



Overtime, Night Shifts Increase Injury Risk for Nurses



According to an analysis of occupational injuries published in the *International Journal of Nursing Studies*, newly licensed registered nurses were likely to work schedules that are associated with increased risks for occupational injuries.

"Overtime and night shift work were significantly associated with increased injury risk in newly licensed nurses independent of other work factors and demographic characteristics," the analysis authors write. "The findings warrant further study, given the long-term consequences of these injuries, costs associated with treatment, and loss of worker productivity," write Amy Witkoski Stimpfel, PhD, RN, assistant professor at New York University College of Nursing, and colleagues.

For the purpose of the analysis, the researchers used data of 1744 newly licensed registered nurses. Data was obtained from the RN Work Project, a nationally representative, 10-year (2006 - 2016) longitudinal study of the work life and career trajectory of new nurses. Data was collected through a questionnaire to nurses who worked in a hospital and were within 6 to 18 months of passing the National Council Licensure Exam. Participants had a mean age of 31 years.

The objective of the analysis was to explore associations between new nurses' occupational injuries and their work shifts and schedule. The findings show that 79 percent of new nurses worked 12-hour shifts; 61 percent worked overtime and 44 percent regularly worked night shifts.

The researchers identified two risk factors as being independently associated with increased risk for injury. Nurses who worked weekly overtime had a 32 percent greater risk for a needle stick injury. Nurses who worked night shift had a 16 percent greater risk for a sprain or strain injury. In addition, needle stick injuries were common among nurses younger than 30 years and those with a higher-than-average workload or those with lower autonomy.

Nurses whose first degree was a BSN had a lower risk for strains and sprain injury. Same was true for those who had a higher-than-average job commitment, who worked in hospitals with higher-than-average nurse-to-patient ratios, and who lived in places with higher unemployment rates.

Overall, the analysis suggests that scheduling and shift characteristics are associated with injury risk in new nurses. However, since this study was cross-sectional and did not include data on whether the nurses had received safety training, it is important to conduct more studies which will incorporate these factors as well as nurses' fatigue, sleep quantity, and sleep quality as possible contributors to injury risk.

Source: [Medscape](#)

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