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Position Statement of the Wisconsin Organization of Nurse Executives
Scheduling Practices
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The Wisconsin Organization of Nurse Executives (W-ONE) recognizes that health care agencies have invested in effective measures to increase staffing levels in response to patient need. Health care facilities utilize a variety of supplemental staffing resources including internal float nurses, local agency staff, call and per diem programs and long term travel nurses. For these and other reasons, W-ONE opposes any legislation on mandatory overtime.

An adequate supply of nurses is currently available in Wisconsin communities and their healthcare facilities. At the current time no counties are reporting acute shortages of nurses and very few graduates are required to relocate to find employment. Mandatory overtime is not being used for routine staffing needs.

Restrictive staffing rules may result in limiting access to emergent care. Hospitals do not directly control patient volumes or acuity levels. Staffing needs are unpredictable and can change very quickly. Variations are most often seen in Labor and Delivery units, Emergency Departments and Medical units. Scheduling restrictions may limit the amount of legally available staff and unintentionally decrease availability of some of these essential unpredictable service needs. These staffing limitations may reduce patient access to critical hospital services.

W-ONE also recognizes that Healthcare professional fatigue is an emerging concern in many settings and is considered when increases in census or acuity require unexpected increases in the planned staffing. Many factors may contribute to fatigue however it is frequently attributed to excessive work hours. Excessive work hours either mandated or voluntary, contribute to a variety of unsafe conditions. Therefore any legislation which addresses mandatory limits on work hours, should also address hours voluntarily worked and hours worked by one individual at several organizations. Any use of overtime in emergency staffing situations must include an assessment of the healthcare provider's fitness to continue providing safe care.

It is W-ONE's position that:

- responsible, planned programs to address unpredicted surges in capacity can and should be monitored and regulated by the professions involved;
- that mandatory overtime is not used as a routine staffing mechanism in health care facilities; and
- that no legislation is necessary to address mandatory overtime.

W-ONE is committed to providing leadership to address the quality and safety of patient care in our organizations. To do less would be to abdicate our responsibility to safely staff healthcare organizations.

References

Safety Partnership Committee, (2008). Fatigue at Work Report.

Maxson-Cooper, P., Bahr, S., Buth, C., Martin, R., Peters, N., Swanson, K., Warhanek, J., Ryan, P., (2007). White Paper: Nurse Scheduling and Fatigue in the Acute Care 24 Hour Setting, pending WONE publication.

Strategies for Addressing Health Care Worker Fatigue, 2008, The Joint Commission on Accreditation of Healthcare Organizations.