

Reduced hours increases sick leave

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By Nic Paton, Personnel Today

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Implementing shorter working weeks for junior doctors to bring them in line with European rules does not necessarily improve patient safety and, in fact, often increases the time doctors take off sick, research has suggested.

The somewhat counter-intuitive finding in the journal *Clinical Medicine*, published by the Royal College of Physicians, has argued that the European Working Time Directive, which limits rotas to a 48-hour working week, may be failing to improve the welfare of employees.

The [study at a district general hospital in East Sussex](#) reviewed sick leave data for all junior doctors in the year before, and following, the introduction of reduced hours' working.

The research found that, contrary to the belief that longer hours put patients at greater risk because of the effect on doctors' decision-making, mortality rates and length of stays did not alter significantly during the study period.

Yet, at the same time, episodes of sick leave among junior doctors more than doubled, with nearly three out of four taking leave, compared with about one in three in the year before implementation.

Key issues arising from directive-compliant rotas included a reduced number of doctors on the ward, difficulties in arranging locum cover and a shortfall in trainee recruitment.

This also meant any rise in sickness levels had a proportionately greater effect on the ward cover, in turn potentially putting patient care at risk, the college argued.

There had also been a breakdown of the traditional medical team, which had in the past offered more support to trainees.

Report author Dr Hugh McIntyre said: "While not associated with any major effect on patient care, the changes in working practice necessary to comply with the working time directive were associated with, and may have contributed to, a detrimental effect on the welfare of doctors in training.

"The directive may have failed in its primary purpose: that of promoting the welfare of employees," he added.