

June 29, 2021

Jeffrey M. Zirger  
Information Collection Review Office  
Centers for Disease Control and Prevention  
1600 Clifton Road NE, MS-D74  
Atlanta, GA 30329

Submitted electronically to [regulations.gov](https://www.regulations.gov)

Re: Proposed Data Collection Submitted for Public Comment and Recommendations; Docket No. CDC-2021-0048

Dear Mr. Zirger:

The American Nurses Association (ANA) respectfully submits these comments on the above-captioned notice. The notice indicates that the National Institute for Occupational Safety and Health (NIOSH) is planning to review Training for Nurses on Shift Work and Long Work Hours, NIOSH's web-based program to improve health care providers' sleep.

ANA thanks NIOSH for reviewing this online training program. Impaired sleep and fatigue are important issues that must be addressed as a matter of nurse safety and quality of patient care. The American Academy of Sleep Medicine and Sleep Research Society recommend seven or more hours of sleep per night for adults.<sup>1</sup> Experts have found that adults who sleep less than the recommended amount on a regular basis have adverse health outcomes, along with impaired performance and increased errors.<sup>2</sup>

Nurses may be at risk for sleep impairment and fatigue, with implications for nurses' well-being and that of their patients.<sup>3</sup> Data from the HealthyNurse® Survey<sup>4</sup> (a component of ANA's Healthy Nurse Healthy Nation initiative) are illustrative. Among the 6,654 nurses and nursing students who completed the survey between March 2020 and May 2021, 37 percent reported sleeping only six or fewer hours out of 24 hours. This shows elevated risks for nurses, compared to 33 percent among employed adults in 2018 who report sleeping six or fewer hours.<sup>5</sup> One out of four nurses in the HealthyNurse® Survey report that they are at significant risk for "excessive fatigue" that impacts their quality of life.

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<sup>1</sup> Recommended Amount of Sleep for a Healthy Adult: A Joint Consensus Statement of the American Academy of Sleep Medicine and Sleep Research Society. *Journal of Clinical Sleep Medicine*. 2015.

<sup>2</sup> *Ibid.*

<sup>3</sup> American Nurses Association (ANA). Addressing Nurse Fatigue to Promote Safety and Health: Joint Responsibilities of Registered Nurses and Employers to Reduce Risks. Position Statement. September 2014. Accessible online at <https://www.nursingworld.org/practice-policy/nursing-excellence/official-position-statements/id/addressing-nurse-fatigue-to-promote-safety-and-health/>

<sup>4</sup> The HealthyNurse® Survey<sup>4</sup> is a component of ANA's Healthy Nurse Healthy Nation initiative.

<sup>5</sup> CDC <https://www.cdc.gov/mmwr/volumes/69/wr/mm6916a5.htm>

Sleep impairment and fatigue in nurses are attributed to shift work and long hours.<sup>6</sup> One study of hospital-based nurses found that “the risks of making an error were significantly increased when work shifts were longer than 12 hours, when nurses worked overtime, or when they worked more than 40 hours per week.”<sup>7</sup> In the HealthyNurse® Survey, 31 percent of respondents say they work more than 40 hours per week. Around half say their shifts are 10 hours or more; and 41 percent worked overtime at least 4 times in the preceding month.

ANA believes that reducing nurse fatigue is a shared responsibility of nurses and their employers.<sup>8</sup> In our 2014 Position Statement, ANA recognized that nurses “have an ethical responsibility to address fatigue and sleepiness in the workplace that may result in harm and prevent optimal patient care.” Meeting this obligation includes practicing healthy behaviors that promote good sleep, and even refusing assignments that undermine sufficient sleep and recovery from work.<sup>9</sup>

The NIOSH training supports education of nurses so that they are informed and knowledgeable of methods and strategies to prevent sleep impairments and fatigue, reducing risks to patients and themselves. The training has been online for five years. A timely evaluation is necessary to assess the effectiveness of the program and identify areas for improvement. ANA stands ready to help promote the proposed study among nurses through various communication channels at the appropriate time.

ANA also believes that employers have a responsibility to establish a healthy work environment, including nursing work schedules that improve alertness.<sup>10</sup> Employers can do more to prevent sleep impairments and fatigue. For instance, health care employers should adopt, as official policy, the position that registered nurses have the right to accept or reject a work assignment on the basis of preventing risks from fatigue. Employers should have staffing policies that promote hours and shifts that are safe for nurses, and conduct regular audits to ensure these policies are maintained. Appropriate staffing policies can assist in nurse fatigue prevention by ensuring reasonable workloads, assuring adequate meal and bathroom breaks, and allowing nurses to leave on time.

ANA encourages NIOSH to explore the existence and impact of employer policies and practices as part of its evaluation of nurse training resources. It would be valuable to have an understanding of the extent to which employer policies enable or hinder nurses from optimizing their sleep health on the job. This information can lead to improvements in nursing training that will empower nurses to engage with employers to address fatigue. NIOSH should also consider a companion training program for employers, for instance, disseminating best practices for scheduling and staffing to prevent fatigue.

ANA is the premier organization representing the interests of the nation’s 4.2 million registered nurses (RNs) through its state and constituent member associations, organizational affiliates, and the individual members. ANA advances the nursing profession by fostering high standards of nursing practice, promoting a safe and ethical work environment, bolstering the health and wellness of nurses, and advocating on healthcare issues that affect nurses and the public. RNs serve in multiple direct care, care coordination, and administration leadership roles, across the full spectrum of health care settings. RNs

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<sup>6</sup> ANA. Addressing Nurse Fatigue to Promote Safety and Health.

<sup>7</sup> <https://pubmed.ncbi.nlm.nih.gov/15318582/>

<sup>8</sup> ANA Position Statement

<sup>9</sup> Ibid.

<sup>10</sup> Ibid.

provide and coordinate patient care, educate patients and the public about various health conditions including essential self-care, and provide advice and emotional support to patients and their family members. ANA members also include the four APRN roles. ANA is dedicated to partnering with health care consumers to improve practice, policies, delivery models, outcomes, and access across the health care continuum.<sup>11</sup> If you have any questions, please contact Brooke Trainum, Director of Policy and Regulatory Advocacy, at [Brooke.Trainum@ana.org](mailto:Brooke.Trainum@ana.org) or (301) 628-5027.

Sincerely,



Debbie Hatmaker, PhD, RN, FAAN  
Chief Nursing Officer/EVP

cc: Ernest Grant, PhD, RN, FAAN, ANA President  
Loressa Cole, DNP, MBA, RN, NEA-BC, FACHE, FAAN, ANA Chief Executive Officer

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<sup>11</sup> The Consensus Model for APRN Regulation defines four APRN roles: certified nurse practitioner, clinical nurse specialist, certified nurse-midwife and certified registered nurse anesthetist. In addition to defining the four roles, the Consensus Model describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.