

Icn position analysis

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ICN Position Analysis The International Council of Nurses position statement regarding shift work states the recognition of need for shift work, as well as concern about the negative impact on nurses and patient care. This statement believes shift work should take several factors into consideration including patient care as this could be jeopardized by errors due to shift work; along with the need to protect and promote nurses health and well-being. The position makes clear promoting taking steps to make changes and adequately evaluate the outcomes. Included in the statement is an affirmation that nurses must be educated and aware of the possible professional, and occupational hazards of shift work so nurses may contribute to policy making. I believe this is of the utmost importance as I see nurses suffering from shift work difficulties, yet I do not believe those nurses are fully aware of the implications to themselves, their families and their patients. The ICN supports obtaining information on these issues, along with strategies to cope; and assisting national nurses associations to advocate for nurses to achieve the outcomes of healthy nurses, and optimal patient care. I believe this is highly relevant in today's nursing practice and for the future of nursing around the world. If national nurses associations and healthcare leaders followed the position statement guidelines and truly advocated and took seriously this matter, there are a number of guidelines to reduce the hazards of shift work. Shift work is not optional in health care, but the impact may be reduced through the efforts and education of nurses and nursing organizations. I believe this statement is a serious and important step toward protecting and enhancing nurses and their personal health. However, it is obvious from the obstacles faced this is a challenging and

difficult task. Optimally, and according to this position statement, shift patterns and staffing mix using recommended strategies can and will improve conditions for everyone. I am a strong patient and nurse advocate and while I cannot diminish the importance of optimal patient care, and typically place it as the top priority, I believe and support this statement as recognizing that without optimally healthy nursing staff, optimal patient care and outcomes are less likely. One cannot exist without the other; they are coexistent. Importance for Nurses A healthy nurse has the potential to provide optimal patient care, education, advocacy, mentoring, teaching, and support for nursing staff as well as the rest of the medical team. Studies have shown negative health effects from disruption of the circadian rhythm related to shift work. One such study (Davis, 2001) has shown a 60 % increase in the incidence of breast cancer among grave yard shift workers. “ Increased accident rates and decreased productivity are often associated with night work. As a result of the Three Mile Island and Chernobyl nuclear power station incidents, as well as other well-publicized nighttime accidents, the news media have focused increasingly on the dangers of a chronically fatigued and sleep-deprived workforce in the health care, transportation, and nuclear power industries. ” (Alward, 2005) Dr. Orfeu Buxton from the Harvard Medical School states studies have shown shift workers to have a higher probability for obesity or diabetes. (The Lamp, 2012) Pick a body system and you can find literature to suggest higher risk to shift workers. I also feel shift work is highly associated with factory work and thus may diminish the professionalism view of nursing among the general public. Along with that thought is why do nurses seek higher and higher education levels to work

like factory workers? Some positions I've seen while recently applying for jobs indicate the need for a MSN for rotating shifts. This issue is of critical importance to the health and well-being of nurses, patient care, and improving the professional image nurses strive to achieve. Three articles on the subject I choose to review three articles on this subject after reading many. The three I chose seemed to cover a broad amount of information to support my understanding of this position statement. How it relates to me personally and my peers, and therefore the care we deliver and patients we serve. Article one: The Challenges of Shift Work by Ewa Blachowicz and Mary Jo Letizia (Blachowicz and Letizia, 2006). This article addresses the many challenges of shift work including fatigue which can impair memory, critical thinking and decision making. The article also helps the reader learn why this is so important to the stages of sleep and maintaining circadian rhythm. There is further research to validate health concerns, adding coronary artery disease and menstrual irregularities. From this article the reader also learns The Diagnostic and Coding Manual now includes shift work sleep disorder (SWSD) as an actual diagnosis! How sad for our profession and patients. The article also discusses recommendation for good sleep hygiene and habits to limit the amount of stress shift work places on the body. Article two: Awake, alert, and ready to work; strategies for sleep technicians to manage shift work by Jeffery Bixby. (Bixby, 2009) I felt this article added a dimension of understanding to the fact not all night shift workers develop SWSD, and provided strategies for coping with shift work. These strategies include: maintaining nutrition, family support and understanding, maintaining a cool, dark, quiet place to sleep; limiting caffeine and sleep aid medications and

planning more difficult tasks for your more alert hours. This article also addresses the responsibility of the employer to be mindful of schedules, including staff meetings, breaks, and nutrition. There is also mention of strategies to suggest carpooling and an employee alertness program. Article three: Morning-evening type and burnout level as factors influencing sleep quality of shift nurses: a questionnaire study by Zencirci and Arslan. (Zencirci and Arslan 2011) I found the value of this article to be in the statistics gathered from questionnaires distributed to nurses in Turkey. They were able to achieve a response rate of 89%, at least 62% worked rotating shifts. The study used the Pittsburg Sleep Quality Index (PSQI) and the Morningness-eveningness questionnaire (MEQ). 79. 1% of these nurses experienced poor sleep quality as expressed through questions about sleep latency, duration, efficiency, disturbances, and daytime dysfunction. These nurses had higher burnout levels, and were more likely to be late or miss work. The authors concluded the strongest predictor of sleep disturbances to be in the participant's natural morningness-eveningness sleep patterns. This helps explain to me why I have seen several colleagues choose the night shift and stay on the night shift despite being offered day positions. Those people are naturally predisposed to later sleep patterns. Evaluation of how use of position statement improves population health Adherence to this position statement and applying the recommendations to effect changes amongst nursing leaders who are able to implement these recommendations, would improve the health of the population. Nurses can give better care, make fewer mistakes, and be the best they can be when this statement is given credence and taken responsibly. The result would be improved health of the

medical community and patient population. The key is how facilities choose to use and implement the position statement and tools available to achieve the goals the position statement supports. It would be interesting if we could globally proceed with the idea's and initiatives of the position statement and re-evaluate all the data; including patient outcomes. I believe the data would reveal very different results, indicating improved health of our entire population. I am thankful this seems to be an isolated issue in this county, and believe the ICN position statement has played a part in this. The research I did for this paper indicates shift work is a concern in a many different countries for nurses. Judging legal and ethical implication Important Issues Regarding Work Hours Hours of work - Sleep deprivation lasting 24 hours has a measurable, negative impact on performance. The same level of impairment occurs after being awake 17-19 hours as having a blood alcohol level at the legal limit for driving. - Working (during the day) more than 55-60 hours per week over an extended period is likely to lead to significant health effects. - Hours of work limits for day work will be different from those for night work. Night work - The effects of working nights and extended hours are interactive. - Shiftworkers lose, on average, 1-1.5 hours sleep each 24 hour period, resulting in a sleep debt of 6 hours after 4 nights and with significant consequences for health and safety. Effect of extended hours or night work - Sleep deprivation, coupled with long hours of work over a prolonged period (approximately 12 months) has both a short-term impact on performance and, in the long term, will lead to cardiovascular, mental health, behavioral (safety), and productivity decrements. Opportunities for recuperation - In the long term, the average sleep period required for health

and alertness is between 7-9 hours. - A minimum of 6 hours of consecutive sleep in a 24-hour period is the minimum needed to maintain alertness for the next 24 hours, but assumes a zero sleep debt. - Two consecutive nights' sleep, with a normal day pattern, are required after 3-4 nights' work.

(Williams, et al.) The legal implications seem clear according to the table above, hours of lost sleep could be have the effect of alcohol. How can we as nurses justify this? Note the references to mental and behavioral safety. We don't let drunk people drive or work. We do not anyone obviously impaired take care of patients. Yet we continue to practice rotating shift work as nurses, despite the evidence of possible impairment, increased error rates, and negative health effects. Legally and ethically with all the research and evidence at our fingertips this is a crime. We as nurses, and health care leaders, must use our resources to advocate an end to this practice and do our best to support the personnel who must work a different shift. Estimated improved health of community If the ICN position statement were followed by all, and shift work was reduced, supported and structured by leadership in healthcare facilities, everyone's health would improve. Every consumer of health care; nursing, patients, ancillary staff, physicians would see improved health based on the research and evidence available. The community at large would benefit from healthier members. The community would also be much healthier without sleep deprived, impaired, and fatigued health care providers driving, and going about activities of daily living outside of the healthcare setting. This puts the community at risk. So to estimate the position statement as to how it improves the health of the community: priceless. Conclusion In conclusion, with all the evidenced based research

and information available to nursing and nursing leaders, it is sad to see rotating shifts with all of the negative implications tolerated and practiced in today's modern world. We now know the impact. We cannot change 24 hour a day healthcare. What we can change is how we manage the shifts required to cover the 24 hour period, and how we assist those who are required to work shifts incompatible with our natural circadian rhythm.

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