Shifts, Sleep, and Safety

Dispatchers know it; managers know it. Shiftwork can be hazardous to a dispatcher’s health. Even hazardous to the public’s health.

Recently, a 911 operator working the night shift made headlines for falling asleep in the middle of an emergency call. Fortunately, no one was seriously injured as a result, but did you know that several modern disasters, including the Exxon Valdez and the Challenger shuttle, were a result of sleepiness on the job?*

The effects of shiftwork have been studied in every industrialized country with the same results. People who work at night get, on average, two to three hours less sleep than day workers. Not only that, but periods of sleep are often split or fragmented, resulting in poor quality sleep.

Why Hazardous?

But why is shiftwork hazardous? It has to do with the daily body clock that each of us has. That clock synchronizes your temperature, heart rate, blood pressure, and mental abilities. Shift work, and especially working nights, tends to disrupt the body clock. And while that clock may adjust to your schedule, the clock is not immediately reset. Bodily functions are disrupted.

Add to that the potential results of poor sleep: fatigue, tiredness, depression, irritability, appetite problems, digestive disorders, and family disharmony. In the short term, sleep deprivation can impact work efficiency; in the long term, it can lead to serious medical conditions. Hazardous? Yes, to the individual and to the public.

Safety Issues

Some of the sleep problems affect the employee’s personal life, but some relate directly to the job. Many agencies will fire a dispatcher found sleeping on the job, yet it is an inevitable consequence of sleep deprivation. (But don’t expect to use that as your defense if you’re caught napping.)

What can happen to a sleepy dispatcher who stays awake? Fatigue impacts hand-eye skills, judgment, decision-making. Fatigue can result in risky behavior, the quality of the work decreases, memory is affected, vigilance to duties decreases, and mood can change. Is this a person you want answering 911 calls and dispatching emergency resources? Is this person a hazard?

Agency Interests

It is in the best interests of the agency to help dispatchers get good quality sleep. How many agencies have you seen that include sleeping as a training module? How many consider personal sleeping time when duty schedules are prepared? How many make any effort to identify dispatchers with sleep problems. Of those, how often is guidance offered over discipline?

The agency can cause or contribute to employee sleep problems in a number of ways, including: stress, workload, mandatory overtime, and hold-overs (where a dispatcher is held beyond the end of the shift to fill minimum staffing). While schedules are for the purpose of meeting the agency’s predicted workload, many schedules can easily be described as anti-personnel. An example is the practice of scheduling “double backs” providing only eight hours between shifts.

The agency can provide guidance to dispatchers from the wealth of industrial knowledge on the subject of shiftwork sleeping. Supervisors can strive to identify dispatchers who exhibit sleep-related problems, and training can be provided. The matter should not be left as the sole problem of the employee.

Dispatcher Interests

From a dispatcher’s point of view, there are steps that can be taken with or without the agency – yet I think any agency would want to help.

While on-the-job, avoid tobacco and caffeine. You’ve heard it before, but it is likely to impact on your sleeping later.

Instead of coffee, drink water, plain or flavored, or with lemon. Avoid a heavy meal at work. Yes, it’s hard to eat fruit and cottage cheese while the aroma of fat and grease is in the air, but be tough. You’ll live longer and sleep better.

On the way home from work in the sunny morning, wear dark glasses so you can fool your body clock. If you go to bed when you get home, turn off the doorbell and the phone. I’ve heard suggestions of having a second line or a pager just for emergencies. If you eat before you go to bed, eat light: soup, toast, fruit.

A lot of dispatchers struggle through the graveyard shift until shift rotation, harming their bodies and damaging relationships with co-workers and family. If that’s you, go have a friendly chat with your medical professional. Explain what you do and why you’re seeking help. You should also keep your supervisor aware of what’s going on if you have any problems. “Aware” means putting it in writing.

Too many dispatchers try to keep sleep problems to themselves. They shouldn’t and help is available, but you have to ask.

New Topic: Promotions

Managers are often asked to serve on oral boards for other agencies, and I did that frequently. I recall one prospective supervisor who said, after a poor performance, that we should select her “because I need the extra money.”

Most of the dispatchers who read this column will eventually be in line for promotion. Someone like me will be on the other side of the table. What have you done to be deserving of consideration?

Can Coverage Change?

Here’s the picture. Your agency has a new radio system that provides portable coverage in the most populated areas. Okay so far?

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Then a large high-rise building is planned for the same area, and the Planning Department approves it. Should it concern you?

What if the building, when built, results in degraded portable coverage in the downtown area? Assume the city’s base station tower is on one side of the building, and your emergency responders are on the other. Concrete and steel can provide for an excellent and effective shield.

Is there an answer? Yes and no. In most cases, the answer is no. Planning departments typically issue or deny building permits based on regulations established by the elected representatives. There may be no provision for public safety’s review and determination of adverse impacts. The answer would be yes if such provisions existed. Rules and laws are seldom changed unless a case can be made for the change.

For readers in rural areas, a similar situation can occur. Assume that a remote, unpopulated area has little or no radio coverage. There hasn’t been any need for it. Then the planners approve a subdivision in that area. Emergency responders will not be able to communicate. Who will or should pay for upgrading the radio system? Or to ask a stickier question, what if the radio system cannot legally be upgraded?

Unfortunately, many things happen in communities that are unforeseen. It isn’t until the new building is occupied that we learn that coverage has been impaired. Not until responders go into and through the new building will it be known that radios don’t work in some, many, or any parts of it – including the three basement levels – and isn’t that where the problems will be?

Planning rules need to consider public safety communications, allowing for review and comment.

VoIP

VoIP stands for Voice over Internet Protocol. This means using your Internet connection for voice telephone services.

If you are a broadband Internet user, a phone adapter is added by the VoIP provider, and your phone is connected to that adapter. When calls are made, the voice is sent through the adapter, converted to a digital signal, then transmitted over the Internet. A number of companies are advertising on national television with monthly fees of $20 for unlimited calls throughout North America.

Why should you care? Because we developed one of the best Enhanced 911 systems in the world for wired phones, and are on the verge of making the same thing happen with wireless phones. Since many VoIP customers are trading their traditional phones for VoIP, how will calls to 911 be handled? Or will they? Will they get the wrong PSAP, or no PSAP, or a recording? Will you get calls from places you’ve never heard of?

Will the problems be ironed out, just like the wireless phones which may have number and location identification in my lifetime? Perhaps. A lot of good people are working on it, but I thought you’d want to know.

Isn’t technology great?

Last Thought

So what if you do get a call from Timbuktu? What is your protocol? Do you have one?

So the caller wants to report a fire, or a non-breather, or a robbery-in-progress. How do you handle it?

Send me an e-mail with your policy, and I’ll pass it along to our readers in a future column.

Questions

*Courtesy of ABC7 Chicago, 9-16-04.

The information provided in this column is not intended to be medical advice. If you suspect that you have a sleep disorder, you should seek care from a qualified professional. The opinions expressed here are those of the author unless otherwise stated.

What topics would you like discussed here? E-mail suggestions, comments and questions to burton@alanburton.us. Tell us if you want your name used.

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