



NURSE FATIGUE AND PATIENT SAFETY

RESEARCH REPORT

Executive Summary

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© **Canadian Nurses Association**

50 Driveway

Ottawa, ON K2P 1E2

Tel.: 613-237-2133 or 1-800-361-8404

Fax: 613-237-3520

Website: www.cna-aiic.ca

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This report was produced by CNA and RNAO to provide information on a particular topic or topics. The views and opinions expressed in this report do not necessarily reflect the views of the CNA or RNAO boards of directors.

This research report represents a clarion call to the health-care system, health-care organizations, governments, nursing associations, unions and regulatory bodies – and nurses themselves – about the rising levels of nurse fatigue. Such fatigue is largely due to the relentless heavy workloads of nurses with ever-increasing cognitive, psychosocial and physical work demands.

The Canadian Nurses Association (CNA) and the Registered Nurses' Association of Ontario (RNAO) are jointly responsible for carrying out the research and producing this research paper. Both organizations have a long history of speaking out for quality health care through policy advocacy. Together, CNA and RNAO have conducted a broad environmental scan – including key informant and focus group interviews, a national survey and a comprehensive literature review – to determine the prevailing norms related to fatigue in nursing and patient safety across Canada. In addition, recommended solutions to this critical issue in health care, targeted to the system, organizations and individual practitioners, have been identified based on the views of nurses and other stakeholders, as well as from literature and research evidence.

The aim is to raise awareness and resolve this health system problem – a goal of vital importance to Canada's nurses and to the public, who expect and deserve safe, competent care from nurses and their health professional team.

The results presented herein represent 7,239 nurses, and depict a profession striving to meet ever-rising professional demands and excessive workloads exacerbated by increasing patient acuity, higher patient volumes and the growing complexity of treatment modalities. At the same time, although those in the profession know the risks of working when fatigued, many tend to pay more attention to the needs of their patients and colleagues rather than to their own needs. While data indicate that nurses perceived they were not making errors due to fatigue, these same nurses reported feeling that patients are in potentially unsafe situations due to workload, inadequate staffing and nurses working while fatigued. The literature corroborates these findings.

The imperative for CNA and RNAO in spotlighting this crucial problem and identifying specific solutions is to guard against unsafe patient situations and stop a potential exodus of nurses from the profession. A continued and fervent focus on nurse fatigue and patient safety is vital in order to prevent lasting adverse effects.

Based on the literature review, various descriptions and experiences of fatigue have been synthesized into the following comprehensive definition of "nurse fatigue":

Nurse fatigue is a subjective feeling of tiredness (experienced by nurses) that is physically and mentally penetrative. It ranges from tiredness to exhaustion, creating an unrelenting overall condition that interferes with individuals' physical and cognitive ability to function to their normal capacity. It is multidimensional in both its causes and manifestations; it is influenced by many factors: physiological (e.g., circadian rhythms), psychological (e.g., stress, alertness, sleepiness), behavioural (e.g., pattern of work, sleep habits) and environmental (e.g., work demand). Its experience involves some combination of features: physical (e.g., sleepiness) and psychological (e.g., compassion fatigue, emotional exhaustion). It may significantly interfere with functioning and may persist despite periods of rest.

Given the urgency of the situation related to fatigue, nursing and patient safety, specific recommended solutions are targeted to policy imperatives at the system and organizational levels, as well as to the role of the individual nurse in mitigating and managing fatigue in nursing. The evidence reinforces that these recommended solutions hold the key to change.

System-Level Recommendations

- 1 Governments at all levels ensure adequate funding aimed at preventing unsafe practices due to rising levels of staff fatigue aggravated by excessive workloads, staff shortages and inattention to safe labour practices. Such funding would support:
 - increasing the number of registered nurses (RNs) to ensure safe care for complex or unstable patients;
 - implementing graduate guarantees to ensure new grads have full-time work (RNAO, 2007);
 - 70% of full-time nurses in all health organizations so as to foster continuity of care and caregiver, thus increasing quality of care, nurse satisfaction and retention (RNAO, 2005); and
 - other human resources solutions, such as those outlined by CNA to eliminate Canada's RN shortage (CNA, 2009).
- 2 Governments provide funding to increase nursing enrolments in order to ensure an adequate nursing workforce through made-in-Canada health human resource strategies focused on: expanding the number of qualified faculty in nursing programs, increasing the number of RN seats in education, providing more clinical placement opportunities, and rejecting unethical international recruitment.
- 3 Research groups support new research on the relationship between nurse fatigue and work schedules, adequate rest and recuperation and patient safety, to be carried out in all settings in which nurses work.
- 4 National patient safety and health-care leaders incorporate the issue of nurse fatigue in the national patient safety agenda as a critical factor impacting safe patient care, and the strategy of creating cultures of safety must include mitigating and managing fatigue as a key component.
- 5 Accreditation bodies explore the development of policy standards for health-care organizations that mitigate and manage staff fatigue.
- 6 Nursing associations and nursing unions collaborate to develop consistent advocacy and policy agendas that incorporate fatigue as a factor, at the national, provincial and territorial levels, targeted to governments, health-care organizations and the public. Such agendas focus on creating and sustaining healthy work environments (Griffin et al., 2006) for nurses and providing safe quality care for patients.
- 7 Nursing associations raise awareness about nurse fatigue and its causal factors and consequences related to patient safety, nurse satisfaction, and retention and recruitment at all levels of government, the public and the nursing community. Work with RNAO to develop a best practice guideline related to mitigating and managing fatigue in nursing.
- 8 Nursing regulatory bodies acknowledge issues of nurse fatigue in regulations related to fitness to practise and in management responsibilities for RNs.

Organizational-Level Recommendations

- 1 Health-care organizations promote a culture of safety by establishing a fatigue management policy and program (Quality Worklife-Quality Healthcare Collaborative, 2007, p. 29).
 - Establish scheduling practices and policies for nursing staff (see Appendix C in report).
 - Develop processes to document fatigue in the workplace and its relationship to overtime, maximum hours worked per day and per week, on-call hours, and data related to patient error, staff retention levels and recruitment results.
 - Develop policies that provide time and space for rest periods, meals and other health-promotion initiatives for sleep hygiene.
 - Educate nursing staff and management in recognizing and managing fatigue in self and others, to include understanding the science of sleep, the risks associated with fatigue and approaches to circadian rhythm disturbances.
 - Equip health-care organizations with sleep facilities to enable nurses to minimize their circadian disruptions during evening and night shift work.
- 2 Nursing education programs incorporate, in professional development and clinical courses, information about the impact of fatigue on clinical nursing work, and hours of care on lifestyle and health, and how to manage this aspect of nursing as a career.
- 3 Nursing unions work to mitigate nurse fatigue:
 - Reinforce safe scheduling by limiting hours worked by a nurse (1) in one day to 12 hours, inclusive of shift hand-off, and on-call hours, and (2) in one 7-day period to 48 hours, inclusive of on-call hours.
 - Promote choice of shift type and length for nurses in all health-care settings within a philosophy of continuity of care and caregiver, and create healthy and safe work environments that apply circadian rhythm principles to scheduling.
 - Advocate for review of the extensive use of the 12-hour shift in health-care settings across Canada with a view to introducing a shift length that is more conducive to patient safety and work-life balance.
 - Mount public campaigns about the working conditions of nurses that reflect the issues of workload, hours per day and per week – including on-call and overtime requirements – and the relationship of such issues to patient safety.

Individual-Level Recommendations

Nurses in all roles and practice settings have a professional responsibility to mitigate and manage their own fatigue and provide safe care. They have a professional responsibility to act in a manner that is consistent with maintaining patient and personal safety (CNA, 2008).

- 1 Nurses learn to be aware of, and recognize signs, symptoms and responses to, personal fatigue.
- 2 Nurses understand and work within the policies related to safe patient care within their organizations and within professional practice expectations.
- 3 Nurses take responsibility for mitigating and managing fatigue while at work, including using professional approaches to decline work assignments. When deciding to work extra shifts or when planning work or non-work related activities, nurses act on their ethical obligation to maintain fitness to practice.
- 4 Nurses work through their professional associations, nursing unions and regulatory bodies to advocate for safe patient care through safe scheduling practices in the work environment.
- 5 Nurses support policies, procedures and health promotion initiatives that manage fatigue in the workplace.

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