NURSING MATTERS

Nursing Matters fact sheets provide quick reference information and international perspectives from the nursing profession on current health and social issues.

Nurses and Overtime

Background

The change in demographic aspects and the economic environment is leading nurses to undertake an increase amount of worked overtime. The prevalence of overtime has become a global issue and is reported in the Middle-East, Europe, Africa, Japan and in the USA.\textsuperscript{12345}

“Overtime is a multifaceted, poorly defined, and indiscriminately used concept”.\textsuperscript{1}

Working overtime increases the risk of making errors; these errors simultaneously reduce the health and safety of staff and patients. Hazardous conditions may even result in the death of nurses (e.g. death due to being overworked).\textsuperscript{6}

Overtime is defined as time in excess of a set limit or as working time in excess of a standard day or week. In 2010, Bae and Brewer provided the following categories of overtime:\textsuperscript{7}

- **Mandatory Overtime** - “[…] a person with authority is commanding a person with lesser authority or power to work extra hours not previously negotiated and that the person with lesser power is obligated to comply during mandatory overtime.”
- **Voluntary Overtime** - time in excess of a set limit “[…] done of one’s own free will without valuable consideration or legal obligation.”
- **Paid on-call hours** - time outside the regular schedule available for emergencies.

But there are comments that even voluntary overtime “[…] feels like it is required”\textsuperscript{8} and has the same potential for threatening patients’ safety as working mandatory overtime.
Causes and consequences

Figure 1: Antecedents, defining attributes and consequences of nursing overtime. Figure adopted by Lobo et al. 2013\(^1\)

**Antecedents**

- **Societal**
  - A shrinking pool of nurses
  - Economic climate resulting in financial pressure on hospitals

- **Organisational**
  - Position control
  - Hiring freezes
  - Nursing shortages
  - Absenteeism
  - Sick days
  - Maternity, bereavement & education leaves
  - Nurse turnover
  - Speciality units and fluctuations in patient acuity/demand

- **Individual/Nurse**
  - Schedule flexibility
  - Financial needs
  - Preferences
  - Schedule options
  - Patient/career commitment

**Defining Attributes**

- Perception of choice or control over overtime hours worked
- Rewards or lack thereof
- Time off duty counts equally as much as time on
- Disruption due to a lack of preparation

**Consequences**

- **Organisational:**
  - Offset the cost of hiring additional full-time staff
  - Fiscal costs
  - Nursing strikes

- **Nurses:**
  - Motivation/energy
  - Recognition from colleagues
  - Promotions
  - Time off
  - Financial remuneration
  - Increased work-related injuries
  - Fatigue
  - Disruption of child and family responsibilities
  - Musculoskeletal problems
  - Burnout/ Stress
  - Dissatisfaction and turnover

- **Patient:**
  - Medication related errors
  - Poorer patient care
  - Pneumonia, myocardial infarction, infections, mortality (increased or decreased)

Ultimately the risk of making errors doubles when nurses work more than 12.5 consecutive hours.
The courts in Japan determined in 2008 that two young nurses died as result of “Karoshi”, which the International Labour Organization describes as a socio-medical term that [...] refers to fatalities or associated work disability due to cardiovascular attacks (such as brain strokes, myocardial infection or acute failure) aggravated by a heavy workload and long working hours.\textsuperscript{19}

**Prevention and Protection**

Legislation:
- Determining limitations of shift length and weekly work hours\textsuperscript{10}
- Designing evidence-based policies and practices for the protection of patients and nurses\textsuperscript{11}
- Setting restrictions of mandatory and voluntary overtime\textsuperscript{12}

Nursing association:
- Participating in policy development and pressing legislations to design restrictions and awards\textsuperscript{13}

Employer:
- Close monitoring of mandatory and voluntary overtime
- Promoting a healthy and safe workplace environment by providing services in the field of occupational health care including health needs assessment
- Providing education about causes and consequences of overtime
- Providing regular and predictable individual schedules
- Perceiving propositions of occupational health services
- Being aware of restrictions, laws, regulations and limitations of overtime
- Promoting change through solidarity among the nursing team
- Getting involved in professional nursing associations
- Being engaged in the process of research in overtime.

**Examples**

- **Middle-East: Iran**
  A 2012 study reported that almost three out of four nurses worked overtime.\textsuperscript{2}
  The standard weekly working time for nurses in Iran is 44 hours. New policies in nursing were implemented in 2011. The maximum amount of working time per day is 12 hours. Under certain circumstances (e.g. years of working experience and specialty) weekly working hours can be reduced from 44 to 36 hours. In addition, there are 80 hours of overtime allowed per month according to the needs of the hospital.\textsuperscript{14}
• **Europe**
  Nurses within the EU are protected by law from being forced to do overtime, but it is still common practice in almost all countries that nurses do work overtime. The EU directives 93/104/EC and 2000/34/EC were codified in the directive 2003/88/EC which is addressed to all members of the EU and entered into force in August 2004. This directive includes minimum safety and health requirements for working time regulations. The maximum weekly working time including overtime is limited to 48 hours. Daily and weekly rest entitlements are also specified in the regulations:
  - **Daily rest**: Employees are entitled to a rest period of not less than 11 consecutive hours in each period of 24 hours during which the employee works for the employer.
  - **Weekly rest period**: Employees are entitled to an uninterrupted rest period of not less than 24 hours in each 7-day period. This is in addition to the daily rest period.
  - **Breaks**: Employees are entitled to a rest break when daily working time exceeds 6 hours.

• **Asia: Japan**
  The results of a 2008 survey by the Japanese Nursing Association (JNA) showed that one out of 23 employees works at a level considered contributing to death due to overwork (i.e. working shifts with overtime of more than 60 hours per month). As previously mentioned, in 2008, two young Japanese nurses died as result of Karoshi. To prevent that happening and to ensure the provision of safe and qualified nursing care, the JNA has established the Kaeru Project for Nurses which includes improving shift work systems and reducing overtime work by organisational commitment of healthcare institutions.\(^8\)

• **Australia**
  The Fair Work Act 2009 by the Fair Work Commission came into force on 1 August 2009 (amendments were made in the Fair Work Amendment Act 2012 and the Fair Work Amendment Act 2013). The Act aims "[...] to provide a balanced framework for cooperative and productive workplace relations that promotes the national economic
Prosperity and social inclusion for all Australians.”\textsuperscript{18} It also demonstrates rights and responsibilities of employees, employers and organisations in relation to that employment including the maximum weekly hours of 38 in full-time-employment.\textsuperscript{19,20} In addition, the National Employment Standards (NES) set out 10 minimum conditions of employment on 1 January 2010.\textsuperscript{21}

Nurses who are working in the Public Health Sector are covered by state-wide awards or enterprise agreements. These declarations involve, e.g. workload management, staffing and the regulations of overtime. The Public Health System Nurses’ and Midwives’ (State) Award 2011 of New South Wales includes the following aspects of overtime:

- “An employee may refuse to work overtime in circumstances where the working of such overtime would result in the employee working hours which are unreasonable.
- What is unreasonable or otherwise will be determined having regard to:
  - a. any risk to employee health and safety;
  - b. the employee’s personal circumstances including any family and carer responsibilities;
  - c. the needs of the workplace or enterprise;
  - d. the notice (if any) given by the employer of the overtime and by the employee of his or her intention to refuse it; and
  - e. any other relevant matter.
- All time worked by employees in excess of the rostered daily ordinary hours of work shall be overtime and shall be paid accordingly.”\textsuperscript{22}

**South America: Brazil**
In 2013, the Brazilian legislature debated reducing the maximum of weekly work hours for nurses to 30 hours a week and set them on an equal workload as physiotherapists and occupational therapists. However nurses in Brazil still work up to 40 hours a week and often have two or three different jobs and suffer from a heavy workload.\textsuperscript{23}

**Eastern Europe: Russia**
In Russia, nurses typically work a 24-hour shift which means a high risk of making mistakes. Despite this, there are slow and significant changes taking place, particularly by the Russian Nursing Association.

**North America: USA**
Promoted by hospital management as a way to staff effectively during an emergency, mandatory overtime has become instead a means to cover routine personnel shortages.
In a large number of hospitals, nurses report the existence of a documented policy that imposes mandatory overtime. Overtime may be from 4 to 16 hours (or more) and nurses are included in a duty roster to perform the overtime after their regular shift. Depending on the state where the nurses are employed, they may be paid extra money (not always) but do not get any extra time off.

In 2010, Alaska was the last of 16 States at present which have enacted restrictions of mandatory overtime in nursing.\textsuperscript{24}

The Registered Nurse Population – Findings from the National Sample Survey of Registered Nurses were published in 2008 (the final year of the survey). The national survey provides updated nursing data every four years i.e. number of Registered Nurses (RNs), employment settings and job satisfaction. In addition, the survey includes data about the average hours of work and overtime. The average number of hours worked per week by full-time RNs in all settings was more than 40 hours, except RNs in school health. The greatest amount of worked hours per week was reported by RNs who worked in Nursing homes (45.8) and home health (45.3). Full-time RNs in home health settings also stated the highest rate of standby on-call hours (25.5%).

Despite several bills on the protection of RNs and patients which were introduced to the US congressional committee the probability of getting passed or being enacted is about 0-1\%.\textsuperscript{25}

For further information, please contact: icn@icn.ch

The \textbf{International Council of Nurses (ICN)} 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.
References

