Can You See Me? Experiences of Night Shift Nurses in Regional Public Hospitals: A Qualitative Case Study

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Nurses and nursing have been studied at length across many cultures but there is little published about the experiences of nurses who work solely or predominately night shift. In the growing nursing crisis, night time nursing demands urgent attention to ensure a continued committed workforce. This study investigated the experiences of night shift nurses with a focus on their relationships with other night time staff, non-night time staff and general work satisfaction issues.

Method and Study Design: Constructivist inquiry was used to frame this qualitative case study. Data were derived from interviews and participant diaries. The participants were 14 nurses working nights half or more of their total shifts in medical or surgical wards of regional public hospitals in northern New South Wales. Participants were recruited by invitation, visits to wards by the researcher and local promotion by key nurses at the individual sites. Thematic analysis of the data was undertaken.

Findings: Symbolic interactionist perspective was used to discuss the findings. Major findings were:

Worker interrelations—Positive relationships were more common and stronger with nurses on the same shift and less cooperative with nurses on different shifts;

Obstacles in the work environment—Night shift nurses endured poorer working conditions in terms of physical and interpersonal interactions than their daytime counterparts;

Variable work practices—Night shift provided opportunity for professional growth for some nurses but produced a slippage in skills for others.

Impact of night shift on personal life—Night shift provided nurses with flexibility for family and social activities yet impeded these same activities, primarily through pervasive fatigue.

Ubiquitous feelings of being undervalued—Night shift nurses embraced a deeply seated belief of having a vital role that was neither acknowledged nor valued by managers or non-night nursing staff.

Control over conditions and decisions—The night nurses sought autonomy to make their own decisions in conjunction with skilled leadership and support.

Conclusion: Night shift nurses had strong positive relationships with co-workers, but experienced disconnectedness with staff from other shifts and the facility in which they worked. They consider their role was highly critical yet believed they were poorly regarded. Further research to provide a deeper understanding of night shift nurses’ experiences, and studies to address changes is warranted.

Implications for Managers: The key areas of interpersonal relationships, effective leadership, work environment, clinical competencies and recognition of the critical role of night time nurses must be used to inform future decisions that impact night time nursing staff.

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