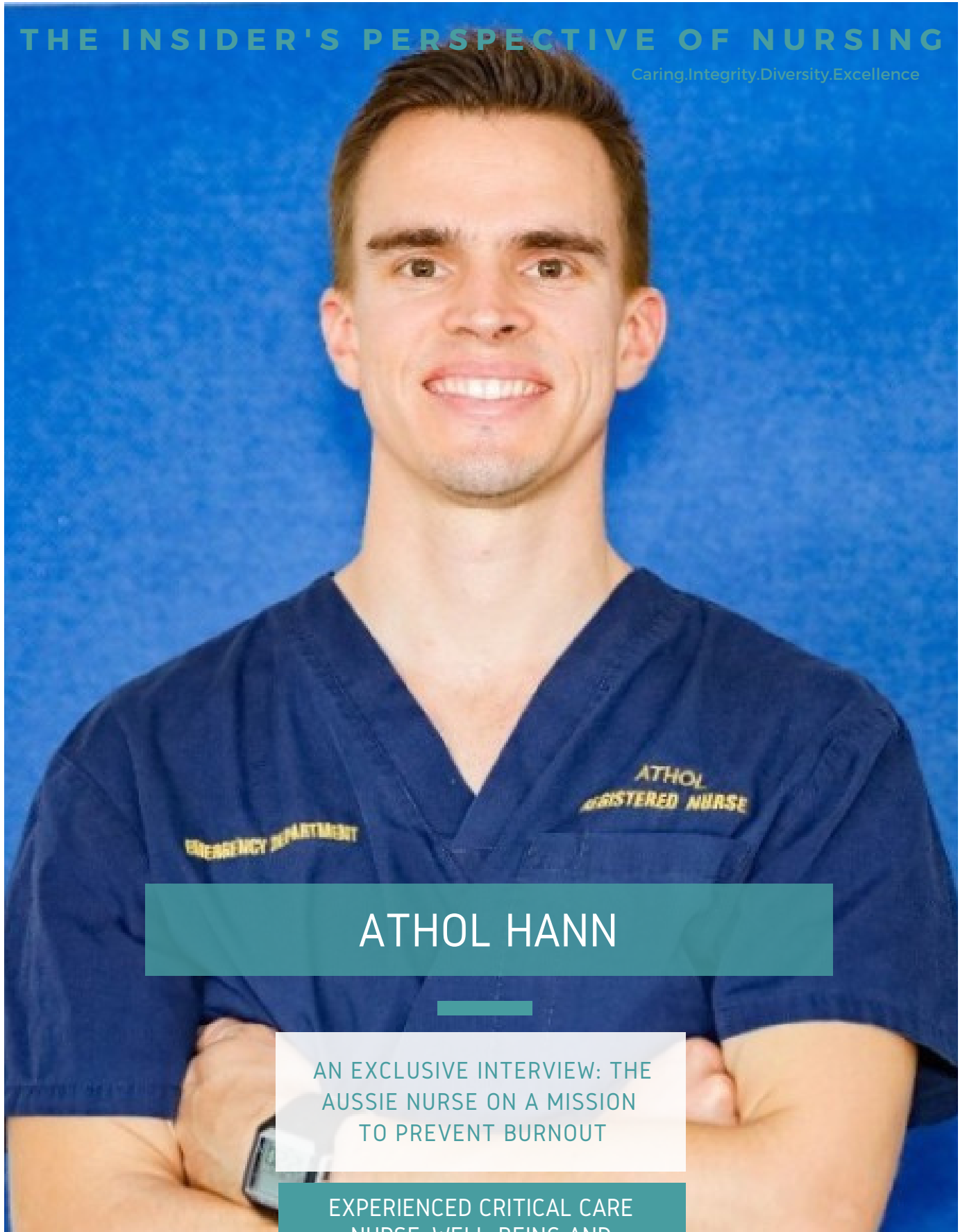


# NURSEDECK

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THE INSIDER'S PERSPECTIVE OF NURSING

Caring.Integrity.Diversity.Excellence



ATHOL HANN

AN EXCLUSIVE INTERVIEW: THE AUSSIE NURSE ON A MISSION TO PREVENT BURNOUT

EXPERIENCED CRITICAL CARE NURSE, WELL-BEING AND MINDFULNESS ADVOCATE

nurse+deck



## **A COMMUNITY OF RESOURCES BUILT FOR REAL NURSES.**

Where nurses share stories, resources & guides to help inspire and motivate.

*“When you’re a nurse, you know that every day you will touch a life or a life will touch yours.” — Unknown*

### **NEVILLE GUPTA**

Founder/CEO

As a strong advocate for the union between humanity and technology, Neville's focus leans toward tech influence on creating highly desirable working environments encompassing altruism, autonomy, human dignity, integrity, honesty and social justice.

### **GABRIELLE DIDATO**

Head of Influencer Marketing & Partnerships

### **LAKESHIA BATES**

Community Engagement Manager

### **DESTINY GORDON**

Brand Marketing Specialist

## PODCAST HOST



**JAMIE SMITH**  
**NURSEDECK PODCAST HOST**  
**RN, NP, MSN**

Nurse Jamie has been chosen as NurseDeck Podcast Host to share stories, resources & guides to help inspire and motivate the NurseDeck Community.

Jamie has been a registered nurse for over 13 years. She is an experienced nurse practitioner with a history in long-term care, medical-surgical geriatric nursing, and clinical pharmacology. She is also an educator and author.

“*I love hearing about startups. With NurseDeck we have our little patch of dirt at work time, to spruce up and help the nurses' community base. I love that there are people like NurseDeck trying to shake things up because we desperately need it.*”



## FEATURED STORY

### ATHOL HANN

## AN EXCLUSIVE INTERVIEW: THE AUSSIE NURSE ON A MISSION TO PREVENT BURNOUT

By NurseDeck

Athol Hann has worked as a nurse for over 12 years in several environments, but his passion is in emergency and intensive care. Right now, he's a nurse educator on a medical ward in a 300-bed hospital in Northern Australia. After a difficult experience with burnout that caused him to leave the field for a few years to be a dairy farmer, Hann got into entrepreneurship hoping to support other nurses through burnout. He founded Fwards in 2018 - an app soon-to-be-available in the States - to create sustainable behaviour change within the healthcare industry, and provide on the ground support and resources to health professionals to drive positive engagement.



NurseDeck (ND): I'm excited to have you here with NurseDeck today. Can you introduce yourself?

Athol Hann (AH): Thanks. I've been a nurse for the last 12 years, in and out of different sections, environments, workplaces, and whatnot, but my passion and background has been emergency and critical care and that's where I based most of my career. At the moment, I'm a nurse educator on a medical ward, though, which is great stuff. I'm based up in the northern part of Australia in a hospital that has 300 beds, and we see a mixture of different things.

ND: So why did you decide to become a nurse in the first place?

AH: Interestingly, I still don't always know the answer to that question. I got into nursing because my grandmother said to me, 'well, you like all these different elements,' and that's why I started into nursing. I wanted to travel, I liked biology and human anatomy. I did like helping people and I like supporting people through difficult times. I think my



grandmother was very wise; she said, 'what about nursing?' Because I had all these questions in my head, and I thought, 'I never thought of myself as a male nurse,' but I jumped in, and it's been a great career.

ND: It's definitely a passion for sure. So what's it like becoming an emergency and intensive care nurse?

AH: I guess it's a little bit of a journey. I've always enjoyed critical care and thinking outside the box on how we can do our best work for the sickest people. So, it has been a passion of mine in my career, since I was a student, and I actively worked when I was just out of university to progress towards intensive care. I moved into intensive care after my graduate program, and it was quite challenging, but there were certain aspects I really liked and certain aspects that I didn't like, but I do really enjoy feeling empowered and feeling like I've got some say or I've got some input into the game and that autonomy, that empowerment to make a real difference with your skills.



*I've always enjoyed critical care and thinking outside the box on how we can do our best work for the sickest people.*

ND: Do you think that a high level of burnout in nurses is more likely to be experienced in those areas - critical care units and the emergency room?

AH: Yes, I think there probably is a little bit more stress involved in those high impact areas - lives are on the line and there's a lot of pressure to perform. If you are doing it quite regularly and there's pressure all the time, which can happen in emergency and especially intensive care like in the current pandemic, burnout has increased. Burnout is that consistent pressure, that overwhelming inability to perform like you really want to, so yes I think it can occur more often in those areas.

ND: How do you go about identifying your own burnout, and how do you prevent it?

AH: It's a journey. So, in 2014-15, I went through a fairly nasty experience of burnout. That was on the back end of my intensive care career, and I felt really lost. It took me about three years to really work out what was causing it, and I didn't even know what burnout was, but it certainly was that. So, it took me a long time but after a lot of soul searching and a lot of deep diving, I did finally get there and understand, 'oh my god, these thoughts, these emotions, these moments in my career when I don't want to do this, these all had a reason and had factors that were leading up to that.' I just felt overwhelmed because I wasn't meeting my own core drivers, I didn't understand a lot of the time the impact that the decisions I was having in intensive care - if that will make a difference. One of my big drivers is making an impact and feeling like the actions that I deliver have worth. Sometimes in intensive care, you don't always get that throughput - in the global sense of it, you do - but I just didn't have

perspective on that. Now I understand what gets me out of bed and what drives me, so I can try to prevent burnout as best as possible. We like to stand strong, don't we? We like to be the saviors but we're not superheroe. We don't want to seem weak, our patients depend on us. They're going through some of the toughest times of their lives, and they want to lean on us, and we get great power out of that.

ND: Definitely. Can you tell us more about Fwards? How does it work?

AH: Fwards's has come off the background of parts of this experience of burnout. I've started to look at some of the factors that lead up to my element of burnout but also some of the struggles that are faced within my career. I was wanting to do something outside the box and I was thinking creatively and really wanted to push the envelope and support others that are maybe going through similar episodes. So, Fwards helps people with around-the-shift work because that work was a really stressful experience: it messes with your family life, sometimes you don't





see a colleague for two weeks that was one of your good friends.

Fwards is a roster-based calendar where you enter your calendar for the week, and the features focus around debriefing. There's a mindfulness tool to try and offload some of those thoughts - which I would have loved when I was going through something - to just try and make sense and do a little bit of easy journaling. We also have a chat feature where you can chat with your colleagues and share information that's around work or performance in healthcare. We're really trying to help reduce some of those stresses that we face every day. You're not going to fix everything, but if you can reduce at least 10% of some of those stresses that are really getting to you, you've got a chance.

ND: So it's an app? How does it protect nurses from burnout? And how is it beneficial to nurses during the pandemic?

AH: Yes it's an app, and available to download off the App Store or Google Play Store in Australia right now, soon in the U.S. market. I think the debriefing tool - the mindfulness tool - was probably the fuse between many different app elements. That's probably one of the big points we could really lean on: helping individuals and yourself to reflect after each day, to get some perspective on what happened during the day. What was challenging? What went well? Who supported you well? Showing some gratitude, but also having a think about some of the struggles you faced and getting some perspective on it. Some traumas or difficult days you're not going to be able to do much, but you can try to understand it in your own mind and reflect on it. What the app does is, once you've debriefed in one section, it will show that on the calendar, so over the month you can start to observe and reflect on how your month has been.



You can start to have some perspective and understanding on that, but you can make changes as you need to. That's when we can start to lean into some well-being tips and tricks and tools: 'This week has been a little bit difficult, maybe I need to sit outside for a bit longer.' I think it has some great benefit to people on the frontline, just to try to manage some of the stress we take home with us, to reduce as much as possible.

ND: What drives you in ensuring that Fwards is truly valuable to the lives of nurses in the broader healthcare community?

AH: Burnout has been an issue in nursing turnover for years, and the research goes back 20 to 30 years. A big passion for me is I don't want to see people leave like I did. I left in 2014 to become a dairy farmer because I thought nursing was dead for me, and I don't want to see my colleagues go through that, because that wasn't my true path, that wasn't my true story. I've come back to nursing, but it took me a lot. So my big passion point is, any tools, any education, anything we can do to help support individuals and teams to



stay together so they can continue doing what they want to do. That's delivering great care, providing impact and supporting patients, but also staying with their team and thriving as nurses. That's really what drives me with the app and educational content it'll deliver as well.

ND: You mentioned educational content - does it go over evidence-based practice? What specific educational elements does it have?

AH: So the app has got some well-being content. I've also developed a course on burnout called 'Burnout, No More.' It unpacks what burnout is and how it can impact you, but what you can do about it and create an action plan on the other side. We dive into what your drivers are, what's really important to you so you can start to understand why you're an intensive care nurse or an emergency



*I left in 2014 to become a dairy farmer because I thought nursing was dead for me.*





nurse, why you're a medical nurse and what all these things mean to you and your family. I'm not stepping into the evidence-based and clinical area, I'm more around the periphery and the other performance elements. I think we do healthcare really well, and there's plenty of resources out there, we just need to be in the right mindset to get the job done.

ND: Can you tell us more about AtholTech?

AH: Oh, yes. Entrepreneurship isn't always a linear path, so AtholTech was the first part of the business. I didn't have a name for a business or anything, so essentially that's what it became. AtholTech is the brain trust to all my different, weird creations. It's just sitting there - it's not the operating part of the business but it's there in the back.

ND: Got it. Do you think there are enough resources out there to support nurses? How does a community platform like NurseDeck help?

AH: Yeah, information is a fallacy, isn't it? Words on paper - we were exposed to information all the time, Facebook, Medium, LinkedIn, blog posts, there's words of advice

everywhere - but being really specific on sections or nurses, like what you guys are doing, is super important. Being really targeted with the information nurses need, like NurseDeck, I think there's a great place for that. I guess that's where I share an interest with you guys: being really specific and focused on what you're trying to achieve and delivering the right resources to nurses, rather than just noise because noise makes the problem worse when you're trying to get up and go to work. It just fills your head no matter what the noise is, your head's full and then you can't do your job.

ND: So how would you encourage our nurses to utilize the Fwards app? Anything else?

AH: Yeah, I'd love to connect on LinkedIn. We're on Facebook and Instagram. I'm really keen to connect with other nurses and hear your experiences and opinions and thoughts and how I can help you.



People can also go to [www.burnoutnomore.me](http://www.burnoutnomore.me), and that's the course hosting website - the next cohort will be opening up in February-March next year. If you feel a little stressed, I'd certainly like to help you through anything you're going through so we can get you on the other side and thriving and performing and doing what you love.

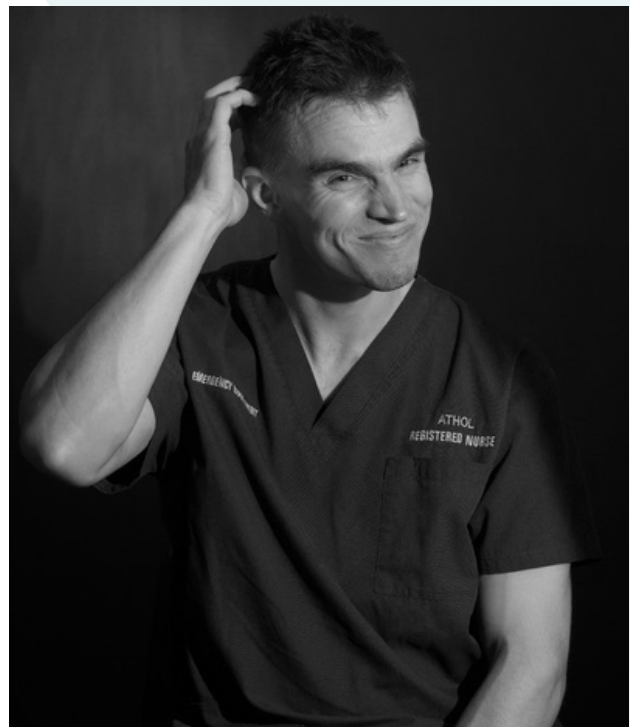
ND: Awesome. Is there a topic or issue we haven't talked about you would like to discuss?

AH: I particularly like this international collaboration and the power of LinkedIn - we're in different countries. I think this is fantastic, and I particularly like how we can go global with our communication and conversations now. I'd love to see more of it. So I think there's heaps of things we could discuss, but maybe for another day.

“*I'm really keen to connect with other nurses and hear your experiences and opinions and thoughts and how I can help you.*”

ND: Well, we love what you're doing here at NurseDeck. Thank you for your time.

AH: Absolutely. It's been great chatting today.



[www.linkedin.com/in/athol-hann](http://www.linkedin.com/in/athol-hann)