

Anticipating and managing fatigue associated with doctors' working patterns

When are you at risk of fatigue?

If you are **not** getting the right amount of sleep for you (most adults need 7-8 hours of good quality sleep per night). This can be caused by:

- working long hours (>10 hours) or long weekly working hours (>60 hours)
- shift working (particularly night shifts and abrupt transitions between day and night shifts)
- not having rest breaks while on duty
- not having adequate recovery time between shifts (minimum of
- unplanned interruptions during sleep (eg giving advice on patient care while on call)

As you get older, your sleep patterns change and your ability to recover from a lack of sleep is reduced. This is likely to start to affect you between the ages of 40 to 50

What are the risks of fatigue?

When fatigued, you are more likely to:

- make clinical errors and diagnostic mistakes
- suffer a needlestick injury or be involved in a road traffic crash driving home

Working long hours and shift/night work increases the risk of cardiovascular disease, primary sleep disorders, overweight/obesity, type 2 diabetes, depression and anxiety, and is likely to contribute to increased risk of some cancers, and dementia

Maximising your rest and recovery

Investing time in improving sleep quality through a good sleep environment and routine is one of the most important actions

You should seek help from your doctor or an accredited occupational medicine specialist if you have any concerns about fatigue and sleep problems

Getting your sleep environment right

You should make sure:

- your bed, mattress and pillows are comfortable and supportive
- your bedroom is as dark as possible
- external noise is reduced as much as possible, and consider using background noise (eg a fan or quiet relaxing music)
- your bedroom is cool (around 18-20°C)
- you have an alternative to any main bright lights that can be switched on if you need to get up in the night or day
- you use a good quality eye mask, blackout curtains and ear plugs for daytime sleeping

Making sure you have a good sleep routine You should make sure you:

- get as much natural daylight as possible while awake

- regularly exercise (not too close to bedtime) and eat regular meals (while not having your main meal any later than 2 hours before going to bed)
- minimise alcohol, caffeine and nicotine use (particularly in the evening or in the morning if on night shifts)
- aim to go to bed and get up at roughly the same time each day
- limit use of electronic items 30-60 minutes before going
- avoid spending long periods of time awake in bed, and if unable to sleep, you should get up and do something relaxing (eg reading, a puzzle, etc.)

Supporting good quality decision making

The need to frequently make decisions about patient care, particularly in busy periods, can increase the risk of poor quality decisions over time while on duty. Where possible:

- plan your day to break up times when you are making key decisions, and factor in when you are most alert (usually first thing in the morning)
- ensure you take breaks to do an activity that is not too taxing (eg a short walk or listening to relaxing music)
- keep hydrated and eat healthily to help stay alert
- if you feel your decision making is impaired, take time to double check what you recommend and consider putting off the decision if you can
- think about your daily routine to minimise time making unnecessary decisions

Managing the 'night shift'

If you are working the night shift, there are ways you can best prepare yourself and maximise recovery

Preparing for a night shift

- Maintain a good core sleep routine - Use the 24 hours before working nights to maximise rest, including trying to have a mid-afternoon nap in the day before your
- Keep hydrated, eat healthily and consider exercising before you start your shift

What to do during a night shift

- Keep well hydrated and aim to maintain normal eating patterns/times as much as possible, consuming healthier and satisfying options and minimising eating between midnight and 6am
- Aim to stick to a consistent routine during each shift and make sure you take a break, working as a team to provide cover to minimise disruption on breaks
- During breaks, have a nap of no more than 20 minutes and use caffeine sparingly, ideally just before you take a nap (caffeine takes around 20 minutes to take effect)
- Be aware of the '4am dip' when you are at your lowest physiological ebb, double-checking any critical decisions during this time

After a night shift

- If you are too tired, **do not drive**, and use public transport where possible (wearing sunglasses to reduce light exposure) - Have a light meal/snack (30 mins before going to sleep) and get to bed as quickly as possible, avoiding alcohol, nicotine and
- caffeine and the use of electronic items
- Minimise disturbances to your sleep (eg avoiding daytime deliveries) - When you wake up, get 20 minutes' exposure to bright light and try some light exercise

- After your final night, have a 1-2 hour nap before midday and do 'normal activities' in the afternoon Aim for as close as normal bedtime and wake time as normal
- Two 'normal' nights rest are usually needed to fully re-establish your usual sleep pattern

Your responsibilities Take steps to understand what

- factors optimise your ability to manage and anticipate fatigue (eg ways to improve your sleep routine, how to prepare for shift work and being on call, how to manage fatigue when making decisions about patient care, etc.) Seek help and support from your doctor or an accredited
- occupational medicine specialist about any concerns you have about fatigue and sleep problems Ensure you meet the standards set out in <u>Good Medical Practice</u>
- related to responding to risks to patient safety because of the impact of fatigue Tell your employer when you feel unfit to work or continue to work
- because of fatigue If you are a GP Partner, ensure there are contingency plans to manage instances when you feel unfit to work or continue to work

because of fatigue

How can your employer help?

- Ensure job plans and work schedules are designed and regularly reviewed (involving an accredited occupational medicine specialist) so they are not likely to cause fatigue by: - minimising shift patterns and rota changes that cause sleep disruption
 - using forward-rotating rota designs (day-evening-night)
 - providing built-in rest breaks while on duty allowing for adequate recovery time between shifts (>11 hours)
 - monitoring the extent of repeat interruptions to provide patient care
 - advice while on call avoiding long weekly working hours (<60 hours) and work shifts (<10
 - minimising requirements to take annual leave only at times that are fixed in the rota
- Ensure adherence to all contractual requirements for working hours, safeguards and rest/recovery Ensure all NHS staff have comprehensive access to accredited occupational
- medicine specialists Provide appropriate facilities to rest and nap during shifts, and to sleep post
- duty periods Encourage team-based approaches to providing cover for staff to take
- uninterrupted breaks Ensure induction programmes include teaching on fatigue and how it
- should be managed Provide access to healthy food options
- Offer regular screening for primary sleep disorders and appropriate treatment - Have contingency plans for when a doctor is unfit to work or continue to work because of fatigue
- Encourage staff to raise concerns about their working patterns and fatigue

If you are a BMA member, you can contact one of our advisers by calling 0300 123 1233 or visiting www.bma.org.uk/contact-bma, or find out how to contact your local BMA representative at www.bma.org.uk/about-us/how-we-work/local-representation

How can the BMA help?

managing the effects of shiftwork. Arch Dis Child Educ Pract Ed 102(3):127-32.