Health Problems among Nurses Due to Flexible Working Conditions

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Authors’ contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

ABSTRACT

Sleepiness and sleeplessness are symptoms of shift work disorder (SWD), a sleep disorder caused by a person's work schedule. Understanding the mechanisms underlying shift work-related health concerns may be necessary when scheduling shifts, establishing employment routines, providing clinical care, and selecting employees. In today's workplace, stress has become the most influential element impacting individual efficacy and satisfaction. In this environment, occupational stress is becoming increasingly prevalent in the nursing profession. Nurses in today's healthcare system encounter several obstacles. These difficulties develop as a result of issues at the organizational, state, and national levels. It is critical for nurses to first recognize and comprehend every potential difficulty they may confront to deal with them effectively. Not only should they be recognized and understood, but methods to minimize them should also be sought.

Keywords: Shift Work Disorder (SWD); Insomnia; Awareness; Stress.
1. INTRODUCTION

"Flexible work" gained popularity in the 1980s, notably following the development of the "flexible company" human resource management paradigm (Atkinson 1984). Nursing is a life-saving profession, and nurses are essential members of the healthcare team. Nurses, who are the "symbol of service and humanity," will be unable to offer their whole attention to this arduous work if they are distracted by their ill health or other stressful circumstances. If there is a significant frequency of illness among nurses, no hospital can function effectively [1]. The performance of the nursing staff has a high correlation with the quality of care provided to hospital patients. Creating a healthy work environment for nurses, following this, is critical to sustaining an appropriate nursing workforce [2].

Nurses constitute a sizable proportion of the healthcare workforce in any tertiary care facility. In many occupations today, round-the-clock performance is demanded. According to census data, a sizable portion of the workforce is working on nonstandard work schedules, which may include shift work [3]. Such work patterns have been linked to a variety of health issues, including cardiovascular disease, digestive issues, exhaustion, cancer, depression, anxiety, and sleep issues. Individuals range in their tolerance for shift work, and the impact on sleep and other health factors vary accordingly [4,5].

Recent research has found that shift employment increases the risk of injury. Working night shifts has a 25–30% higher risk of injury than working day hours, according to the findings. They also demonstrate that working 12-hour shifts as opposed to eight-hour shifts increases the risk of injury by 25–30%. The risk increases evenly during the first four shifts in succession, with night shifts experiencing greater increases than day shifts [6].

However, it is unclear how irregular employment habits affect health. The disruption of biological rhythms over a lengthy period may have detrimental long-term impacts, which is a possible workplace problem given the trend toward later retirement. Shift employment is said to interfere with the body clock, sleep, as well as family and social life. The interruptions can have an immediate impact on mood and performance, as well as long-term implications on mental health. These factors, taken together, may have an impact on both safety and health [6].

2. BURNOUT SYNDROME

Extended work shifts of twelve hours or more are normal and even popular among hospital staff nurses, but little is known about how such lengthy shifts affect patient care or nurse well-being. According to survey data from nurses in four states, more than 80% of nurses were satisfied with their hospital's scheduling policies. Patients' dissatisfaction with care increased as the number of hospital nurses working shifts of more than thirteen hours increased. Furthermore, nurses who worked ten-hour or longer shifts were up to two and a half times more likely than nurses who worked shorter shifts to suffer burnout and job dissatisfaction, as well as to desire to leave the profession. Extended shifts are harmful to nurses' well-being, can lead to costly job turnover, and can have a detrimental impact on patient care. Work-hour policies for nurses, comparable to those in place for resident physicians, may be warranted. Nursing leaders can also promote workplace cultures that value nurses' days off and vacation time, encourage nurses to leave on time after a shift, and empower nurses to decline to work overtime without fear of repercussions [7].

3. THE MOST COMMON PHYSICAL DANGERS FOR NURSES

According to the Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health (NIOSH), a major concern in occupational healthcare is the potential for musculoskeletal disorders [8] Nurses often deal with physical hazards due to:

- Heavy manual lifting when transferring or repositioning patients
- Working in awkward positions
- Straining to lift or move obese patients
- A significant amount of time standing and walking

There are other physical dangers commonly associated with certain patient populations, such as those in psychiatric wards, emergency rooms, waiting rooms and geriatric units. The CDC reports that nurses are more often the target of workplace violence than other healthcare workers. Effects include:

- Minor and serious physical injuries
- Temporary and permanent physical disability
4. OTHER DANGERS FOR NURSES

The physical dangers of nursing are most obvious, but there are other workplace hazards nurses should be aware of [8].

4.1 Infectious Diseases

Nurses are frequently exposed to Hepatitis B, MRSA, tuberculosis, and HIV. Exposure to blood-borne pathogens sometimes occurs during a needlestick injury, which experts estimate happens to 800,000 healthcare workers every year.

4.2 Latex Allergy

A mild allergic reaction might cause dermatitis, while a severe allergy can trigger anaphylaxis. Vinyl gloves can safely replace latex when clinicians are allergic.

4.3 Radiation Exposure

Nurses working in the radiology department or ER may have higher than average risk of exposure.

4.4 Chemical Exposure

Sterilizing agents and chemotherapy drugs carry a significant health risk.

4.5 Dermatitis Resulting from Hand Hygiene

Healthcare professionals who adhere to proper hand hygiene protocols are the most likely to have moderate or severe cases of contact dermatitis.

4.6 Remedial Intervention to Avoid Health Problem

Despite the fact that nurses cannot be excluded from shift duties, appropriate intervention, such as behavioral changes for good sleep hygiene, forward rotating shifts and treatment (in Chrono clinic, i.e., sleep medicine), counseling, and periodic screening to overcome SWD will help improve nurses’ quality of life and help them cope with shift duty. From an occupational health point of view, induction training programs of nurses can incorporate these measures that need to be reinforced frequently for the betterment of nurses [9].

5. CONCLUSION

Although nurses cannot be excluded from shift work, appropriate intervention, such as behavioral changes for good sleep hygiene, forward rotating shifts and treatment (in Chrono clinic, i.e., sleep medicine), counseling, and periodic screening to overcome SWD, will help improve nurses’ quality of life and help them cope with shift work. From the standpoint of occupational health, nurse induction training programs can integrate these measures, which must be reinforced regularly for the benefit of nurses.

CONSENT

It is not applicable.

ETHICAL APPROVAL

It is not applicable.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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