Healthcare Worker Fatigue as a Factor in Patient Safety

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Healthcare organizations providing 24-hour care have always faced staffing challenges. However, trends such as increasing patient acuity, nursing shortages and shorter lengths of stay have influenced management practices. Specifically, we have seen nurses’ shifts increase from the traditional eight-hour shift to 10- to 12-hour shifts. A survey of 393 registered nurses found that 14 percent of the respondents worked 16 or more consecutive hours at least once during the four-week survey period; the longest shift reportedly lasted 23 hours and 40 minutes.1

The link between longer work hours and concerns of worker fatigue and its effects have been well-documented in the literature. For example, the Accreditation Council for Graduate Medical Education (ACGME) revised their standards for physicians in training in 2011. While the maximum number of hours worked per week remained at 80 hours averaged over a four-week period, a caveat was added that this maximum number of hours included all in-house call activity and all moonlighting.2 In December of 2011, The Joint Commission released a Sentinel Event Alert which noted that the practice of extended work hours significantly increases fatigue and compromises performance and patient safety.3 In fact, the most frequently identified root cause of sentinel events reviewed by The Joint Commission in 2014 was “Human Factors,” which includes fatigue.4 In September 2014, the American Nurses Association (ANA) issued a position statement which includes the following:

Registered nurses and employers in all care settings must collaborate to reduce the risks of nurse fatigue and sleepiness associated with shift work and long work hours. Evidence-based strategies must be implemented to proactively address nurse fatigue and sleepiness; to promote the health, safety, and wellness of registered nurses; and to ensure optimal patient outcomes.5

The National Sleep Foundation recommends seven to nine hours of sleep per night for an adult aged 26–64.6 The American College of Obstetricians and Gynecologists (ACOG) has stated, “If patient care responsibilities preclude scheduled rest, alertness management strategies may in be helpful.”7 In this regard, ACOG pointed to the following guidelines from the National Highway Traffic Safety Administration:

- Structure work to take advantage of circadian influences.
- Recognize that the urge to sleep is very strong between 2 am and 9 am, and especially between 3 am and 5 am. Avoid unnecessary work at that time.
- Sleep when sleepy.
- Provide for backup during times impairment is likely.
- Go to sleep immediately after working a night shift to maximize sleep length.
- Apply good sleep habits. The sleep environment should be quiet and dark. It should have adequate ventilation and a comfortable temperature to allow daytime sleep.
- Recognize behavioral changes such as irritability that may indicate dangerous levels of fatigue.
- Use naps strategically. A 2-hour nap before a night shift will help prevent sleepiness. If a 2-hour nap cannot be scheduled, then sleep no more than 45 minutes to avoid deep sleep and subsequent difficulty with arousal.8

Recognizing that fatigue is inherent in the 24-hour healthcare industry, what can be objectively and systematically done to eliminate fatigue from your operations, and thereby reduce costs, risks and liabilities? The Joint Commission’s Sentinel Event Alert, “Healthcare Worker Fatigue and Patient Safety,” suggests the following evidence-based actions to help mitigate the risks of fatigue and protect patients from preventable harm:

1. Assess your organization for fatigue-related risks.
2. Assess your organization’s hand-off processes and procedures to ensure that they adequately protect patients.
3. Ask staff members for input on designing work schedules to minimize fatigue potential.
4. Create and implement a fatigue management plan that includes scientific strategies for fighting fatigue.
5. Educate staff members about sleep hygiene and the effects of fatigue on patient safety.
6. Provide opportunities for staff members to express their concerns about fatigue.
7. Encourage staff members who work extended work shifts or hours to use teamwork as a supportive strategy and to protect patients from potential harm.
8. Consider fatigue as a potentially contributing factor when reviewing all adverse events.
9. Assess the environment provided for sleep breaks to ensure that it fully protects sleep. 

As suggested by The Joint Commission, once a corporate commitment is made to reduce fatigue and optimize the safety and productivity of the workforce to make it safer for patients, a fatigue risk management system (FRMS) should be developed. The American College of Occupational and Environmental Medicine (ACOEM) has defined FRMS as, “A scientifically based, date-driven addition or alternative to prescriptive hours of work limitations which manages employee fatigue in a flexible manner appropriate to the level of risk exposure and the nature of the operation.”

The key characteristics of a FRMS include being science-based, data-driven, cooperative, fully implemented, integrated, continuously improved, budgeted and owned. While developing a FRMS may appear to be very challenging at the outset, a careful review of current policies, procedures and practices may actually demonstrate that portions of the FRMS are already in place at the organization. Also, “An FRMS will include education for staff and leadership on the effects of fatigue, risk mitigating strategies for monitoring and managing fatigue-related risk, and a process for monitoring and evaluating any fatigue-related events.”

An effective FRMS addresses five defenses:

1. Workload-Staffing Balance
2. Shift or Duty-Rest Scheduling
3. Employee Fatigue Training & Sleep Disorder Management
4. Work Environment Design
5. Alertness Monitoring & Fitness for Duty

In order to effectively achieve improved health and safety outcomes for both workers and patients, employers and employees have to work together. Employers should review their policies, procedures, practices and culture with respect to overtime practices, shift-work, patient hand-offs, the work environment and employee rest periods. Because of the potential issues with patient safety, employees should address their lifestyle by evaluating the effects that fatigue have on their professional and personal lives and determine what they can do to support restful, adequate and uninterrupted sleep on a daily basis. Make the time to give your body what it needs!

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References

12. Ibid, without secondary citation.

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