Temporal conditions of work environments

Lesson 6.4.2 | Organisational psychology

Core ideas

Temporal work conditions are features of when people work, including shift timing, rotation speed, on-call demands and flexible start or finish times.

Shiftwork can disrupt circadian rhythms, sleep quality and alertness, especially when work happens at night or schedules keep changing.

Rapid rotation changes shifts frequently, while slow rotation keeps workers on one shift pattern for longer before changing.

On-call work can create uncertainty and stress because workers must be ready to work even when they are not actively on duty.

Flexitime gives workers some control over start and finish times, which may improve autonomy and work-life balance.

Gold et al. found that rotating-shift nurses reported more sleep disruption and sleepiness-related accidents or errors than nurses working day or evening shifts.

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Key terms

Temporal work conditions: Workplace conditions related to the timing and scheduling of work.

Shiftwork: Work scheduled outside a single standard daytime pattern.

Rapid rotation: A shift system where workers change shift type frequently.

Slow rotation: A shift system where workers stay on one shift type for a longer period before changing.

On-call work: A schedule where workers must be available to work if called in.

Flexitime: A system where workers have some choice over start and finish times.

Circadian rhythm: The body's roughly 24-hour sleep-wake and alertness cycle.

Sleepiness-related accident: An accident or error linked to tiredness or reduced alertness.

Further detail and evidence

Rapid rotation changes shifts after short runs, such as several days; slow rotation retains one shift for longer, such as weeks. On-call work requires availability when needed and may interrupt rest. Flexitime permits some choice over start/end times around agreed requirements/core hours.

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Continued

Shift patterns can disrupt circadian rhythms, sleep length/quality, meals, family routines and recovery. Daytime sleep may be shortened by light, noise and social obligations. A person can adapt partly without eliminating every fatigue risk.

Gold et al. (1992) used a cross-sectional questionnaire with hospital nurses to relate schedules to sleepiness and accidents/near misses. Rotating workers reported more sleep disruption and sleepiness-related problems than fixed day/evening workers. Self-report associations do not show that schedule alone caused each accident.

Applying the ideas

A worker alternating day and night duties has different adjustment demands from someone on a stable day schedule. On-call interruption can reduce recovery even when total scheduled hours look modest. Flexitime may support preferences but cannot remove all staffing constraints.

Evaluation and connections

Questionnaires efficiently collect schedules and rare incidents, but recall and reluctance to report errors threaten validity. Nurses working different schedules may differ in age, responsibilities and health. Compare shift duration, rotation, recovery time and workload. Individual preference matters alongside the organisation's design.