LETTER



Impact of age on emergency physicians' preference for overnight shifts

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Dear Editor,

We write to bring to light the findings from our recent research into how age influences an emergency physician's (EP's) willingness to work overnight shifts in a tertiary urban emergency department (ED). While multiple sectors recognize the physiological challenges that night shifts pose to older workers, and recent position statements acknowledge the increasing threat to wellness among emergency medicine physicians [1], the implications of these challenges relating to career progression and burnout within emergency medicine remain underexplored [2].

We embarked on this study during a period when there was no formal policy on preferential allocation of overnight shifts according to age, but where overnight shifts commanded a preferential rate, offering a 20% higher hourly remuneration than daytime and evening shifts. The allocation of these shifts typically considers the weekly total an EP undertakes. As there was flexibility to trade shifts, we were keen to observe any notable differences or trends that might emerge between older and younger EPs.

Our study involved 23 EPs, having excluded 1 participant from our overnight shift analysis due to their significant skewing of data as a preferential night worker, accounting for one-third of all overnight shifts. Physicians were evenly divided as younger (under 40 years) or older (over 40 years) physicians.

Three primary observations surfaced: older EPs worked fewer night shifts than younger EPs with an annual mean of 5.6 vs. 11.7 shifts (p = 0.021; Student T test). Older EPs were also more likely to work part time than younger EPs, and traded shifts to reduce their scheduled number of night shifts from their original allocation by 4.3%, whereas younger EPs increased their number of scheduled overnight shifts by a similar margin.

Even without a concrete night shift policy at play, our study determined that older EPs lean more toward part-time clinical emergency roles, often complemented by other duties, and also seem to prefer to achieve proportionately fewer overnight shifts than allocated. These findings may help improve the understanding of our workforce dynamics and could guide administrative decisions in the future. We hope to study the impact of overnight policy changes prospectively, including the impact of casino shifts, as well as age-determined overnight shift allocation, to better understand night work preferences and to mold an evidence-based schedule that best suits the needs of our team while maintaining service delivery.

Declarations

Conflict of interest All authors declare that they have no conflicts of interest.

References

- CAEP (2021). Emergency department workforce struggles amidst perfect storm. Emergency Department Workforce Struggles Amidst Perfect Storm. https://caep.ca/wp-content/uploads/2021/ 09/ED-Crisis-Sept7.pdf. Retrieved 18 Aug 2023
- Howlett M, Doody K, Murray J, LeBlanc-Duchin D, Fraser J, Atkinson PR. Burnout in emergency department healthcare professionals is associated with coping style: a cross-sectional survey. Emerg Med J. 2015;32(9):722–7. https://doi.org/10.1136/emerm ed-2014-203750. (Epub 2015 Jan 20 PMID: 25604324).

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