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Antecedents and outcomes of nurses' rest break organization: A scoping review



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ABSTRACT

Objectives: To prevent an accumulation of strain during work and to reduce error risk, many countries have made rest breaks mandatory. In the nursing literature, insufficient rest break organization is often reported. However, the outcomes of nurses' rest break organization and its anteceding factors are less clear.

Data sources: We searched for academic literature on nurses' rest break organization in electronic databases (PubMed, Medline, PsycArticles, PsycINFO, CINAHL).

Review methods: Our search yielded 93 potentially relevant articles published between 01/1990 and 04/2016. The final sample in our scoping review consisted of 36 publications and included data from 35 independent and international study samples and two reviews.

Results: Several studies reported a high prevalence of missed, interrupted, or delayed rest breaks in nursing. Nurses' rest breaks often related to better physical and mental well-being but did not affect motivational outcomes and performance systematically. Results on the effects of napping breaks were inconsistent. Rest break activities and high quality rest break areas are further factors that relieve nurses from job demands and can be helpful in coping with them. Several study results indicated that temporal and quantitative work demands, job resources, and individual characteristics influence rest break organization. However, most of these findings stem from studies that do not allow causal conclusions to be drawn.

Conclusions: Well-designed rest breaks influence nurses' occupational well-being and behavior positively. However, the mechanisms and moderating break-, work-, and person-related factors involved in producing these effects are not well understood today. Thus, further theory building and stronger empirical data are needed.

What is already known about the topic?

- Previous studies with industrial and office workers have shown that sufficient rest breaks improve important employee outcomes such as physical and mental well-being, job performance, and workplace safety.
- The work-related and individual antecedents of employees' rest break organization are less clear.
- Nurses' rest break organization has been often described as insufficient.

What this paper adds

 Many studies report a high prevalence of missed, interrupted, or delayed rest breaks in nursing.

- The impacts of rest breaks seem to be moderated by characteristics of rest break activities and rest break areas and job demands, job resources, and individual characteristics often antecede nurses' actual rest break behavior.
- Interventions studies are rare and most of the findings rest on questionnaire and cross-sectional research which limits more comprehensive and causal conclusions.

1. Introduction and theoretical background

The nursing profession in many countries faces severe challenges such as staff shortages and high turnover rates (Buchan and Aiken,

In many studies nurses' rest breaks relate to better physical and mental well-being but for motivational and performance-related outcomes the findings are inconclusive.

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2008; Lu et al., 2012). Nurses have to cope with high workload (Aiken et al., 2002) and this can lead in combination with other work-related (e.g., low social support and low job control) and individual factors (e.g., low self-efficacy) to high psychological strain (Adriaenssens et al., 2015; Pisanti et al., 2015; McVicar, 2003) and increased intentions to leave and turnover (Coomber and Barriball, 2007; Estryn-Béhar et al., 2007). Moreover, if nurses feel unwell at work the quality of care (Van Bogaert et al., 2014) and patient safety (Welp et al., 2015) might decrease. Furthermore, in an ageing society with more older and multimorbid patients, increasing demands on nurses impair undeniably the attractiveness of this profession (Flinkman et al., 2010).

As numerous studies with industrial and office workers have shown that sufficient rest breaks might counteract the adverse consequences of high workload on strain (Tucker, 2003; Wendsche et al., 2016), our study reviews the current literature on antecedents and outcomes of nurses' rest break organization. Such an analysis is missing in the literature and our findings, therefore, can inform scholars and practitioners whether enforcing the use of better rest breaks in nursing is one promising option to counteract current problems of nurses' work organization.

1.1. Work characteristics and recovery

High physical and psychosocial demands and a difficult work environment characterize the nursing profession (Brennan, 2017; McVicar, 2003). Such working conditions that influence employees are called *job stressors* (Sonnentag and Frese, 2003) and can be of various natures (e.g., physical, task-related, social, role-related, work-schedule-related, career-related, traumatic events, stressful change processes). In turn, employees' individual reactions to these stressors are called *strain* (Sonnentag and Frese, 2003). They can develop immediately or delayed in time and affect the employee in different ways (e.g., physiological, cognitive, affective, and behavioral) with other individuals' characteristics (e.g., age, gender, coping styles) further influencing these relationships (Sonnentag and Frese, 2003).

The Job-Demands-Resources (JD-R) model (Bakker and Demerouti, 2007), which is widely used in nursing research (e.g., McVicar, 2016; Rahnfeld et al., 2016; Wendsche et al., 2017), states that every occupation has specific job-stressors, which are categorized into job demands and job resources. Job demands are defined as "physical, psychological, social, or organizational aspects of the job that require sustained physical and/or psychological (cognitive and emotional) effort or skills and are therefore associated with certain physiological and/or psychological costs" (Bakker and Demerouti, 2007, p. 312). Examples of job demands given by these authors, such as high work pressure, emotional demands, and unfavorable physical environment, are in line with the typical work of nurses (Brennan, 2017). Further, the JD-R model proposes that high job demands can lead to strain and, in the long run, to health impairment if recovery from those demands is not sufficient. This is because adaptive performance protection strategies under high demanding working conditions (e.g., increased effort investment and strategy adjustment) are associated with certain psychological and physiological costs further increasing the level of strain (Hockey, 1997).

Buffering and reducing these job demands is greatly influenced by the job resources. *Job resources* describe work aspects that either help in achieving goals (motivational function) or mitigating strain reactions (resource conserving or replenishing function), leading to improved job performance and health in the long run. Based on this model, we consider rest breaks as a potential job resource because they can reduce adverse effects of high job demands (Trougakos and Hideg, 2009).

1.2. Rest breaks

Rest breaks describe within-shift interruptions between work periods to recover from mental and physical strain and to prevent their

development and accumulation over the workday (Wendsche et al., 2016). During a rest break, working is not required or expected (Trougakos and Hideg, 2009). In line with the Effort-Recovery model (Meijman and Mulder, 1998), rest breaks prevent strain effects (e.g., fatigue and exhaustion) by replenishing work-induced losses of psychophysiological, emotional, and motivational resources. Moreover, rest breaks positively influence well-being, health, work performance, and safety (Tucker, 2003; Wendsche and Lohmann-Haislah, 2016). Thus, rest breaks fulfill two main functions (Wendsche et al., 2016, 2017). First, by offering time to replenish from work strain they have a recovery function; second, as rest breaks structure work into smaller parts they have a motivational function (e.g. by anticipating comfortable breaks and/or by optimizing effort expenditure). Furthermore, studies found that unofficial breaks decrease when scheduled rest breaks are introduced, a factor that is considered to increase work motivation (Wendsche et al., 2017).

1.3. Purposes of the review

Recent reviews (Nejati et al., 2016b; Witkoski and Dickson, 2010) showed that nurses seem to benefit from rest breaks in terms of wellbeing and job performance, although individual and organizational outcomes have not been investigated in detail. Furthermore, there is a lack of knowledge about nurses' rest break organization and its anteceding factors. This is problematic as knowing such factors, for instance, will help us to understand the high prevalence of nurses' disturbed or missed breaks (Sarna et al., 2009).

With this review, we further seek to disentangle strain effects of work breaks on nurses' individual outcome variables (e.g., well-being, physical health, psychological health) and the organizational ones (e.g., attitudes towards work and organization, work performance, turnover rates). Our study on nurses' rest break organization contributes to the literature in several ways. It updates two earlier reviews, which have methodological issues such as an unsystematic literature search (Witkoski and Dickson, 2010) or a less detailed, narrative design (Nejati et al., 2016b). In our research, we use the scoping review method (Davis et al., 2009; Norman and Griffiths, 2014) to map the prior research activities in this field and to obtain a comprehensive overview of research. We follow other authors' suggestion (Sonnentag and Frese, 2003) and use a broad conceptualization of potential antecedents and outcomes of nurses' rest breaks. Finally, our review identifies new research gaps in the evidence base concerning outcomes and antecedents of nurses' rest break organization that to date have been poorly researched (Sarna et al., 2009).

2. Methods

2.1. General approach

We used Arksey and O'Malley's (2005) framework for conducting a scoping review. We wanted to shed light on the issue of nurses' rest break organization in the scientific literature from the last quarter century aiming to (a) identify the extent, range, and nature of research activities, (b) to summarize and disseminate research findings, and (c) to identify relevant gaps in the literature. We followed the five stages approach of Arksey and O'Malley (2005): (1) identifying the research question, (2) identifying relevant studies, (3) selecting studies, (4) charting data, and (5) collating, summarizing, and reporting the results.

2.2. Research questions

Our research questions were: "What are (a) the extent, range and nature of evidence available, (b) the core findings, and (c) the major literature gaps including those concerning outcomes and antecedents of nurses' rest break organization?".

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