Fatigue - Preventing & Managing Work Related Fatigue: Guidelines for the NSW Public Health System

Summary These Guidelines, which should be read in conjunction with PD2005_409 Workplace Health and Safety: Policy and Better Practice Guide, have been developed to assist employers identify the potential for work related fatigue to become an OHS issue, and to prevent and manage work related fatigue, as they would any other OHS risk. This includes identifying areas at increased risk for work related fatigue, determining whether work related fatigue may already be an OHS issue, and providing guidance on strategies to reduce the likelihood of work related fatigue occurring or minimise its impact where it may occur.

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Audience All staff; including managers
PREVENTING AND MANAGING WORK RELATED FATIGUE

Guidelines for the NSW Health Public Health System

November 2007
1.0 INTRODUCTION

1.1 Scope

These Guidelines apply to all workplaces in the NSW public health system. These Guidelines apply to non declared affiliated health organisations, because the Determination of Conditions of Subsidy requires (to the extent permitted by law) non declared affiliated organisations to comply with policy directives and guidelines issued by the Department dealing with terms and conditions of employment of staff employed in the NSW Health Service.

1.2 Purpose

The *NSW Occupational Health and Safety (OHS) Act 2000* places a legal obligation on employers to provide a safe environment for all staff, contractors and workplace visitors by identifying, assessing, eliminating or controlling foreseeable workplace risks. The *OHS Regulation 2001* makes specific reference to the hazards arising from shift work and fatigue.

*PD2005_409 Workplace Health and Safety: Policy and Better Practice Guide* supports the implementation of OHS legislation in the NSW public health system.

These Guidelines, which should be read in conjunction with the above policy, have been developed to assist employers identify the potential for work related fatigue to become an OHS issue, and to prevent and manage work related fatigue, as they would any other OHS risk. This includes identifying areas at increased risk for work related fatigue, determining whether work related fatigue may already be an OHS issue, and providing guidance on strategies to reduce the likelihood of work related fatigue occurring or minimise its impact where it may occur.

These Guidelines also recognise the mutual responsibility of employers and staff for preventing and managing work related fatigue. Managers and staff should work together with the overarching objective of maintaining patient and staff safety.

1.3 Definitions

**Employer** means any person authorised to exercise the functions of the employer of staff to which these Guidelines apply.

**NSW public health system** consists of all area health services, all statutory health corporations and all affiliated health organisations in respect of their recognised services, as well as the Ambulance Service of NSW and the Public Heath System Support Division.

**Staff** means any person working in a permanent, temporary, casual, termed appointment or honorary capacity within NSW Health.

In this document the term:

- **must** – indicates a mandatory action required by existing Departmental policy directive, law or industrial instrument.
- **should** – indicates an action that should be followed unless there are sound reasons for taking a different course of action.
1.4 Related NSW Health documents

PD2005_626 NSW Health Code of Conduct
PD2006_063 Sick Leave Management: Policy, Procedures and Eligibility
PD2007_055 Framework for the Recruitment of Nurses and Midwives
Reasonable Workload clauses contained in NSW public health Awards

1.5 Additional Resources – WorkCover Publications

- Minimising fatigue in the health, aged care and allied industries (under review)
- Shiftwork: How to devise an effective roster.

2.0 WORK RELATED FATIGUE

Work related fatigue is a state of mental or physical exhaustion that can affect a person's ability to function normally at work. Work related fatigue may be caused by prolonged periods of physical and/or mental exertion at work without sufficient time to rest and recover.

These Guidelines do not address personal lifestyle choices and their potential flow on to the workplace. However, lifestyle issues and personal commitments outside the workplace have potential to either mitigate or exacerbate how fatigue might be experienced in the workplace. Staff members should be cognisant of this relationship and recognise their own role in managing lifestyle related fatigue.

The NSW Health Code of Conduct requires staff to present themselves for work in a fit and proper condition and not enter into outside work commitments that might adversely affect work performance or the safety of colleagues, patients or the public.

Employers must consider the potential for increased fatigue when deciding whether to approve secondary employment. For issues related to secondary employment, refer to the NSW Health policy on secondary employment.

3.0 IDENTIFYING THE POTENTIAL FOR WORK RELATED FATIGUE

Working environments that provide services around the clock have a greater potential for work related fatigue to become an OHS issue. In particular, staff working in environments that require shift work, extended hours or high levels of overtime may be at increased risk of suffering work related fatigue.

In order to identify such working environments, employers need access to accurate, up to date attendance and leave records. Therefore all employers should ensure that attendance and leave records are actively maintained in line with relevant policy directives in the Leave Matters Manual, and that rosters accurately reflect staff at work, hours worked and leave taken.

Employers should also ensure that all staff requests for leave are submitted in writing via the appropriate forms, that staff give reasonable notice when requesting leave and that such requests are approved in line with existing policy. All sick leave should be notified as soon as possible so appropriate arrangements can be made for replacements in high demand areas, and sick leave forms should be completed and
submitted as soon as possible after returning to work, if they have not already been completed.

The data collected via the nursing workloads monitoring system provides an additional source of information that should be reviewed by employers.

Employers should also consider environmental and other work related factors and their capacity to create the potential for work related fatigue to exist. For example staff undertaking roles that involve working with people who are distressed, angry, traumatised or staff who work in environments with high levels of interpersonal conflict may be at increased risk of suffering work related fatigue. Likewise staff working in environments undergoing high levels of change eg changes to technology or working arrangements may also be at increased risk of experiencing work related fatigue.

4.0 MANAGING WORK RELATED FATIGUE

4.1 Risks associated with work related fatigue

The risks associated with unmanaged work related fatigue include:
- Reduction in work performance
- Reduction in productivity
- Increased risks of work related OHS incidents and injuries including journey claims
- Increased risk of possible adverse outcomes for patients.

The consequences of these risks, should they be realised, will vary, depending on the nature of work being done, and the environment in which the work is being conducted.

For example, the potential consequences of an error due to work related fatigue while driving, working at heights, during complicated or prolonged surgery or during diagnosis in an emergency, are potentially more severe than someone performing clerical duties in an office setting. Therefore these matters need to be considered when developing strategies to minimise or manage work related fatigue.

4.2 Identifying and assessing factors that may contribute to work related fatigue

The following sources of information may assist employers identify whether work related fatigue has the potential to, or has already become an OHS issue:
- Consultation with staff and their representatives
- Shift arrangements, rosters and hours worked, including overtime
- OHS incident notifications/reports
- Investigation reports citing fatigue
- Industrial issues, complaints or grievances citing fatigue
- Staff and/or patient complaints
- Workplace injury records.

A more detailed Tool has been provided at Appendix One to assist employers identify where there is a potential for work related fatigue to become an OHS issue.
4.3 Eliminating or managing the risks associated with work related fatigue

A range of management strategies and options exist that will assist in minimising the likelihood of work related fatigue occurring, and/or minimising the potential consequences of work related fatigue where it may be unavoidable.

While the actions taken will be specific to the individual circumstances and dependent on the responses to the questions posed in the Risk Identification Tool at Appendix One, some examples are provided below.

Shift and rostering design:

- Using a forward shift rotation eg starting times moving from morning to afternoon to night time
- Maximising breaks between shifts and before rotating staff to a new shift
- Minimising the number of consecutive night shifts
- Ensuring that periods of extended work hours are followed by an appropriate recovery time before resuming work
- Ensuring rosters reflect an appropriate skills mix
- Avoiding overtime allocation after afternoon or night shifts, especially after 10 or 12 hour night shifts
- Engaging and consulting staff on roster design
- Allowing access to flexible work arrangements
- Ensuring staff establishments are sufficient to keep overtime to a minimum
- Ensuring staff establishments are sufficient to carry out the work required.

Leave management:

- Ensuring a process is in place for reducing/minimising excessive accumulation of annual leave entitlements
- Ensuring leave requests are not unreasonably withheld
- Ensuring vacant positions are filled in a timely manner
- Ensuring the processes for managing and monitoring rosters and leave are linked. The same manager should be responsible for rosters (and changes to rosters, including shift swapping) and for approving leave. For example, if the nursing unit manager rosters nursing staff they should also be responsible for approving leave for the same group of nursing staff.
- Ensuring all requests and approvals for leave or changes to rosters are in writing
- Ensuring service delivery needs and the impact on staff are considered and managed when planning rosters and approving leave
- Ensuring rosters reflect approved leave
- Ensuring sufficient staff are made available to fill a roster
- Making alternative staff arrangements to cover a roster where required
- Maintaining a relief pool in high demand areas
- Having access to an appropriate number of on call staff for unplanned leave, emergencies or where workload increases
- Monitoring and managing actual time worked against the allocated roster to identify where excessive hours are being worked. Review rosters and organise relief staff if extended breaks are then required
Ensuring appropriate rest and nutrition breaks are provided and taken during long or extended hours of work.

Work environment issues:

- Ensuring staff have access to food outlets which offer nutritious food options
- Providing rest accommodation or safe travel options after extra long or extended shifts or long distance patient escorts, especially after hours and
- Ensuring sufficient time is allocated to allow safe travel between facilities.

Staff support:

- Ensuring all staff are aware of policies, procedures and expectations regarding rostering and leave
- Ensuring staff have an agreed mechanism for raising concerns about work related fatigue that encourages early identification of potential issues
- Ensuring workplace grievances are dealt with in an appropriate and timely manner
- Ensuring staff have access to support services eg Employee Assistance Programs
- Ensuring managers are provided with appropriate training to assist them with preventing and managing work related fatigue.

5.0 DRIVER FATIGUE

Staff should not be placed at unnecessary or unreasonable risk associated with driving and fatigue. The geographical size of Health Services, particularly in rural areas, can mean staff are required to spend considerable time driving between facilities. Factors such as poorly lit and/or poorly maintained roads, adverse weather conditions, hours already worked and hours behind the wheel all increase the risk associated with driver fatigue.

While specific strategies to manage the risks associated with driver fatigue will depend on the individual circumstances, options can include:

- A greater use of teleconferencing and videoconferencing
- Sharing vehicles so driving duties can be shared
- Ensuring staff driving take rest breaks every 2 hours
- Providing overnight accommodation for early morning or late finishing meetings and long distance patient escorts where there is a significant drive home or back to base.

When determining the amount of driving being undertaken by staff, their place of residence should be taken into consideration.

Staff should not be prevented from using toll roads if they provide the safest and most direct route to the destination.

6.0 EVALUATION, REVIEW AND IMPROVEMENT

On-going evaluation and review of strategies to reduce the risks arising from work related fatigue will identify areas for improvement, gaps in the administrative systems
and the causes of any systems failures and enable the on-going improvement of control measures.

Reviews should be conducted regularly, in consultation with staff, to ensure that management strategies aimed at minimising and managing work related fatigue are actually achieving their goals.
Appendix One

Identifying the potential for work related fatigue to become an OHS issue

This checklist can be used by facilities or individual workplaces to help identify and assess the likelihood of work related fatigue becoming an OHS issue. It will also help identify potential management strategies that could be implemented to reduce the risks associated with work related fatigue.

Rostering and shift design:

For shift work:
• Do shifts move in a forward cycle ie morning, evening and night?
• Are consecutive night shifts kept to a minimum, where practicable?
• Are staff given sufficient time to recover between shifts eg 10 hours?
• Is there staff input/involvement in developing rosters and determining hours?

For all workplaces:
• Is the staff establishment sufficient to keep overtime to a minimum?
• Is staff establishment sufficient to allow staff to take their breaks?
• Do staff have reasonable access to flexible work practices?

Leave management:

For shift working:
• Are processes for approving and monitoring rosters and leave linked?
• Are on-call staff available to cover unplanned absences and workload fluctuations?
• Do rosters reflect approved leave?
• Is there sufficient staff available to meet roster requirements?
• Are all leave requests required to be in writing?

For all workplaces:
• Are relief staff engaged where staff are on leave?
• Are staff working hours monitored to identify where they may lead to excessive fatigue?
• Is there a process for identifying excessive sick leave or patterns of sick leave?
• Is there a process for identifying/reducing excessive annual leave balances?
• Are reasonable requests for leave approved?
• Are vacant positions filled in a timely manner?

The working environment:

• Are the levels of lighting, ventilation and noise appropriate?
• Is the working space appropriate for the nature of the work being undertaken?
• Are rest facilities available to staff?
• Do staff have access to food outlets/vending machines that offer nutritious options?
• Do staff have access to appropriate breaks during their working day?
• Is this monitored to ensure staff take scheduled breaks?
**Staff Support:**

- Do staff have access to an agreed mechanism for raising concerns about work related fatigue?
- Does this mechanism encourage the early identification of potential issues?
- Are staff regularly provided with information on rostering and leave policies and practices?
- Are managers provided with education on ways to prevent and manage fatigue?
- Does this education include the need for managers to be aware that staff returning from illness may have a greater potential for experiencing fatigue?
- Are grievances managed in a timely and appropriate way?
- Do staff have access to support services eg Employee Assistance Programs or clinical supervision?

**Driving practices:**

- Is teleconference or videoconferencing considered as an alternative to driving?
- Are staff driving hours monitored?
- Are staff encouraged to take rest breaks every two hours when they are driving?
- Do staff who drive repeatedly as part of their work have access to safe driving courses?
- Are staff travelling significant distances during their work encouraged to travel in pairs to share driving duties?
- Is air travel (or fly drive) considered as an alternative to driving?
- Are staff provided with advice on the safest route to a destination?
- Are staff travelling long distances provided with overnight accommodation for late finishing meetings, where appropriate?
- Are driving activities scheduled for daylight hours, where practicable?

The greater the number of ‘no’ responses, the greater the potential for work related fatigue to become an OHS issue.

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