

# Fatigue

# Practice Recommendations

Developed by participants during WSNA and NWOONE co-sponsored workshop event

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## **I Education**

- awareness of effects of fatigue for all staff (nurses, managers, and other healthcare workers)
- awareness of implications of fatigue on patient safety and nurse well-being
- fatigue awareness competencies
- bedtime/sleep hygiene and "rituals"
- stress management education
- self renewal
- self assessment tools (how to use)
- incorporate fatigue education into staff orientation
- educate students
- make sure medical staff on board and understand implications
- continue state/regional collaboration to provide education about the impact of fatigue in order to create a culture change

## **II Staffing and Scheduling**

- Creative scheduling design such as flexible schedules to meet staff needs (4 hour, "mom/dad" shifts, etc)
- have adequate staffing to support vacations
- ancillary help for nurses
- having enough staff to ensure staff take breaks
- consider incentives to work the 8 hr shift rather than the long shifts

## **III Clinical Practice**

- Increase use of standardized checklists
  - surgery
  - for critical tasks
- Procedure/surgery scheduling - spread out so can plan better

## **IV. Develop supportive culture fostering healthy environment and self care**

- break room design for calmness
- having enough break rooms
- night shift "comfort kit"
- pursue group pricing for eye shields, lights, etc to support staff

- wellness promotion for staff
- have front line nurses involved in decision-making
- consider scheduling a meeting day for all meetings/no-meeting day
- limit overhead pages
- implement self assessment tool distribution and utilization
- decrease noise levels at nursing work stations
- have enough work stations where nurses can get off their feet and sit down
- ask co-workers if they have taken a break
- ergonomic changes to better support staff
- sleep rooms accessible for nursing staff as well as other staff
- challenge the paradigm of “nurses are invincible”
- galvanize “slogan” to bring awareness to importance of recognizing/eliminating fatigue
- change culture of seeing a need but not speaking up

**V. Management role-modeling**

- asking about staffs' ability to get breaks
- establishing break partners so ensure each gets a break
- manager take a staff member with them for a meal break

**VI. Community collaboration and networking to learn new ideas**

- educate community more to recognize care needs/issues (to help decrease Emergency Department crises)
- bring public in as partner in re-setting expectations regarding nurses

**VII. Policy development**

- limit OT hours per week
- rest between shifts (minimum of 12 hours)
- ban 24 hr shifts
- develop policies re: max hours per 24 hours and/or per pay period