

Strengths-Based Nursing and Healthcare Leadership: An Approach to Minimize Burnout Rates

Mastroberardino, M., Boies, K., Fréchette, J., Lavoie-Tremblay, M., Clausen, C., Manning, K., & Gottlieb, L.

Introduction

- Healthcare employees show more prevalent rates of burnout (Pedersen & Minnotte, 2017)
- When employees feel isolated and unsupported, rates of burnout increase (Eliacin et al., 2018)
- SBNH-L is an approach that is proposed as one way to change how care is delivered to patients by applying principles of SBN to the leadership behaviors of the nurse/healthcare manager collaboration between team members

“A unique, value-driven, embodied approach that guides leaders and managers to create equitable and safe workplace cultures and environments that honour, develop, mobilize, and capitalize on the strengths of individuals and their team”

- Laurie N. Gottlieb

Conclusion

- Regardless of what discipline of healthcare participants were in, SBNH-L was a significant positive predictor of inclusion
- Perceived inclusion has a mediating role in the relationship between SBNH-L and burnout, even when controlling for perceived minority status

Methodology

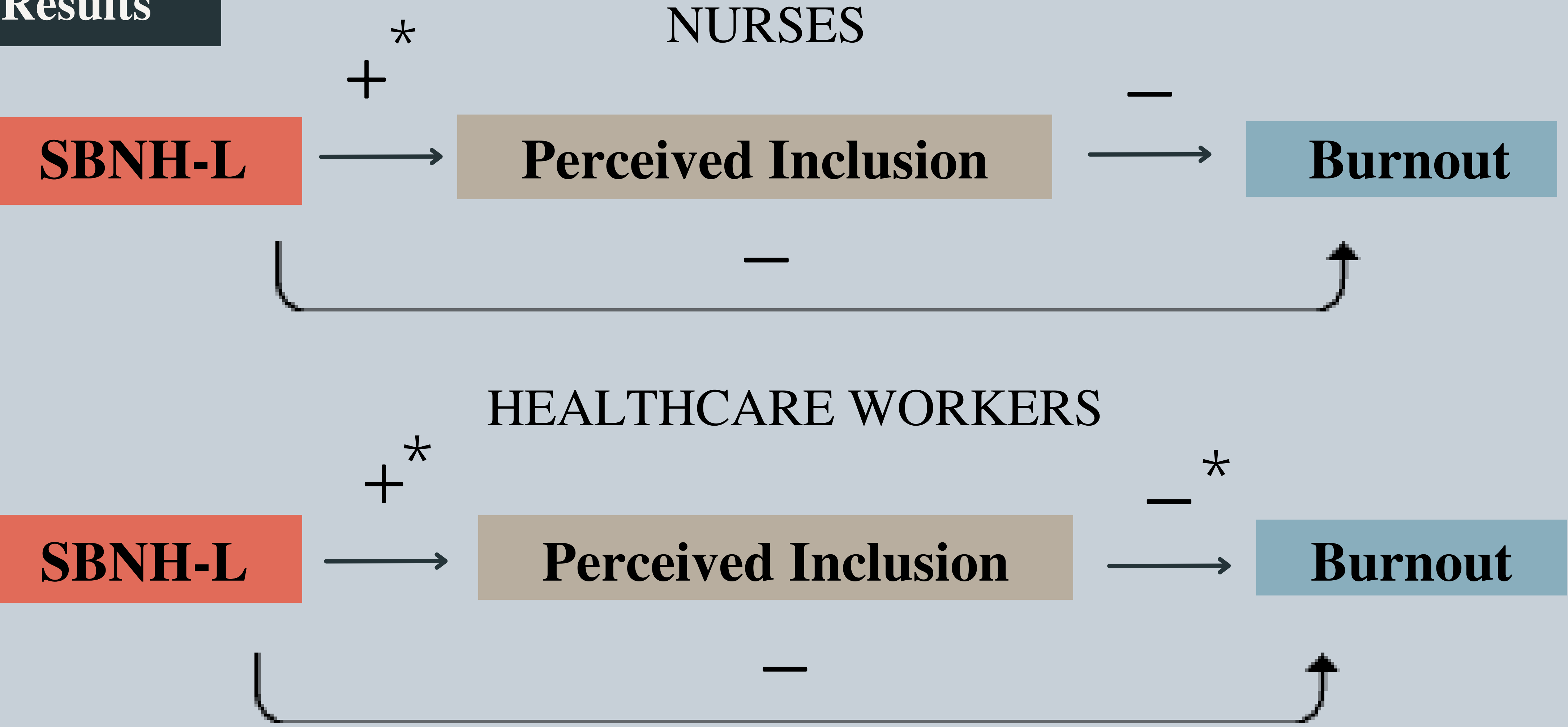


- Participants: 357 Healthcare employees
 - 144/357 Nurses
- Measures: Survey
 - Strengths-Based Nursing and Healthcare Leadership Scale (Frechette et al., 2021)
 - Inclusion Scale (Chung et al., 2020)
 - Maslach Burnout Inventory (Leiter & Schaufeli, 1996)
 - Perceived Minority Status (PMS) (Strauss, 2007)

Research Question

- Is there a relationship between **Strengths-Based Nursing and Healthcare Leadership** and burnout and does perceived inclusion mediate this possible relationship?

Results



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