

FOR BCCNM REGISTERED MIDWIVES

Position statement on fatigue management

The British Columbia College of Nurses and Midwives (BCCNM) recognizes that the nature of midwifery may necessitate that midwives work within variable patterns which often include overnight work and extended hours. These patterns have the potential to cumulate in insufficient and poor-quality sleep which may lead to fatigue. Studies show that safety-related concerns associated with lack of sleep and fatigue include slowed reaction time, reduced decision-making ability, poor judgement, distraction during complex tasks and loss of awareness in critical situations. After 17-19 hours without sleep, studies have shown performance on some cognitive and motor performance tests to be equivalent or worse than a blood alcohol concentration (BAC) of 0.05% (just above the legal limit for drivers in BC). After 24 hours without sleep, performance is impaired equivalent to the BAC of 0.10% (twice the legal limit for drivers in BC).

BCCNM Standards of Practice for Registered Midwives requires the midwife to refer “to another appropriate practitioner when ability to practise safely is mentally or physically impaired.” Physical impairment in this context extends to fatigue. Midwives should be aware of the potential impacts that both lack of sleep and fatigue, individually and in combination, have on client safety. Midwives are responsible for self-managing their fatigue and should take this into consideration when determining whether they are clinically fit to provide midwifery care.

BCCNM recommends that midwives balance continuity of care requirements with strategies for effective fatigue management. BCCNM encourages midwives to develop systems within their schedules and practice that address fatigue management, including associated strategies to ensure client safety.

References

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900 – 200 Granville St
Vancouver, BC V6C 1S4
Canada

www.bccnm.ca

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