

Night-shift napping

Evidence indicates that short naps can help staff working night shifts to function efficiently. So why are employers not allowing nurses to sleep during unpaid breaks?

Working night shifts is part and parcel of many nurses' lives, especially in the secondary care sector, where rotational shift patterns are common. While some nurses find these easier to cope with than others, they can take a physical and mental toll.

Humans have evolved into a diurnal species, meaning we are active during the day, then sleep and recuperate at night. Night workers, however, do the opposite to what is natural and so experience disruption to normal circadian rhythms. Even if you are one of the lucky ones who escape the illnesses associated with circadian disruption, (see box) you are likely to be troubled by fatigue.

Sleep deficit

Many people have difficulty sleeping during the day, so both the duration and quality of their sleep are affected. Sleep deficit and fatigue are therefore common problems among night

workers. Coupled with the body's natural tendency to be less active at night, they can make it difficult for someone to remain awake and function properly when working night shifts. In addition, the greater the number of night shifts worked, the worse the level of fatigue becomes.

'Just having a break has no effect on fatigue... it is sleep that makes the difference'

A tired workforce has health and safety implications for individuals and the organisation for which they work. Fatigue may contribute to irritability, mood swings and depression and has a general negative effect on physical and psychological wellbeing. There is also considerable evidence that alertness, perception, decision-making ability and performance are compromised. These factors may have a detrimental effect on patient care and safety. There is also evidence of an increase in road accidents among workers who drive following a night shift.

So what can be done about reducing tiredness in night workers? The many nurses who responded to my letter on the topic in *Nursing Standard* in September (Hummi 2007) were in no doubt that sleeping on their break at night reduced fatigue, boosted performance and generally helped them cope with the night shift.

They are not alone in their thinking. A large body of research evidence supports the same premise.

Smith *et al* (2007) investigated the effect of a short nap on psychomotor vigilance and subjective sleepiness in health workers. They found naps of 30 minutes to be beneficial. Takeyama *et al* (2005) concluded that a 'night time napping strategy is an effective tool for improving working conditions, work performance and safety'.

Just having a break has no effect on fatigue or performance, according to the results of many studies – it is sleep that makes the difference.

Junior doctors

Here in the UK, Horrocks and Pounder (2006) in their *Guide for Junior Doctors*, give specific advice for 'surviving the night shift'. They say: 'Developing a napping routine is an indispensable part of working safely overnight and naps are a powerful means of staying refreshed while on duty.' They add that 'naps as short as 20 to 45 minutes have been shown to provide positive benefits'.

Mention must be made of the phenomenon of sleep inertia. This is the groggy feeling many people experience on waking up. It can last for several minutes and may compromise mental and physical function for a short period. The Royal College of Physicians recommends doctors sleep for

SUMMARY

Fatigue can be a major problem for nurses working night shifts and could put patient care at risk. Taking brief naps may help.

Keywords

Night shifts • Sleep • Sleep deprivation • Sleep inertia • Recovery sleep • Sleep cycle • Naps • Circadian rhythms • Diurnal species

a maximum of 45 minutes to minimise sleep inertia problems should they need to deal quickly with an emergency situation. Sleep patterns usually follow a regular 90–100 minute cycle, with the individual gradually going into a 'deeper' sleep over that period. The deeper the sleep you are woken from, the worse the symptoms of sleep inertia can be. However, the symptoms may be alleviated by waking a few minutes before returning to work.

Employers' duty

Given the large amount of research evidence that has found night-time napping beneficial and the fact that most breaks are unpaid, why do most healthcare employers not allow night staff to sleep on their break? In fact, most of the respondents to my letter in *Nursing Standard* said they risked disciplinary action should they be found sleeping.

As the employers I contacted did not want to comment, I can only speculate about the reason and it would seem to be financial.

Nursing workloads in many healthcare situations are lower at night in comparison with

day shifts, so fewer staff may be needed. However, many employers seem to have the lowest possible number of staff available on the night shift. Then, by insisting staff remain awake, even though on a break and unpaid, employers are in effect maintaining minimum staffing levels at no financial cost.

But employers do have a duty under health and safety legislation to ensure the wellbeing of employees and the clients in their care. If they know that fatigue can cause problems that compromise wellbeing, they should make an effort to do something about it. Kilpatrick and Lavoie-Tremblay (2006) concluded: 'Planned napping may be a useful tool to combat the pernicious effects of sleep debt on performance.'

Trade unions, too, need to be aware of the benefits of sleeping on a night-time break and encourage employers to make appropriate provision for staff.

Sheelagh Brewer, senior labour relations officer at the RCN, says: 'There is no RCN document on this particular issue but there should be consistent advice. If it is okay for doctors to take naps then why shouldn't nurses sleep on their unpaid breaks?'

Nursing is a 24-hour occupation that necessitates

Problems associated with night work

- ▶ Increased incidence of gastrointestinal disorders, including ulcers.
- ▶ Increased incidence of cardiovascular disorders, including ischaemic heart disease.
- ▶ Depression.
- ▶ Anxiety.
- ▶ Sexual dysfunction.
- ▶ Increased incidence of breast and colorectal cancer.

The actual mechanism by which circadian disruption contributes to these health problems is, in many cases, unclear, not least because many of them have multiple causation (Humm 2005).



night work, so someone has to do the night shift. As research clearly supports the benefits of sleeping on a night-time break, then the onus should be on the employer to take notice of the evidence and act accordingly **NS**

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