

Western New England University

Digital Commons @ Western New England University

OTD DEx Reports - College of Pharmacy and
Health Sciences

College of Pharmacy and Health Sciences

7-2024

Exploring Burnout Program Effectiveness With Adult Day Health Providers

Katy R. Maguire

Western New England University, km600778@wne.edu

Follow this and additional works at: <https://digitalcommons.law.wne.edu/otd>



Part of the [Occupational Therapy Commons](#)

Recommended Citation

Maguire, Katy R., "Exploring Burnout Program Effectiveness With Adult Day Health Providers" (2024). *OTD DEx Reports - College of Pharmacy and Health Sciences*. 83.
<https://digitalcommons.law.wne.edu/otd/83>

This Report is brought to you for free and open access by the College of Pharmacy and Health Sciences at Digital Commons @ Western New England University. It has been accepted for inclusion in OTD DEx Reports - College of Pharmacy and Health Sciences by an authorized administrator of Digital Commons @ Western New England University.

Exploring Burnout Program Effectiveness With Adult Day Health Providers

A Doctoral Experiential Capstone Project Final Report

Presented to the Faculty of Western New England University

In Partial Fulfillment of the Requirements for the

Entry-Level Doctorate

in

Occupational Therapy

by

© Katy R. Maguire, 2024

July 2024

Exploring Burnout Program Effectiveness With Adult Day Health Providers

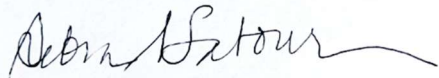
A Doctoral Experiential Capstone Project Final Report

By

Katy Maguire, OT/s

July 2024

APPROVED BY:

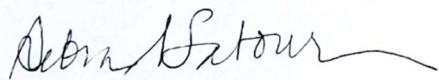


7/23/2024

Debra Latour, OT, PP-OTD, M.Ed., OTR, FAOTA
Faculty Mentor

Date

APPROVED BY:



7/23/2024

Debra Latour, OT, PP-OTD, M.Ed., OTR, FAOTA
Doctoral Experiential Coordinator

Date

Abstract

Stress and burnout are frequently experienced by those in healthcare professions. While extensive research has been done on the impact of stress and burnout on nurses and physicians, other healthcare fields are less researched. One of these populations of health providers excluded from current studies is adult day health providers. Health providers at adult day health centers provide specialized services to persons with acquired, developmental, and intellectual disabilities. They orient these individuals to the community, administer their medications, provide opportunities for socialization and learning, accommodate leisure activities, and many other services that promote community and personal independence for their clients. As such, they fall under the healthcare umbrella and are subject to similar stressors and burnout experienced by nurses and physicians. This study aims to explore the extent and type of stress experienced by healthcare workers in the adult day health service field and determine if some successful interventions used with other health providers effectively prevent stress and burnout in this population. Mindfulness is an effective tool to reduce stress and prevent burnout. As such, a program was created as part of a capstone project to implement a mindfulness curriculum at the House of Possibilities, an adult day health facility. Upon exploration of this topic, it was concluded that mindfulness is an appropriate intervention tool to alleviate stress and burnout in adult day health providers.

Introduction/Background

Adult day health programs offer services for individuals with intellectual and developmental disabilities (Westmore & Anderson, 2024). Typically thought of as an alternative to full-time residential care for aging adults, some adult day health programs are aimed specifically at the young adult to adult population with intellectual and developmental disabilities. Adult day health programs are an alternative to home care and offer numerous services that can include opportunities for socialization, community integration, development of independent living skills, cultivating hobbies, and education, among many others. Various medical services may also be available at some facilities and required at others.

Participation in adult day health programs gives at-home caregivers daily respite from the responsibilities of full-time care for individuals with intellectual and developmental disabilities. The responsibility of caregiving then falls to adult day health providers who perform a range of duties from activity coordination to medication administration. This can be extremely rewarding and challenging work, according to qualitative data from participants in this study. The work, however rewarding, also comes with its share of stressors according to participants.

Intellectual and Developmental Disabilities (IDD) are defined as a deficit in intellectual functioning before age 18 years that results in difficulties with learning, reasoning, emotional regulation, self-regulation, problem-solving, socialization, life skills, and others (Institute on Community Integration, n.d.). Developmental disability is a broad term used to apply to either physical or intellectual disabilities that are lifelong and impact an individual's ability to develop

typically. Some examples are Spina Bifida, Autism Spectrum Disorder, traumatic or other brain injuries, fetal alcohol syndrome, and cerebral palsy, among others.

The House of possibilities (HOPE) provides diverse services to its population, including many of the conditions listed above (*Programs for Adults — House of Possibilities*, n.d.). HOPE offers career and community access programs by participating in community service activities like cleaning a local gym and accessing the community by shopping for cooking ingredients. HOPE clients receive valuable life transition services that help them navigate educational systems. HOPE encourages social engagement and recreational opportunities through its programming. Finally, HOPE offers overnight respite for clients and caregivers to reduce care and compassion fatigue.

The Medication Administration Program (MAP) of Massachusetts requires that healthcare providers with direct client interaction and working in adult day health centers must be certified and qualified to administer important client medications throughout the day as needed (*Medication Administration Program (MAP)*, 2024). This requires a special certification of a challenging written and practical component. One HOPE health provider stated that they have taken the certification and failed and are now at risk of losing their job and is a source of stress that can lead to burnout. In this case, the employee is a long-time caregiver with many years of experience and will face job dismissal if they cannot pass. All new employees are subject to passing this certification, which can be a barrier to hiring and retaining adult day health providers. To mitigate the risk of unqualified employees and loss of qualified employees, HOPE could benefit from a peer support program to help those struggling to gain the MAP certification in Massachusetts.

Doctoral Experiential Capstone Project Overview

Preparation work was required to begin the experiential portion of this research project and program creation and implementation. This included identification and support from a site, a needs assessment, proposal, work plan, telehealth course, Collaborative Institutional Training Initiative (CITI Program) Human Research Subjects training, and other preparation assignments. These were designed to assist with developing a capstone project. Didactic classwork also contributed to the learning requirements and objectives to be met for this capstone project. For example, a miniature group research project was conducted in preparation for the capstone experiential project. This mini group project used mixed methods and surveys to conduct the research and provided valuable experience that informed this research study.

When preparation for the Doctoral Experiential Capstone project (DEX) was complete, the actual work on the project began. The project was coordinated with the House of Possibilities in Easton, Massachusetts, and a site mentor was established. With site support, participants were recruited and engaged in weekly mindfulness intervention sessions.

The capstone project consisted of a 4-week mindfulness program for Adult Day Center Health Providers at the House of Possibilities. The curriculum was created with weekly themes designed to encourage stress reduction and prevent burnout. These sessions were conducted three days per week, on Mondays, Wednesdays, and Fridays before the morning meeting. HOPE health providers participated in activities like educational sessions, meditation practices, mindfulness training, and other exercises based on the weekly theme.

The themes for each week were self-compassion, gratitude, humility, and happiness. In the self-compassion module, participants were encouraged to be mindful of their judgments and attitudes toward themselves and to exercise compassion in those areas they deem deficient. In week two, HOPE employees participated in a meditation practice and received journal prompts to

encourage gratitude through mindfulness. Humility was the theme of week three, and participants received an educational session on what humility is and how mindfulness helps foster humility. Happiness was the mindfulness practice theme for week four, and the curriculum included materials on scientifically backed mindfulness methods that boost or support happiness (Greater Good Science Center, 2023).

The researcher designed the curriculum before the start of the project and developed with evidence of effectiveness from previous studies (Botha et al., 2015; Green & Kinchen, 2021). Based on the themes, mindfulness practices were sourced from evidence-based articles on interventions used in other healthcare fields, such as nursing and other allied health professions (Green & Kinchen, 2021; Luken & Sammons, 2015). Other resources were created using expertise gained from certifications in both mindfulness and yoga.

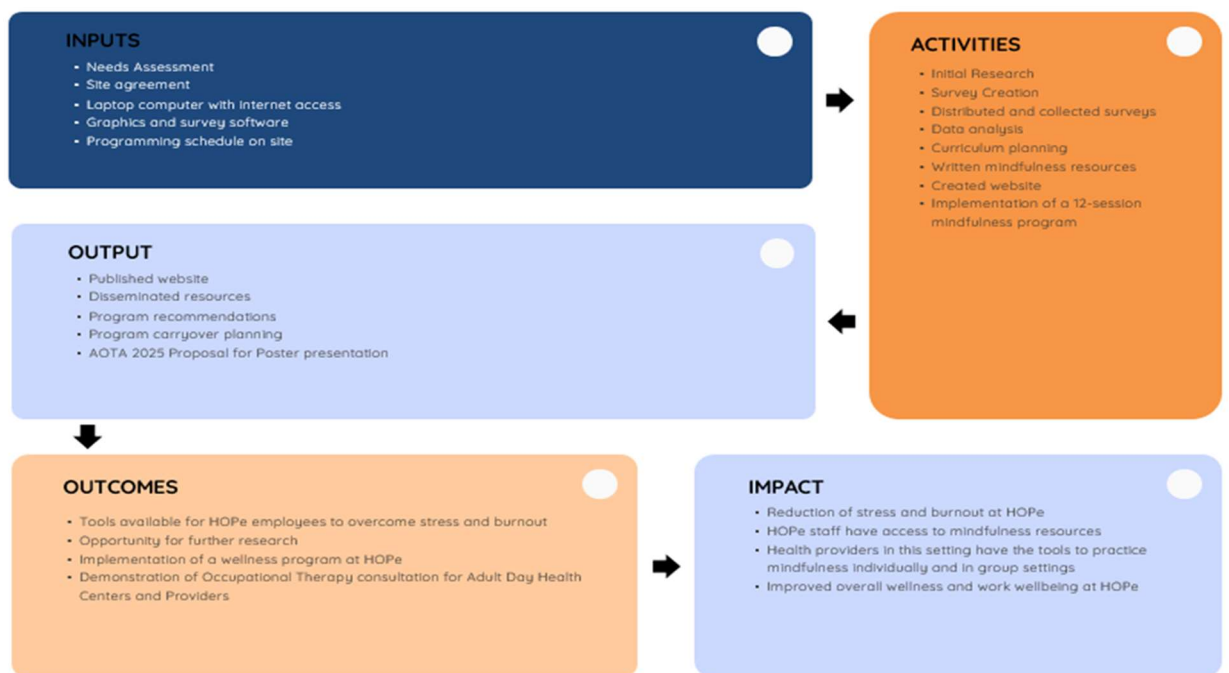
The scholarly portion of this project included creating and distributing mindfulness resources, including a dedicated website for HOPE employees to continue accessing in the future. Employees were left with knowledge of resources and where to find them to assist with their ongoing awareness and mindfulness practices. The resources included themed materials based on the live sessions held at HOPE. These deliverables are available to staff and administration, as well as agreed-upon plans for carryover now that the program has reached completion.

Model/Framework

The logic model guided this capstone project's creation and evaluation. The logic model outlines that the researcher identifies a problem, develops a community profile, assesses the community or population's needs, develops outcome measures, determines influential factors, implements strategies, and develops assumptions (Carrion et al., 2021). For this DEX capstone project, these steps were taken to ensure quality programming was designed based on existing

evidentiary models. The logic model was also used to evaluate the capstone project and the resulting mindfulness program (Kellog 2004).

According to Kellog, the logic model is two-pronged: your planned work and your intended results (2004). In the planning phase, resources or inputs are needed for project development. For the capstone project, those inputs were a site to conduct a needs assessment and an agreement from the site to conduct the study. Research for this project also required using a laptop computer, the internet, and graphics software to create flyers, a website platform, a survey platform, and a consistent time slot on the programming schedule. Resources needed were acquired to implement the next phase of planned work, which Kellog refers to as activities.



Activities of this capstone project included creating surveys for participants to gather data and implement programming. Other activities consisted of adding mindfulness sessions to the schedule, creating a curriculum for mindfulness training, writing resources, publishing a website, and providing the organization with recommendations for the carryover of the mindfulness stress

and burnout reduction program. Activities in this capstone project were carried out, leading to the second prong of the Logic model, your intended results.

Three phases are carried out under the intended results: outputs, outcomes, and impact. The capstone project outputs are the scholarly component in a submission to present this study at the 2025 American Occupational Therapy Association conference. Other outputs are the published website and the resources created on stress, burnout, and mindfulness specific to the needs of HOPE employees. A written report and presentation were provided to the House of Possibilities organization to inform carryover of this program in the future.

The outcomes of this project and program were that the staff at HOPE were left with tools to overcome stress and burnout in the workplace, uniquely for their population as adult day health providers. The HOPE organization has recommendations and data supporting implementing mindfulness or other mental health programming. Finally, the direct care staff members received four weeks of mindfulness instruction and programming, resulting in a greater knowledge of how to access resources and utilize tools to relieve stress and reduce the threat of burnout.

The final phase of the logic model is the impact or continued community effect of the capstone project and mindfulness program at HOPE (Kellog, 2004). The impact is that the employed caregivers at this adult day health center have access to resources and tools that can be maintained and updated on an accessible website. The capstone project's impact is that it is an emerging field opportunity for Occupational Therapists to work with this population and improve occupational performance through mindfulness intervention, such as to what has been implemented in other similar fields like allied health and nursing.

The guiding occupational therapy model that was the framework for the mindfulness program at HOPE was the Person, Environment, Occupation, Performance model (PEOP). This research focused on occupational performance in work and leisure activities through stress reduction and mindfulness. The PEOP model emphasizes occupational performance in all its forms and takes into consideration the interaction between the “characteristics of the person,” “features of the environment,” and “characteristics of the activity, task, or role” (*Person-Environment-Occupation-Performance Model (PEOP) | OT Theory*, n.d.).

The “person” of the PEOP model refers to the physiological, psychological, motor, sensory/perceptual, cognitive, or spiritual characteristics of a person performing occupations. In this research study, stress and mindfulness's physical and psychological manifestations are physiological. For example, stress has been shown to have negative physical and psychological effects on the body (Nowrouzi et al., 2015). In contrast, research shows mindfulness has a positive physical and psychological impact on the body (Greater Good in Education, 2023). Stress has cognitive implications, like memory deficits. Again, mindfulness has been shown to have an answer to that. Mindfulness has a naturally occurring spiritual component in that it requires the person to look outside themselves and objectively observe the present moment. Those who practice some form of spirituality may find fulfillment in this aspect of mindfulness as an answer to stress and burnout.

The PEOP model's “environment” refers to cultural, social, physical, and natural environments, health education and public policy, and assistive technology (*Person-Environment-Occupation-Performance Model (PEOP) | OT Theory*, n.d.). Aspects of mindfulness are the considerations of a person’s culture and viewing that culture objectively and with curiosity and lack of judgment. Social support in the caregiving industry is important for a

person's well-being and quality of life (Liang et al., 2017). Practicing mindfulness in a group setting can reinforce existing social support bonds and create new ones. These social supports, like positive colleague relationships, improve work life and reduce stress. Physical and natural environments impact stress. In this study, the working environment is high-stress and can be emotionally, mentally, and physically demanding. While mindfulness cannot change the physical environment, it offers a solution to managing a person's response to their environment and coping with stress.

“Occupation” in the PEOP model refers to the “characteristics of the activity, task, or role” (*Person-Environment-Occupation-Performance Model (PEOP) | OT Theory*, n.d.). The above characteristics of the person and environment interact inextricably with the occupations and the quality of occupational performance. The interactions between these components can be negative or positive; either way, they influence occupational performance. In this study, occupational performance in providing direct client care is negatively impacted by stress (Liang et al., 2017). Still, the research says mindfulness can reduce stress and positively influence occupational performance (Green & Kinchen 2021).

The development of this program aligned with this model in practice for four weeks and twelve sessions. The health providers at HOPE were those affected by the program; therefore, the researchers identified their needs through a needs assessment before developing the mindfulness program. In this case, the goals of the employed caregivers were to reduce stress and prevent burnout, and the program centered around this. The mindfulness program was implemented, which influenced the physical environments of the participants and promoted optimal occupational performance. The interaction of the health providers, their enhanced environment through mindfulness intervention, and their occupational tasks, which is their provision of direct

client care, reflect the PEOP model. Further, environmental and personal performance barriers can be removed through mindfulness. In summary, the program was created based on the factors of the PEOP model as it pertains to occupational therapy.

Literature Review

Health professionals are subject to high rates of stress and burnout due to the types of client populations they work with, and the daily confrontations of personal traumas and suffering accompanied by high workloads (Green & Kinchen, 2021). Elevated levels of stress and burnout can be attributed to the psychological and emotional aspects of a health provider's workload and job responsibilities (Perula-de Torres et al., 2019). Stress and burnout can be attributed in part to exposure to suffering, trauma, demanding workloads, low pay, poor work/life balance, and others (Molina-Praena et al., 2018). Molina-Praena et al. (2018) say stress is a 21st-century pandemic, and unmitigated stress can lead to burnout syndrome.

Stress is any form of mental tension or worry about the present (WHO, 2022). Stress is an evolutionary response to a situation that spurs us to action when faced with challenges or threatening situations. All humans experience stress in some way throughout their lives. Responses to stress can help to determine the possibility of suffering future burnout. The U.S. Department of Health and Human Services states that burnout is unmitigated stress, emotional and physical exhaustion, depersonalization and an inability to feel a sense of purpose or accomplishment at work.

Stress in healthcare jobs threatens the quality of working life for employees and can cause various work-related problems, according to Mosadeghrad et al. (2011). These problems include open hostility, absenteeism, high turnover, compassion fatigue, and low productivity. Quality of care to clients also suffers in healthcare fields, and this is an especially alarming

impact of stress on healthcare providers (Adler et al., 2022). Shapiro et al. state that “stress inherent in health care negatively impacts health care professionals, leading to increased depression, decreased job satisfaction and psychological distress” (2005).

The U.S. Department of Health and Human Services (HHS) describes burnout among healthcare workers as detrimental to our collective well-being and the health of organizations (hhs.gov, 2024). HHS says that burnout can lead to other serious medical conditions like anxiety and depression. It posits that burnout is a workplace, system-oriented problem that requires an equally robust solution.

Low job retention is expensive for organizations, as is training newly hired employees to replace those who left due to stress and burnout (Lindquist, 2023). A caregiver employee's salary can take up to six to nine months to compensate for turnover loss. The cost of money, time, and resources can be much higher if the turnover position is a specialty or requires licensure or certifications. Stress is a health problem that can be significant for employees and employers alike (Nowrouzi et al., 2015).

Mindfulness is an emerging practice in workplace stress and burnout (Williams & Kabat-Zinn, 2013). Mindfulness according to their study is a sense of being in the present moment and experiencing that moment objectively. Kabat-Zinn is a leading pioneer in integrating Eastern philosophy, mindfulness, and Western medical practices, developing scientific evidence of effectiveness since the 1970s. Williams and Kabat-Zinn are proponents of the Mindfulness-based Stress Reduction (MBSR) intervention method and Mindfulness-based Cognitive Theory, which combines mindfulness principles with Cognitive Behavioral Therapy (CBT). These methods have been successfully used to reduce stress and depression among healthcare providers. Mindfulness has implications in healthcare specifically. Mindfulness “enables participants to

cultivate compassion in response to their suffering.” Compassion underlies the impact and effectiveness of mindfulness programming (Kuyken et al. 2010).

Studies have been done to determine the effectiveness of mindfulness on stress and burnout, and mixed results have been obtained (Keng et al., 2011). Though most sources provide evidence of high effectiveness in reducing stress, mindfulness does little to relieve burnout once it has already started. However, there is evidence that burnout can be prevented altogether through the practice of mindfulness (Luken & Sammons 2016).

Healthcare workers are particularly susceptible to workplace stress and are ideal candidates for implementing mindfulness practices to counteract it (Botha, 2015). In one study, mindfulness significantly reduced stress in participants throughout a 4-hour mindfulness session (Green & Kinchin, 2021). Green and Kinchin (2021) agree that mindfulness meditation is a powerful tool in decreasing stress and burnout. It decreases self-judgement and the intensity of the present moment, building resiliency and emotional control.

Another study showed that nurses experience a reduction in stress and burnout following a 4-hour mindfulness session and reported that they continue to employ mindfulness principles daily (Sarazine et al., 2021). In their systematic review, Botha et al. found multiple studies have shown that mindfulness in forms of instruction, education, guided meditations, and others is effective in addressing burnout and reducing stress (2015). Another scoping review found that nurses and other healthcare providers provided better client care, were more self-compassionate, and reduced instances of compassion fatigue through mindfulness programs implemented within their organization (Green and Kinchin, 2021).

Research has proven that workplace interventions are the most effective way to address workplace stress (Cohen et al., 2023). Developing a program to combat stress is the

organization's responsibility from the management structure to improve workplace culture and morale. Organizational change is more effective in combatting burnout than any other method, as burnout is a system-wide problem stemming from unrelenting stressors (Nowrouzi et al., 2015). Workplace programs that promote healthy mental and physical behaviors, like a mindfulness program, can benefit organizational health while reducing costs related to stress and burnout.

Mindfulness programs can be designed to mitigate the negative effects of stress specifically (Cohen et al., 2023). These effects include resiliency, self-compassion, compassion for others, emotional exhaustion, depersonalization, low personal recognition, reduced anxiety and depression, quality of life, and overall well-being (Hooper et al., 2010; Greater Good Science Center, 2023). An organizational program designed to meet the needs of direct caregiver employees should implement a program that addresses these and other negative effects and introduce programming that improves the quality of life and well-being.

Mindfulness programs that have been proven successful, according to research, are those that incorporate instruction, practice, recommendations, resources, and built-in time during the workday to implement the programs (Cohen et al., 2023). Instructional or educational programming could be through media, like podcasts, YouTube videos, live instruction, and presentations (Botha et al., 2015). Education delivered in these formats reaches some audiences effectively. At the same time, other learning styles may need to be more conducive to strictly learning about a mindfulness technique or the benefits of implementing a personal mindfulness practice through instructional formats. Therefore, other formats, such as in-person and/or guided mindfulness practices, should be considered. These can take many forms. Some are more effective, according to research, than others (Nowrouzi et al., 2015).

The benefits of a mindfulness program address many of the causes of stress, which are defined and discussed above. Of these causes, mindfulness effectively fosters a sense of self-compassion that leads to compassion for others (Greater Good in Science Center, 2023). Mindfulness allows people to view their situations objectively, as if from the outside looking in, and evaluate them in the present moment. This alleviates feelings of anxiety about the future and depression usually rooted in the past. Mindfulness has been shown to improve overall well-being and quality of life for those who regularly practice it and, in some cases, those who have simply been exposed to mindfulness (Sarazine et al., 2021).

Mindfulness practice is effective individually but can also positively impact when practiced in a group setting, which is especially promising in a workplace wellness initiative (Pérula-de Torres et al., 2019; Botha et al., 2015). Much of the research to date is based on group interventions and mindfulness. Group interventions are efficient in the workplace in addressing the collective quality of employees' work lives.

Occupational therapists are uniquely poised to develop programming, implement direct interventions, and consult on organizational wellness (Fazio, 2017). Occupational therapists are trained in providing mindfulness training to groups and individuals. Program development is a focus of occupational therapy that includes public health initiatives. This qualifies based on the acknowledgment of this significant problem by the U.S. Department of Health and Human Services and the World Health Organization. Occupational therapists are client-focused, meaning the design of interventions is unique to the population served. In their systematic review, Hogan et al. concluded that occupational therapy focused on stress management reduces stress-related physical and mental exhaustion and aids in recovery (Hogan et al., 2023). Strategies employed

by occupational therapists are mindfulness in addition to other mental and physical health interventions.

Problem Statement

The problem with stress that leads to burnout in the workplace is that it results in a high turnover of employees, which is expensive for employers due to costs related to recruitment, the hiring process, and training, not to mention the burden of being short-staffed (Sarazine et al., 2021). Stress also leads to poor work life and employee well-being (Mosadeghrad et al., 2011). Stressed and burnt-out employees have lower client satisfaction and contribute to a lower quality of care.

At HOPE, several employees who provide direct health services to IDD clients experience high rates of stress but report minimal risk of burnout. Some stress causes for HOPE staff include low morale, a communication gap between administration and staff, lack of mental health support, and little to no say in their work lives. Health providers at HOPE also indicated that stress was caused by low pay and lack of acknowledgment about the amount and quality of work they produce.

Mindfulness practice and other mental health initiatives alleviate some of the work stress experienced by employees at HOPE. Participants in this study indicated they had little to no knowledge of where or how to access mental health resources. They state that mental health resources and programs designed to address their mental health needs would be well received. Additionally, because a mental health program, like mindfulness practice implementation, is research-based and has been shown to reduce stress and burnout for healthcare workers, a program was conducted at HOPE (Nowrouzi et al., 2015).

HOPe employees, according to surveys and face-to-face interactions, report that the sources of their stressors include little to no recognition of efforts, lack of communication between administration and staff, inconsistent scheduling, physical strain, and emotional exhaustion. Surprisingly, salary and compensation were not the priority concerns raised, which is consistent with other studies researching stress and burnout (Nowrouzi et al., 2015). Another surprising source of stress was the idea that technology would replace them. Though employees report stress and, at times, elevated levels of stress, only 7% of participants felt they were close to burnout, and none of the survey respondents indicated that they were at risk of quitting due to stress or burnout.

Purpose/Research Question

This study aimed to explore mindfulness's effects on stress and burnout among HOPe employees by first examining the extent and cause of stress among this population. The research question was intended to ask if employees were experiencing stress or threat of burnout and, if so, to what extent and does mindfulness have the answer. Further, the purpose was to start a mindfulness program that could be carried over to continue to address mental health and provide resources to combat stress and burnout.

Based on the above research, it was hypothesized that stressors would include mental and physical exhaustion, lack of participation in decision-making, inadequate compensation, poor relationships with management, and emotional distress. Many of these are accurate based on this research study. The extent of burnout was expected to be higher than it was, according to the polled participants. Additionally, the openness to trying a mindfulness-based program received a greater reception than originally anticipated when designing this research study.

Methods

This mixed-methods research study applied qualitative and quantitative measures to gain information about stress and burnout at HOPE. The instruments used were open-ended questions, closed-ended questions, Likert-style questions, surveys (pre/post), observations, and verbal feedback from participants. The data from these instruments were then triangulated to accurately converge and validate the results from these varying informational methods.

The population in this study included employees at the House of Possibilities employed for more than one month, over the age of 18, providing direct client care, and not a member of the administration. Of 17 possible participants, 10 met the inclusion criteria and participated throughout the program. The chosen members varied from new employees to seasoned, long-term staff. The age range of participants varied between 21 and 57. Six females and four males participated.

The instrumentation and data collection were through Google Forms survey analytics, manual data derivation, and Google Sheets. Data was gathered to compare the results of this research study to those reviewed in the literature. Further, results were collected from qualitative survey measures and collated into readable terms. Information from the survey analytics was triangulated in the research study to provide the best possible data regarding stress and burnout among this population of adult day health providers.

Google form surveys were used to gather information through three pre-surveys and one post-surveys. The forms were constructed around existing stress, burnout, wellness instrumentation, and data collection methods. These were the Copenhagen Burnout Inventory and the Copenhagen Psychosocial Questionnaire. In addition to these surveys, one pre-survey and a post-survey were created to derive information specific to this study. Those were the HOPE wellbeing survey and the HOPE mindfulness/stress and burnout questionnaire. All surveys were

transcribed to a Google Form and administered to the staff participants before the start of the mindfulness program and the post-survey following the program.

The Copenhagen Burnout Inventory (CBI) is a survey that has been used in previous studies about workplace burnout, personal burnout, and client-related burnout (Kristensen et al., 2005). These three scales inform the causal relationships between stressors at work, personal life, and clients. The CBI is a 19-item survey with three sections that derive stress and burnout influencers in these three domains.

The Copenhagen Psychosocial Questionnaire (Kristensen et al., 2005) has three versions: a extended version, a medium version, and a condensed version. This study's abridged version consisted of 44 questions and eight dimensions. Aspects of work and personal stressors and management of those stressors are divided into those eight dimensions, which are meant to derive qualitative data on the amount of stress and the source of burnout.

The HOPE well-being survey had 25 questions that were a mix of Likert scale and open-ended questions (Gillham 2008). The questions were designed to derive stress and burnout information from diverse sources and determine the quality of work life and overall well-being. This survey was meant to capture life outside work and the quality of life at work.

The final survey was the HOPE Stress/Burnout and Mindfulness post-survey, which consisted of five questions meant to determine the effectiveness of the mindfulness program, the participant's knowledge of the material, and where to find resources (Gillham, 2008). The survey was a mixture of yes/no, Likert-style, and open-ended questions. Verbal feedback was also collected on the final day of the mindfulness sessions, and that information is included in the final data analysis.

The mindfulness program was implemented in the fifth week of the 14-week capstone project and ran for four weeks. It was held for 10-15 minutes three times per week in the mornings before the daily morning meetings. The sessions were open to all, even those who chose not to participate in the study. Those who chose not to participate in the mindfulness sessions were welcome to exclude themselves. The sessions were well attended, with an average of 13 attendees.

The curriculum was designed to meet the needs of those experiencing stress and burnout, and each week was themed around an evidence-based topic (Greater Good Science Center, 2023). The topics included self-compassion, gratitude, humility, and happiness. The themes were chosen based on the sources of stress and the corresponding mindfulness topics that aligned to address these sources.

The format was a mix of instruction and guided practice (Greater Good Science Center, 2023). For example, during week 1, the mindfulness instruction was on how to exercise self-compassion consistently and the benefits of doing so. During week 2, there was a guided mindfulness meditation practice. During week 3, mindfulness journaling was covered, and a seated yoga practice was facilitated during the final week. The mix of intervention styles was intended to reach a large audience by appealing to all learning styles (Fazio, 2017).

Throughout the four weeks, resources were created for HOPE staff to refer to as a continuation of the program. These included the in-person instruction materials and mindfulness activity guides. They were collected and put together on a website for HOPE health providers to reference. These materials could be for personal, group, or client use. At the end of the 4-week mindfulness program, the staff had access to a published website with mindfulness resources created over that time and the resources they received during the in-person mindfulness sessions.

Results And Discussion

Qualitative data from the HOPE Wellbeing Questionnaire—Pre-survey: 76% of respondents reported diminished overall health and well-being. 74% believe their well-being is not a priority to employers at HOPE. According to this questionnaire, physical health is more urgent and serious than mental health and well-being. The implications of stress and burnout at HOPE are extensive, as 95% of respondents noted they experienced some stress levels up to “intense burnout.”

Mental health and well-being attributes that participants would like to improve included mental health in general, “mental fortitude,” stress reduction, and living in the moment. Employee suggestions for support from HOPE management include prioritizing mental health through mental health sick days. Not only do employees not feel that they are entitled to mental health sick days, but 78% of respondents stated that they either try not to take time off work or feel uncomfortable taking time off. This is detrimental to restoring or maintaining a healthy work/life balance. In addition, they would like to see enhanced communication, equitable opportunities, and pay reflective of the level of responsibility. Employees would also like to see the implementation of a mental and/or physical health program to support their well-being goals, such as mindfulness workshops, yoga, and a form of group support.

Employees at HOPE were satisfied that management respects work/life boundaries, which is important for demonstrating care for employee health. 75% of respondents to the Wellbeing questionnaire also find that managers are flexible when meeting their individual needs, which is a positive step toward stress reduction in the workplace. About 50% of HOPE health providers feel positive about their mental health. This means about half of employed caregivers feel that they lack some sort of mental health support, and there is an opportunity for HOPE to meet those

needs as an organization and demonstrate care for not only their employees but also those clients that the employees care for. When asked what type of mental and physical health support they receive from HOPE, 95% of the respondents stated that no support is offered, while the remaining indicated that the question did not apply. This implies that while the HOPE administration respects and acknowledges the importance of mental health, there is little in the way of mental and physical health support, which could be provided through mindfulness practice, weekly yoga classes, walking meditation groups, or weight loss programs. 100% of respondents to the HOPE well-being questionnaire reported that HOPE does not provide any tools for stress management that they are aware of. Additionally, direct care staff denied knowing how to take advantage of mental health resources. 80% of respondents said that if mental health programs were implemented, they would take advantage of them.

In some ways, mental health needs are acknowledged by the HOPE administration, but in others, more is needed to ensure health provider stress and burnout are being addressed in a meaningful way. One way to start providing support is to give space for employees to express their concerns and foster an environment of open communication. When asked if employees feel comfortable expressing mental health concerns at work, one employee stated that a close colleague was fired due to asking for mental health support. Overall, 74% of respondents said that they do not feel that HOPE has a culture conducive to the expression of mental health challenges. While employees face mental health challenges, they feel a sense of purpose and pride in their work and feel supported by their colleagues. 86% of the well-being survey respondents said they feel valued by their co-workers. Still, at least one respondent indicated that the administration could improve on recognizing the value and quantity of work done by direct care staff.

The Copenhagen Burnout Inventory results were collected from the eight domains, and the data graphed along those domains considered work, personal stressors, and management of those. Table 1 Demonstrates fatigue as a general personal stressor among HOPE employees.

Table 1.

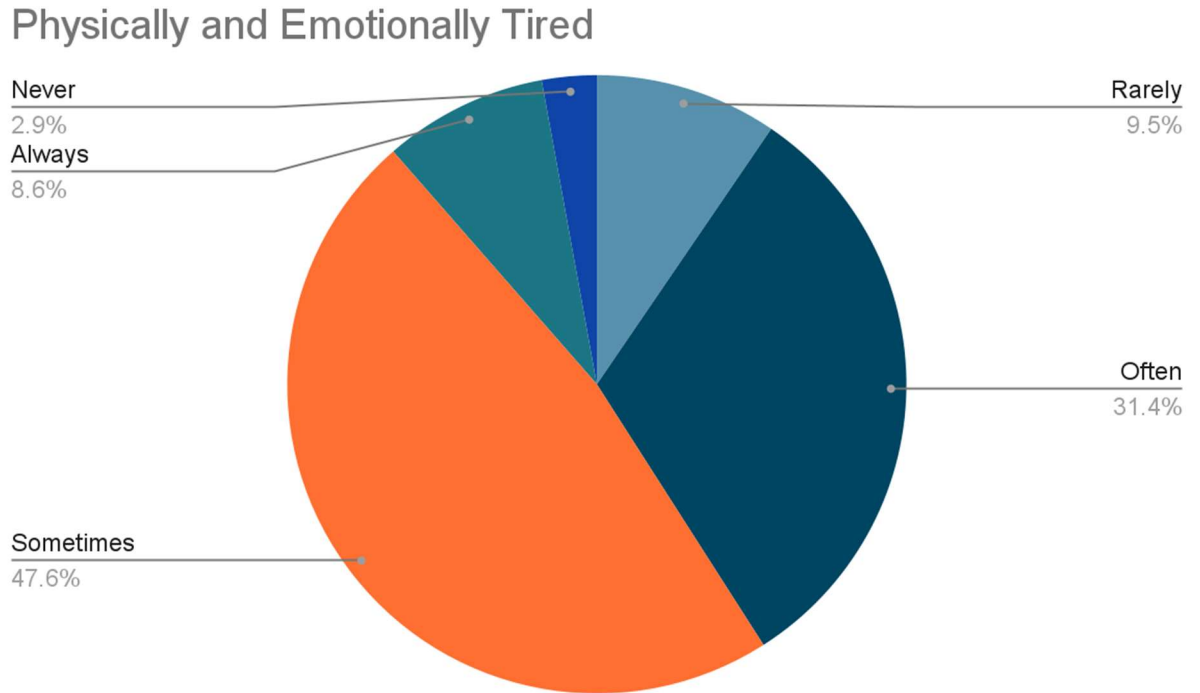


Table 2 demonstrates physical fatigue attributed to the workday. This is different from the everyday tiredness that HOPE employees experience. Table 2 is specific to workplace exhaustion.

Table 2.

Workday Fatigue

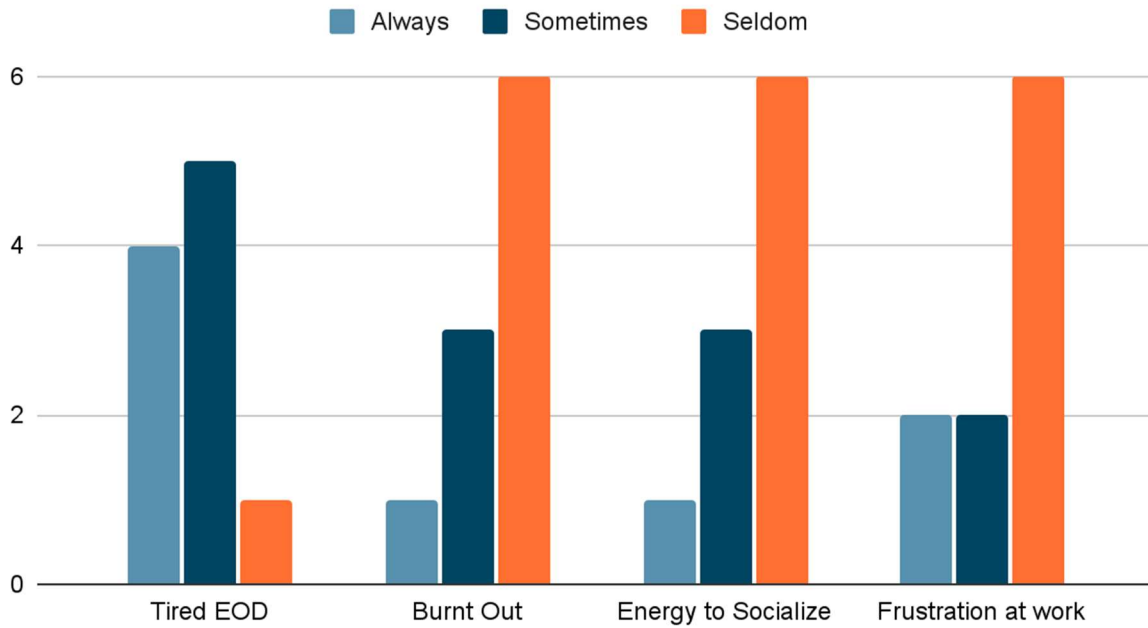


Table 3.

Do you feel that you give more than you get back when you work with clients?

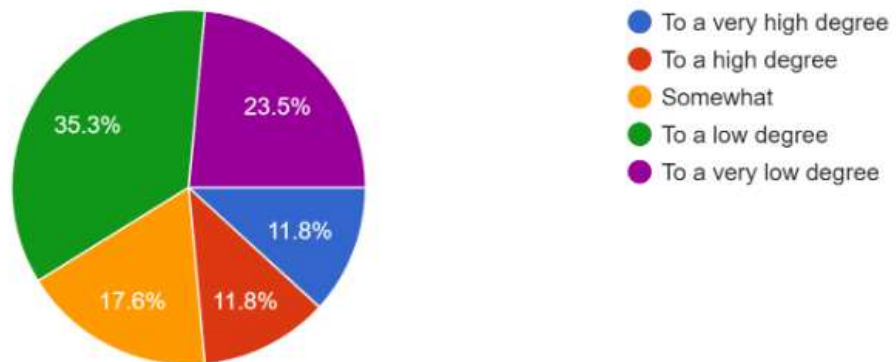


Table 4.

Does it drain your energy to work with clients?

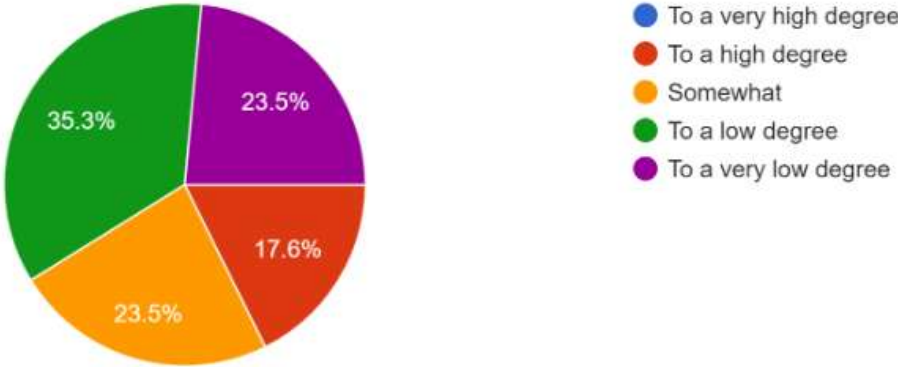
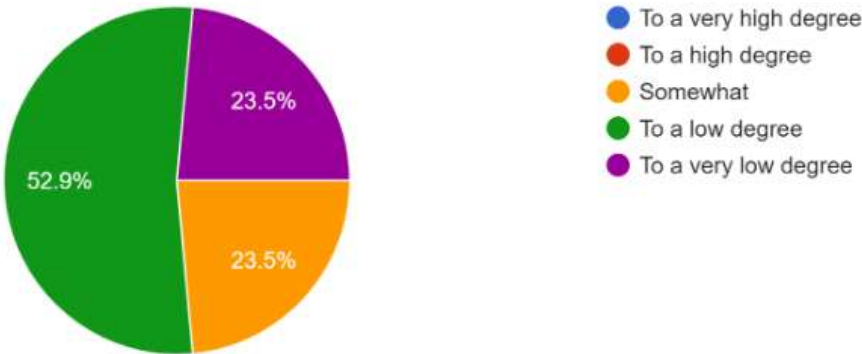


Table 5.

Do you find it hard to work with clients?



Tables 3-5 are related to working directly with clients. This is another aspect of the Copenhagen Burnout Inventory related to work stressors and client care. Based on the above data, employees at HOPE do not experience a great deal of stress when working with clients; instead, they face

stress outside direct client care. In the qualitative analysis, the glaring theme is that working directly with clients is why employees have stayed as long as they have and how they derive meaning from their work. These are important considerations when discussing burnout, as they can be used as preventative factors.

The results show mixed results on the extent of stress experienced by direct care health providers at HOPE, but there is little reported burnout and no plans to quit indicated in the data. Staff indicated that they could benefit from mental health support specifically. HOPE employees would also welcome physical health support. The data supports the findings that there must be more support between administrative staff and direct care providers. This significant work stress can be addressed through mental and physical health programming, like mindfulness, yoga, or a nutritional course.

Some data showed that HOPE employees rely heavily on one another and show great gratitude throughout the day. Many indicated they could only make it through the workday with their co-workers. Additionally, adult day health providers at HOPE find that working with clients is a rewarding aspect of the job, and direct care influences a small amount of their stress compared to other work-related factors.

Upon completing the 4-week, 12-session mindfulness program, HOPE health providers indicated that they understood stress and burnout and its causes and implications for work life. They also demonstrated knowledge of the material by participating in guided mindfulness discussions and group sessions. Participants in the study could find and verbalize where to find mindfulness resources after the program. Additionally, HOPE employees reported that mindfulness decreased their overall stress, and they could access resources.

Table 6 shows that mindfulness reduced stress and burnout levels in some way, according to participants after completing this program.

Table 6.

Do you feel like mindfulness reduced your stress or burnout level?

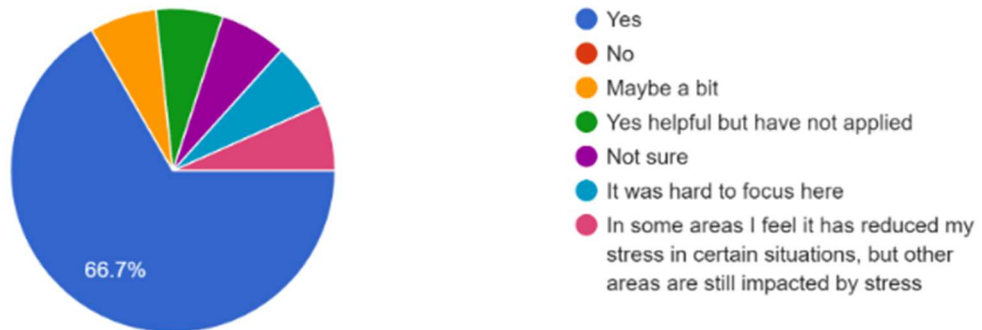


Table 7 indicates that most participants in the mindfulness program now know where and how to access resources created.

Table 7.

Do you know where and how to access stress reduction, burnout and mindfulness resources after the completion of this program?

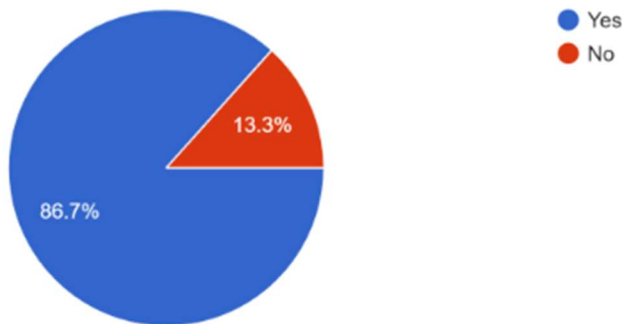
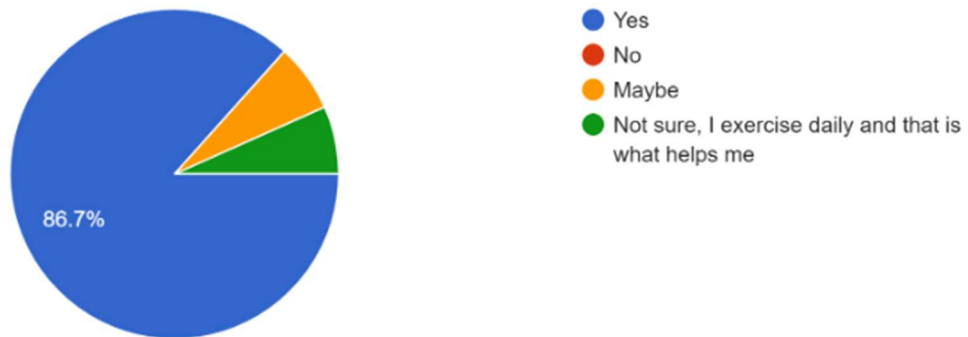


Table 8 outlines the intention of HOPE health providers to continue incorporating mindfulness into their workday.

Table 8.

Will you continue to incorporate mindfulness into your workday?



Conclusion

HOPe employees are experiencing some forms of stress in the workplace, and in some cases, these direct health providers are at risk for burnout. The mindfulness program implemented in this case met a few of the participants' identified needs, and the sessions were effective in reducing everyday stress. Additionally, participants indicated that they now know where to access mental health resources and are better informed about the principles of mindfulness and where and how a person can practice it.

Adult day health providers at HOPe found that mindfulness reduced stress and was a positive mental health tool. They also posited that it would be a source of stress reduction with continued practice. Supportive administration is the key to continued success in this initiative. Mental health support is vital to stress reduction in the workplace, and this study has shown that mindfulness is a valuable tool that offers support.

Finally, supportive administration is key to the success of a mental health program. Steps to mitigate burnout include including staff in decision-making, equal division of responsibilities, and general administrative support. Staff would also like recognition of the amount and quality

of work they do daily. Their time is valuable, and the employees at HOPE would like to know that the administration understands that by communicating changes openly and quickly. In conclusion, the HOPE administration has taken steps to identify stress, level of burnout, and avenues of combatting it.

Discussion

Learning Objectives set at the beginning of this capstone project were met during program implementation at HOPE. Those learning objectives included collaborating with other professionals, completing a needs assessment, professionalism in written and verbal communication, scholarly writing, implementing a program, understanding the principles of mindfulness, and leading occupational therapy group sessions.

The program's strengths were that the staff was present during the scheduled sessions and that the sessions were well-planned in advance. Weaknesses included limited time to conduct sessions and time of day. The 10-15-minute sessions could have been more effective had they been longer. Additionally, sessions were held in the morning, and feedback from the staff indicated that it would have been better to have them received and attended in the afternoon. Opportunities are to have longer sessions at another time of the day and incorporate other themes and interventions. Threats to the program are sustainability and administrative support to continue this program or some other programming to address mental and physical health concerns.

This mindfulness program implementation positively impacted the stress level and mental health needs of HOPE employees. Programs like this can lead to a better quality of working life and reduced attrition due to burnout. To carry over this program, it is recommended that the administration designate a team member to lead the initiative, schedule meeting times, and

advocate for the continuation of mental and physical health support. Other interventions include mental health groups covering other topics, reading clubs, yoga offerings, walking clubs, and nutritional support groups.

Limitations included the number of weeks and sessions that could be completed in the capstone project's time. Another limitation was the number of participants. Though the study recruited the target number of participants, future studies might include a larger pool to generalize the data to the larger population of adult day health providers. Future studies may also focus on one area of mindfulness or introduce multiple areas of mindfulness in their curriculum to determine effectiveness specific to the subject matter.

In summary, the success of this program informs the value of similar program interventions being established at HOPE to support mental well-being among health providers. Mindfulness was particularly helpful in reducing stress and preventing burnout in this study. Continuation of this program is highly recommended.

References

A Manager's Guide to Preventing Employee Burnout | Lyra Health. (2024, March 19).

Lyra Health. https://www.lyrahealth.com/resources/guide/managers-guide-to-preventing-employee-burnout/?utm_source=paidsearch&utm_medium=google&utm_campaign=pa-2022-q2-search-2022-managers-guide-preventing-burnout&utm_content=preventing-burnout-managers-guide-2022&utm_term=workplace%20burn%20out&_bt=648855934294&_bk=workplace%20burn%20out&_bm=p&_bn=g&_bg=127227439665*&gad_source=1&gclid=CjwKCAiA paarBhB7EiwAYiMwqroHybXut7CSTw9V8u9WE0RfpRZBZOhwM ApKymTAsOE47x U9Z5fypRoCIscQAvD_BwE

ABOUT - Massachusetts Adult Day Services Association. (2023, April 11).

Massachusetts Adult Day Services Association. <https://madsa.net/>

Adler, D. A., Tseng, E., Moon, K. C., Young, J. Q., Kane, J. M., Moss, E., Mohr, D. C., & Choudhury, T. (2022). Burnout and the Quantified Workplace: Tensions around Personal Sensing Interventions for Stress in Resident Physicians. *Proceedings of the ACM on Human-computer Interaction*, 6(CSCW2), 1–48.

<https://doi.org/10.1145/3555531>

Behavioral Change Models. (n.d.). https://sphweb.bumc.bu.edu/otlt/mph-modules/sb/behavioralchangetheories/BehavioralChangeTheories_print.html

Botha, E., Gwin, T., & Purpora, C. (2015). The effectiveness of mindfulness based programs in reducing stress experienced by nurses in adult hospital settings: a systematic review of quantitative evidence protocol. *JBI Database of Systematic Reviews and Implementation Reports*, 13(10), 21–29. <https://doi.org/10.11124/jbisrir-2015-2380>

Caregiver stress: Tips for taking care of yourself. (2023, August 9). Mayo Clinic.

<https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/caregiver-stress/art-20044784>

Carrion, A. J., Miles, J. D., Thompson, M. D., Journee, B., & Nelson, E. (2021). Program Evaluation Through the Use of Logic Models. *Currents in pharmacy teaching & learning*, 13(7), 789–795. <https://doi.org/10.1016/j.cptl.2021.03.006>

Center for Health Promotion University of Toronto, Health Communication Unit. (2001, April). *Introduction to Health Promotion Program Planning*. Mentalhealthpromotion. <http://www.mentalhealthpromotion.net/resources/introduction-to-health-promotion-program-planning.pdf>

Choithramani, A. (2022, November 18). *9 Experts reveal how agencies can reduce caregiver burnout*. CareAcademy. <https://careacademy.com/blog/caregiver-burnout/>

Compassion Definition | What is compassion. (n.d.). Greater Good.

<https://greatergood.berkeley.edu/topic/compassion/definition#:~:text=Compassion%20literally%20means%20%E2%80%9Cto%20suffer,though%20the%20concepts%20are%20related.>

Du Preez, J., Millsteed, J., Marquis, R., & Richmond, J. (2018). The role of Adult Day Services in supporting the occupational participation of people with dementia and their carers: An integrative review. *Healthcare*, 6(2), 43.

<https://doi.org/10.3390/healthcare6020043>

Employers need to focus on workplace burnout: Here's why. (2023, May 12).

<https://www.apa.org>. <https://www.apa.org/topics/healthy-workplaces/workplace->

Greater Good Science Center. (2024b, April 24). *Mindful Breathing for Adults* | *Greater Good in Education*. Greater Good in Education.

https://ggie.berkeley.edu/practice/mindful-breathing-for-adults/#tab__2

Green, A. A., & Kinchen, E. V. (2021). The Effects of Mindfulness Meditation on Stress and Burnout in Nurses. *Journal of holistic nursing: official journal of the American Holistic Nurses' Association*, 39(4), 356–368.

<https://doi.org/10.1177/08980101211015818>

Hogan, L. M., Björklund Carlstedt, A., & Wagman, P. (2023). Occupational therapy and stress-related exhaustion - a scoping review. *Scandinavian journal of occupational therapy*, 30(7), 1047–1063. <https://doi.org/10.1080/11038128.2023.2207802>

Hooper, C., Craig, J., Janvrin, D. R., Wetsel, M. A., & Reimels, E. (2010). Compassion satisfaction, burnout, and compassion fatigue among emergency nurses compared with nurses in other selected inpatient specialties. *Journal of Emergency Nursing*, 36(5), 420–427. <https://doi.org/10.1016/j.jen.2009.11.027>

How mindfulness can help you become More Humble. (n.d.-a). Greater Good.

https://greatergood.berkeley.edu/article/item/mindfulness_helps_you_become_more_humble

How mindfulness can help you become More Humble. (n.d.-b). Greater Good.

https://greatergood.berkeley.edu/article/item/mindfulness_helps_you_become_more_humble

Kellogg, W. K. (2004). Using logic models to bring together planning, evaluation, and action: logic model development guide. Michigan: WK Kellogg Foundation.

Keng, S. L., Smoski, M. J., & Robins, C. J. (2011). Effects of mindfulness on psychological health: a review of empirical studies. *Clinical psychology review*, 31(6), 1041–1056. <https://doi.org/10.1016/j.cpr.2011.04.006>

Kristensen, T. S., Borritz, M., Villadsen, E., & Christensen, K. B. (2005). The Copenhagen Burnout Inventory: A new tool for the assessment of burnout. *Work & Stress*, 19(3), 192–207. <https://doi.org/10.1080/02678370500297720>

Kristensen, T. S., Hannerz, H., Høgh, A., & Borg, V. (2005). The Copenhagen Psychosocial Questionnaire--a tool for the assessment and improvement of the psychosocial work environment. *Scandinavian journal of work, environment & health*, 31(6), 438–449. <https://doi.org/10.5271/sjweh.948>

Kuyken, W., Watkins, E., and Beck, A.T. 2005. Cognitive-behavior therapy for mood disorders. In *Psychotherapy in psychiatric disorders*, ed. 113-128. Oxford: Oxford University Press

Kuyken W., Watkins, E.R., Holden, E.R., White, K., Taylor, R.S., Byford, S., Evans, S., Radford, A., Teasdale, J.D., and Dalgeish, T., 2010. How does mindfulness-based cognitive therapy work? *Behaviour Research and Therapy* 48: 1105-1112

Latour, D. (n.d.). *Program planning and evaluation models: Introduction* [Slide show; Microsoft PowerPoint]. kodiak.wne.edu.

<https://kodiak.wne.edu/d21/le/content/98084/viewContent/1430100/View>

LeMoult, C. (2023, August 7). Thousands of adults with intellectual and developmental disabilities have lost access to day programs in Mass. *GBH*.

<https://www.wgbh.org/news/local/2023-04-27/thousands-of-adults-with-intellectual-and-developmental-disabilities-have-lost-access-to-day-programs-in-mass>

Liang, Y., Wang, Y., Li, Z., He, L., Xu, Y., Zhang, Q., You, G., & Mi, X. (2017). Caregiving burden and depression in paid caregivers of hospitalized patients: a pilot study in China. *BMC Public Health*, 18(1). <https://doi.org/10.1186/s12889-017-4563-6>

Lindquist, M. (2023, March 22). The real cost of turnover in healthcare. <https://www.oracle.com/human-capital-management/cost-employee-turnover-healthcare/#:~:text=The%20average%20cost%20of%20turnover,of%20the%20employee's%20yearly%20salary.>

Luken, M., & Sammons, A. (2016). Systematic Review of Mindfulness Practice for reducing Job Burnout. *The American Journal of Occupational Therapy*, 70(2), 7002250020p1-7002250020p10. <https://doi.org/10.5014/ajot.2016.016956>

Medication Administration Program (MAP). (2024). Mass.gov. <https://www.mass.gov/medication-administration-program-map>

Mental health and psychosocial considerations during the COVID-19 outbreak. (2020). World Health Organization. Retrieved June 11, 2024, from <https://www.who.int/publications/i/item/WHO-2019-nCoV-MentalHealth-2020.1>

Mindfulness. (n.d.). Greater Good. <https://greatergood.berkeley.edu/topic/mindfulness>

Molina-Praena, J., Ramirez-Baena, L., Gómez-Urquiza, J. L., Cañadas, G. R., De la Fuente, E. I., & Cañadas-De la Fuente, G. A. (2018). Levels of Burnout and Risk Factors in Medical Area Nurses: A Meta-Analytic Study. *International journal of environmental research and public health*, 15(12), 2800. <https://doi.org/10.3390/ijerph15122800>

Mosadeghrad, A. M., Ferlie, E., & Rosenberg, D. (n.d.). A study of relationship between job stress, quality of working life and turnover intention among hospital employees.

Health Services Management Research, 24(4), 170–181. <https://doi-org.wne.idm.oclc.org/10.1258/hsmr.2011.011009>

Murphy, L. R. (1996). Stress Management in work Settings: A Critical Review of the health effects. *American Journal of Health Promotion*, 11(2), 112–135. <https://doi.org/10.4278/0890-1171-11.2.112>

Nowrouzi B., Lightfoot, N., & Larivière M. (2015). Occupational Stress Management and Burnout Interventions in nursing and their Implications for Healthy work Environments: a literature review. *Workplace Health & Safety*, 63(7), 308–315. <https://doi.org/10.1177/2165079915576931>

Nowrouzi, B., Lightfoot, N., Larivière, M., Carter, L., Rukholm, E., Schinke, R., & Belanger-Gardner, D. (2015a). Occupational stress management and burnout interventions in nursing and their implications for healthy work environments. *Workplace Health & Safety*, 63(7), 308–315. <https://doi.org/10.1177/2165079915576931>

Person-Environment-Occupation-Performance model (PEOP) | OT Theory. (n.d.). <https://ottheory.com/therapy-model/person-environment-occupation-performance-model-peop>

Pérula-de Torres, L. A., Atalaya, J. C. V., García-Campayo, J., Roldán-Villalobos, A., Magallón-Botaya, R., Bartolomé-Moreno, C., Moreno-Martos, H., Melús-Palazón, E., Liétor-Villajos, N., Valverde-Bolívar, F. J., Hachem-Salas, N., Rodríguez, L. A., Navarro-Gil, M., Epstein, R., Cabezón-Crespo, A., Moreno, C. M., & collaborative group of the MINDUDD study (2019). Controlled clinical trial comparing the effectiveness of a mindfulness and self-compassion 4-session programme versus an 8-session programme to reduce work stress and burnout in family and community medicine physicians and

nurses: MINDUDD study protocol. *BMC family practice*, 20(1), 24.

<https://doi.org/10.1186/s12875-019-0913-z>

Pollock, A., Campbell, P., Cheyne, J., Cowie, J., Davis, B., McCallum, J., McGill, K., Elders, A., Hagen, S., McClurg, D., Torrens, C., & Maxwell, M. (2020). Interventions to support the resilience and mental health of frontline health and social care professionals during and after a disease outbreak, epidemic or pandemic: a mixed methods systematic review. *Cochrane Library*, 2020(11). <https://doi.org/10.1002/14651858.cd013779>

Professional, C. C. M. (n.d.). *Caregiver burnout*. Cleveland Clinic.

<https://my.clevelandclinic.org/health/diseases/9225-caregiver-burnout>

Programs for Adults — House of Possibilities. (n.d.). House of Possibilities.

<https://www.houseofpossibilities.org/programs-for-adults>

Rainen, K. B. (2020, April 28). *Massachusetts begins to regulate adult day care*. Tamkin & Hochberg, LLP. <https://tamkinhochberg.com/massachusetts-begins-to-regulate-adult-day-care/>

Redhead, K., Bradshaw, T., Braynion, P., & Doyle, M. (2010). An evaluation of the outcomes of psychosocial intervention training for qualified and unqualified nursing staff working in a low-secure mental health unit. *Journal of Psychiatric and Mental Health Nursing*, 18(1), 59–66. <https://doi.org/10.1111/j.1365-2850.2010.01629.x>

Regulatory Review of Adult Day Services: Final Report, 2014 Edition. (2014, November 30). ASPE. <https://aspe.hhs.gov/reports/regulatory-review-adult-day-services-final-report-2014-edition-0>

Restrepo, J., & Lemos, M. (2021). Addressing psychosocial work-related stress interventions: A systematic review. *Work, 70*(1), 53–62. <https://doi.org/10.3233/wor-213577>

Sarazine, J., Heitschmidt, M., Vondracek, H., Sarris, S., Marcinkowski, N., & Kleinpell, R. (2020). Mindfulness workshops Effects on nurses' burnout, stress, and mindfulness skills. *Holistic Nursing Practice, 35*(1), 10–18.

<https://doi.org/10.1097/hnp.0000000000000378>

Shapiro, S. L., Astin, J. A., Bishop, S. R., & Cordova, M. (2005). Mindfulness-Based stress Reduction for health care professionals: results from a randomized trial.

International Journal of Stress Management, 12(2), 164–176.

<https://doi.org/10.1037/1072-5245.12.2.164>

Shin, J., McCarthy, M., Schmidt, C., Zellner, J., Ellerman, K., & Britton, M. (2022).

Prevalence and predictors of burnout among occupational therapy practitioners in the United States. *the American Journal of Occupational Therapy, 76*(4).

<https://doi.org/10.5014/ajot.2022.048108>

Stress. (2022, June 17). <https://www.who.int/news-room/questions-and-answers/item/stress>

Striving for mental health excellence in the workplace. (n.d.). <https://www.apa.org>.

<https://www.apa.org/topics/healthy-workplaces/mental-health>

Torres, L. P., Atalaya, J. C. V., García-Campayo, J., Roldán-Villalobos, A., Magallón-Botaya, R., Bartolomé-Moreno, C., Moreno-Martos, H., Melús-Palazón, E., Liétor-Villajos, N., Valverde-Bolívar, F. J., Hachem-Salas, N., Rodríguez, L., Navarro-Gil, M., Epstein, R., Cabezón-Crespo, A., & Moreno, C. M. (2019). Controlled clinical trial

comparing the effectiveness of a mindfulness and self-compassion 4-session programme versus an 8-session programme to reduce work stress and burnout in family and community medicine physicians and nurses: MINDUDD study protocol. *BMC Family Practice*, 20(1). <https://doi.org/10.1186/s12875-019-0913-z>

Westmore, M. R., & Anderson, K. A. (2024). Adult Day Services for People With Intellectual and Developmental Disabilities: A Scoping Review. *Family & community health*, 47(3), 209–218. <https://doi.org/10.1097/FCH.0000000000000406>

Williams, J. M. G., & Kabat-Zinn, J. (2013). *Mindfulness: diverse perspectives on its meaning, origins and applications* (Vol. 12) [PDF]. Routledge.

<https://api.taylorfrancis.com/content/books/mono/download?identifierName=doi&identifierValue=10.4324/9781315874586&type=googlepdf>

World Health Organization: WHO. (2019, May 28). Burn-out an “occupational phenomenon”: International Classification of Diseases. *World Health Organization*. <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>

World Health Organization: WHO. (2022, June 17). *Stress*. <https://www.who.int/news-room/questions-and-answers/item/stress>

Appendices

Appendix A: IRB and Approval form

Appendix B: Weekly Materials and Products

Appendix C: Website Resources

Appendix A:



Subgroup of the IRB & Human Subjects Committee
FWA00010736 Approval Form[&]

Responsible Director: _____ Dr. Levine _____

Title of Project: Exploring burnout program^{46.104.d} effectiveness with adult day health providers.

College Proposal Number: ___ COP-IRB#227

This research proposal is exempt under Federal Regulation ___ 45 CFR 46.104.d.3.i

It is deemed acceptable according to the Belmont Principles and the American Psychological Association's Ethical Guidelines for the Use of Human Participants for a period of one year.*

_____ This research proposal has undergone an expedited review under Federal Regulation _____. It is deemed acceptable according to the Belmont Principles and the American Psychological Association's Ethical Guidelines for the Use of Human Participants for a period of one year.*

_____ This research does not qualify for exemption or expedited review and will need to be reviewed by the entire board.

Signature _____ *Mona Levine*
Date _____ 5/8/2024 _____

Renewal requests due before ___ 5/8/2025 _____

[&] Note: Authority to approve exempt or expedited research originating within the College of Pharmacy.

* Note: It is your responsibility to notify the IRB of any adverse events that occur during your research. You must also request an additional review before you introduce changes to the proposed protocol. Maintain a copy of your original application, any requested changes, and this signed approval form. You will need to submit these if you apply for a renewal.

**STRESSED?
BURNT OUT?**

JOIN OUR CONFIDENTIAL STUDY:
EXPLORING BURNOUT PROGRAM
EFFECTIVENESS WITH ADULT DAY
HEALTH PROVIDERS

**SEEKING ADULT
DAY HEALTH
PROVIDERS**

WHAT DO I DO?

- SIGN A CONSENT FORM
- FILL OUT A SURVEY
- ATTEND 4-WEEKS OF MINDFULNESS SESSIONS

SURVEYS:

- COPENHAGEN BURNOUT INVENTORY



- COPENHAGEN PSYCHOSOCIAL QUESTIONNAIRE (ENGLISH VERSION)



- WELLBEING QUESTIONNAIRE



MINDFULNESS SESSIONS:

- 10-MINUTES
- MON - WED - FRI
- BEGINNING OF THE DAY
- PARTICIPATION IS VOLUNTARY!

katy.maguire@wne.edu
katy.maguire1@gmail.com
774-274-7760

Study Approved by WNE Internal Review Board

Exploring burnout program effectiveness with adult day health providers

Appendix B: Recruitment Email

Dear future participant,

Are you feeling stressed or burnt out at work? Do you feel like you are sacrificing your well-being? Please consider participating in my study on burnout, stress reduction, and prevention, "Exploring burnout program effectiveness with adult day health providers". This study is intended to research the impact of a mindfulness-based program on addressing stress and burnout and has been approved by the Western New England University Institutional Review Board.

To participate in this study, you must be 18 years of age, employed by House of Possibilities in Easton, MA, and employed for over one month. The surveys and consent forms are in English.

The first step is clicking on a link and e-signing a consent form for this confidential study. Next, you will take three surveys to evaluate your current stress, burnout, and well-being level. Finally, you will be asked to participate in weekly mindfulness sessions. These sessions are voluntary and will be held before the morning meetings.

For further information regarding participation, please contact me directly:

Katy.maguire1@gmail.com

Katy.maguire@wne.edu

774-274-7760

Thank you for considering,

Katy Maguire (she/her/hers)

Doctor of Occupational Therapy Student '24

Western New England University

1215 Wilbraham Rd, Springfield, MA 01119

Survey Links:

Copenhagen Burnout Inventory



Copenhagen Psychosocial



HOPe Wellbeing Questionnaire



Exploring burnout program effectiveness with adult day health providers

Appendix C: Copenhagen Burnout Inventory

For your unique identifier, please put the following together to form a username.
Favorite Color+Favorite Animal+Middle Initial


Example: BlueElephantR


(If you do not have an middle initial, please use your DAY of birth. Ex. 10/11/90 would be BlueElephant11)

Your answer

Exploring burnout program effectiveness with adult day health providers

CBI Simple Inventory

katy.maguire1@gmail.com [Switch account](#) 

 Not shared

How often do you feel tired?

Always

Often

Sometimes

Rarely

Never

How often are you physically exhausted?

Always

Often

Sometimes

Rarely

Never

Exploring burnout program effectiveness with adult day health providers

Page 1 of 10

Survey Questions

How often are you emotionally exhausted?

- Always
- Often
- Sometimes
- Rarely
- Never

How often do you think: "I can't take it anymore"?

- Always
- Often
- Sometimes
- Rarely
- Never

How often do you feel worn out?

- Always
- Often
- Sometimes
- Rarely
- Never

Exploring burnout program effectiveness with adult day health providers

How often do you feel weak and easily get sick?

- Always
- Often
- Sometimes
- Rarely
- Never

Is your work emotionally exhausting?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Do you feel burnt out because of your work?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Exploring burnout program effectiveness with adult day health providers

Page 2 of 10

Survey instrument 1/1/2020/2021

Does your work frustrate you?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Do you feel worn out at the end of the working day?

- Always
- Often
- Sometimes
- Seldom
- Never

Are you exhausted in the morning at the thought of another day at work?

- Always
- Often
- Sometimes
- Seldom
- Never

Exploring burnout program effectiveness with adult day health providers

Do you feel that every working hour is tiring for you?

- Always
- Often
- Sometimes
- Seldom
- Never

Do you have enough energy for family and friends during your off time?

- Always
- Often
- Sometimes
- Seldom
- Never

Do you find it hard to work with clients?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Exploring burnout program effectiveness with adult day health providers

Do you find it frustrating to work with clients?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Does it drain your energy to work with clients?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Do you feel that you give more than you get back when you work with clients?

- To a very high degree
- To a high degree
- Somewhat
- To a low degree
- To a very low degree

Exploring burnout program effectiveness with adult day health providers

Are you tire of working with clients?

- Always
- Often
- Sometimes
- Seldom
- Never

Do you sometimes wonder how long you will be able to continue working with clients?

- Always
- Often
- Sometimes
- Seldom
- Never

Submit

Clear form

This content is neither created nor endorsed by Google. [Report Abuse](#) - [Terms of Service](#) - [Privacy Policy](#)

Google Forms

Exploring burnout program effectiveness with adult day health providers

Appendix D: Copenhagen Psychosocial Questionnaire

For your unique identifier, please put the following together to form a username.

Favorite Color+Favorite Animal+Middle Initial

Example: BlueElephantR

(If you do not have an middle initial, please use your DAY of birth. Ex. 10/11/90 would be BlueElephant11)

Your answer _____

Burnout Job Satisfaction HOPE Questionnaire

Copenhagen Psychosocial Questionnaire (English version)
used in the PUMA study

katy.maguire1@gmail.com [Switch account](#)



Not shared

Is your workload unevenly distributed so it piles up?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Do you get behind with your work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:



Exploring burnout program effectiveness with adult day health providers

How often can you take it easy and still do your work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Do you have enough time for your work tasks?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you have to keep your eyes on lots of things while you work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Does your work require that you remember a lot of things?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Does your work demand that you are good at coming up with new ideas?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Does your work require you to make difficult decisions?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Does your work put you in emotionally disturbing situations?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Is your work emotionally demanding?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Page 4 of 10

Survey Questions

Do you get emotionally involved in your work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Does your work require that you hide your feelings?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Does your work require that you do not state your opinion?

- Always
- Often
- Sometimes
- Seldom
- Never/hardly ever
- Other:

Do you have a large degree of influence concerning your work?

- Always
- Often
- Sometimes
- Seldom
- Never/hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you have a say in choosing who you work with?

- Always
- Often
- Sometimes
- Seldom
- Never/hardly ever
- Other:

Can you influence the amount of work assigned to you?

- Always
- Often
- Sometimes
- Seldom
- Never/hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you have any influence on WHAT you do at work?

- Always
- Often
- Sometimes
- Seldom
- Never/hardly ever
- Other:

Is your work varied?

- Always
- Often
- Sometimes
- Seldom
- Never/hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Does your work require you to take the initiative?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you have the possibility to learning new things through your work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Can you use your skills or expertise in your work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Is your work meaningful?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you feel that the work you do is important?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you feel motivated and involved in your work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Would you like to stay at your current place of work for the rest of your working life?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you enjoy telling others about your place of work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you feel that the problems at your place of work are yours too?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you feel that your place of work is of great personal importance to you?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

At your place of work, are you informed well in advance concerning for example important decisions, changes, or plans for the future?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you receive all the information you need in order to do your work well?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you know exactly how much say you have at work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Does your work have clear objectives?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you know exactly which areas are your responsibility?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you know exactly what is expected of you at work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

447 / 451

QUESTION AND ANSWERS (1 OUT OF 4) ANSWERED

Do you do things at work, which are accepted by some people but not by others?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Are contradictory demands placed on you at work?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you sometimes have to do things, which ought to have been done in a different way?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Do you sometimes have to do things, which seem to you to be unnecessary?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Does your immediate supervisor: Make sure that the individual member of staff has good development opportunities?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Does your immediate supervisor: Gives high priority to job satisfaction?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

Is your immediate supervisor good at work planning?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Is your immediate supervisor good at solving conflicts?

- To a very large extent
- To a large extent
- Somewhat
- To a small extent
- To a very small extent
- Other:

Exploring burnout program effectiveness with adult day health providers

How often do you get help and support from your colleagues?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

How often do you get help and support from your immediate superior?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

20 of 26

QUESTIONS

How often does your superior talk with you about how well you carry out your work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

How often do your colleagues talk with you about how well you carry out your work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you work isolated from your colleagues?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Is it possible for you to talk to your colleagues while you are working?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Is there a good atmosphere between you and your colleagues?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Is there good cooperation between the colleagues at work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Exploring burnout program effectiveness with adult day health providers

Do you feel part of a community at your place of work?

- Always
- Often
- Sometimes
- Seldom
- Never/Hardly ever
- Other:

Are you worried about becoming unemployed?

- Yes
- No

Are you worried about new technology replacing you?

- Yes
- No

Are you worried about it being difficult for you to find another job if you became unemployed?

- Yes
- No

Exploring burnout program effectiveness with adult day health providers

Are you worried about being transferred to another job role against your will?

- Yes
- No

Are you happy with your work prospects?

- Very Satisfied
- Satisfied
- Unsatisfied
- Highly unsatisfied
- Not Relevant

Are you happy with your physical working conditions?

- Very Satisfied
- Satisfied
- Unsatisfied
- Highly unsatisfied
- Not Relevant

Exploring burnout program effectiveness with adult day health providers

Are you happy with the way your abilities are used?

- Very Satisfied
- Satisfied
- Unsatisfied
- Highly unsatisfied
- Not Relevant

Are you happy with your job as a whole, everything taken into consideration?

- Very Satisfied
- Satisfied
- Unsatisfied
- Highly unsatisfied
- Not Relevant

Submit

Clear form

Never submit passwords through Google Forms.

This content is neither created nor endorsed by Google. [Report Abuse](#) - [Terms of Service](#) - [Privacy Policy](#)

Google Forms

Exploring burnout program effectiveness with adult day health providers

Appendix E: Wellbeing Questionnaire

HOPe Wellbeing Questionnaire

For your unique identifier, please put the following together to form a username.
Favorite Color+Favorite Animal+Middle Initial

Example: BlueElephantR

(If you do not have an middle initial, please use your DAY of birth. Ex. 10/11/90 would be BlueElephant11)

Your answer

1. How do you feel about your overall health and wellbeing?
2. Do you feel like your employers prioritize your well-being? Please explain.
3. What are aspects of your health and wellbeing you'd like to improve?
4. What are your top three suggestions for programs the organization could offer to improve employee health and wellbeing?
5. Do you believe your organization respects your work and life boundaries?
 - a. Yes
 - b. No
 - c. Other
6. Do you feel like your manager is flexible to meet your daily needs?
 - a. Yes
 - b. No
 - c. Other
7. Do you feel comfortable taking time off?
 - a. Yes
 - b. No
 - c. Other
8. Are you able to successfully balance work and life? Please explain.
9. How do you feel about your physical health?
10. How do you feel about your mental health?
11. What type of mental health support do you get from the HOPe organization? (Group classes, mindfulness, mental health days, etc.)
12. What type of physical health support do you get from the HOPe organization? (Gym membership, yoga classes, weight watchers, etc.)
13. What tools does HOPe provide for you to manage your stress?

Exploring burnout program effectiveness with adult day health providers

14. Does HOPE give physical and mental health equal importance? Please explain.
15. Describe how comfortable you are talking about mental health at work.
16. How happy are you to work for this organization?
 - a. 1 – Not Happy
 - b. 5 – Very Happy
17. How proud are you to work for this organization?
 - a. 1 – Not very
 - b. 5 – Very
18. Does your work give you a sense of purpose? Please explain.
19. Do you feel that the work you do is important? Please explain.
20. Do you feel that people at work genuinely care about your health and wellbeing?
 - a. Yes
 - b. No
 - c. Maybe
 - d. Other
21. Do you feel valued for what you do at work?
 - a. Yes
 - b. No
 - c. Other
22. Do you know how to take advantage of mental health benefits at work?
 - a. Yes
 - b. No
 - c. Other
23. If mental health programs were put in place, would you take advantage of them?
 - a. Yes
 - b. No
 - c. Maybe
 - d. Other
24. What could be done to prevent burnout at this organization
25. What is your current level of burnout?
 - a. No stress or burnout
 - b. Some stress
 - c. Some burnout
 - d. Intense burnout
 - e. Plan to quit
26. What is your main source of stress and/or burnout?

Appendix F: Post Survey

For your unique identifier, please put the following together to form a username.
Favorite Color+Favorite Animal+Middle Initial

Example: BlueElephantR

(If you do not have an middle initial, please use your DAY of birth. Ex. 10/11/90 would be BlueElephant11)

Your answer

Did you participate in the burnout, stress and mindfulness study at HOPe?

- Yes
- No
- Sometimes

What did you learn about mindfulness?

Your answer

Do you feel like mindfulness reduced your stress or burnout level?

- Yes
- No
- Other: _____

Exploring burnout program effectiveness with adult day health providers

Do you know where and how to access stress reduction, burnout and mindfulness resources after the completion of this program?

- Yes
- No
- Other: _____

Will you continue to incorporate mindfulness into your workday?

- Yes
- No
- Maybe
- Other: _____

Exploring burnout program effectiveness with adult day health providers

Appendix G: Informed Consent

Study Title: Exploring Burnout Program Effectiveness with Adult Day Health Providers

Primary Investigator/Institution:

Dr. Debra Latour, OT, PP-OTD, M.Ed., OTR Western New England University

Katy Maguire, OT/s, Western New England University

We are inviting you to participate in a research study. This study has been approved by the institutional review board (IRB) at Western New England University (WNEU). You were invited by Katy Maguire, to participate because you are an employee of House of Possibilities (HOPE) in Easton, MA and provide direct client care. This research consent form explains why this research study is being done, what is involved in participating, the possible risks and benefits of participation, and your rights as a participant in this study. This study will take place from April, 2024 to July, 2024 in partnership with the Occupational Therapy Department in the College of Pharmacy & Health Sciences at Western New England University.

Please read this form carefully and ask any questions that you may have.

Purpose of the Study

The purpose of the study is to determine your current level of burnout and provide a mindfulness based program designed to alleviate the burnout.

Description of the Study Procedures

The inclusion criteria designate currently employed adult day health provider that provides direct client care and is 18 or older. Any participants not employed by HOPE or who have been employed for less than one month are excluded from participation as are members of administrative staff that do not provide direct client care.

Exploring burnout program effectiveness with adult day health providers

Initial surveys will be sent to participants to gather baseline data on burnout level or threat for developing burnout. Final surveys will be administered to compare burnout or threat of burnout data after the implementation of a mindfulness program. Two additional contacts will occur when the study is complete to request participants take the final survey and to thank the participants. The second will serve as a reminder to complete the survey if not already completed.

If you are eligible and agree to participate in this study, you will be asked to:

Read and respond to an initial contact via email and commit to participating in three surveys that take 20 minutes to complete and weekly mindfulness sessions for a period of four weeks. The time for each component is:

Initial survey: one time, 20 minutes

Final survey: one time, 20 minutes

Closing email: one time, 5 minutes

Weekly Mindfulness: four weeks, 2 hours

Total time: 3 hours per participant

The following things will happen:

- Complete Pre-surveys using the QR codes provided in the flyer to gather data regarding burnout and stress

Participate in mindfulness curriculum

- Duration 10 min/3 days per week x 4 weeks

Complete Post-surveys electronically using the QR codes provided in an email after 4 weeks mindfulness training

Risks or Discomforts of the Study

Exploring burnout program effectiveness with adult day health providers

There are risks to participating in any research study. You will unlikely be at risk for any physical or psychological harm due to your participation in this study. You may find the questions or the interview to cause distress and/or fatigue. You may decline to answer any questions and voice concerns to the investigators at any time.

Benefits of Being in the Study

The benefits of participation are an increased knowledge base for innovation in OT and the procedures to follow to develop and implement a novel idea. You will receive no payment for participating in the study.

Costs of Being in the Study

There will be no cost to you for participating.

Confidentiality

Research studies have a risk for some loss of privacy. To help prevent the loss of privacy, your name will not be recorded on any study documents. We will assign a research identification number to all participants, which will be included in all study documentation. All records will be kept strictly at Western New England University, College of Pharmacy / Health Sciences.

The results of this research study may be published in a medical book or journal or used to teach others. However, your name or other identifiable information will not be used without your permission. None of the information we may publish or present in any reports, presentations, or papers will include information that can identify you as a participant in this study.

Right to Refuse or Withdraw

The decision to participate in this study is entirely up to you. You will be excluded from the study if you choose not to sign this form. You can stop being in the study at any time. Tell the

Exploring burnout program effectiveness with adult day health providers

research investigator immediately if you are thinking about stopping or decide to stop. Your employment will not be affected if you refuse to participate.

Right to Ask Questions and Report Concerns

You have the right to ask questions about this research study before, during, or after the research.

If you have any questions about the study at any time, don't hesitate to contact the Student

Primary Investigator, Katy Maguire, via telephone at (413) 782-3111. You may also contact the Faculty Primary Investigator, Dr. Debra Latour, OT, PP-OTD, M.Ed., OTR, via telephone at (413)782-3111.

If you wish to speak to the Institutional Review Board (IRB), then please get in touch with Dr. Jessica Carlson, Professor of Psychology and Chair of the WNEU IRB,

Jessica.outhouse@wne.edu or via telephone at 413-796-2325 or Dr. Minna Levine, College of Pharmacy / Health Sciences, Member of the IRB at minna.levine@wne.edu. The Western New

England University Institutional Review Board has reviewed and approved this research project.

ELECTRONIC CONSENT: Please select your choice below. You may print a copy of this consent form for your records. Clicking on the "Agree" button indicates that

- You have read the above information
- You voluntarily agree to participate
- You are 18 years of age or older
- You provide direct care to adult day program clients
- You have worked at HOPE for more than 1 month
- You are not a member of the administration

- Agree
 Disagree

Exploring burnout program effectiveness with adult day health providers

Appendix H: CITI Completions



Completion Date: 01-Nov-2021
Expiration Date: 31-Oct-2024
Record ID: 44781994

This is to certify that:

Katy Maguire

Has completed the following CITI Program course:

Biomedical Responsible Conduct of Research
(Curriculum Group)

Biomedical Responsible Conduct of Research
(Course / Learner Group)

1 - RCR
(Stage)

Under requirements set by:

Western New England University



Not valid for renewal of certification through CMC.



Collaborative Institutional Training Initiative

Verify at www.citiprogram.org/verify/w3845caaa-14d1-4310-6e2a-485138878b2b-44781994

Exploring burnout program effectiveness with adult day health providers

Completion Date: 23-Feb-2024
Expiration Date: 23-Feb-2027
Record ID: 61371197

This is to certify that:

Tom Unsworth

Has completed the following CITI Program course:

Social & Behavioral Research - Basic/Refresher
(Curriculum Group)
Social & Behavioral Research
(Course Learner Group)
1 - Basic Course
(Stage)

Under requirements set by:

Stonehill College


CITI
Collaborative Institutional Training Initiative
101 PE 210 Avenue, Suite 220
Fort Lauderdale, FL 33311 US
www.citiprogram.org

Not valid for renewal of certification through CME.

Generated on 16-Apr-2024. Verify at www.citiprogram.org/verify?wle36c084-0850-43b0-9489-ee3a5091b051-61371197

Exploring burnout program effectiveness with adult day health providers

Appendix I: Support Letters/Correspondence

 **Katy Maguire** <katy.maguire@gmail.com> Thu, Apr 25, 7:15AM (4 days ago) ☆ 😊 ↶ ⓘ
to Tom →

Good morning, Tom!
Per my last email, I need a support letter on HOPe letterhead for the recruitment part of and the nature of the project. I am attaching an example.

At this point, we are at a crucial stage of our project. We are looking to conduct a Stress and Burnout program at HOPe, which we believe will have a significant impact. As part of this program, the day health service providers will be asked to sign a consent form and fill out 3 surveys to begin work on this project. The data collected and the findings will be instrumental in shaping our future strategies and will be made available to stakeholders at HOPe.

To help identify and recruit these participants, I have created and attached a flyer to this email and the proposed recruitment email for you to look at. The IRB should be approved soon, and a few more documents need to be signed and submitted.

Please let me know if you have any questions or concerns, and be on the lookout for a few more emails from me.

Thank you,
Katy Maguire

 **Tom Unsworth** Thu, Apr 25, 10:07AM (4 days ago) ☆ 😊 ↶ ⓘ
to me →

Hi Katy,

Attached is the signature page, I'll have the letter by end of day!

Thanks,

Tom
☺
—

Tom Unsworth
Sr. Director of Family Supports & Professional Development
House of Possibilities
(508) 285-0555 Ext. 204
Tunsworth@houseofpossibilities.org

Exploring burnout program effectiveness with adult day health providers

Hi Katy,

Thank you again for your interest in working with HOPE and your dedication to helping us achieve our mission.

I'm delighted to connect you with Tom Unsworth, our Senior Director of Family Support and Professional Development. He oversees all aspects of training and staff development at HOPE and possesses extensive experience in mentoring and supporting individuals like yourself.

Given your enthusiasm and commitment to helping HOPE empower its staff, I believe Tom would be the ideal mentor to guide you through this process. He can provide valuable insight and guidance as you develop your ideas and contribute to enhancing the well-being and effectiveness of our staff.

As HOPE continues to grow, we recognize the crucial importance of equipping our team with the tools and resources necessary to excel in their roles while prioritizing their personal well-being and managing stress. Your contributions and Tom's expertise can play a significant role in this endeavor.

I'm truly excited to see what you and Tom can achieve together in this process. Please don't hesitate to reach out if you have any questions or require any further assistance.

Best regards,



Kelly Tallman, Chief Operating Officer

Work: (508) 205-0555 EXT: 225

House of Possibilities (HOPE) | [350 Washington Street](#) | Easton, MA 02356

Visit [houseofpossibilities.org](#) and *donate today!*

[Quoted text hidden]

Exploring burnout program effectiveness with adult day health providers



TO: Katy Maguire

FROM: Tom Unsworth

DATE: 4/29/24

SUBJECT: Capstone Project Approval

Dear Katy,

We are pleased to approve the implementation of your project, "Exploring Burnout Program Effectiveness With Adult Day Health Providers." Once the IRB is approved, please go ahead and send out your recruitment emails, post flyers, and start mindfulness sessions as outlined in the IRB. Please keep us updated on the status and approval of the IRB. We are excited to see the results.

Sincerely,

A handwritten signature in black ink, appearing to read "Tom Unsworth", written over a light blue horizontal line.

Tom Unsworth
Sr. Program Director, Family Supports and Staff Development
House of Possibilities Inc.

Appendix B: Materials and Products

Week 1 Materials: Self-Compassion, Mindfulness and Stress

Confidential

Customized for Lorem Ipsum LLC

Version 1.0



Mindfulness and Stress

How does mindfulness alleviate stress?



What is mindfulness?

Mindfulness can be defined as “the awareness that emerges through paying attention, on purpose, and nonjudgmentally to the unfolding of experience moment by moment” ([Kabat-Zinn, 2003](#), p. 145). The concept of mindfulness is steeped in Buddhist values, with the emphasis on switching modes of thinking from mindless to mindful ([Reid, 2009](#)). A person who practices mindfulness goes about his or her day being in the present moment and acknowledging, rather than judging, events and emotions. Specific mindfulness exercises can include mindful eating, sitting meditation, body scanning, and hatha yoga ([Kabat-Zinn, 1982](#)).

Taken from AJOT: Luken, M., & Sammons, A. (2016). Systematic Review of Mindfulness Practice for reducing Job Burnout. *the American Journal of Occupational Therapy*, 70(2), 7002250020p1-7002250020p10.





Problems to solve

- 1 Burnout/Stress
- 2 Mental/Physical Health Problems
- 3 Empathy/Compassion fatigue
- 4 Depression/Anxiety



Mindfulness Practice for Self-compassion

Facilitating Compassionate and Empathetic Care



Self-Compassion

Put your oxygen mask on first. You have self-compassion within you, here is a mindfulness practice to tap into that. Self-compassion leads to compassionate care.

Greater Good Science Center. (2023, December 18). *Mindful Self-Compassion for Adults* | *Greater Good in Education*. Greater Good in Education.

https://ggie.berkeley.edu/practice/mindful-self-compassion-for-adults/#tab__2

Let's Practice Self - Compassion

https://soundcloud.com/mirjam-schell/sets/self-compassion-skills-14-days?si=250113bfa6014dd0abcfab92e7e1147d&utm_source=clipboard&utm_medium=text&utm_campaign=social_sharing

Benefits of Self-Compassion

- Self-soothing. ...
- Better self-esteem. ...
- Higher life satisfaction. ...
- More fulfilling relationships. ...
- Fewer symptoms of anxiety and depression. ...
- Increased motivation to take risks. ...
- Promotes a growth mindset.



Cpt, S. C. (2022, September 7). *The benefits of Self-Compassion*. Psych Central. <https://psychcentral.com/blog/practicing-self-compassion-when-you-have-a-mental-illness>



Reflection

What does it feel like to soothe yourself in this way?

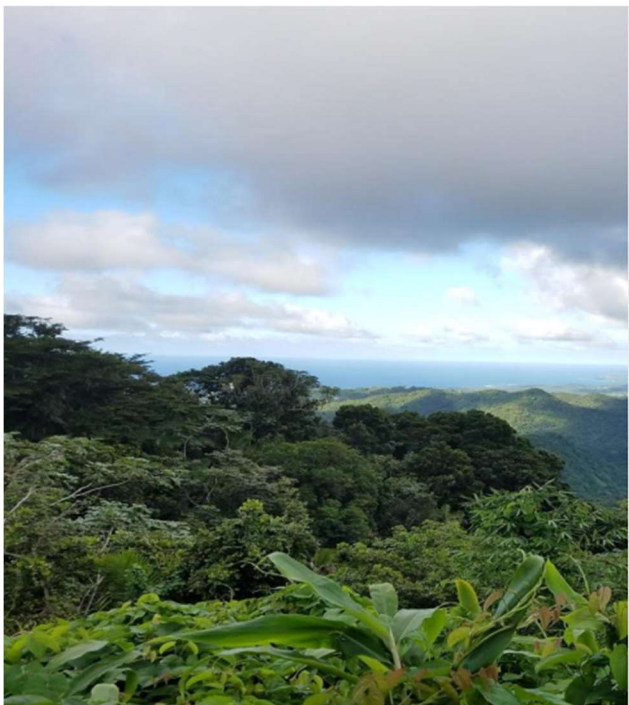
Did you notice any resistance in your body or mind as you engaged in this activity?



Week 2: Gratitude



Mindfulness and Gratitude



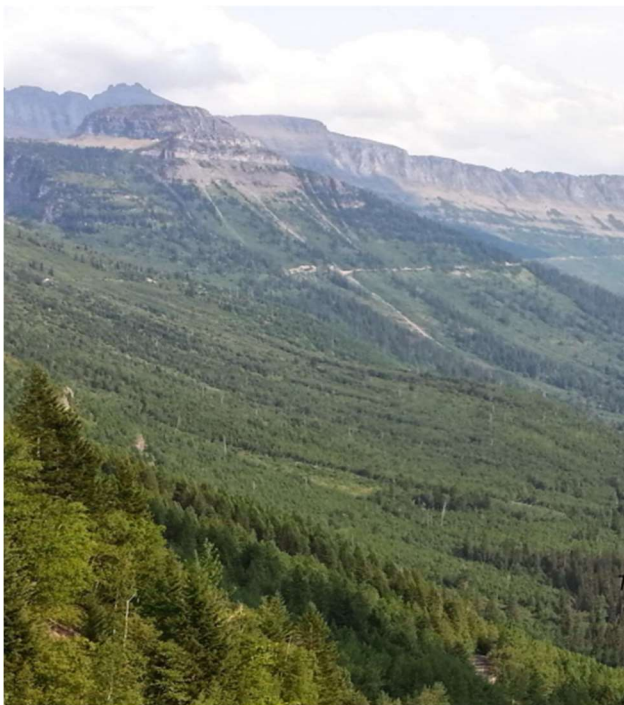
What is Gratitude?

According to the Oxford Dictionary, Gratitude is the “quality of being thankful; readiness to show appreciation for and to return kindness.”



Why Gratitude?

- Affirms there is good in the world
- We recognize the source of goodness outside of ourselves, a gift from a higher power or other people.
- It strengthens relationships
- Reduces Stress
- Grounded in the present

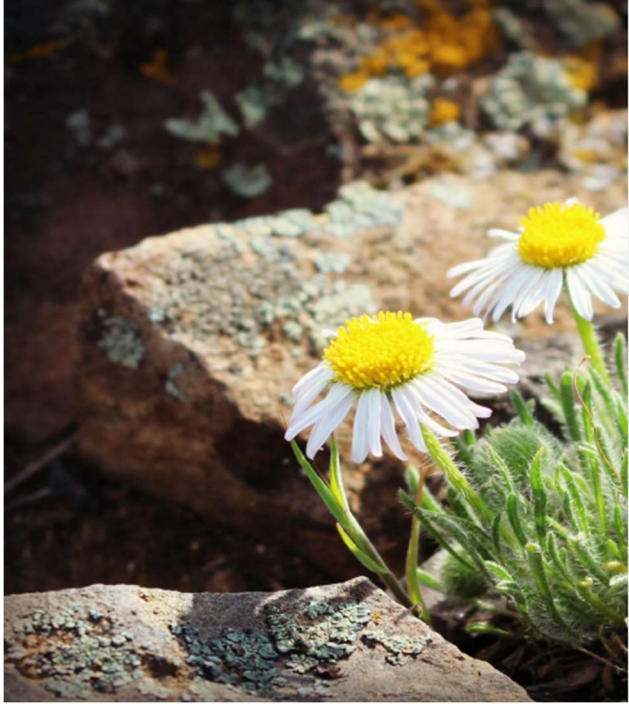


Practicing Gratitude

- Gratitude journal
- 3 things a day or 5 things in a week
- Re-frame your speech
- Find things to be grateful for
- Allow others to show you gratitude

Tips for keeping a gratitude journal. (n.d.). Greater Good.

https://greatergood.berkeley.edu/article/item/tips_for_keeping_a_gratitude_journal



Thank you!

Week 3: Humility

Mindfulness and Humility

What is your definition of Humility?

What can we be mindful of when it comes to being humble?

Mindfulness and Humility

Compassion - Care for others, "To suffer together", motivation to help others

Curiosity - Other's perspective taking, you might be wrong, Confirmation Bias, Echo Chamber

Non-judgmental - Practice Cultural Humility, Not everyone sees things the same way, others way of doing things may not agree with yours

Compassion Definition | What is compassion. (n.d.). Greater Good.

<https://greatergood.berkeley.edu/topic/compassion/definition#:~:text=Compassion%20literally%20means%20%E2%80%9Cto%20suffer,though%20the%20concepts%20are%20related.>

Becoming more humble – Judgement

- Humble people see failures as opportunities to learn, i.e. we can't possibly know it all
- Be mindful of your judgments through meditation and practice
- Openness to learning
- Learn about others from others
- Consider others perspectives
- Resist applying labels (some things are neither good nor bad, they just are.)

Becoming more humble – Curiosity

- Fuels growth and willingness to change
- Be mindful of your judgments through meditation and practice
- Ask questions and Listen to answers
- Have a flexible attitude and a sense of humor
- Collaborate with others
- Tell me more

Becoming more humble – Compassion

- Compassion, not pity
- Different from empathy
- Motivation to help others when you see them in distress
- Action, not thought
- Development of compassion fatigue due to stress and burnout

Mindfulness Practice

Mindfulness, like everything else, becomes easier with practice. This week, practice humility by checking your biases, becoming curious about the world and others, and by exercising compassion.

Think of ways you already practice humility and ways that the practice has enhanced your growth and way of looking at the world.

References

How mindfulness can help you become More Humble. (n.d.-b). Greater Good.
https://greatergood.berkeley.edu/article/item/mindfulness_helps_you_become_more_humble



Week 4: Happiness



MINDFULNESS & HAPPINESS

HOW CAN MINDFULNESS MAKE
US HAPPY?



WHAT DOES HAPPINESS MEAN TO YOU?

PositivePsychology.com says that happiness is:

Pleasure, comfort, gratitude, hope, and inspiration are examples of positive emotions that increase our happiness and move us to flourish. In scientific literature, happiness is referred to as **hedonia** (Ryan & Deci, 2001), the presence of positive emotions and the absence of negative emotions.

MINDFULNESS AND MANAGING EMOTIONS



We are all going to experience negative emotions. So what do we do with those?

- Practice mindfulness by acknowledging the negative emotion
- Take the time to decide whether and how to respond to that emotion
- Accept the negative emotion rather than try to ignore it
- Without sadness, there would be no happiness.
- Circumstances and decisions come with their own set of problems, choose the problems you want to accept and keep moving forward.

MINDFULNESS PRACTICE



REFERENCES



Three ways to navigate difficult emotions. (n.d.). Greater Good.
https://greatergood.berkeley.edu/article/item/three_ways_to_navigate_difficult_emotions

Kringelbach, M. L., & Berridge, K. C. (2010). The Neuroscience of Happiness and Pleasure. *Social research*, 77(2), 659–678.



Appendix C: Website Resources

Acts of Kindness

Humility and Mindfulness by Katy Maguire

Acts of Kindness Journal



Something Kind
you did today

Write about something kind
you did for someone else
today.



Kindness from
Others

Write about something kind
someone did for you today.



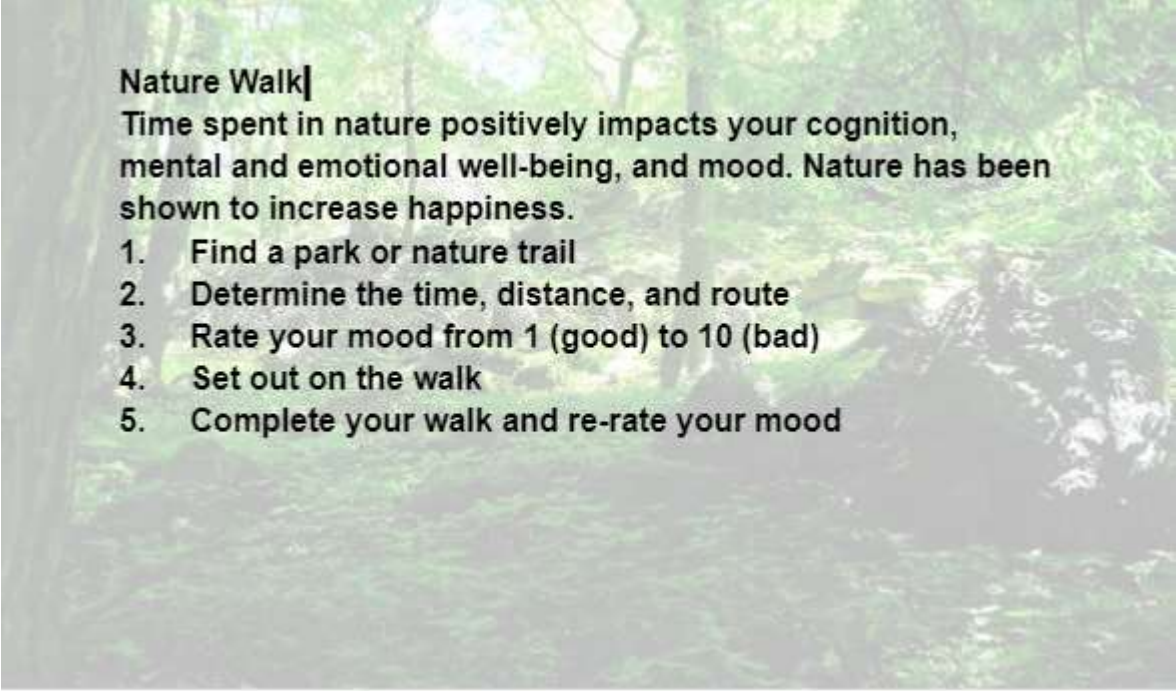
Kindness Toward
Yourself

Write about how you
showed yourself kindness
today.

Practice this exercise
every day.

Do something Kind
every day.

-Katy Maguire



Nature Walk

Time spent in nature positively impacts your cognition, mental and emotional well-being, and mood. Nature has been shown to increase happiness.

1. Find a park or nature trail
2. Determine the time, distance, and route
3. Rate your mood from 1 (good) to 10 (bad)
4. Set out on the walk
5. Complete your walk and re-rate your mood

Grade Up:

1. Listen to music or an audiobook
2. Take a camera

Grade Down:

1. Walk around the block
2. Sit outside and make a note of 5 things you see

Precautions: Do not walk alone. Communicate your route, estimated time, and distance.

Recommended for: Mood disorders, anxiety disorders, coping with stress, ADHD, depressive disorders

Materials: Walking shoes **Cost:** \$0

Outcome Goals: Mood improvement, Emotional regulation, Attention and Cognitive improvement

Curiosity & Humility

MINDFULNESS

Written by Katy Maguire

Mindfulness CURIOSITY



Ask Yourself:
What are my biases in this situation?
What thoughts and judgements am I having now and what does that say?
What is the message this person is trying to get across?
What can I learn from this situation or person?

Listen to Understand

Many of us listen while planning our next response. This is not truly listening. Stop and listen to understand what others are saying to you.

Open Mind

Approach every situation with curiosity. Try to understand all perspectives with an open mind.

Check your Bias

We all have a tendency to be biased based on our individual values, upbringing, culture, social norms and others. Avoid using your experience to judge others.

YOGA YOU CAN DO ANYWHERE

SEATED YOGA

CREATED BY KATY MAGUIRE



PRANAYAMA

JUST BREATHE

Breathe in for a count of 6 and hold it for 6 seconds. Breathe out slowly for 6 seconds and hold it for 6 seconds.

Repeat this for 10 breaths then breathe normally.

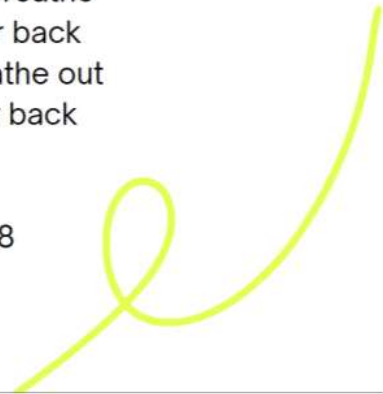




CAT COW

While seated, breathe in and arch your back like a cow. Breathe out and round your back like a cat.

Repeat this for 8 breaths



RAISED HANDS POSE ✨

For this pose, sit straight up in the seat. Imagine a string pulling your spine straight up in a line. Let your arms down by your side, palms facing inward. Now raise your arms straight up in front of you.

Repeat for 8 breaths.



EAR TO SHOULDER

Simply bring your ear to your shoulder. You should feel the stretch on the opposite side. Breathe in and bring your ear to your shoulder. Breathe out and return to center. Repeat on the other side.

Repeat this on both sides for 8 breaths.



SIDE BODY STRETCH

While seated and sitting straight upright, bring one arm out to the side and over head, leaning toward the opposite direction. Breathe in and bend to the side, Breathe out and return to the center. Repeat this on the opposite side.

Repeat the side body stretch on each side for 8 breaths.



CHAIR SAVASANA

Final Pose



Sit straight upright in the chair and place your hands on your thighs or your knees, wherever you feel comfortable. Relax your body starting at the top of your head to your toes. Choose a mantra and focus on that while you breathe in and out at your own pace. Meditate like this for 2 minutes.



THANK YOU FOR SHARING YOUR PRACTICE

Katy Maguire

Precautions: Sensitive and emotional information may be discussed- could provoke anxiety

Coping Styles Formulation Intervention:

Worksheet with six steps

- Materials required: writing utensils and worksheet
 - Instructions to fill out the flow chart:
- 1.) Identify barrier(s)
 - 2.) Address the client's vulnerabilities in comparison to another person
 - 3.) Identify triggers and source of the barrier(s)
 - 4.) Explore coping strategies
 - 5.) Describe how the coping strategies make the client feel for short-term and long-term effects in addition to the advantages/disadvantages of each strategy
 - 6.) Explore alternative coping strategies



Grading Activity:

Grade up

1. Address multiple barriers in one session

Grade down

1. Discuss the chart verbally instead of filling it out

Purpose of Intervention: This worksheet gets the client thinking about the current coping strategies and alternative approaches to the barriers. It helps clients work through conflicts to accomplish a goal.

Target Audience: Clients experiencing stress, barriers, or uncomfortable emotions. The worksheet is fit for clients dealing with anxiety, depression, or addiction.

Diagnosis: This intervention is designed to help those who experience various forms of anxiety, such as those with Generalized Anxiety Disorder. It may also be helpful for those with compulsive or reoccurring or intrusive thoughts, such as those with Obsessive Compulsive Disorder, Depression, or Schizophrenia.

Therapeutic Purpose: It helps develop healthy strategies when under stress or uncertainty.

Outcome Goals: The goal of this intervention is to develop a healthy solution to the barrier addressed by the client.

On Solid Ground

Painting Worry Stones



Grounding has a positive impact on anxiety, depression, and sleep deficits. Sensory-motor grounding draws the participant back to the present. This mindfulness practice interrupts anxiety and ruminations by encouraging individuals to experience their surroundings non-judgmentally. Grounding enhances relaxation, increases self-acceptance, improves relationships with others, and increases satisfaction in daily activities.

Rocks are physical touchstones used to reduce stress and worry in the form of "worry stones" for many years, possibly as far back as ancient Greece. The tangible sensations of manipulating the rock enhance the experience of grounding as a coping skill.

This activity is best for people struggling with anxiety, social integration, stress, worry, and/or thought ruminations.

On Solid Ground

Painting Worry Stones



Population/Group Membership

and Size:

6-8 participants

Limitations/precautions: For ages 10+ for this activity, acrylic paint can stain clothing and hands or be swallowed.

Steps:

- Participants choose a rock and decorative tools
- Participants follow a template or design their picture
- Participants allow time to dry and discuss the activity
- Clean up

Grade Up:

1. Find your rock to paint (round, flat, 2-4")
2. Use Acrylic paint with brushes
3. Add additional sensory stimulation (music, aromatherapy, tactile decorations for rock)

On Solid Ground

Painting Worry Stones



Grade Down:

1. Pre-paint the rock a solid color, participants paint from a template
2. Use stencils and paint with sponges
3. Decorate pre-painted rock with stickers, no paint

Group Goals:

1. Clients will utilize grounding as a coping skill during times of anxiety, racing thoughts, and worry.
2. Clients will identify stimulus for each sense (touch, smell, see, taste, sound)
3. Clients will articulate how this grounding technique impacts them
4. Clients will reflect on times and places grounding techniques would be used

On Solid Ground

Painting Worry Stones



Supplies and Cost: \$20-\$25

Rocks, acrylic paint pens, chairs, and a table. Optional: stickers, acrylic paint, paintbrushes, sponges, stencils, glue, and objects for decoration (sequins, googly eyes, yarn)

Variations: this activity can be used for sensory-motor, self-regulation, attention deficits, and problem-solving

Succulent Re-potting

Green Exercise for Mental Health

Gardening is a holistic therapy that positively impacts Mental health by reducing stress and improving an individual's mood. *

Katy Maguire and Emily Stack



Succulent Re-Potting Intervention

Supplies Needed 

Re-potting Steps 

Grading Up and Down 



Steps	Instruction
1	Introduce intervention and objectives Describe the intervention activity and instructions. Discuss the objectives and purpose of the intervention. Ask the participants to self-rate their stress and mood prior to the activity.
2	Gather Supplies Succulent plants, small planters with drainage holes, Coffee Filters, Succulent Soil, small Plastic/wooden spoon, Plastic Tablecloth, Cleansing wipes, latex gloves. PRECAUTIONS: Utilize non-sharp plastic or wooden tools. Avoid sharp tools or any supply that could facilitate self-harm or suicidal behavior. Assess allergies to plants, soil, latex gloves and substitute with hypoallergenic supplies.
3	Prepare New planter Don latex gloves. Place a coffee filter in the bottom of the new planter. (Prevents soil from escaping the planter through drainage hole) Place soil into new planter, filling about 2/3 of the planter. Set aside.
4	Remove plant from Old planter Turn old planter sideways and loosen soil by gently tapping the sides. Separate soil from the sides of the planter with small plastic or wooden spoon and carefully poke through the bottom of the planter to release the plant from the container
5	Prepare Plant Gently shake excess soil from the roots of the plant or gently clean roots with water and dry. Trim roots if they are too long.
6	Place Plant in new planter Gently transfer the succulent into the center of the new pot. Cover the roots of the succulent with soil and add soil as needed. Leaves of the succulent should be completely above the soil.
7	Care instructions for Client Do not water for 2 to 3 days after re-potting. Water with small amount of water after 2 to 3 days
8	Activity Summary and Reflection Summarize the activity and the intended objectives. Reflect on the success and challenges for the clients and gather feedback on the efficacy of this intervention. Encourage Clients to self-rate their stress and mood after the activity.
9	Clean up Clean up activity supplies and gather tools used for the intervention.

SQUEEZE THE ANXIETY AWAY

By: Molly Manning OT/s and Makayla Descout OT/s



01 COLLECT MATERIALS

1. Balloons- precaution: latex material
2. Flour, rice, or beans
3. Funnel
4. Markers
5. Stickers
6. Optional essential oils

02 STEP 2

Put the smaller side of the funnel into the opening of the balloon



Tip!

If the filling is not going through the funnel you can use a pen to push it down

03 STEP 3

Carefully fill the larger side of the funnel with flour (or your preferred filling). Shake or tap the funnel to allow for flour to get into the balloon.

04 STEP 4

Take the funnel out of the balloon and tie a knot to the end of it to keep the filling safe inside



05 STEP 5- OPTIONAL

Decorate! You can put as many stickers as you want and draw on your stress ball to make it unique. For an added stress relief add some drops of essential oils

06 RELIEVE YOUR STRESS AND ANXIETY!

Squeeze the stress ball whenever you feel stressed, anxious, or to replace any unhealthy habit you may be trying to decrease



Purpose of activity:
Relaxing coping strategy for stress and
anxiety relief

.....

Creative activity for the
individual to have a
healthy alternative
coping mechanism

.....

Grading up-

- Decorate! You can put as many stickers as you want and draw on your stress ball to make it unique.
- For an added stress relief, add some drops of essential oils.
- Write something you're looking forward to on the stress ball.

Grading down-

- Use easier to squeeze fillings such as rice and beans
- Does not need to be decorated
- Have a pre-made stress ball

.....

This activity can be for anyone struggling
with stress, anxiety, depression etc.

.....

Time Required: 20 minutes

.....

Precautions:
Latex balloons

DO IT YOURSELF (DIY) ~SENSORY BOTTLE~

What is a Sensory Bottle?

Sensory bottles are a visual & physical tool for encouraging self-regulation & producing calming input. The bottle can be filled with materials unique to each client.

Type of Activity

- Relaxation
- Art
- Sensory

Relevant Diagnoses

- ADHD
- Autism
- Anxiety
- ODD

Variations On the Theme

- Can be done in groups or individually
- Bottles can be uniquely created to match client needs or interests (fill with numbers, letters, etc.)

Time Required

- 30 minutes

Potential Impact

Sensory bottles can act as a coping technique, play exploration, play participation, emotional health promotion & management, and leisure participation.

Breathing Exercise for Sensory Bottle

- Shake bottle & put on flat surface
- Breathe in for 5 seconds through nose & focus on items in bottle
- Breathe out for 5 seconds through mouth
- Repeat as many times as desired

Grade Up

1. Create a weighted bottle
2. Increase bottle size

Grade Down

1. Buy a premade sensory bottle
2. Use heavier/bigger items in bottle to focus on

Materials Required

- Empty bottle(s)
- Warm water
- Water beads
- Clear glue
- Food coloring
- Glitter
- Any lightweight foam items if desired

Precautions

- Toxic material (if ingested)
- Small items



DO IT YOURSELF (DIY) ~SENSORY BOTTLE~

Instructions to Create Sensory Bottle

1. Gather all materials together
2. Fill an empty water bottle 3/4 of the way with warm water
3. Fill the remainder of bottle with 1/4 clear glue
4. Squeeze 1-2 drops of food coloring into bottle
5. Add any desired glitter, water beads and other items
6. Seal the lid shut
7. Mix it all up by shaking bottle and watch!



References

Teaching Tutes. (2021, November 17). How to make simple diy glitter sensory bottles. <https://www.teachingtutes.com/how-to-make-simple-diy-glitter-sensory-bottle/>

Happy Mother's Day! (2019, August 6). Sensory bottle diy play ideas. <https://happybirthdayplaytime.com/sensory-bottle-diy-play-ideas/>

Ride the wave

Ride the wave is a DBT exercise and utilizes concepts like KAWA-inspired interventions. It identifies overwhelming urges and ways to ride out the distress.

“A surfer doesn’t fight the powerful ocean wave; he moves with the wave riding its natural tide. [...] “Riding the wave” is about allowing your emotions to be with you without acting ineffectively. Like a tidal wave coming and going, you will get back to a place of calm rather than emotional turmoil.” Shira Lichtenstein, <https://www.erikalighthouse.org/blog/riding-the-wave-dbt-and-distress-tolerance/>



Materials & Cost: Paper and pencil, less than \$5

Grade Up: Draw & label a wave, daily worksheets

Grade Down: Use a pre-drawn worksheet to label, do it once a week

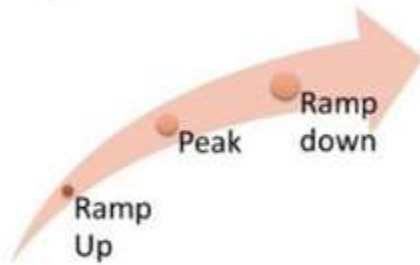


Ride the wave

Urge Surfing

Every urge has three phases.

1. Ramp-up period begins at trigger point or event, when the idea of doing the behavior first arises.
2. The peak is the intense high point of the urge.
3. Ramp-down or fall off period as things gradually return to baseline



TO Urge Surf:

1. Breathe deep and have willingness to **reduce the urge** and let go of the behavior as a solution for pain.
2. **Remove yourself** from the situation if you can.
3. **Relax** the body and practice breathing or calming techniques while staying mindful and present-focused.

Reduce

Remove

Relax

<https://coping.us/suicideintervention/bcbbriefcbrt.html>

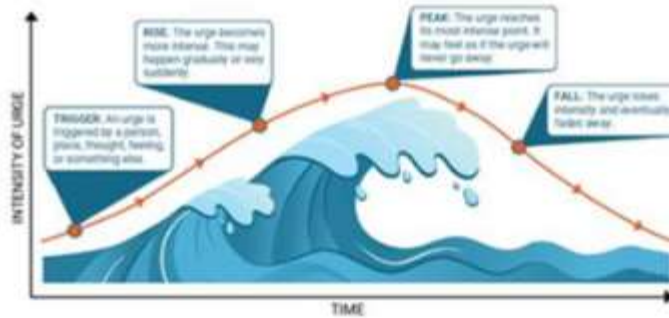
Population: 8+, substance use disorder, borderline personality order, behavioral disorders, mood disorders, PTSD, Stress disorders, anxiety

Purpose: Emotional regulation, stress reduction, behavior modification, increased interpersonal socialization, increased confidence, & self-control

Urge Surfing

Urge surfing is a technique for managing your unwanted behaviors. Rather than giving in to an urge, you will ride it out, like a surfer riding a wave. After a short time, the urge will pass on its own.

This technique can be used to stop or reduce drug and alcohol use, emotional reactions such as "blowing up" when angry, gambling, and other unwanted behaviors.



How to Practice Urge Surfing

1. Acknowledge you are having an urge.
2. Notice your thoughts and feelings without trying to change or suppress them.
Note: It is normal to feel some discomfort during an urge.
3. Remind yourself...
 - It is okay to have urges. They are natural reactions to addictions and habits.
 - An urge is a feeling, not a "must." I can have this feeling and choose not to act.
 - Some discomfort is okay. I don't have to change it.
 - An urge is temporary. Like any other feeling, it will pass on its own.

Other Skills

Managing Triggers

Use coping skills to reduce the power of triggers. Know your triggers ahead of time, and have a strategy or skill prepared for each one.

Examples: deep breathing if stressed, eating if hungry, leaving a location if it is high risk

Delay & Distraction

Do something to take your mind off the urge. Every minute you delay increases the chance of the urge weakening on its own.

Examples: go for a walk, listen to music, call a friend, read a book, practice a hobby

URGE SURFING

PRACTICING GRATITUDE

Studies show that by expressing gratitude, individuals experience benefits of both mental and physical health.



What you'll need for this practice:

- Journal
- Pen/Pencil
- Quiet place
- 5-10 minutes

Journal Prompt 1

- In what ways are you grateful for yourself today?
- Examples: I am grateful for my abilities. I am grateful for what my body does for me. I am grateful that I took a step toward a goal today.



Journal Prompt 2

- In what way are you grateful to someone else today?
- Examples: I am grateful for my partner because they support me. I am grateful to my colleague because they helped me today. I am grateful to my client for letting me work with them today.

Journal Prompt 3

- In what way are you grateful to a higher power today?
- Examples: A higher power can mean many things to different people. Your ideal self, nature or a spiritual figure are all examples of what people view as a higher power.



References

Stumbling Inward Gratitude. In d. J. Grewer Good. <https://www.psychologytoday.com/articles/2016/07/stumbling-toward-gratitude>





NON- JUDGEMENT

Mindfulness and Humility



MEDITATION

1. Find a comfortable position (seated or lying down)
2. Close your eyes and rest your tongue on the roof of your mouth
3. Take a deep breath in through and blow out through you mouth, Repeat this for 4 breaths
4. Begin to breath normally at your own pace
5. Sit with your thoughts and notice them as they occur
6. When thoughts arise, notice them with non-judgement, as if you are observing someone else's thoughts
7. Allow the thoughts to pass over and return to focusing on your breathing
8. Choose a mantra and focus on that as you practice this meditation for 5 minutes.




MANTRAS

MANTRA ONE

Be Present, Focus on the here and now and do not worry about the future.

MANTRA THREE




When we are judging everyone and everything, we are learning nothing.

MANTRA TWO

Be Kind to yourself, be compassionate so that you might exercise compassion for others

MANTRA FOUR



I don't know everyone's story or what they are going through. Approach every situation with curiosity and compassion.

Curiosity & Humility

MINDFULNESS

Written by Katy Maguire

Mindfulness CURIOSITY



Ask Yourself:
What are my biases in this situation?
What thoughts and judgements am I having now and what does that say?
What is the message this person is trying to get across?
What can I learn from this situation or person?

Listen to Understand

Many of us listen while planning our next response. This is not truly listening. Stop and listen to understand what others are saying to you.

Open Mind

Approach every situation with curiosity. Try to understand all perspectives with an open mind.

Check your Bias

We all have a tendency to be biased based on our individual values, upbringing, culture, social norms and others. Avoid using your experience to judge others.

Mindfulness & Self-Compassion

Be kind to yourself

What you'll need: Journal, writing utensil, quiet space

How to do it: Write down 3 things that you forgive yourself for today. Now write down what you would say to a friend in these situations. Remember to show yourself kindness and compassion as you write.

Example: I forgive myself for skipping the gym today. What I would say to a friend in this situation is that it's one day, and there's a new opportunity to go tomorrow - OR - I forgive myself for being late to work today. What I would tell a friend is that we all make mistakes and this is not a reflection of who you are as a person.

Time: 5-10 minutes





Thank You!!

"The most precious gift we can offer anyone is our attention. When mindfulness embraces those we love, they will bloom like flowers." - Thich Nhat Hanh

Gratitude Meditation

"Gratitude practice can promote a positive mood, hope, and resilience. Our awareness broadens as we experience positive emotions such as gratitude, loving-kindness, and compassion. Our creativity and problem-solving capacities blossom, and we become more effective in our choices." Dr. Kathi Kemper

What you'll need	<ul style="list-style-type: none">- Quiet place- Comfortable sitting area or place to lie down- Yoga mat (opt.)- Soothing music (opt.)
How to start	<p>Find a nice, quiet space and take a seated or lying position. Whatever feels the most comfortable to you. You may choose to close your eyes or leave them open. Rest your tongue on the roof of your mouth. Relax your body, starting at your forehead and working your way down to your toes.</p>
Breathing	<ul style="list-style-type: none">- Take a deep breath in for a count of 6 seconds. Hold your breath in for a count of 6. Release your breath for a count of 6 and hold at the bottom of your breath for 6 seconds.- Repeat for six cycles.
Mindfulness Meditation	<p>Focus your attention on the present. Clear your mind of the past and the future, and find yourself grounded in this moment. Choose a mantra that reflects your gratitude today. It may be that you're alive and participating in this practice. Focus on this affirmation as you quiet your mind. You will notice thoughts, feelings, and emotions. Allow those to pass by, acknowledge them, and return your thoughts to your mantra.</p>
Time	<p>Participate in this mindfulness practice for 5-10 minutes.</p>



GRATITUDE JAR

PURPOSE:

- It helps to identify areas of gratitude in your life
- Develop a mindfulness skill
- Designed to foster positive emotions through conscious appreciation
- Living memory of gratefulness

WHAT YOU'LL NEED

- Clean, empty jar
- Strips of paper or small cards
- Pen/Pencil

HOW TO DO IT

- Decorate your jar with items or materials of your choice (i.e., stickers, ribbons, pictures)
- As you think of things you are grateful for, write them down on paper and put them in the gratitude jar.
- Try to practice this at least once a day.