



Position Statement

Nurses and shift work

ICN Position:

The International Council of Nurses (ICN) recognises that many nursing services must be accessible on a twenty-four hour basis, making shift work a necessity. At the same time ICN is very concerned that shift work may have a negative impact on an individual's health, ability to function, immediate support group and the continuity of care, thus affecting the services provided.

ICN believes that rostering systems applied in all nurses' work settings must adequately consider occupational health implications as well as:

- Patients' needs.
- Number of nurses and skills pool required to meet patient/community needs and ensure patient safety.
- Nurses' personal needs.
- Worker safety.
- Legislation/collective agreement stipulations.

ICN promotes the testing of new shift patterns on a trial basis for at least six months so that a thorough evaluation (with nurse participation) may be undertaken. Nurses must be made aware of the professional and occupational health implications of the various systems of rostering applied so that they may make informed contributions to policy-making.

The International Council of Nurses is committed to:

- Identifying trends in the management of shift work (including split shifts).
- Disseminating information to member nurses associations about the effects of shift work and strategies to cope with shift work for inclusion in education and orientation programmes.
- Obtaining recognition of the occupational hazards associated with shift work.
- Assisting national nurses associations (NNAs) in preparing their negotiation for fair rostering systems.

National nurses associations need to disseminate information on shift work and best-practice management. In addition, NNAs should strongly recommend or negotiate adequate working conditions for shift nurses, for example:

- shift plans that consider rest periods, shift duration and order of rotation
- adequate number and skill mix of nursing staff
- access to occupational health services
- stress reduction programmes
- access to continuing education
- access to suitable child care facilities

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- safe transport
- access to hot meals
- changing rooms (locker rooms)
- protection against discriminatory practices

Background

The very nature of nursing care presupposes a service provided on a twenty-four hour basis that can only be maintained by shift work. This employment pattern is known to require nurses to adapt physically, emotionally and socially.

While shift work may bring some wanted flexibility to nurses' work schedule and additional income, it often introduces additional hardship on nurses providing services in complex environments and demanding interpersonal situations. Evening and night shifts are frequently less well staffed (fewer employees with often a lower grade mix) and nurses have difficult access to safe transport and basic comforts such as hot meals. The stress of shift work is known to increase levels of absenteeism and staff turnover thus affecting the quality of nursing care.

Rotating shifts have been associated with more sleep disturbances, digestive problems, fatigue and alcohol intake, along with less satisfactory psychological health and work performance. Nurses on rotating shifts were found to take more sick days and to give more serious reasons for these sick days relative to fixed shift workers.

Remuneration compensating for shift work does not address the occupational health hazards shift nurses face. Employers should be required to introduce approaches to reduce the harmful effects of shift work such as:

- individualised time schedules
- decreased hours per week for evening and night shifts
- computer programmes developing objective rosters

The allocation of nurses on various shift patterns determines the staffing level in a given unit/service at a particular point in time. The nursing team thus created will provide a certain grade and skill mix. This combination will necessarily influence the quality of care provided. Rostering will also influence the degree of physical and mental fatigue experienced by shift staff.

Adopted in 1995
Reviewed and revised in 2000 and 2007

Related ICN Positions:

- Abuse and Violence Against Nursing Personnel
- Occupational Health and Safety for Nurses
- Socio-economic Welfare for Nurses
- HHRD

Related ICN Publications:

- Guidelines on Occupational Health and Safety Management Programme for Nurses, Geneva, ICN, 2007
- Guidelines: Law and the Workplace, Geneva, ICN, 2004

The International Council of Nurses is a federation of more than 130 national nurses associations representing the millions of nurses worldwide. Operated by nurses and leading nursing internationally, ICN works to ensure quality nursing care for all and sound health policies globally.