

Practice Test 12

READING SUB-TEST – PART C

In this part of the test, there is one text about an aspect of healthcare.
Choose the answer (A, B, C, or D) that you think fits best according to the text.

Text – Night Shift Work and Healthcare Performance

Paragraph 1

Healthcare delivery operates continuously, requiring many professionals to work night or rotating shifts; however, such schedules disrupt the body's circadian rhythm, which regulates the natural sleep–wake cycle. As a result, healthcare workers are often required to remain alert and perform complex clinical tasks at times when their bodies are biologically predisposed to sleep. This misalignment is further compounded by the accumulation of sleep debt, which may arise from prolonged wakefulness prior to the first night shift and insufficient recovery sleep between consecutive shifts, particularly when daytime sleep is shorter and less restorative than normal nocturnal sleep.

Paragraph 2

Sleep deprivation associated with shift work does not arise from a single cause but rather from a combination of interacting factors, including irregular sleep patterns, difficulty achieving adequate rest during the day, and repeated disruption of circadian rhythms. Attempts to compensate for lost sleep are often only partially effective, and over time, cumulative sleep loss may develop. Although individual responses to sleep deprivation can vary, the overall effect is a progressive decline in alertness and cognitive functioning, particularly during extended periods of wakefulness.

Paragraph 3

Research has consistently demonstrated that sleep deprivation can impair several aspects of cognitive performance, including attention, reaction time, and decision-making ability. These impairments may not always be immediately apparent but can become more pronounced under conditions of sustained workload or during critical clinical situations. While some healthcare professionals may develop coping

strategies, these are unlikely to fully offset the physiological effects of fatigue, particularly when sleep deprivation is ongoing.

Paragraph 4

The implications of reduced cognitive performance in healthcare settings are significant. Errors in medication administration, delayed responses to patient deterioration, and lapses in concentration may occur more frequently when healthcare professionals are fatigued. Although safety systems and protocols are designed to minimise such risks, they cannot entirely compensate for reduced human performance, suggesting that fatigue remains an important and potentially under-recognised contributor to clinical error.

Paragraph 5

In addition to cognitive effects, shift work has been associated with a range of physical and psychological health outcomes. Evidence suggests links between irregular working hours and increased risk of cardiovascular disease, gastrointestinal disturbances, and mood disorders. However, these associations are not uniform across all individuals, and factors such as lifestyle, resilience, and existing health conditions may influence the extent to which shift work impacts overall well-being.

Paragraph 6

Various strategies have been proposed to reduce the negative effects of shift work, including modifications to shift scheduling, improvements in workplace lighting, and education on sleep hygiene. While these approaches may offer some benefit, their effectiveness is often inconsistent and may depend on how they are implemented, as well as on the specific context in which they are applied.

Paragraph 7

Short rest breaks during shifts have also been suggested as a practical means of reducing fatigue. Some evidence indicates that brief periods of rest may help improve alertness and performance, particularly during night shifts when fatigue is most pronounced. However, the effectiveness of such breaks may depend on factors such as their duration, timing, and feasibility within busy clinical environments, where continuous patient care may limit opportunities for rest.

Paragraph 8

Despite the availability of these strategies, their overall effectiveness remains uncertain. Outcomes may be influenced by a range of factors, including workload intensity, environmental conditions, and individual differences in tolerance to shift work. As a result, it is difficult to establish universally applicable guidelines, and interventions that are effective in one setting may not produce the same results in another.

Paragraph 9

Healthcare organisations are increasingly recognising the importance of addressing fatigue among staff, and in some regions, policies have been introduced to limit working hours and promote staff well-being. However, the extent to which these policies are implemented varies, and practical challenges may limit their impact in real-world settings.

Paragraph 10

A key challenge lies in balancing the need for continuous patient care with the health and safety of healthcare professionals. In many healthcare systems, staff shortages and resource constraints make it difficult to reduce shift length or frequency, even when the risks associated with fatigue are well understood, highlighting an ongoing tension between service demands and workforce well-being.

Paragraph 11

Overall, while shift work remains an essential component of healthcare delivery, its effects on performance, safety, and well-being require careful management. Addressing these challenges will likely require a combination of organisational policies, individual strategies, and continued research, as no single approach is sufficient to fully mitigate the risks associated with fatigue in healthcare settings.