5 ways to avoid nurse resident + staff burnout

With nurse burnout nearly doubling from pre-pandemic norms\(^1\) and turnover rates increasing by 5%\(^2\), healthcare organizations must implement initiatives to support learners and mentors in nurse residency programs.

1. **Prioritize collaboration and streamline communications**
   - Residency programs should invest in software solutions that provide streamlined guidance, feedback, and support with a shared understanding of goals, best practices, and expected outcomes.

2. **Implement evidence-based practice solutions**
   - Evidence-based practice (EBP) workflow solutions like Ovid\(^\circ\) Synthesis feature expert guidance, specific workflows for resident projects, and real-time collaboration between learners and mentors, reducing the added stress associated with resident EBP projects as they transition into practice.

3. **Invest and partake in shared governance programs**
   - Nurse residents can shape organizational culture and policy development by participating in shared governance activities like committees, task forces, or councils that foster engagement and ownership.

4. **Support nurses as they transition to practice**
   - The industry must address systemic issues and meet growing workforce demands by streamlining research education and coaching to equip the next generation of nurses with the proper knowledge and skills to provide evidence-based care.

5. **Encourage the development of a self-preservation plan**
   - Developing a self-preservation plan that includes personal guidelines to nurture, monitor, and evaluate physical and mental well-being and an action plan to seek support can ensure nurses are prepared to combat burnout.

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Ovid® Synthesis is a workflow solution that fosters a culture of EBP and patient safety by improving research competency and confidence. With built-in guidance, residency EBP project workflows, and collaboration tools, it trains learners with limited research backgrounds while empowering practicing nurses to climb the clinical ladder.