

The Experience of COVID -19 Among Advanced Practice Nurses Caring for Patients and the Public

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Abstract

Nurses have a duty to care for patients, clients and community members. Advanced Practice Nurses are experiencing many concerns as they face new challenges, fear the unknown and are working with extreme shortages in PPE during the COVID-19 pandemic. COVID-19 has spread rapidly, infecting millions of people worldwide.

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Nurses have a duty to care for patients, clients and community members. Public health practice focuses on holistic care for its patients which involves providing the best physical, mental, emotional, and spiritual care possible. Advanced Practice Nurses are experiencing many concerns as they face new challenges, fear the unknown and are working with extreme shortages in PPE during the COVID-19 pandemic. COVID-19 has spread rapidly, infecting millions of people worldwide.

More than a million people have died throughout the world due to COVID-19 (WHO, 2020). Health care providers have worked the frontlines in previous pandemics or epidemics, putting themselves at risk (Borghese et al., 2020). This mirrors what is currently happening with CCOVID-19. As a result, some Health Care Providers (HCPs), including Advanced Practice Nurses (APNs) have become victims of the disease while at work. Furthermore, the rate of infection and number of deaths from COVID-19 continues to rise (WHO, 2020). This review paper examines the 'lived experiences' of APNs and the challenges they face as they support their patients and maintain their personal wellbeing while dealing with uncertainty, limited knowledge and fear of the unknowns related to COVID-19.

Challenges faced by APNs and HCPs providing clinical and online services

APNs and other frontline HCPs have borne the brunt of the effects of COVID-19, both physically and psychologically. APNs acknowledge their professional duty to provide care for patients while experiencing feelings of discomfort identifying and addressing ethical issues that they encounter in patient care such as; the inability to practice according to evidence based rationales for care being provided, working long hours, and the lack of proper personal protective equipment (PPE) (Stockman &

Baker, 2020). APNs and HCPs working in these conditions are positioned to be more susceptible to contracting COVID-19 and bringing it home to their families, adding an additional stressor to the responsibilities placed on them at work throughout the pandemic (Stockman & Bakers, 2020).

The practice of an APN, especially during a pandemic, demonstrates that it is imperative that standardized educational requirements across Canada are enforced in the APN role. This will ensure that high-quality training for APNs include a fit between education and practice, adequate resources, and inter professional education (Dicenso et al., 2010).

COVID-19 has presented challenges for APNs and HCPs as some clinical services have been limited or unavailable due to the uncertainty of the spread of COVID-19. This means that less staff are providing these services, and as a result, there is a reduction in the number of patients and community members who are able to access these services. Due to limited resources non-emergent care is being deferred and attended to in alternative formats, such as telehealth, and other online healthcare platforms. Unfortunately, the delay or omission of routine health services can lead to morbidity or mortality (McGuire et al., 2020).

APNs find it increasingly difficult to connect with their clients or clearly communicate their intended message. For example, when sessions are conducted by telephone, thy must rely only on audio to assess patient's health care status. Practitioners reported that they missed the ability to perform exercises requiring physical presence with patients (Feijt et al., 2020).

Raising Community awareness surrounding the COVID-19 Pandemic

It is important to encourage the population to understand the facts regarding

COVID-19 to reduce excessive stress responses (e.g., anxiety, depression, etc.). Furthermore, transparency public and awareness of the progress of the virus will the feeling help form that health officials/governments are being transparent about the spread of the virus, and this will assist in helping to build trust, thus ensuring compliance with public health protocols to reduce the spread of Coronavirus (Dewey et al., 2020). Expanding public awareness of the progress being made to contain the virus would help mitigate the spread of the virus (Dewey et al., 2020). Alternatively, health and wellbeing may decline if the public is left unaware of important practices to reduce the spread of the virus. As a result of this lack of knowledge, cases have increased which has resulted in furthering the pandemic.

As new information is gathered, Advantaged Practice Registered Nurses APRNs must educate themselves on current best practices, participate in effective patient education about viral symptoms mitigate transmission. and help psychological impact that the pandemic may have on themselves, patients, and the public (Diez-Sampedro et al., 2020). Providing public awareness and knowledge of how COVID-19 is being monitored can help mitigate the spread and enable people to critically reflect on their behaviours (Wu et al., 2020). It can also assist the public in knowing what medical treatments and services are available to them. Moreover, having medical services in place to treat the disease while informing people about the critical realities of it is vitally important.

Many people are unsure how long the current pandemic will last; therefore, they are stocking up on groceries and buying in bulk. When people shop for essential items, they often face the reality of limited to no products being available, insinuating a sense of panic, resulting in even more people hoarding products and resources to feel that they are in

abundance in case of the unknown. The general public experiences many symptoms as a result of COVID-19. Physical symptoms include headaches, gastrointestinal problems, sleep disturbance, and lower energy (Lai et al., 2020). People are also experiencing cognitive symptoms such as: memory loss, decreased attention span, poor reasoning and judgment as well as depression, suffering from anxiety and other mental health related symptoms (Lai et al., 2020). Some patients will need referrals for mental health evaluation and care, while others may benefit from supportive interventions geared towards promoting wellness and enhanced coping. Taking into consideration the expanding economic crisis. alongside numerous uncertainties surrounding the pandemic, suicidal ideation may emerge with patients which requires immediate consultation with a mental health professional or referral to a psychiatric hospital (Pfefferbaum & North, 2020). As COVID-19 increasingly becomes a part of our new lifestyle, many people will become angry and experience emotions of sadness, stress and indignation resulting from a lack of knowledge about the future (Lai, 2020).

APNs and **HCPs** offer can suggestions for coping mechanisms associated with stress (such as structuring activities and maintaining routines). Social distancing is another way for the public to assist in decreasing the number of COVID-19 infections and deaths. Connecting with loved ones and extended family through social media and other forms of technology will ensure that the human connection is maintained while upholding public health guidelines to mitigate the spread. Being able manage stress improves coping mechanisms and promotes ways to adapt to challenges that many nurses, APNs and HCPs are facing when caring for Covid-19 patients. Further, educating them on the importance of managing their stress will

resilience demonstrate during these unprecedented times (McAlonan al., 2007). Stress plays an important part in our lives. How people manage stress can affect how they cope with situations that are presented to them. These are stressful unprecedented times and stress can be classified as an illness if no solution and or strategy can be utilized to manage it (Salleh, 2008).

Social Media

Most often, the public is misguided, ill-informed and exposed to myths surrounding COVID-19 through social media networks (Jayaseelan., et al., 2020). People are becoming more fearful of potential risks of COVID-19 and are acknowledging that they lack the ability to control this virus. This resulted in people being at higher risk of contracting the virus. Moreover, some preventative policies and regulations, including travel restriction and self-isolation protocol decrease overall quality of life. Information disseminated through media caused confusion surrounding public health guidelines and how to slow the spread of infection (Jayaseelan et al., 2020). People are misinformed about the virus which resulted in inconsistencies about the nature of the virus. They acted irrationally by displaying behaviours such as nervousness, anger, putting the blame on others and refusing to follow rules or questioning authority (Jayaseelan et al., 2020).

The psychological effects related to the current pandemic are driven by many factors, including uncertainty about the duration of the crisis, lack of proven therapies or a vaccine, and potential shortages of health care resources, including PPE. Health care workers are also distressed by the effects of social distancing balanced against the desire to be present for their families. All of these concerns are amplified by the rapid availability of information and misinformation on the Internet and social media (Morely et al., 2020). Media reports and news can be emotionally and mentally disturbing, often centering on aspects that deter from what is really going on with COVID-19, such as the spread of infection and the vulnerability of the public. Pandemic related news disseminated by the media bombards the public with new information about the pandemic that lacks credibility and is most often inaccurate and misleading (Dewey et al., 2020).

How APNs and HCPs can mitigate the psychological and emotional effects of COVID-19

The COVID-19 pandemic has been overwhelming and created feelings of insecurity, sadness, anger, and negativity. Behaviourally, people may experience challenges concentrating, feeling irritable, withdrawn, have difficulty making decisions and engage in increased substance use which can have an impact on their mental health (Pfefferbaum & North, 2020). Mental wellbeing is an aspect of health that needs to be addressed among the public and HCPs when dealing with varied crises as a result of this disease.

Unfortunately, COVID-19 is a new disease, presenting challenges without sound solutions as of yet. As the crisis continues, the stigma surrounding mental illness has become prevalent. It is important to be aware of what mental health and well-being is, recognizing the importance of screening for depression and other mental health issues, highlighting that evidence-based strategies can be put in place to manage the consequences of COVID-19 (Sampson, From a Melnyk & Hoying, 2020). psychosocial perspective, many of the experiences of patients, family members, and the public can be appropriately normalized by providing information about usual reactions to different stressors. It is important to raise

awareness about what can be done to prevent the spread of COVID-19.

Techniques and potential strategies that may help APNs and HCPs in practising self-care

In these difficult times APNs, physicians, and other HCPs must work together as a team. Promoting social support, and encouraging colleagues to seek professional assistance when they feel unable to care for themselves, could decrease the stigma attached to stress. APNs and HCPs need to send a message to the public about the importance of following the public health guidelines to avoid over burdening already overwhelmed care providers.

COVID-19 has changed the way that we practice. HCPs are now, more than ever, implementing a team-based approach that is collaborative, supportive and cohesive. Vulnerability surrounding the pandemic has brought staff closer together creating a unit that supports one another. APNs are also recognizing the importance of self-care practices which enhance health, well-being and allows for provision of optimal care to patients.

HCPs may experience psychological distress from providing direct care to COVID-19 patients (Goelz & Linzer, 2020). This distress may occur as a result of knowing someone who has contracted or died of the disease, or going through the processes of being quarantined and or in isolation (Goelz & Linzer, 2020). Strategies aimed at mitigating the psychological and emotional effects of COVID-19 and practicing self-care strategies promoting are vital to psychological wellness and ensuring a healthy and robust clinical workforce (Wu et al., 2020). Moreover, it is important for psychiatric APRNs to be prepared to initiate alternative therapy methods such as online support groups, debriefing, mindfulness, and meditation exercises for the mental health promotion of APNs, HCPs and other frontline health care workers exposed to trauma and stress (Diez-Sampedro et al., 2020).

It is critical that APNs and HCPs continue to unite throughout this urgent time of need. Unfortunately, this comes at a costly time for APNs and HCPs managing both personal well-being and the well-being of their loved ones. If HCPs and APNs remain united in the care that they provide it can help to minimize the stress and complex workloads caring for COVID-19 patients. The public can assist nurses and HCPs by following protocols to decrease the spread of infection while being mindful of their actions and behaviours that will assist with decreasing the spread of infection.

Clinical Implications for APNs and HCPs

The role of APNs and HCPs is to care for the public in ways that attest their professionalism, responsibility, and accountability. It is important for APNs not to lose sight of their duty and practice to provide care for the public (Wu et al., 2020). Furthermore, APNs and HCPs must continue to practice self-care for themselves so that they can safely and efficiently care for the public by providing them with relevant evidence-based information allowing them the opportunity to make informed decisions that will have positive implications for nursing practice.

More importantly, the clinical implications for this paper focus on providing and establishing compassionate care programmes for APNs which are aimed at positively impacting clinical leadership and change in practice. Compassionate care education for APNs, HCPs and nursing students transitioning into Registered Nurses would lead to improved job satisfaction, and an uplifted sense of mental and emotional well-being (Rosenbaum, 2020). As a result, this would augment the pride and scholarship

that nursing's distinct scientific body of knowledge merits in the nursing profession.

It is important that supportive educational programs be put in place for APNs', nurses, and nursing students. This would highlight and emphasize the need for being compassionate while providing care. The programs should include the importance of acknowledging workplace culture and the necessity for staff well-being. The objective is that the long-term effects of these programs will have a profound impact on leadership for APNs. nurses. patients, healthcare organizations and the health care system as a whole (Dicenso et al., 2010).

Healthcare needs radical change, which means that small modifications to a global system must be incorporated. Health care requires a different approach in its delivery, distribution, and organization, which will be paramount to the existence of APNs and HCPs. The healthcare system along with the help and support of APNs and HCPx can work together to employ efficient and effective strategies to overcome this pandemic and look towards the future of health care. We must remember that we are all in this together!

References

Borghese, L., Di Donato, V., Ruotolo, N., & Fiegender, J. (2020, March 22). Nearly 1 in 10 of Italy's infected are health care workers. CNN. Retrieved from https://edition.cnn.com/world/live-news/coronavirus-outbreak-03-22-20/he27a10efe9dfe61900b2ae6583e

Depoux, A., Martin, S., Karafillakis, E., Preet, R., Wilder-Smith, A., & Larson, H. (2020). The pandemic of social media panic travels faster than the COVID-19 outbreak. *Journal of Travel Medicine*, 27(3), 1-2.

Dewey, C., Hingle, S., Goelz, E., & Linzer, M. (2020). Supporting Clinicians During the COVID-19 Pandemic. *Annals of Internal Medicine*, 172(11), 752–753. https://doi.org/10.7326/M20-1033.

Dicenso, A., Bryant-Lukosius, D., Martin-Misener, R., Donald, F., Abelson, J., Bourgeault, I., . ..Harbman, P. (2010). Factors Enabling Advanced Practice Nursing Role Integration in Canada. Nursing Leadership, 23(Sp), 211-238.

doi:10.12927/cjnl.2010.22279

Feijt, M., Kort, Y. D., Bongers, I.,
Bierbooms, J., Westerink, J., &
Ijsselsteijn, W. (2020). Mental Health
Care Goes Online: Practitioners
Experiences of Providing Mental
Health Care During the COVID-19
Pandemic. Cyberpsychology,
Behavior, and Social Networking,
23(12), 860-864.

Goelz, E., & Linzer, M. (2020). Supporting clinicians during the COVID-19 pandemic. *Annals of Internal Medicine*, 172(11), 752–753. https://doi.org/10.7326/M20-1033

Jayaseelan, R. Brindha, D, & Waran, K.

(2020). Social Media reigned by information or misinformation about COVID-19: A phenomenological study. SSRN Electronic Journal. Available at SSRN:

http://dx.doi.org/10.2139/ssrn.35960 58

Lai, J., Ma, S., Wang, Y., Cai, Z., Hu, J., Wei, N., ... & Tan, H. (2020). Factors associated with mental health outcomes among health care workers exposed to coronavirus disease 2019. *JAMA network open*, *3*(3), e203976-e203976.

- Maunder, R. G., Lancee, W. J., Balderson, K. E., Bennett, J. P., Borgundvaag, B., Evans, S., ... Hall, L. M. (2006). Long-term psychological and occupational effects of providing hospital healthcare during SARS outbreak. Emerging Infectious Diseases, 12(12), 1924. https://doi.org/10.3201/eid1212.060584
- McAlonan, G. M., Lee, A. M., Cheung,
 V., Cheung, C., Tsang, K. W., Sham,
 P. C., ... Wong, J.
 G. (2007). Immediate and sustained psychological impact of an emerging infectious disease outbreak on health care workers. The Canadian Journal of Psychiatry, 52(4), 241–247. https://doi.org/10.1177/0706743
- McGuire, A, L., Aulisio, M, P., Davis, D., Erwin. C., Harter, T.D., Jagsi, R.,Klitzman, R., Macauley, Racine, E., Wolf, S.M., & Wolpe, P.R. (2020). Ethical challenges arising in the COVID-19 pandemic: American The **Journal** of Bioethics, 20:7, 15-27, DOI:

10.1080/15265161.2020.1764138

- Morley, G., Grady, C., McCarthy, J., & Ulrich, C. M. (2020). Covid-19: Ethical challenges for nurses. *The Hastings Center report*, 50(3), 35–39. https://doi.org/10.1002/hast.1110
- Pfefferbaum B, North CS. Mental health and the Covid-19 pandemic [published online ahead of print, 2020 Apr 13]. New England Journal of Medicine. 2020;10.1056/NEJMp2008017. doi:10.1056/NEJMp2008017
- Rosenbaum, L. (2020). Harnessing our
 Humanity How Washington's
 Health Care Workers Have Risen to
 the Pandemic Challenge. New
 England Journal of Medicine,

- *382*(22), 2069-2071. doi:10.1056/nejmp2007466
- Sampson, M., Melnyk, B. M., & Hoying, J. (2020). The MIND BODY STRONG intervention for new nurse residents: 6-month effects on mental health outcomes, healthy lifestyle behaviors, and job satisfaction. Worldviews on Evidence-Based Nursing, 17(1), 16–23. https://doi.org/10.1111/wvn.1241
- Salleh M. R. (2008). Life event, stress and illness. The Malaysain Journal of Medical Sciences: MJMS, 15(4), 9-18
- Stockman, F., & Baker, M. (2020, March 5). Nurses battling coronavirus beg for protective gear and better planning. The New York Times. Retrieved from https://www.nytimes.com/2020/03/05/us/coronavirus-nurses.html
- World Health Organization (2020).

 Coronavirus disease (COVID-19)
 situation dashboard. Retrieved
 from https://experience.arcgis.com/experience/685
- Wu, P. E., Styra, R., & Gold, W. L. (2020).

 Mitigating the psychological effects of COVID-19 on health care workers. Canadian Medical Association Journal, 192(17). doi:10.1503/cmaj.200519

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