



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

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THE INITIATING STUDY

'Can you see me? The experiences of night shift nurses in regional public hospitals'. A qualitative case study. Powell, I **Journal of Advanced Nursing** 69(10) 2172-2184.

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.

Grafton Base Hospital
NSW, AUSTRALIA



'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

The Opera House,
Sydney



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

- 64 primary action steps

- 36 secondary action steps

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

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

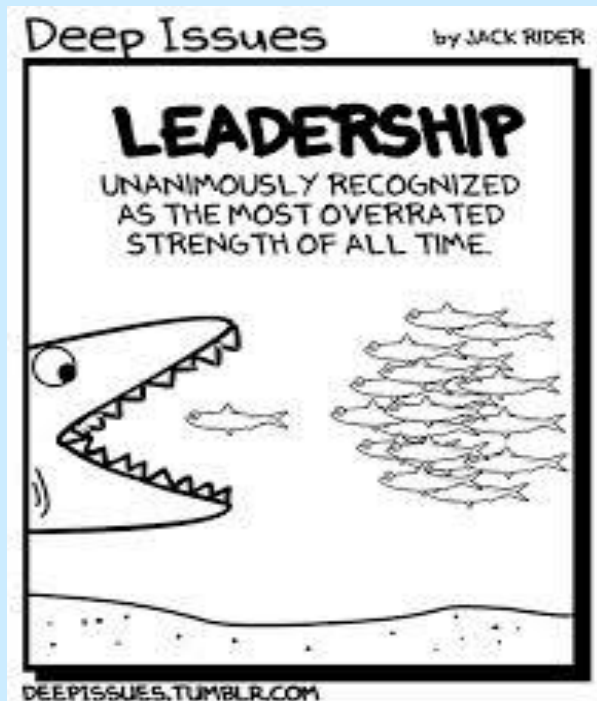
- Paid release
- Presentations at suitable times
- Clinical educators at night
- Rotations to different wards / facilities
- Electronic recording of daytime educational activities
- Information transfer
- Representation on LHD education committee

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.

Acknowledgment and Thanks

- **The Night Shift Nurses**
- Nursing Executive from the Northern NSW Health District
- Directors of Nursing
- Members of the Reference Group

