



Review

Valuable yet Vulnerable—A review of the challenges encountered by older nurses in the workplace

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ABSTRACT

Objective: As the global nursing workforce ages, developing a comprehensive understanding of the experiences, needs and values specific to older nurses is increasingly significant. This paper reviews the evidence with regard to the specific challenges encountered by older nurses in the workplace.

Design: A scoping review of the published literature was conducted using the electronic databases Medline, CINAHL, PsycINFO, Science Direct and Google Scholar. A total of 20 papers were included in this review, most of which were qualitative ($n = 14$). Three quantitative studies were identified (including one study which combined a physical exam with survey methods) as well as three mixed method studies.

Results: The challenges faced by older nurses in their practice are synthesised across three primary domains: Nursing and the ageing body; Recognition and support of the older nurse and Demands associated with middle-age.

Conclusion: As older nurses form a substantial proportion of the healthcare workforce in many countries, the development and implementation of strategies to address these challenges is of utmost importance.

What is already known about the topic?

- Older nurses are a significant and growing proportion of the global nursing workforce.
- In recent years more research has focused on profiling the experiences of older nurses in workplace.

What this paper adds

- This review finds that older nurses struggle with natural physical and cognitive declines as they age, as that musculoskeletal injury at work is a significant challenge.
- Older nurses gain valuable skills and knowledge through years of experience; however this is not always recognised by colleagues.
- Middle-age demands such as home-life responsibilities, personal health issues and caring for elderly parents are additional burdens often faced by older nurses.
- There is a lack of agreed terminology and age criteria to define older nurses and older workers in general.

1. Introduction

The global nursing workforce is ageing (Wells and Norman, 2009). In 2015 an estimated 50% of registered nurses in the United States were aged 50 or older (Budden et al., 2016). Similar trends are observed in Canada, where 38.9% of the nursing workforce are aged over 50 (Canadian Institute for Health Information, 2016); in Australia, where 37.3% are aged over 50 (Australian Institute for Health and Welfare, 2015) and in the United Kingdom, where 34.5% of National Health Service (NHS) nurses are aged between 45 and 54 and 14.3% are aged over 55 (Royal College of Nursing, 2016).

Many countries are now facing a previously un-encountered situation in which older nurses represent a significant and growing proportion of the healthcare workforce (Stichler, 2013). The working life of nurses has gradually increased over time. For example, 'Baby Boomer' nurses in the United States are currently delaying retirement (Auerbach et al., 2014). Whilst it is unclear why these nurses delay retirement it would appear to arise from a combination of health and lifestyle advances enabling such nurses to continue to work. Other factors may include nurses retaining a sense of vocation and satisfaction from their work, social trends such as having children later in life and economic

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reasons such as a desire for a better quality of life in retirement (Auerbach et al., 2014).

Political factors are also a consideration as many OECD (Organisation for Economic Co-operation and Development) countries intend to raise the age at which workers are entitled to access government-funded pensions. In the United Kingdom, for example, the age at which workers may access the state pension will be 66 years by 2020, with further plans to increase this to 67 by 2028 (Duffield et al., 2015). Understanding the challenges older nurses may face in practice is therefore of importance in order to facilitate the development of effective strategies to support their well-being and productivity in the workplace. This paper addresses a key gap in the literature by reviewing the evidence as this relates to the specific challenges encountered by older nurses in the workplace.

2. Background-Stress in nursing

Nursing is an inherently stressful occupation (Clegg, 2001; McVicar, 2003; Wells, 2011), the demands of which are well-documented (Johnston et al., 2013). Nurses require significant technical skills and expertise and must cope with numerous challenges including a heavy workload; interpersonal conflict; the necessity of shift work and the emotional impact of caring for sick and dying patients (Happell et al., 2013). The scope of nursing practice also frequently changes, meaning that nurses are often faced with the difficulty of assuming additional responsibilities in the workplace or negotiating the impact of organisational change arising from economic and political pressures (Oulton, 2006).

Previously much of what was known about the experience of being an older nurse derived from broader work on the natural ageing process, the stressors inherent to nursing as a profession and research into older workers in general (Collins et al., 2012). Research into older nurses specifically focused on issues related to their retention in the workplace and the identification of strategies which may encourage them to remain in practice (Letvak, 2002; Moseley et al., 2008; Storey et al., 2009). Recently, however, more attention has been paid to investigating challenges and issues specific to the older working nurse.

3. Method

A scoping review of the published literature was undertaken using a framework described by Arksey and O'Malley (2005). A systematic literature search using the electronic databases Medline, CINAHL, PsycINFO, Science Direct and Google Scholar was undertaken. Keywords including "older" or "ageing" nurses were searched. Studies published from the year 2000 to 2016 only were retrieved.

The following inclusion criteria were applied:

- Studies which described challenges reported by older nurse in their practice;
- Published in English between the years 2000 and 2016;
- Studies that included older or ageing nurses providing direct patient care and
- Studies which utilised qualitative, quantitative or mixed methods study designs.

Papers were excluded if they focused solely on the retention of older nurses; retirement issues; intention-to-leave nursing or return to practice strategies or included nurse managers or human resource managers only. Discussion and review papers, papers published in a language other than English or papers published before the year 2000 were also excluded.

4. Results

The initial literature search returned a total of 5997 papers from all

databases. From these, the abstracts of 292 papers were screened for relevance to the review and 115 full-texts were read and checked against the inclusion criteria. The reference lists of these studies were also searched for additional relevant papers. A total of 20 papers were included in this review. Most studies were qualitative ($n = 14$). Three quantitative studies were identified, including one study which combined a physical exam with survey methods. Three mixed method studies were also included.

The Mixed Method Appraisal Tool (MMAT) version 2011 (Pluye et al., 2011) was used to assess the quality of the included studies. The tool outlines four criteria for assessing the quality of quantitative and qualitative research studies, with scores ranging from 25% for one criterion met to 100% for all criteria met. Mixed methods studies are assessed using both the qualitative and quantitative components of the tool. All twenty studies reviewed here fulfilled most of the quality assessment criteria, with seven fulfilling all four criteria; nine fulfilling three criteria and four fulfilling two criteria. The authors; location; sample; design; MMAT score and key findings of each study are presented in Table A1 (see Appendix A).

The challenges encountered by older nurses in the workplace may be considered across three primary domains: Nursing and the ageing body; Recognition and support of the older nurse and Demands associated with middle-age. The following sections synthesises the evidence in relation to each of these domains.

5. Nursing and the ageing body

Physical Demands of Nursing: Nursing is a physically strenuous job, involving tasks such as the manual handling and lifting of patients; working long shifts; lengthy periods of standing and walking and administering medications (Collins-McNeil et al., 2012). Coping with such demands becomes significantly more challenging as nurses age due to declines in sensory ability; stamina; flexibility; aerobic capacity and muscle strength as part of the natural ageing process (Keller, 2010; Phillips and Miltner, 2015).

Physical age-related factors were highlighted as one of the primary challenges older nurses faced in their practice in a study by Fragar and Depczynski (2011) who interviewed eighty Australian nurses and allied health professionals aged over 50. These nurses described how they experienced declines in their vision and hearing; reduced strength and flexibility; persistent mental fatigue and sleep issues as they aged. These impacted their ability to cope with the physical demands of providing patient care such as administering medications, patient handling and spending long periods of time standing, walking or sitting.

Difficulties arising from reduced stamina and tiredness in the workplace emerged as a significant issue in another study of Australian nurses aged between 40 and 60 years (Gabrielle et al., 2008) who likened their physical ageing process to series of losses, with each loss signalling a decline in physical ability. Spiva et al., 2011 identified an enduring stress and frustration arising from the fast pace of work, physical care demands and a lack of energy as major themes in interviews with 18 nurses aged between 55 and 67 in the United States. A further qualitative study with 10 New Zealand nurses aged over 60 (Squire, 2008) found that such nurses struggled with sensory declines and an increased need for recovery from work as they got older. Interestingly, the nurses in this study also indicated that they did not perceive that they had a disability or that these declines impacted their ability to perform their duties.

Shift work is often required of the older nurse, and presents several challenges relating to long periods at work (shifts of twelve hours or more are increasingly common across Europe), working several days consecutively and the requirement of being 'on-call' (Dall'Ora et al., 2015; Keller, 2010). Older nurses report that shift work becomes more difficult to cope with as they age (Letvak, 2003a; Mion et al., 2006; Spiva et al., 2011) and that it impacts sleep, recovery needs and mental performance (Durosaiye et al., 2016).

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