

Review of schedule 8

Nurses and Midwives: Towards a Safer Culture

November 2021

The ACT Public Sector currently uses 'Schedule 8' (Schedule 8) – Rostering Guidelines and Efficiencies for rostering purposes. (Refer to appendix 1, pp. 168-171, ACT Public Sector Nursing and Midwifery Enterprise Agreement 2017-2019, 'the Agreement'). Schedule 8 will be under review with future ACT Public Sector Nursing and Midwifery Enterprise Negotiations. The review will ensure it complies with best practice principles promoting safety for all nurses and midwives through rostering and leave allocation practices.

The following discussion should be considered when strengthening rostering principles to assist the continued formation of robust evidence-based guidelines for use across the ACT Public Health sector. Due to the relative paucity of evidence-based research regarding rostering in the nursing and midwifery professions, the principles compiled within the Schedule 8 review derived from consultation, the literature of other jurisdictions, and wider evidence-based research from a Work Health and Safety perspective.

The review of Schedule 8 seeks to strengthen the rostering framework and associated guidelines further by making note that all ACT Public Health organisations must adhere to the Work Health and Safety ACT 2011. Employers have responsibilities in relation to fatigue management for staff.

So that Schedule 8 can complement rostering practices and guidance for nurse and midwife managers, the Schedule 8 review recommends consolidating the clauses into one place. Consolidation of clauses is for ease of reading and use of the document, rather than looking for individual clauses elsewhere within the lengthy document that relates to rostering practices.

An example of consolidation of clauses, from reviewing Schedule 8, clause 83.2 from p.46 of the Agreement states that staff must have 48 hours 'clear of night duty' to rest. This could be further strengthened by principles from within the literature stating that a full two nights sleep as a minimum to assist in preventing fatigue (Guide for Managing the risk of fatigue at work, Safe Work Australia, 2013). Recovery time could be supplemented by applying accrued days off (ADO's) to assist staff in recovering from night duty before rotating back onto day shifts. This example in rostering practices would assist in maintaining an adequate work-life balance that considers fatigue mitigation for staff working rotating shifts.

PRINCIPLES OF ROSTERING FOR MANAGERS IN THE DEVELOPMENT OF ROSTERS IN ADDITION TO THOSE LISTED IN SCHEDULE 8 ON P. 168 INCLUDE:

1. A process for declaration of external shifts at second jobs require mandating across all health organisations to mitigate fatigue across the primary and secondary job arrangements and aid fatigue management strategies by employers (Work Health and Safety requirements). Declaration of external shifts in a second job is in line with "avoidance of rostering practices that contribute to fatigue and adherence to rostering practices that control fatigue" p.168, Schedule 8.

There is an oversight in the current Rostering Guidelines, Schedule 8, that employees who work second jobs must declare their shift patterns in external work at other hospitals. Transparency is needed so that an appropriate roster can be generated taking these external shifts into account. A transparent process for declaring external shifts allows employers to perform due diligence in ensuring fatigue is minimised and monitored appropriately in line with Work Health and Safety laws, and the current ACT Public Sector Nursing and Midwifery Enterprise Agreement 2017-2019.

2. New clauses pertaining to rostering principles of new starters including Transition to Practice and newly qualified nurses and midwives in their first year of practice in ACT public hospitals needs addressing
3. Special provisions such as not rostering Transition to Practice and newly qualified nurses and midwives onto night duty for their first 3 rosters is an option worth considering. This is to ensure that they have adequate support and to manage fatigue as they develop in the professions and become acclimated to the unique demands of shift work.
4. Regulation and monitoring of hours worked in a week for casual relief pool staff currently does not exist. These employees may work multiple double shifts in a week adding to extreme fatigue and risk of errors. Monitoring the hours that all casual employees work (casual or relief pool nurses and midwives) should be considered.

5. This is an important issue because “being awake for 17 hours to 19 hours straight has been proven by research to be the equivalent of a blood alcohol concentration reading of 0.05%. The effects of this [is] documented to include a 20% chance of making a serious error and taking 14% longer to complete simple tasks” (Australian Medical Association, 2006, cited in Best Practice Rostering Guidelines: Queensland Health Nurses and Midwives, 2018, p.15).
6. Additional principles to strengthen Schedule 8 could be achieved by the addition of principles from Queensland Health’s Rostering Guidelines. To provide clarity of all the various components that go into roosting frameworks and guidelines the following statement could be considered for the ACT:

“Principle 5: Rostering conforms to relevant regulatory frameworks, including industrial awards and agreements, workplace health and safety legislation, antidiscrimination legislation and policies/procedures” (Best Practice Rostering Guidelines: Queensland Health Nurses and Midwives, 2018, p.3).
7. Principles from Queensland Health’s Rostering Guidelines that would help to strengthen Schedule 8 takes into consideration the important topic of fatigue.

“Principle 6: Rostering is designed to mitigate fatigue and take into account the health and safety needs of nurses and midwives in order to provide a safe workplace and optimal patient care” (Best Practice Rostering Guidelines: Queensland Health Nurses and Midwives, 2018, p.3). The Schedule 8 review also recognises that non-work-related factors such as family responsibilities and staff lifestyles amongst others add to fatigue (Guide for Managing the Risk of Fatigue at Work, 2013, Safe Work Australia; Fatigue Prevention: ANMF Policy 2019).
8. Additional roosting principles to strengthen Schedule 8, could include the consideration of adopting NSW Health’s Rostering Resource Manual’s:

“Principle 5: The organisation must have appropriate governance structures in place to oversee roster planning, creation, approval, monitoring and reporting” (Rostering Resource Manual Version 2.1. NSW Health, 2016, p.5). This is already stated elsewhere within the Agreement. Once again, by consolidating relevant information into the one section on roosting frameworks and guidelines leads to greater clarity.

PRINCIPLES OF ROSTERING FRAMEWORKS/GUIDELINES/ EFFICIENCIES FOR STRENGTHENING STATEMENTS AS FOLLOWS:

Clause 10 under the Rostering Framework states: “Short-term night duty shift vacancies to be filled by relief staff or by day duty staff, after negotiation and agreement with the employees involved” (Schedule 8, p.169). This statement can be strengthened by noting shift patterns should be rostered in a forward rotation to reduce the effects of significant fatigue. I.e., Rostering patterns from afternoon to night shift, not morning shift to night shift for example (Safe Staffing and Patient Safety Literature Review, 2003; Gander et al, 2019; Gifkins et al, 2020).

Clause 23 under Preferential Rostering:

To instil rigour into roosting guidelines and remove misinterpretation with the partial control of roosting, the Schedule 8 review suggests looking to the literature for a specified ‘must have’ number of shifts for increased work life balance as an option for future Enterprise Agreements. The value associated with a minimum set of ‘must have’ shifts is 4, this amount however is also said to only just cover occasional work life needs to attend family or friend functions etc. (Improving Nurses’ Work-Life Balance, 2019, p.9), and may not properly assist in achieving a healthy work-life balance. As it currently stands, the current Enterprise Agreement states roster requests are to be provided ‘wherever possible’.

Clause 36 under Rostering Efficiencies states:

“A standard maximum of 5 (five) days supernumerary status will apply to newly employed staff members. Where exceptional or unforeseen circumstances exist, the Deputy Director-General Canberra Hospital Health Services will have the discretion to increase this amount on a case-by-case basis”. And “for the purposes of this clause, supernumerary means in excess of the normal or requisite number of nursing or midwifery staff” (Schedule 8, p.171). The NM TASC Advisory Group believes that this statement could be amended by noting that more flexibility of supernumerary status is required rather than by special exception. More experienced staff within the same organisation could require less days transferring between different positions due to corporate knowledge, than new staff to organisations who may require more than the currently stipulated 5 days.

REFERENCES:

- ACT Public Sector (ACTPS) Nursing and Midwifery Enterprise Agreement 2017- 2019. Australian Nursing and Midwifery Federation. (“Section 8” Rostering Guidelines). [accessed 17/02/2021] www.fwc.gov.au/document/agreement/AE503830
- Fatigue. (nd). Safe Work Australia. www.safeworkaustralia.gov.au/fatigue
- Fatigue Prevention Policy. (2019). Australian Nursing and Midwifery Federation [accessed 17/02/2021] https://anmf.org.au/documents/policies/P_Fatigue_prevention.pdf
- Guide for Managing the Risk of Fatigue at Work. (2013). SafeWork Australia [accessed 17/02/2021] www.safeworkaustralia.gov.au/doc/guide-managing-risk-fatigue-work
- Best Practice Rostering Guidelines: Queensland Health Nurses and Midwives. (2018). QLD Health. Sourced by personal communications – Cullen, T, February 11, 2021.
- Rostering Resource Manual Version 2.1. (2016). NSW Health. [accessed 04/01/2021]. www.health.nsw.gov.au/Performance/roosting/Pages/roosting-resource-manual.aspx

