### To: The Hon. Dr Jim Chalmers, MP

Treasurer of Australia

Better sleep and wellbeing for essential health and aged care workers: A proposal to prevent burnout and shift worker fatigue

### Introduction

Please find attached a policy proposal from the Australasian Sleep Association and Sleep Health Foundation, responding to the current crisis in shift workers working in essential healthcare and aged care roles.

This policy proposal builds on solutions to shift worker fatigue, already developed and tested by the Cooperative Research Centre for Alertness, Safety and Productivity, funded by the Commonwealth 2013-2020.

We now recommend a program to implement these solutions, in pilot trials, across selected metropolitan and rural hospitals and aged care settings.



### **Background**

The 2019 report of the <u>Parliamentary Inquiry into Sleep Health Awareness in Australia</u> detailed the current sleep health crisis among Australians. The effects of the pandemic have worsened the situation, with shift workers being especially impacted by poor sleep and fatigue.

Recent research has shown that COVID-19 has impacted the sleep health and wellbeing of essential health and aged care workers, leading to burnout and departures from the health and aged care sectors.

- Australian frontline health workers in <u>one study</u> reported mild to severe anxiety (60%), mild to severe depression (57%) and moderate to severe burnout (71%)
- 65.1% of Victorian health care and aged care workers surveyed <u>reported</u> emotional exhaustion reflecting moderate-severe burnout
- 46% of doctors in training in NSW hospitals <u>reported</u> making a fatigue-induced error and study respondents identified rostering issues and facilities as the main issues across all hospitals.

A recent <u>systematic review and meta-analysis</u> demonstrated that physicians experiencing burnout are twice as likely to be involved in patient safety incidents and more than three times as likely to have thoughts or intentions to leave their job. A <u>study of Norwegian nurses</u> concluded that shift work demands such as work schedule changes and quick returns to work were associated with worse sleep and higher turnover intention.

Out of this pilot initiative, a business case will be built for the economic, patient care and employee wellbeing benefits of better sleep health among health and aged care shift workers. This can then be leveraged to motivate public and private hospital and aged care operators to implement these proven techniques more broadly beyond the pilot trial sites.

### Conclusion

The complexities of health care and aged care workforce considerations, in the face of the ongoing COVID-19 pandemic are significant. However, we urge the Government to support this evidence-based initiative aimed at helping essential health and aged care workers overcome their increasingly difficult sleep health and wellbeing challenges.

Not only will this help mitigate the very real risk of burnout with more and more of these essential workers leaving the overwhelmed health and aged care sectors but we know it will be to the long term benefit and protection of the patients in their care.

Yours sincerely,

**Associate Professor Sutapa Mukherjee** 

President, Australasian Sleep Association

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**Professor Shantha Rajaratnam** 

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S. Rajaral



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# Better Sleep and Wellbeing for Healthcare Workers



Policy Proposal for the Wellbeing Budget January 2023





### **Foreword**

Sleep is a fundamental human need. It is as vital as nutrition and physical exercise and as the bipartisan Parliamentary Inquiry into Sleep Health Awareness (Bedtime Reading<sup>1</sup>) declared unequivocally, sleep is one of the three essential pillars of good health.

And yet the final report of this inquiry underscores how sleep health is woefully lacking in policy attention. To not sleep is no longer a 'badge of honour' and a show of 'toughness'. It is a precursor to serious and potentially costly chronic health problems.

Fatigue results in decreased productivity and is the cause of more road accidents than alcohol and drug use combined. Fatigue is four times more likely to contribute to impairment than drugs or alcohol.<sup>2</sup>

Four in every ten Australians are not getting the sleep they need.<sup>3</sup> The direct financial cost of this inadequate sleep is currently estimated to be \$26.2 billion annually. If health and wellbeing costs are considered the cost rises to \$66.3 billion annually. Of even greater concern, in 2016-17 inadequate sleep was estimated to contribute to 3017 deaths in Australia.<sup>3</sup>

We applaud the leadership of the Treasurer for placing a 'wellbeing' lens across the economic statement released in October 2022. Nothing is more central to every Australian's wellbeing than good sleep health, across the lifespan from babies, to workers, to the elderly. We all need to sleep and sleep well. There is a very strong evidence base now that describes the relationship between good sleep health and productivity.

COVID-19 is still wreaking unbearable havoc on our healthcare system let alone our own mental wellbeing and our hospitals again are at breaking point. This proposal offers a solution to urgently and effectively help those most of risk of burn-out.

These reforms will keep our essential healthcare workers on the front line where we need them to be. The more healthcare workers leave, the bigger the holes they leave behind to fill. Shifts become longer. Shift work becomes a struggle and sleep is the one essential element that is often the first to go. If these reforms are implemented, the

national conversation around sleep health and the impact particularly on the hundreds of thousands of Australian shift workers can finally be changed.

We commit this proposal to the Government for consideration.

Warm regards,



S. Rajaral

Professor Shantha Rajaratnam Chair, Sleep Health Foundation



Smuherjee

Associate Professor Sutapa Mukherjee President, Australasian Sleep Association

# **Executive summary**

worsening COVID-19 pandemic and ongoing natural disasters are severely impacting the health and wellbeing of Australia's healthcare workforces. Many of these essential workers are employed in shift work, which routinely causes disrupted body clocks and inadequate sleep, leading to:

- reduced physical and mental health
- increased errors and accidents, and
- high levels of burnout and leaving the workforce.

This submission outlines a program that will improve the health of shift workers in healthcare settings. Our focus is on four professions: nurses, midwives, medical doctors and aged-care workers. These key frontline professions are in crisis and are experiencing unprecedented levels of burnout and staff shortages.

This submission is a prioritised response to two key recommendations of the Parliamentary Inquiry into Sleep Health Awareness in Australia. It will result in significant benefits to Australian healthcare systems through better health and welfare for essential shift workers and decreased economic burden due to staff absences.

A substantial body of previous work has resulted in development of a series of evidence-based resources and interventions. We will implement tools and knowledge created by the Cooperative Research Centre for Alertness, Safety and Productivity (Alertness CRC) funded by the Commonwealth Government from 2013 to 2020. With the collaboration of unions, employer organisations and professional organisations, the programs will implement and quantify the effectiveness of these approaches in improving health and wellbeing among essential healthcare workers engaged in 24-hour shift work. This implementation program will lead to reduced levels of burnout and increase staff retention.



## The problem and the solution

nadequate sleep is a dangerous, debilitating and costly problem in Australia, especially in healthcare workers. The pandemic has exacerbated problems that already existed.

The extent of the problem prompted the establishment of the Parliamentary Inquiry into Sleep Health Awareness in Australia<sup>1</sup> which made the following recommendations in relation to shift work:

- Recommendation 2: The Committee recommends Safe
  Work Australia and the Alertness CRC provide updated
  guidelines (based on current research and science) for
  industries using shift work, regarding optimal shift
  structures and other workplace practices that promote
  alertness, productivity and ensure worker safety.
- Recommendation 3: The Committee recommends the Australian Government work with the states and territories to:

- Develop a nationally consistent approach to working hours and rest breaks for shift workers; and
- Consider whether there is a need for sleep health screenings for shift workers; and
- That this approach be based on guidelines recommended by Safe Work Australia and the Alertness CRC.

There has been no action taken by any level of government to implement any of the 11 recommendations made in the 2019 Parliamentary Inquiry into Sleep Health Awareness. The time for action is now. There is strong evidence that directly addressing sleep, roster schedules and setting lighting to the appropriate levels (intensity and wavelength) to promote alertness or sleep will have a positive impact on the health of essential workers and help retain them in the workforce.

**Figure 1** summarises the extent of the problem as well as our proposed solutions.

# Shift Work Sleep and Body Clock disruption Burnout, increased risk of poor mental health and chronic diseases, and leaving workforce

### The Health Risks

### Sleep disorders 70% Insomnia

40% Sleep Apnoea

### **Physical health risks**

26% Mortality

40% Cardiovascular Disease

42% Type II Diabetes

### **Occupational health risks**

90% Fatigue on shift30% Workplace injuries36% Motor vehicle accidents

### **Mental health risks**

1.5x Depression1.5x Anxiety3.1x Suicidal ideation2.3x Burnout

### Our Solution

Which shift workers?

### Will focus on:

- Nurses
- Midwives
- Doctors
- Aged-care workers

### What can be done to help?

### We can provide:

- Tailored sleep solutions
- Sleep disorders screening
- Roster and lighting solutions
- Mental health support via all of the above being improved

### This Project

### Our solution for shift workers

- Co-design with key stakeholders
- Workplace implementation and evaluation of sleep solutions

### Anticipated outcomes

- Increased staff retention
- Reduced health burden
- Reduced burnout
- Australian healthcare workforce health and wellbeing will be improved

Figure 1. Diagrammatic summary of the healthcare shift work problems and our proposed solution

We have outputs ready to implement that have been developed and tested in the field.

**Figure 2** outlines in more detail the elements of the program. This is the 5-step plan to improve the lives of these essential healthcare workers:



### 1 Tailored sleep health education and solutions:

- Online, self-guided format
- Improve sleep health knowledge and behaviours



### Sleep disorder screening program:

- Screening via survey for common sleep disorders
- Privacy maintained, online referral



### 3 Automated, personalised sleep-wake management program

- Mobile app
- Personalised behavioural recommendations to improve sleep



### Work scheduling software platform (rosters):

- AlertSafe® shift rostering system
- Enable rostering of personnel to minimise adverse effects on health, in particular mental health



### 5 Smart Lighting

- Design based on physiology
- Enhance alertness, performance and safety
- Assist alignment of body clock to specific work schedules

Figure 2. The tools that we have ready to implement.

### The investment

ach of the five steps above will require \$1 million to implement across the hospital and the aged-care settings. We are asking for a total of \$5 million to roll out this program.

We will be targeting hospital emergency and ICU departments as priority areas. There will be two city-based hospitals and one rural hospital in each state.

There will also be three aged-care sites in each state (two city-based and one in a rural setting). The funds will cover the costs of staffing, software and lighting changes across all these sites.

### Co-design

There will be costs associated with bringing together stakeholder consultation groups to find appropriate and willing participants and to co-design the implementation process. These groups of healthcare workers have their own peak bodies, unions and other relevant organisations. For example, when focusing on nurses and midwives we will invite the Australian Nurses and Midwives Federation (ANMF) alongside other peak nursing employers, nurses' and midwives' representatives and other stakeholders to form an Representative Working Group (RWG).

### Implementation

The co-design process will help us to identify sites which will be open to and able to implement the program. It is important to cover a range of settings to ensure a broad representation of healthcare workers. This would involve 2 FTE staff to coordinate and drive this stage of the program. See **Figure 2** for the elements of what will be implemented.

### **Evaluation**

We need to evaluate this program as it is most likely to be rolled out on a wider and more extensive scale. We will use an established, rigorous evaluation process to measure impact on burnout, health outcomes (including sleep quality and quantity) and retention of staff.

### Return on investment (ROI)

A 2014 report tabled by Beyond Blue and Price Waterhouse Coopers<sup>4</sup> highlights that investing in mental health is not only good for society but it's an imperative to reduce economic burden.

Australian companies and government departments can reap \$2.30 for every \$1 spent on workplace mental health strategies. There is no direct figure available yet for ROI for investment in fatigue and burnout. As they are so closely related it is clear the returns would be similar, if not larger.

### **About us**



### **The Sleep Health Foundation**

The Sleep Health Foundation is Australia's leading advocate for healthy sleep.

It aims to improve people's lives by promoting sleep health, raising awareness of sleep disorders and building partnerships with organisations with complementary objectives.

It includes the Australian Sleep and Alertness Consortium (ASAC), the transition (legacy) structure for the Alertness Cooperative Research Centre, comprised of stakeholders involved in the development and deployment of innovative solutions to improve workplace productivity and safety.



### **The Australasian Sleep Association**

The Australasian Sleep Association is the peak scientific body in Australia and New Zealand representing clinicians, scientists and researchers working in sleep health and sleep medicine.

It is experienced in developing clinical guidelines, professional education and other services aimed at improving the quality of sleep health.

The association is a current recipient of Commonwealth grant funding under the Health Peak and Advisory Bodies program to provide evidence-based sleep health and sleep medicine information to assist with informing Australian Government policy, as well as informing the Government about emerging issues in relation to sleep health and sleep medicine. The program also has a focus on supporting the goals of the recently-released National Preventive Health Strategy 2021-2030.

The Foundation and the Association are long-time collaborators that have worked together on the Parliamentary Inquiry into Sleep Health Awareness in Australia and other communication and advocacy work to improve the sleep health of all Australians.

### References

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- 2. National Road Safety Action Plan 2018-2020 available at: www.roadsafety.gov.au/action-plan/2018-2020/fatigue
- 3. Asleep on the job: Costs of inadequate sleep in Australia (2017) A report commissioned by the Sleep Health Foundation and conducted by Deloitte.
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- 4. Creating a mentally healthy workplace. Return on investment analysis: A report commissioned by Beyond Blue and conducted by Price Waterhouse Coopers (2014). Available at:
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