



## rostering

It is the policy of the Australian Nursing Federation that:

1. Nurses need suitable periods of rest, relaxation and recreation as shift work impacts significantly on physical, psychological, family and social well being;
2. Rostering systems must be developed to: optimise the occupational health and safety requirements of nurses; conform to the provisions in the relevant industrial agreement; and accommodate each employees leave entitlements;
3. Rosters should be prepared to achieve an appropriate balance between patient, client or resident care needs and employee rights and needs;
4. Rosters should be prepared to provide appropriate staffing levels and skills mix rostered to ensure that
  - quality nursing care, including continuity of care, is available to each patient, client or resident for all shifts 24 hours each day, seven days each week; and
  - there is sufficient staff with appropriate skills mix available for known fluctuations in demand eg. admission periods, surgery, or medicine rounds;
5. Rosters should facilitate effective communication between nursing and other personnel such as medical practitioners and allied health professionals so that nurses are available for multidisciplinary discussions with and about patients, clients and residents;
6. Rostering practices should include adequate time for supervision both direct and indirect of new staff and or students;
7. Rosters should include adequate over lap of each shift to allow for safe handover procedures;
8. Rosters must allow as a minimum the break between late and early shifts specified in the relevant industrial agreement;
9. Rosters should be posted well in advance of their implementation and in accordance with the relevant industrial instrument in order to facilitate work-life balance for nurses;
10. Roster patterns should be distributed equitably between individual employees considering their individual preferences. All nurses should be actively involved in the assessment of roster patterns including reviews of equity;
11. Rostering policies must serve to protect individual employees against discriminatory practices;
12. Preparation of rosters should be at the local level to allow for participation by nurses including self rostering. Centralised preparation of rosters should be negotiated with the relevant Branch of the Australian Nursing Federation;

13. Planning for and monitoring roster patterns that include 12 hour shifts must include representation from the relevant Branch of the Australian Nursing Federation and be in line with relevant industrial awards and agreements, and OH&S legislation and evidence;
14. Rostering practices should allow staff to access professional development or in service programs without increasing workloads;
15. Any significant changes to rostering arrangements or to specific hospital policies which impact on rostering require negotiation between the employer, the employee and the relevant Branch of the Australian Nursing Federation;
16. Any additional matters relating to rosters should be negotiated between employees and the relevant Branch of the Australian Nursing Federation, and the employer to prevent ad hoc or inconsistent patterns of rostering;
17. The International Labour Organisation convention on nursing personnel - C149 Nursing Personnel Convention, 1977, Article 6, is endorsed;<sup>1</sup>
18. A watching brief must be maintained on research developments relating to possible links between the circadian disruption of shift work and carcinogenic effects. Any new strategies to minimize potential effects of shift work on nurse health should be disseminated and implemented into rostering systems as soon as practicable.<sup>2</sup>

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*reviewed and re-endorsed november 1996*

*reviewed and re-endorsed october 1998*

*reviewed and re-endorsed november 2005*

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#### references

1. [www.ilo.org](http://www.ilo.org) (search under C149 Nursing Personnel Convention, 1977)
2. <http://monographs.iarc.fr/ENG/Meetings/vol98-participants.pdf>  
<http://monographs.iarc.fr/index.php>