Improving the experiences of night shift nurses in Australian regional public hospitals: An action research project

IDONA POWELL
dona.powell@ncahs.health.nsw.gov.au
After Hours Nurse Manager
Grafton Base Hospital AUSTRALIA

Greg Fairbrother
Post doctoral research fellow
Southern Cross University
NNSW LHD

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THE INITIATING STUDY


Explored:
- experiences of nurses working night shift
- their relationships with other night nurses
- their relationship with non-night staff
- general work satisfaction issues
Presentation Objectives

- Recap findings of the qualitative study ‘Can you see me?’

- Explain First Cycle of the Action Research Project

- Describe the key findings from this cycle.
‘Can you see me study?’ Key findings

- Reduced access to Professional Development
- Leadership perceived as minimal
- Lack of cooperation and recognition from non-night staff
- Perception night shift position is undervalued
- Desire for increased control and autonomy
Improving the experiences of night shift nurses: Action Research Project

- Address findings from ‘Can you See Me Study?’
- Identify areas for action / change
- Action Plan development
Action steps focus

• Access to professional development

• Nursing leadership and support

• Cooperation between departments and shifts

• Communication with and by night staff

• Value of night shift
Study: Terms of Reference

- Develop tangible strategic interventions
- Informed by the staff
- Reasonably be implemented by nurses, nurse managers and hospital executives
Method

- Participatory action research approach
- Reference Group
  - Night shift nurses --- direct care and managers
  - Four participating hospitals
- Problem solving approach
Data Collection

- Focus groups
  - Primary source
- Email
- Open ended questionnaire
- Opportunistic conversations

Kakadu National Park, Northern Territory, Australia
Constructivist Framework

- *Meaning* constructed rather than discovered.
- Able to develop solutions from a practical and professional-cultural nature.
- Nurse empowerment and their visions used to derive potential changes and solutions.
Findings derived from

**NINE FORUMS**

**69 PARTICIPANTS**

- 29 Nurse Managers;
- 40 Nurses

**54 FEED BACK SHEETS RETURNED**

**FOUR EMAIL RESPONSES**

**OPPORTUNISTIC CONVERSATIONS**
Findings

Group One

• Requires endorsement by the Local Health District (LHD) executive or legislative changes
• Does not meet terms of reference

Group Two

• Steps actionable within the scope of control of LHD managers or staff
Group Two findings

5 domains

- Access to professional development
- Nursing leadership and support
- Cooperation between departments and shifts
- Communicating with and by night staff
- Value of the night shift position

64 primary action steps

36 secondary action steps
Broad Action Steps

• Flexibility to design and manage actions to meet own situation
• Prioritization by LHDs or individual hospitals
• May be cost neutral
Access to Professional Development

- Paid release
- Presentations at suitable times
- Clinical educators at night
- Rotations to different wards / facilities
- Electronic recording of daytime educational activities
- Information transfer
- Representation on LHD education committee
Professional development program designed for night shift staff

- For senior and novice nurses
- Clinical and non-clinical topics
- Scheduled off night rotations
- Definitive off-nights program
Nursing Leadership & Support

- Managers’ interactions with staff
- Managers’ own behavior
- Provision of resources
Nursing Leadership & Support
Managers’ interactions with staff

Transparency
Access
Formal mechanism between Unit Managers and After Hours Managers
Appraisal system
Nursing Leadership & Support
Managers’ own behavior

Non-beneficial behaviours
Reflective management
Nursing Leadership & Support
Provision of resources

Staff scheduling redesign
Cover for meal breaks
Additional staff related to workload
Access to food
Cooperation between departments & shifts

- Proactive measures
- Rotating night staff
- Spontaneous assistance
- Team building
- Social integration
- Education of senior management in team cohesion
Communicating with and by night staff

- After Hours Managers as conduit
- Hospital newsletters
- Email access
- Information transfer and follow through
- Ability to manage electronic information
Value of night shift position

• Increase autonomy to make clinical and non-clinical decisions
• Control over schedule
• No mandatory requirement to work day shift
• Break time
• Two-way forums
• Overt acknowledgement
CONCLUSION

• Group One findings – requires extensive lobbying and funds

• Group Two findings – actionable locally

• Responsibility of executive, managers and clinical nurses

• Widespread application

• Complex process
Change through

- Recognition of potential
- Take reasonable steps towards addressing negative experiences
- Build on positive experiences of nightshift nurses.
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