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# Mindfulness at Work

## Virtual Mindfulness Program for Occupational Therapy Practitioners Experiencing Burnout: A Pilot Study

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### Background

Job burnout is high among occupational therapy practitioners (OTPs)<sup>1,2</sup>. Burnout impacts practitioner well-being and patient outcomes<sup>3</sup>. Mindfulness is an evidence-based approach to decreasing burnout, but the time burden for traditional mindfulness programs is high for professionals experiencing burnout<sup>4</sup>.

**Mindfulness at Work** is a brief, virtual program during which OTPs embed learned mindfulness strategies during their workday.

### Purpose and Objectives

Evaluate **Mindfulness at Work** and the embedded *mindfulness strategies*

- Participants will demonstrate a decrease in their burnout level.
- Participants will find **Mindfulness at Work** and the *mindfulness strategies* (a) acceptable, (b) appropriate, and (c) feasible.
- Investigators will report on recruitment and retention capability.

### Methods

*The Jefferson IRB approved this study.*

**Study Design:** Single group. Three cohorts. Pre/post-test for change in burnout; Post-test- only for acceptability, appropriateness, and feasibility of **Mindfulness at Work** and the embedded *mindfulness strategies*.

**Inclusion Criteria:** registered OT or OTA, ≥ one year of professional experience, English-speaking, and scored ≥ 44 on the Oldenburg Burnout Inventory. Those with formal mindfulness training were excluded.

#### Instruments:

Burnout: Oldenburg Burnout Inventory (OLBI)<sup>5</sup>

- 16 items, 4-point Likert scale: 1 (strongly disagree) to 4 (strongly agree). Burnout: mild (<44 low), moderate (44-59), high (>59). Valid and reliable<sup>6</sup>

Feasibility (3): Acceptability of Intervention Measure, Intervention Appropriateness Measure, Feasibility of Intervention Measure<sup>7</sup>.

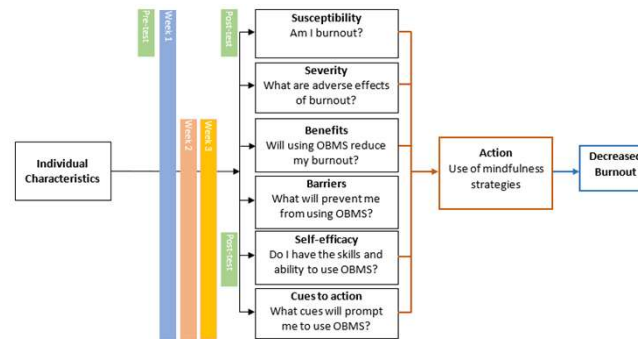
- 4 items, 5-point Likert scale: 1 (completely disagree) to 5 (completely agree). Valid and reliable<sup>7</sup>

### Methods (continued)

**Program Description:** **Mindfulness at Work** was a three-week virtual mindfulness program during which OTPs learned mindfulness strategies to embed during their workday. Participants met weekly for a live 75-minute Zoom session. Between sessions, they used the learned strategies at work. Participants accessed handouts, shared experiences, and asked questions in a private Google Classroom.

At the end of the third session, participants received information on traditional mindfulness programs in their local area.

Figure 1: Conceptual Framework - Health Belief Model



#### Data Collection, Management & Analysis:

- Post-tests were completed at the end of the third Zoom session via Qualtrics software<sup>8</sup>
- Attendance logs were kept in a password-protected Excel spreadsheet
- Descriptive statistics analyzed each feasibility outcome (group M & SD)
- A Wilcoxon signed-rank test measured the statistical significance of the change in pre and post-test OLBI scores

### References

- Scan QR Code for references.



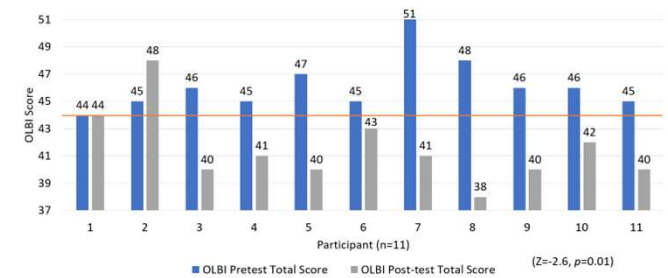
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### Results

**Demographics:** 11 OTPs, female, from United States and Canada

**Burnout:** **Mindfulness at Work** elicited a statistically significant change in OLBI scores. **Pre-test median:** 46.0 (moderate); **Post-test median:** 41.0 (low).

Figure 2: Oldenburg Burnout Inventory Score Pre to Post test



**Feasibility:** 100% rated **Mindfulness at Work** as acceptable, with mean (M) scores of (M:4.7), appropriate (M:4.6), and feasible (M:4.6). 100% rated the mindfulness strategies acceptable (M:4.6), appropriate (M: 4.5), & feasible M:4.6).

**Recruitment/Retention:** Attendance: 100% for first two sessions; 82% for 3<sup>rd</sup> session.

### Conclusions

- **Mindfulness at Work** and the embedded *mindfulness strategies* show preliminary promise of: (a) reducing burnout in OTPs and (b) being acceptable, appropriate, and feasible for OTPs.
- Implementation of **Mindfulness at Work** with larger populations is warranted.

### Implications

**Challenges & Limitations:** (1) no OTAs, and (3) mostly school-based practitioners.

**Implications for Future Research:** (1) pilot with a larger and more diverse group of OTPs, (2) plan for participants who cannot attend sessions 2 or 3, and (3) follow-up survey one week after program completion.