





SHORT COMMUNICATION

Compassion fatigue, quality of care and clinical governance

Fatiga por compasión, calidad de la atención y gobernanza clínica

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ABSTRACT

Introduction: compassion fatigue, as an emotional cost resulting from prolonged exposure to the suffering of the people and families being cared for, is a factor with adverse repercussions on the quality and safety of nursing care. The aim is to reflect on the clinical governance strategies to be used to minimize the effect of compassion fatigue.

Method: this is a narrative critical analysis based on a review of the current scientific literature on compassion fatigue, focusing on studies that address the interaction with clinical management, in order to provide evidence from the literature and indications for practice in the context of health service management. To carry out the study, articles were selected that addressed the interdependence between compassion fatigue and clinical governance.

Results: compassion fatigue manifests itself through symptoms such as physical and emotional exhaustion, associated with feelings of professional frustration, resulting from nurses' continuous empathetic involvement with people and families in situations of suffering. Its presence negatively compromises the quality and safety of care, constituting a silent threat to the effectiveness of clinical governance.

Conclusion: nurse managers have a responsibility to develop systematic and strategic plans that foster the emotional well-being of their teams, thus contributing to the reduction of compassion fatigue and consequently to the continuous improvement of the quality of care provided.

Keywords: Compassion Fatigue; Clinical Governance; Nursing; Health Management; Patient Safety.

RESUMEN

Introducción: la fatiga por compasión, como coste emocional derivado de la exposición prolongada al sufrimiento de las personas y familias atendidas, es un factor con repercusiones negativas en la calidad y la seguridad de la atención de enfermería. El objetivo es reflexionar sobre las estrategias de gobernanza clínica que se pueden utilizar para minimizar el efecto de la fatiga por compasión.

Método: se trata de un análisis narrativo crítico basado en una revisión de la literatura científica actual sobre la fatiga por compasión, centrándose en estudios que abordan la interacción con la gestión clínica, con el fin

de aportar evidencia de la literatura e indicaciones para la práctica en el contexto de la gestión de servicios de salud. Para llevar a cabo el estudio, se seleccionaron artículos que abordaron la interdependencia entre la fatiga por compasión y la gobernanza clínica.

Resultados: la fatiga por compasión se manifiesta a través de síntomas como el agotamiento físico y emocional, asociado a sentimientos de frustración profesional, resultantes de la continua implicación empática de las enfermeras con las personas y familias en situaciones de sufrimiento. Su presencia compromete negativamente la calidad y la seguridad de la atención, constituyendo una amenaza silenciosa para la eficacia de la gobernanza clínica.

Conclusión: las enfermeras gestoras tienen la responsabilidad de desarrollar planes sistemáticos y estratégicos que promuevan el bienestar emocional de sus equipos, contribuyendo así a la reducción de la fatiga por compasión y, en consecuencia, a la mejora continua de la calidad de la atención prestada.

Palabras clave: Fatiga por Compasión; Gobernanza Clínica; Enfermería; Gestión de la Salud; Seguridad del Paciente.

INTRODUCTION

In providing care, nurses establish a helping relationship with people and their families or significant others, which requires empathy and compassion.⁽¹⁾ However, continuous contact with human suffering over a long period of time can culminate in compassion fatigue in nurses; a syndrome characterized by symptoms such as physical and emotional exhaustion and frustration at work.⁽²⁾

Current scientific evidence shows that higher levels of compassion fatigue have a negative impact on the quality and safety of nursing care.⁽³⁾ Thus, it is necessary for nurse managers to recognize that compassion fatigue is not just an individual issue, but an organizational factor that can compromise the effectiveness of clinical governance, whose mission is to ensure high-quality, safe and person-centered care.⁽⁴⁾

In this article, we propose a reflection on the relationship between compassion fatigue and clinical governance, considering the fundamental role of nursing leadership and management in quinary prevention⁽⁵⁾ which focuses on the care of those who care and demands the creation of healthy and sustainable environments in institutions. The aim of this study is to reflect on the clinical governance strategies to be used by nurse managers to minimize the effect of compassion fatigue.

METHOD

A narrative critical analysis was carried out, based on a search on Google Scholar with the terms (compassion fatigue and clinical governance), on the research rabbit app with the strategy (Compassion Fatigue AND Health Facilities AND Governance); on the EBSCO Host platform, in the CINAHL® Plus, MEDLINE® databases, with the terms (compassion fatigue AND patient safety or patient outcomes or quality of care or safety or error) AND (nurse or nurses or nursing). Articles that addressed the interdependence between compassion fatigue and clinical governance in nursing were included.

DEVELOPMENT

Compassion fatigue, defined as the emotional cost of caring for others, especially in situations of intense suffering⁽²⁾, differs from burnout in that it can appear more quickly and is directly related to the impact of empathy; burnout, on the other hand, stems from a chronic process of occupational stress.⁽³⁾

In compassion fatigue there are symptoms and consequences for professionals such as physical and emotional exhaustion, reduced empathy and increased emotional detachment, decreased job satisfaction and cognitive changes (memory failures, difficulty concentrating)⁽⁴⁾ which can culminate in decreased quality of care, increased risk of clinical error and deterioration of the working environment.

Since clinical governance is a system of knowledge, attitudes and practices that guide individuals, teams or services to achieve health gains with the involvement of all, by improving the quality of care and health intervention processes⁽⁵⁾, it is up to health service managers and leaders to use processes such as training, risk management, transparency, research and development, clinical effectiveness and clinical audit in their governance.⁽⁷⁾ Nurse managers should consider intervention strategies that focus on factors that contribute to reducing compassion fatigue.⁽⁶⁾

The quality of interpersonal relationships in the services and professional recognition are assumed to be factors that promote satisfaction and quality of life in professional practice. On the other hand, increasing workload⁽⁸⁾ and constant fatigue can increase nurses' vulnerability to compassion fatigue, compromising their well-being and performance.

Current evidence demonstrates the importance of valuing nurses' mental health and points to concrete

measures to be included in clinical governance, such as: taking into account professionals' mental health indicators in quality monitoring systems, allowing spaces for active listening and clinical supervision, valuing intelligent emotional leadership and implementing psychosocial support and mindfulness programs.⁽⁷⁾

Caring for those who care is an ethical priority for nurse managers in order to build solid, healthy and happy teams. Being responsible for developing plans that promote the emotional well-being of their teams, nurse managers recognize and act in a structured way, using a systematic methodology with defined stages, where characterizing the problem, defining the indicators and results to be achieved, defining strategies and activities, operationalization, monitoring and control and evaluation can contribute to effective results.⁽⁵⁾

The strategies to be adopted by the nurse manager in the prevention and management of compassion fatigue should include:

1. Promoting psychologically safe environments: creating spaces for active listening, clinical supervision and reflective dialog allow professionals to share emotions, identify early signs of emotional fatigue and build or develop resilience skills.⁽⁸⁾
2. Training and emotional literacy: invest in ongoing training programs on emotional and spiritual self-care, emotional regulation and the limits of empathy, in order to empower professionals and reduce the risk of burnout.⁽⁹⁾
3. Monitoring and evaluation: integrating well-being and mental health indicators into instruments for evaluating the quality of care and professional satisfaction, to enable management to identify risk contexts at an early stage.⁽¹⁰⁾
4. Sustainable organizational policies: implementing policies that respect working hours, promoting work-life balance and ensuring adequate human resources are key to preventing compassion fatigue.⁽¹¹⁾

Challenges and future prospects

Integrating the prevention and management of compassion fatigue into clinical governance necessitates a paradigm shift within healthcare organizations. In addition to the current emphasis—still in development—on outcomes of patient care, it is essential to incorporate indicators related to healthcare professionals' well-being, which is a fundamental prerequisite for ensuring quality and safety in care delivery. Accordingly, the training of health service managers must encompass competencies in emotional leadership, psychosocial risk assessment, and human-centered team management.

CONCLUSION

Compassion fatigue directly compromises two fundamental pillars of clinical governance: quality and safety. Decreased empathy can deteriorate the therapeutic relationship and affect the person's experience, contributing to a negative perception of the care provided, and can be contagious at an organizational level, especially when it is not recognized or addressed as a real and present risk for healthcare institutions.

Emotionally exhausted professionals are more prone to errors, delays in the therapeutic response and failures in communication with people and the team.

Managers should be responsible for developing strategies that foster the emotional well-being of their teams, providing psychologically safe environments, targeted training opportunities and emotional literacy. It is necessary to implement sustainable organizational policies, respecting the workload, balancing personal and work life in order to ensure adequate human resources by involving and committing the entire team.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest in carrying out this article.

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