NIHR | Greater Manchester Patient Safety Research Collaboration

Paul Garvey: An Ethnographic Exploration of How Early Career Nurses Manage Workload and Patient Safety in Critical Care Units

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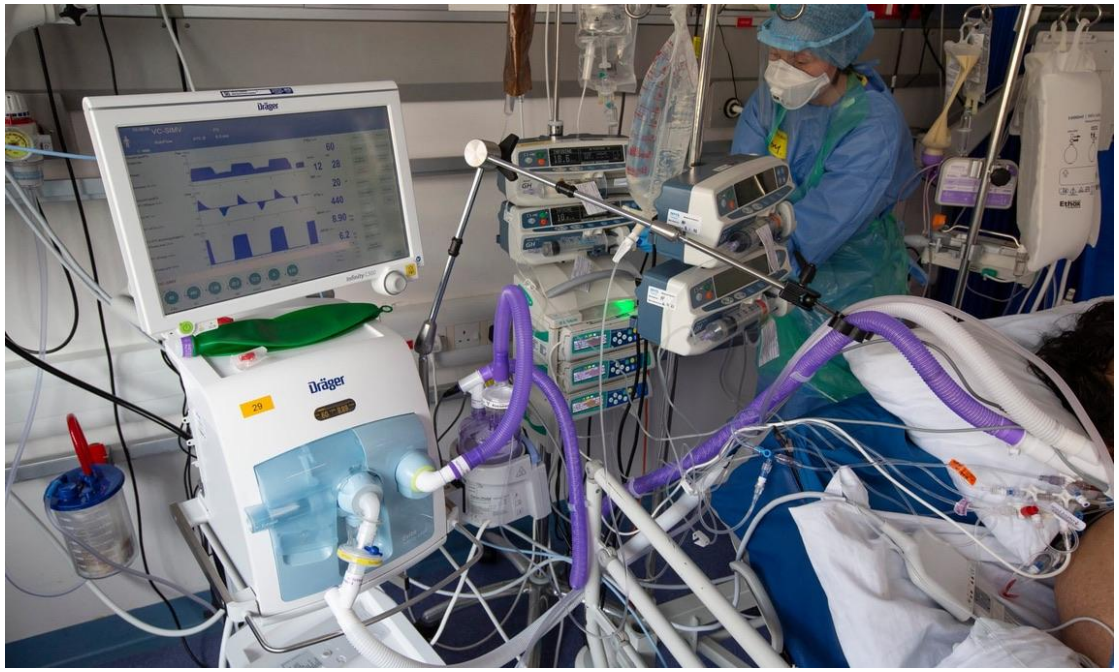
How do Early Career Nurses manage the tension between workload and patient safety in critical care?

- Experiences and perceptions
- Practice
- Factors that influence these

Early Career Nurses (qualified less than 5 years)



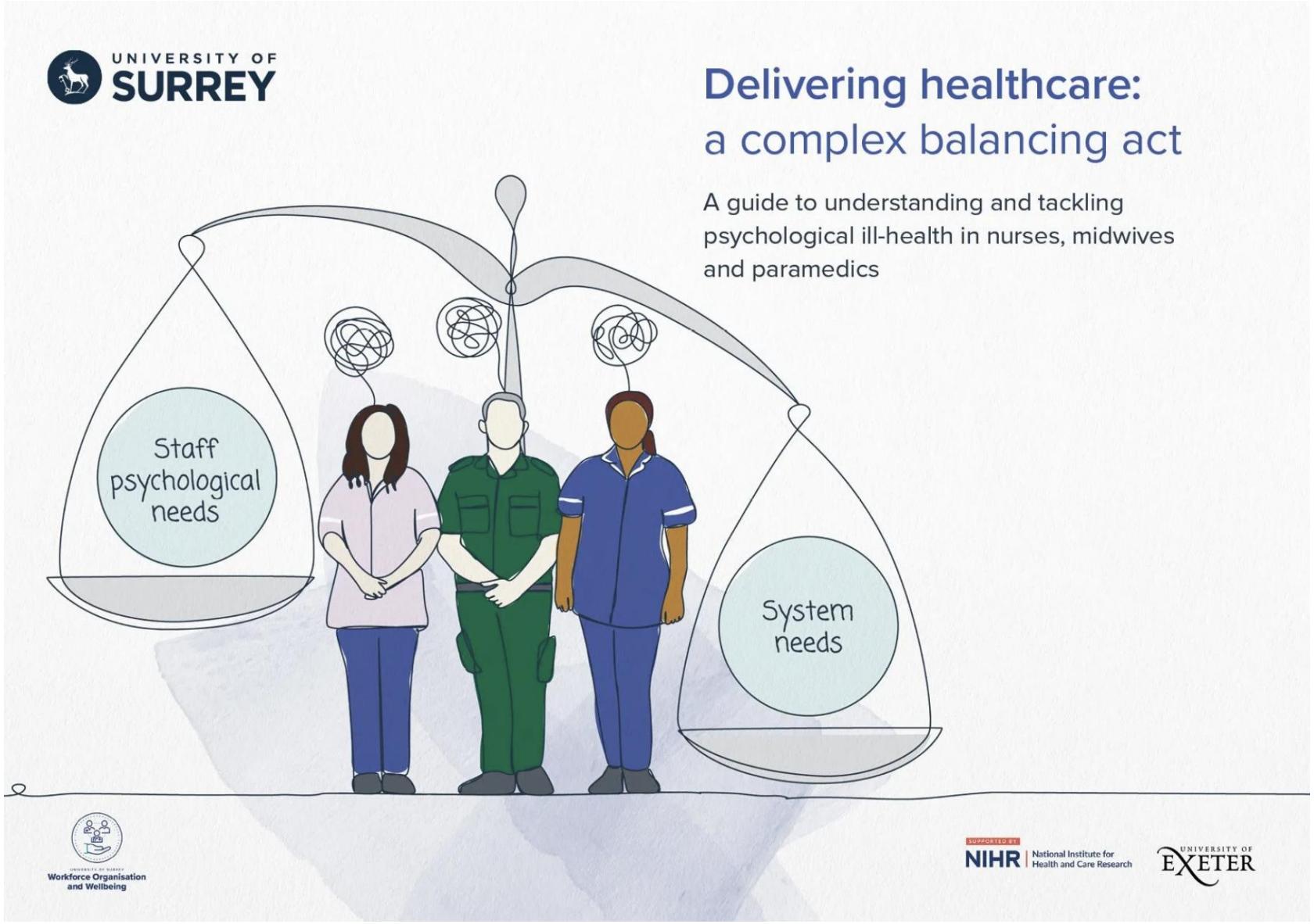
Gen Z and **recent joiners** are significantly more likely to report "**workload**" as a reason to leave the register.

nmc Insights

Professionals who left the NMC register in 2024/2025

June 2025

NMC Research and Evidence


UNIVERSITY OF SURREY
Delivering healthcare:
a complex balancing act
A guide to understanding and tackling psychological ill-health in nurses, midwives and paramedics
Staff psychological needs
System needs
Workforce Organisation and Wellbeing
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How do you define nursing work and workload?

"doing in a responsible way whatever necessary things are in danger of not being done at all"

Hughes **1951**

Future of Nursing ??

"Overall, while there will be fewer staff in the NHS in 2035 than projected by the 2023 workforce plan, those staff will be **better treated**, have **better training**, more exciting roles and real hope for the future - and **so they will each achieve much more**" . p97

Phase One

- Interviews with Early Career Nurses

Phase Two

- Observation of Early Career Nurses in practice
- Interviews with senior staff

Data analysis and Potential themes

Themes just developing

- Untimely questions
- Communication
- Benchmarking Competence
- Double impact
- Creating time
- Co production
- Stoicism

Potential strong themes across all data

- Heroes and captives
- Fear in the workplace
- Asking for help.

Heroes or Professionals or both?

Nigel Farage MP
@Nigel_Farage · **Follow**

Supporting Clap For Our Carers.

Critical Care as a silo of excellence/ heroes and captives (Interview Data)

"I'm a hero, I like being a hero"

('Clara', 31, 3 years in practice, Interview 3)

"it felt like I'd been inducted into the SAS. And I was like, this is this is the pinnacle of nursing. Like, we do more stuff here t we do anywhere else."

('John', 33, <1 year in practice, Interview 1)

Fear in the workplace : (Scoping review data)

" Fear of dirt was a good starting point for nurses"
Florence Nightingale, 1883

'A senior nurse said to me that I should be scared of being a nurse in ICU due to all the mistakes you can make' (Stewart, 2021, p. 5)

Fear in the workplace: Interview Data

“as I'm getting more experience and people coming through that are new, I kind of have to like not frighten them, but I think it's good to be a bit scared because you need to realise that these patients are very critically unwell and they could die and you've got that responsibility.”

Interview 3: ‘Clara’, 3 years in practice

Fear is not innate; it is performative and taught

Babies are genetically thought to be more aware of snakes, but fear of snakes is taught.

Asking for help: Scoping review data

Strength and weakness

Described as debt creating.

Described as being a burden on others

Asking for help :Interview data

"If it's like my patients unwell, I don't know what to do then. Yes, [help] is available. If it's for something a bit more quote unquote like bureaucratic or like paperwork based or something that's not. I don't want to say not important. But you know what I mean"

'Sarah', interview 2, 5 years in practice.

Conclusions.

- Early Career Nurses experience high workload because they are providing a service whilst learning and socialising into the role.
- The ‘Hero’ Narrative competes with the ‘Professional Practice’ narrative.
- Staff are socialised in training to be fearful, and this is transmitted down the hierarchy, “nurses eating their young”

What does this mean for practice!

Still a work in progress……

I will,

- Stop using my nursing horror stories to scare/frighten staff into compliance
- Challenge the hero/angel narrative, which I know many people always do,
- As a relatively senior member of staff, I will do what I can to be available for Early Career staff to ask for help and reflect on practice.

Early Career Critical Care Nurses' workload and patient safety study.

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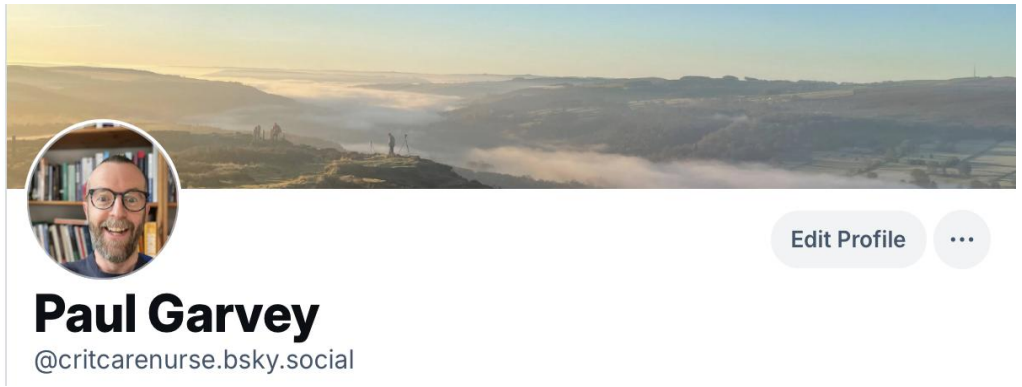
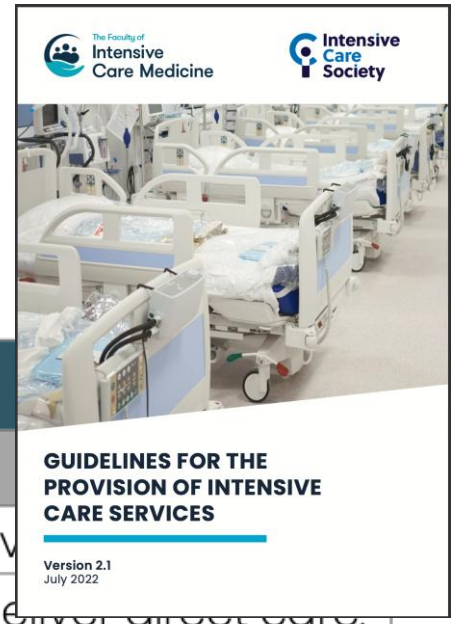
X: @IC_nurse



Blue Sky: @critcarenurse

Why Critical Care?



CHAPTER 2.2: REGISTERED NURSING STAFF	
Standards	
2.2.1	Level 3 patients must have a registered nurse/patient ratio of a minimum 1:1 to deliv
2.2.2	Level 2 patients must have a registered nurse/patient ratio of a minimum of 1:2 to de
2.2.3	Each designated critical care unit must have an identified lead nurse who has overall responsibility for the nursing elements of the service e.g. a Band 8a Matron.
2.2.4	There must be a supernumerary (i.e. not rostered to deliver direct patient care to a specific patient) senior registered nurse who provides the supervisory clinical coordinator role on duty 24/7 in critical care units. Units with fewer than six beds may consider having a supernumerary clinical coordinator to provide the supervisory role during peak activity periods, e.g. early shifts.
2.2.5	Units with greater than ten beds must have additional supernumerary senior registered nursing staff over and above the supervisory clinical coordinator to enable the delivery of safe care (i.e. 11-20 beds