



WorkSafe Victoria

# Fatigue in the Workplace.

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IPC Fatigue Webinar  
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Chris Azzam  
WorkSafe Victoria

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# Fatigue is...

Mental Fatigue

Physical Fatigue

Emotional Fatigue

# Hani

Irritable

Experiences of  
trauma

Changes in  
behaviour



Lack of  
enthusiasm

Lack of motivation

Unable to  
complete simple  
tasks

# Chantelle

Difficulty  
concentrating

Does not feel well  
equipped

Indecisive

Avoidance



Struggling to focus

Feels unsupported

Mood swings

Indifference

# Marta

Overworked

Lack of sleep

Needing longer breaks

Manual handling injuries

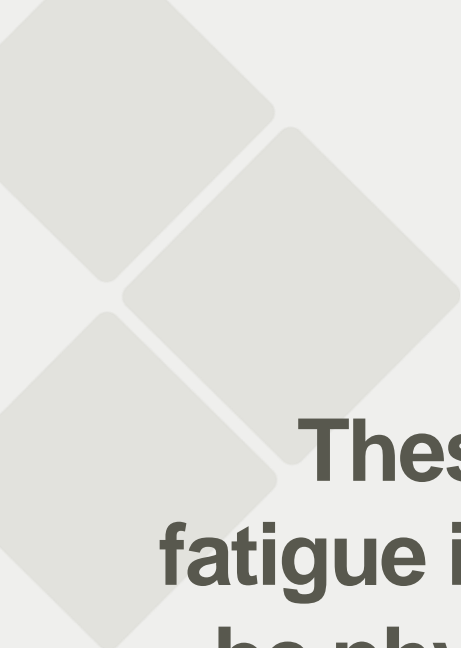


Increased workload

Difficulty staying awake

Changes in diet

Headaches



**These workers are all experiencing fatigue in different ways however, you can be physically, mentally and emotionally fatigue at the same time.**

# Fatigue risk in COVID

- ❖ Working Additional Shifts
- ❖ Working longer shifts
- ❖ More intense workloads
- ❖ Not getting adequate breaks
- ❖ Prolonged use of PPE – leads to difficulty rehydrating and communicating
- ❖ Frequent changing of PPE

## Increases the risk of:

- ❖ Physical, mental and emotional fatigue
- ❖ Stress from patient loads and work demands
- ❖ Burnout
- ❖ PTSD

# Controlling the risks of fatigue

**There are 3 main areas where risk controls may be relevant:**

❖ Hours of work

❖ Mental workload

❖ Emotional workload, stress, anxiety, burnout and PTSD



# Hours of work

## Preventative risk controls:

- ◆ a minimum 10 hours between shifts to enable sufficient sleep
- ◆ a maximum of 3 consecutive night shifts
- ◆ enabling 2 nights' recovery sleep after a set of night shifts
- ◆ at least 1 full day off per week at the peak of the pandemic, comprising 1 night's sleep, followed by a day off and another night's sleep
- ◆ Provide adequate coverage

## Mitigate risk:

- ◆ 20-minute power naps
- ◆ a break
- ◆ task variation
- ◆ swapping to another less critical area
- ◆ Safe sleep area

# Hours of work – conversation starters

- ❖ Do you have a minimum of 10 hours between shift?
- ❖ Do you work more than 3 night shifts in a row?
- ❖ Are you taking regular breaks during your shifts?
- ❖ Do you have at least a full day off every week?
- ❖ Are there any rules preventing you from doing a shift swap with anyone?
- ❖ Does a supervisor assess fatigue after 10 hours on shift or 5 shifts in a row?
- ❖ What happens if someone says they are fatigued?
  - ❖ If they can't be sent home, can they have a power nap? Break? Task variation? Swap to another area?

# Mental workload

## Preventative risk controls:

- ◆ Workplaces should provide training and, where possible, a buddy system to ensure clarity and support for those who need to adapt to a new area or system.

## Mitigate risk:

- ◆ a break
- ◆ task variation
- ◆ swapping to another less critical area

# Mental workload – conversation starters

- ❖ Does your work require your undivided attention? How often? Constantly, 10 minutes of every hour, 10 minutes of your shift? Etc...
- ❖ Is anyone working with a patient/client they don't usually work with? If so, what training / support is available for them to learn the relevant processes and equipment?
- ❖ If fatigued, are staff able to change the tasks they are doing? If only temporarily?

# Emotional workload, stress, anxiety, burnout and PTSD

## Preventative risk controls:

- ❖ Workplaces should ensure an expert group agrees on decision-making principles well in advance. These principles should then be applied by at least 2 people.
- ❖ Inform employees in advance about the expected demand on services and likely increase in workload.
- ❖ Ensure regular team discussions, especially for more difficult clients, with a focus on what was done well and learning opportunities, and to check whether support is required.
- ❖ Implement clear and regular communication processes, including highlighting positive statistics or results.

## Mitigate risk:

- ❖ a break
- ❖ task variation
- ❖ swapping to another less critical area
- ❖ Inform employees in advance about the availability of Employee Assistance Programs, psychologists or general practitioners and encourage employees to use these services.

# Emotional workload, stress, anxiety, burnout and PTSD – Conversation starters

- ❖ Are staff given clear communication to prepare them for an increased workload and demand?
- ❖ How often do teams meet to discuss patients/clients or to raise concerns they have?
- ❖ Do your team meetings discuss positive interactions with patients/clients, positive statistics, or what went well?
- ❖ Do staff feel emotionally drained after your shift? How often do they report feeling this way?
- ❖ Are unplanned absences high?
- ❖ Do staff report feeling stressed, emotional, anxious, burnt-out or like they have nothing else to give?
- ❖ Does your job allow you to change the tasks you are doing? If only temporarily?

# What is the impact of fatigue on a workforce?

Adverse patient outcomes

Chronic work-related stress

Burnout

Impaired eyesight

Depersonalisation

Decreased ability to make decisions

High staff turnover

# What tools are available to help manage fatigue?

WorkSafe Guidance

OHS Essentials Program

Tools such as Fatigue Safe



# Questions?

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