

**Nursing Work Hour Limits:  
Request for Board Charge to NPAC**

**Summary of Request:**

Request for a Board charge to the Nursing Practice Advisory Committee (NPAC) to develop a position statement regarding implications of nursing work hours and fatigue to the nurse's duty to maintain patient/client safety.

**Historical Perspective**

National patient safety initiatives has been gaining momentum since the Institute of Medicine's first report *To Err is Human* in 1999. More recently, one focus has turned toward the relationship of errors to the work hours & fatigue of people in nursing and medical occupations.

This concept is nothing new to the airline industry. The now infamous study by the National Transportation Safety Board (NTSB) of flight crew incidents between 1978-1990 found that 50% of airline captains for which data existed had been awake for more than 12-hours prior to their accidents. The connection between fatigue and increased pilot judgement errors was obvious, and led to sweeping changes in consecutive hours worked and increased rest time between flights, among other changes. The Federal Aviation Administration (FAA) is involved with ongoing research in human factors, including fatigue, sleep deprivation, and circadian rhythm effects on performance.

The Accreditation Council for Graduate Medical Education took similar action in 2003 after studying the effects of extensive hours residents spent caring for patients. The effects of fatigue include slowed reaction times, decreased attention to details, omission errors, and problem solving difficulties, to name a few. Concerned for both graduate education and rising rates of errors, they initiated a comprehensive plan that includes limiting duty hours of residents to 80 hours/week [which has to make you wonder what they were working before this regulation].

Nursing Research, though scant, is growing. The trends in nursing are no different than those in other occupations where the person must be alert and attentive to the tasks of his/her profession or risk potentially catastrophic error. Rogers (2004) found that when nurses worked longer than 12.5 hours the commission of errors was three times higher.

In an effort to determine if fatigue and hours worked were impacting the performance of nurses reported to the Board, BNE staff collected information from nurses (and their employers) reported to the board with alleged practice errors in 2005. Results of this self-reported survey showed that the majority of nurses reported to the BNE were not working overtime and did not feel fatigued at the time of their incident; however, staff are aware of disciplined nurses who were easily working well in excess of the standard 40 hours/week between multiple employers, so there are definite limitations to the survey data reported.

The Board has long held nurses accountable for making prudent judgements with regard to patient safety when accepting an assignment. The standards of nursing practice require each nurse to provide for patient safety and to accept only those assignments that are commensurate with the nurse's level of education, experience, knowledge, physical and emotional abilities [22 TAC §217.11 (1) (B) and (T)]. At the same time, the Board provides avenues for nurses to object to unreasonable assignments through Tex. Occ. Code 301.352 and 22TAC §217.20.

**Pros & Cons:**

**Pros:** Highlighting the growing body of research on fatigue and work hours of nurses, and recommending limits to consecutive hours and hours/week worked will be a beginning from which to move forward as the culture of safety becomes a national goal. A position statement will offer guidance with research as a basis, but will not have the force of statute or rule. Staff believe creation of a rule that places prescriptive limits on work hours would overstep the Board's statutory authority and would not necessarily be the best means of promoting safe nursing care in all situations.

**Cons:** As the national nursing shortage grows more acute, staff believe the time is appropriate to try to establish guidelines for nurses and their employers related to emerging best practices for work hours. Given the increasing numbers of inquiries to the board relating to work hours and related regulations already in existence, such as the hospital licensing rules on mandatory overtime [25 TAC §133.41(O)(1)(I)(j)(V)(d)], lack of any guidance from the BNE is potentially detrimental to both patient safety and to the practice of nursing in Texas.

**Recommendations:**

Move to make a charge to the Nursing Practice Advisory Committee to develop a position statement on Nursing Work Hours and the Impact of Fatigue on Patient Safety.