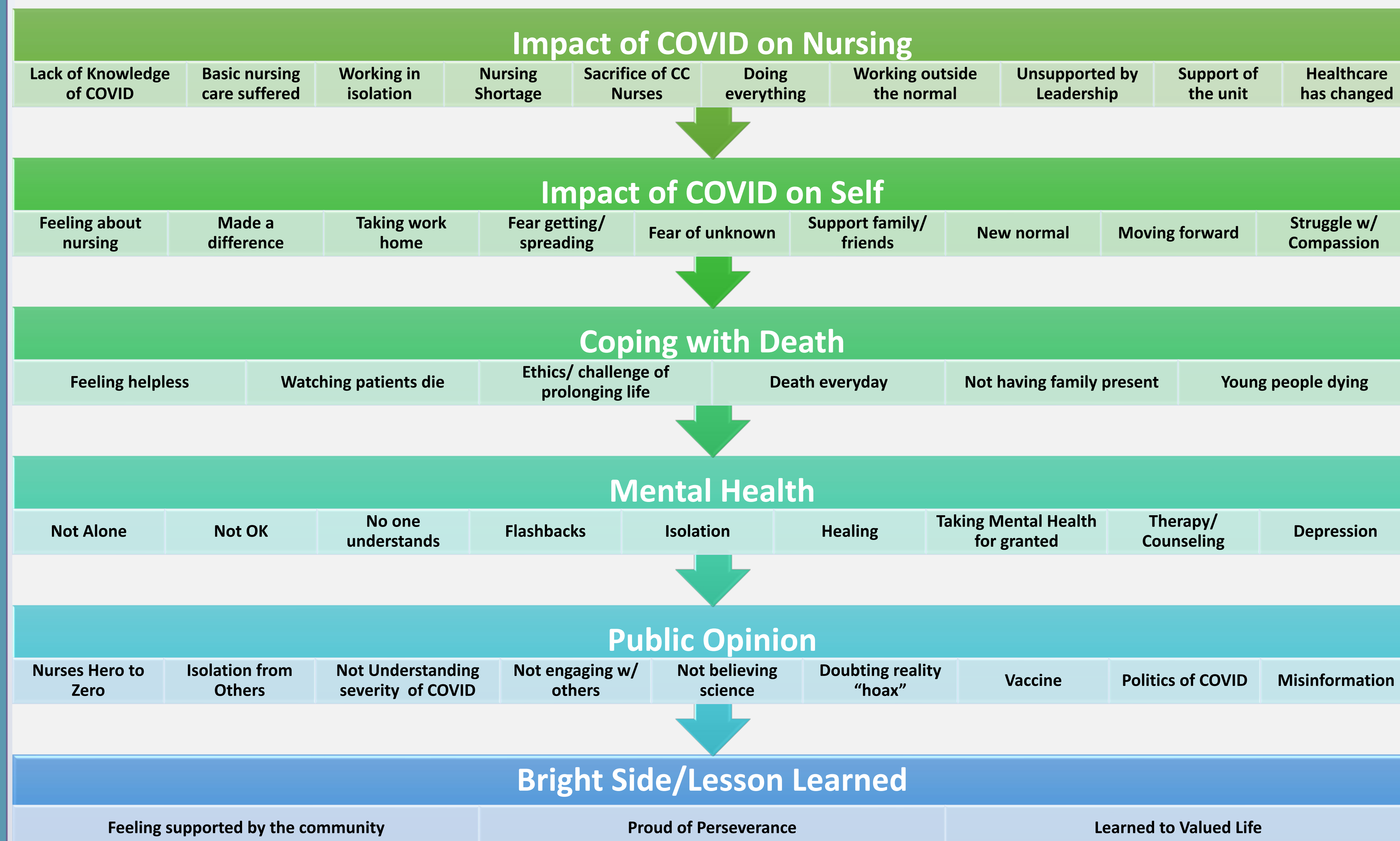
## Study Design/Methods

- Qualitative phenomenological study using Interpretative Phenomenological Analysis (IPA) approach.
  - IPA is used to understand the lived experience of individual and explore how they make sense of that experience in their own personal context
- There were 9 participants that met the inclusion criteria
- Participants were consented and scheduled for an individual semi-structured interviews that was conducted by the PI via Zoom due to limitations of COVID and in person meetings
- Participant were de-identified by assigning each interview a number
- The individual interviews were transcribed and analyzed by the research team using IPA coding and theming
- Individual interview themes were then compared where the final overarching themes and sub-themes were determined

## Themes and Sub-themes

After analysis using Interpretative Phenomenological Analysis (IPA) there were 6 overarching themes emerged and within each theme there were sub-themes that were identified.

- (a) Impact of COVID on Nursing, (b) Impact of COVID on Self, (c) Coping with Death, (d) Mental Health, (e) Public Opinion, (f) Bright Side/Lessons Learned.



## Sub-themes and Quotes

Sub-theme	Quote
Impact on Nursing	<b>Doing Everything</b> "The best way I can describe it is I feel we were doing everything and that was not enough, which was just really hard"
Impact on Self	<b>Personal Feelings</b> "I used to love nursing - it was my fuel, my soul, my passion. It was honestly part of my identity- then during COVID I did not want it to be part of my identity anymore"
Mental Health	<b>Not Alone</b> "I have images in my head that I will never be able to un-see, of people struggling to breathe, and watching someone use every fiber and muscle of their being just trying to draw a breath"
Coping with Death	<b>Feeling Helpless</b> "Sitting there holding a patient's hand in 15 layers of PPE, barely hearing each other, and the family is just sobbing and there is absolutely nothing you can do- yeah that's awful"
Public Opinion	<b>Nurses Hero to Zero</b> "In the beginning healthcare workers were like heroes, and now it's like nobody cares"

## Demographics of Participants

Participant #	# Years in Nursing	# of Months worked	States worked	Days worked (per week)	Marital Status	# of Children
1	10	13	GA	3	Married	1
2	4	11	GA, NY, FL	5	Married	0
3	35	20	GA, FL	3	Married	2
4	9.5	20	GA	3	Married	1
5	7	5	TX	3-4	Single	0
6	12	17	GA	5	Married	0
7	10	24	GA	2-3	Married	1
8	5.5	10	CA	2-3	Single	0
9	10	24	IL	2-3	Married	0

## Discussion/Limitations

The study explored the lived experiences of nurses who cared for COVID patient and when analyzed there were many shared themes that reflect the emotions and feelings of nurses over two and a half years into the pandemic. There are inherent limitations to qualitative research studies that aim to explore the lived experience from a small size. The sample is a result of purposeful sampling of nurses that cared for COVID patients. The analysis was systematically completed based on IPA guidelines and codes and themes were agreed upon by the three team members, however they are still limited to the interpretation of the team.

## Implications for Practice

- The study highlighted the lived experiences of Critical Care nurses caring for COVID patients.
- Understanding the lived experiences of nurses can provide insight into the key factors contributing to employee satisfaction, engagement and ultimately retention
  - Help hospital and nursing leadership to develop next steps to address the most important issues facing the nurses considering the impact that COVID-19 has had
  - Validates the lived experiences of critical care nurses and being heard can be the start for the healing process for so many other critical care nurses.

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