



RESEARCH TRENDS ON TIME MANAGEMENT AND WORKLOAD IN NURSING: A BIBLIOMETRIC ANALYSIS

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ABSTRACT

Time and workload management are crucial issues in nursing practice because they directly relate to time pressure, workflow efficiency, and nurses' psychological well-being. However, the rapid growth of publications has not been accompanied by a comprehensive scientific mapping to understand the global knowledge landscape on this topic. Mapping publication performance, distribution of country contributions, and dynamics of research themes related to time management and workload in nursing through bibliometric analysis. A bibliometric study was conducted using the Scopus database (Elsevier) covering the last 10 years. The search strategy combined keywords related to time management/time pressure/workflow management, workload/work demands/work intensity, and nursing/nurse. The initial search yielded 562 documents, which were then narrowed down to 199 publications (in the last 10 years), 173 publications (in the fields of Medicine and Nursing), and finally 164 documents (articles and reviews) for analysis. Descriptive analysis was used for annual publication trends (2016–2026) and country contributions, while keyword co-occurrence mapping, overlay maps, and density maps were performed using VOSviewer version 1.6.18. Co-occurrence mapping placed population/indexation terms (e.g., human/humans, adult, male, aged, article) as the central node, with prominent substantive themes on workload and nurse. Key clusters were identified that reflect: (1) work stress and mental health (e.g., stress/job stress, mental health/mental stress, burnout, job satisfaction), (2) management/operations and work processes (e.g., organization and management, workflow, task performance, time management/time pressure), and (3) qualitative approaches and capacity building (e.g., qualitative research, interview, content analysis, nursing education, skills, leadership). The overlay map indicates a strengthening of newer themes on time pressure, time management, procedures, and qualitative approaches, while the density map highlights hotspots on the relationship between nurse workload and stress/burnout and organizational factors. Research on time management and workload in nursing shows increasing scientific attention and is still dominated by contributions from countries with established research ecosystems. Key themes center on the relationship between nurse workload and stress/burnout, as well as organizational factors and work processes, with recent signs of increased focus on time pressure and qualitative approaches to understanding work dynamics. Future research should strengthen the standardization of workload definitions and measurements, expand geographic coverage, and evaluate organization-based interventions that can reduce workload and improve nurse well-being and service quality.

Keywords: burnout; nursing; time management; workload

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INTRODUCTION

Nursing is a health profession with a high and complex workload, encompassing clinical, administrative, and educational responsibilities, as well as interprofessional coordination within the healthcare system (Murphy et al., 2016). In the increasingly dynamic context of healthcare, nurses face time constraints, increasing workloads, and ever-increasing demands for quality care and patient safety (Grinberg & Sela, 2022). These conditions make time and workload management crucial issues in modern nursing practice.

Time management in nursing refers to a nurse's ability to effectively plan, organize, and prioritize various nursing activities within a limited time (Taghinezhad et al., 2022). Meanwhile, nursing workload encompasses both quantitative and qualitative dimensions, including the number of

patients, the complexity of care, emotional demands, and the administrative burden nurses must bear during working hours (Kim & Chae, 2022; Thalaya & Puritat, 2022). An imbalance between work demands and available time can lead to fatigue, job stress, decreased performance, and an increased risk of medical errors.

Various studies have shown that ineffective time management and excessive workload are closely associated with burnout, low job satisfaction, high nurse turnover, and decreased quality of nursing care and patient safety (Huang et al., 2023). Furthermore, time pressure and high workloads also impact nurses' psychological well-being, including increased stress, anxiety, and mental health disorders (Lapage et al., 2023; Ramón Arbués et al., 2023). Therefore, the issues of time and workload management are not only relevant to individual nurses but also have broad implications for the healthcare system as a whole.

With increasing attention to the well-being of nursing staff and the quality of healthcare services, the number of scientific publications discussing time and workload management in nursing continues to increase (Vincent et al., 2022). These studies cover various aspects, such as workload measurement, time management strategies, the use of technology and information systems, nursing assignment models, and their impact on performance, patient safety, and organizational outcomes (Lapage et al., 2023). However, this rapid growth in the literature has not been accompanied by a comprehensive scientific mapping to understand global research patterns, trends, and directions (Okstoria, 2022).

Most available studies still focus on empirical studies in specific settings or systematic reviews of specific interventions, without providing a comprehensive overview of the research landscape on time and workload management in nursing (Bragard et al., 2015). The absence of bibliometric analysis limits the ability to identify temporal trends, author and institutional contributions, international collaboration networks, and dominant and underexplored research themes (Lavander et al., 2016; Waterfield & Barnason, 2022). This situation has the potential to hinder the development of a more strategic and evidence-based nursing research and policy agenda.

Bibliometric analysis is a relevant and robust methodological approach to address this gap (Kokol & Blažun Vošner, 2019; Zupic & Čater, 2014). This method allows for quantitative mapping of scientific publication developments, analysis of collaborative networks between authors, institutions, and countries, and identification of keywords and emerging research theme clusters within a scientific field. Thus, bibliometric analysis can provide a systematic and comprehensive understanding of the dynamics of research on time management and workload in nursing.

Therefore, this study aims to conduct a bibliometric analysis of research on time and workload management in nursing. The results are expected to provide a comprehensive overview of global research trends and patterns, identify underexplored research areas, and serve as a basis for researchers, nursing practitioners, and policymakers in designing more effective time and workload management strategies to improve nurse well-being and the quality of healthcare services in the future.

METHOD

Research Design

This study uses bibliometric analysis to examine research trends on time management and workload in nursing. Bibliometric analysis is a quantitative approach used to evaluate scientific literature by measuring publication patterns, citations, author collaboration networks, and conceptual linkages based on keywords (Donthu et al., 2021). This approach allows for mapping the structure of knowledge, identifying dominant research themes, and analyzing global research developments and

directions in the field of nursing. Through bibliometric analysis, the dynamics of research related to time management and workload in nursing can be systematically and comprehensively understood.

Data Sources and Search Strategy

A literature search was conducted using the Scopus database (Elsevier) due to its extensive coverage of reputable scientific publications and its compatibility with bibliometric analysis software such as VOSviewer. The search strategy was designed by combining keywords representing the concepts of time management, workload, and nursing, using the following Boolean operators:

((TITLE-ABS-KEY ("time management") OR TITLE-ABS-KEY ("time allocation") OR TITLE-ABS-KEY ("time use") OR TITLE-ABS-KEY ("time pressure") OR TITLE-ABS-KEY ("workflow management"))) AND ((TITLE-ABS-KEY (workload) OR TITLE-ABS-KEY ("work load") OR TITLE-ABS-KEY ("nursing workload") OR TITLE-ABS-KEY ("work intensity") OR TITLE-ABS-KEY ("work demands") OR TITLE-ABS-KEY ("task load"))) AND ((TITLE-ABS-KEY (nursing) OR TITLE-ABS-KEY (nurse*) OR TITLE-ABS-KEY ("nursing staff") OR TITLE-ABS-KEY ("clinical nurse*") OR TITLE-ABS-KEY ("registered nurse*"))))

The initial search yielded 562 documents (Figure 1). The timeframe was then limited to the last 10 years, resulting in 199 publications. The articles were then restricted to the fields of Medicine and Nursing, resulting in 173 publications. Furthermore, only articles and reviews were included, resulting in a final number of 164 publications analyzed. All documents meeting these criteria were included in the bibliometric analysis. No language restrictions were applied to the search.

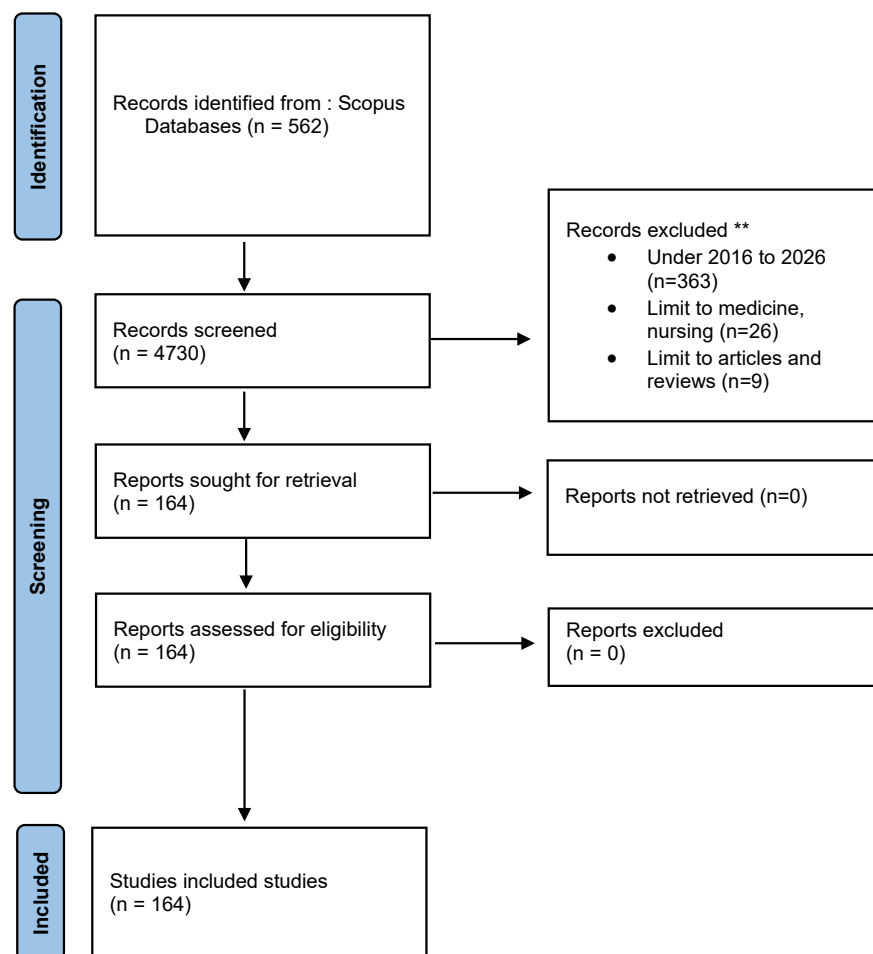


Figure 1. PRISMA Flow Diagram

Inclusion and Exclusion Criteria

Inclusion and exclusion criteria were established using the Population, Concept, Context (PCC) framework as follows: Population: Nurses and nursing staff working in various health care settings. Concept: Time and workload management, including work time management, task allocation, work intensity, and job demands. Context: Nursing practice in the context of health care, including hospitals, community services, and other health facilities. Documents that did not focus on the nursing profession, did not address time management or workload, were not articles or reviews, or were not relevant to the context of nursing practice were excluded from the analysis.

Data Extraction and Coding

The extracted bibliographic data included article title, author name, year of publication, journal name, institutional affiliation, author country of origin, author keywords, index keywords, and number of citations. Additionally, additional bibliometric indicators were recorded to support the analysis of scientific productivity and impact. The data extraction process was conducted independently by two researchers to ensure data consistency and reliability. Differences in the extraction process were resolved through discussion until consensus was reached.

Bibliometric and Network Analysis

Bibliometric analysis was conducted to identify annual publication trends, article growth, and research distribution based on the most productive authors, institutions, countries, and journals. Scientific collaboration patterns were analyzed through co-authorship networks between authors and institutions. Furthermore, keyword co-occurrence analysis was conducted to identify key research theme clusters and emerging topics in the field of nursing time management and workload (Bukar et al., 2023; Herrera-Franco et al., 2021). Bibliometric network visualization was performed using VOSviewer (version 1.6.18), while initial descriptive analysis was conducted using Microsoft Excel 2021.

Statistical Analysis

Descriptive statistics were used to summarize publication characteristics and bibliometric indicators, presented as frequencies, percentages, and temporal trends. This analysis aims to provide an overview of research developments and scientific contributions in the field of nursing time and workload management.

Visualization

The resulting visualizations include annual publication trend maps, author and institutional collaboration networks, cross-country collaboration maps, keyword co-occurrence clusters, and geographic distribution of publications. These visualizations aim to facilitate interpretation of the bibliometric analysis results and highlight the direction of research developments on time management and workload in nursing globally.

RESULT

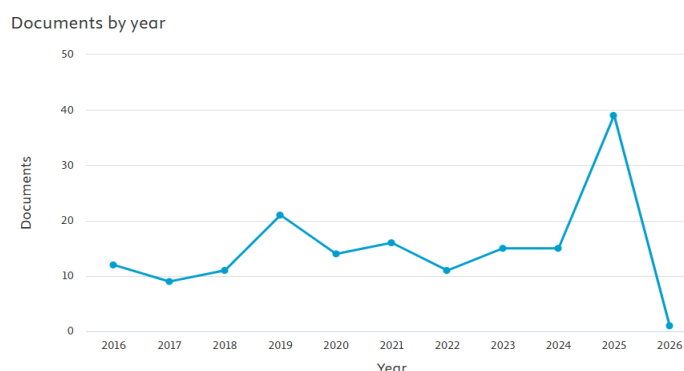


Figure 2. Documents by year (2016–2026)

Figure 2 shows the distribution of the number of documents per year between 2016 and 2026, with a total of 164 documents. At the beginning of the period, the number of documents decreased from 12 documents (2016) to 9 (2017), then increased again in 2018 (11) and reached a more pronounced increase in 2019 (21). After that, document production decreased in 2020 (14), then increased again in 2021 (16) before decreasing again in 2022 (11). The following period showed recovery and a stable trend in 2023 (15) and 2024 (15). The peak number of documents occurred in 2025 (39), which was the highest value throughout the analysis period. Meanwhile, only 1 document was recorded in 2026, which is very likely temporary because the current year has not yet finished and the data indexing/updating process is not yet fully complete. Overall, the pattern shows moderate fluctuations in 2016–2024, followed by a sharp spike in 2025.

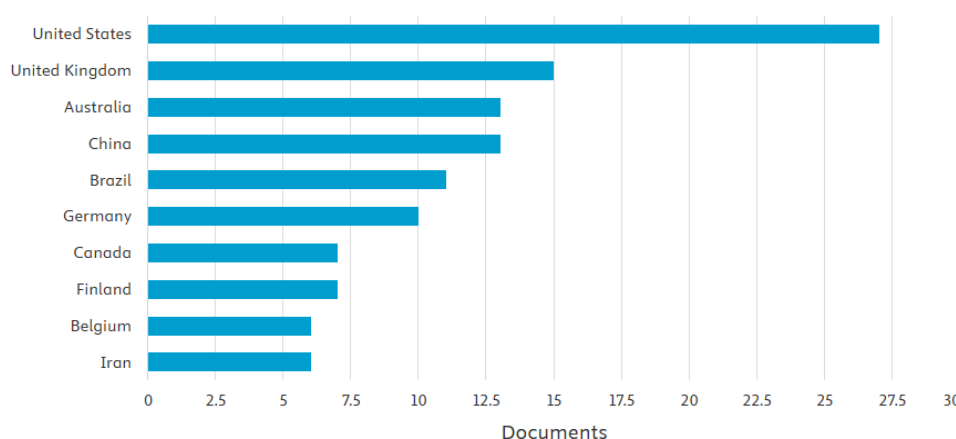


Figure 3. Documents by country or region

Figure 3 displays the distribution of the number of documents by country/region in the analyzed corpus (164 documents in total). The United States was the largest contributor with 27 documents, followed by the United Kingdom (15). Next came contributions from Australia and China, each with 13 documents, followed by Brazil (11) and Germany (10). At a lower level of contribution, Canada and Finland each recorded 7 documents, while Belgium and Iran each contributed 6 documents. Overall, this pattern shows the strongest concentration of publications in the United States, with intermediate contributions from the United Kingdom, Australia, and China, and a relatively smaller distribution of additional publications from other countries.

Table 1.
The 10 most cited publications in the dataset

No	Title	Author and Year	TC
1	Burnout in nursing: A theoretical review	(Dall’Ora et al., 2020)	747
2	Workplace-based organizational interventions promoting mental health and happiness among healthcare workers: A realistic review	(Gray et al., 2019)	217
3	Prevalence and factors associated with burnout among frontline primary health care providers in low- and middle-income countries: A systematic review	(Dugani et al., 2018)	167
4	Covid-19 effects on the workload of Iranian healthcare workers	(Shoja et al., 2020)	130
5	Resilience of primary healthcare professionals working in challenging environments: A focus group study	(Matheson et al., 2016)	99
6	A systematic review of the impact of health information technology on nurses' time	(Moore et al., 2020)	80
7	The association between occupational stress and psychosomatic wellbeing among Chinese nurses: A cross-sectional survey	(Gu et al., 2019)	80
8	Job stress and burnout: A comparative study of senior and head nurses in China	(Luan et al., 2017)	79
9	Medical Taylorism	(Hartzband & Groopman, 2016)	77
10	Decreasing the Hours That Anesthesiologists and Nurse Anesthetists Work Late by Making Decisions to Reduce the Hours of Over-Utilized Operating Room Time	(Dexter et al., 2016)	72

TC = total citations in Scopus based on the list view you submitted.

Table 1 shows that the most highly cited publications are dominated by the themes of burnout, occupational stress, and organizational interventions/approaches for healthcare workers. The most influential article is a theoretical review of burnout in nurses (Dall'Ora et al., 2020), with 747 citations, far surpassing all other publications. Next in the ranking are a realistic review of organizational interventions for healthcare worker mental health and well-being (Gray et al., 2019), and a systematic review of burnout in primary care providers in low- and middle-income countries (Dugani et al., 2018). The remaining topics revolve around the impact of COVID-19 on workload, healthcare worker resilience, the influence of health information technology on nurses' working hours, and the relationship between occupational stress and psychosocial well-being, confirming the literature's focus on healthcare worker workload and mental health.

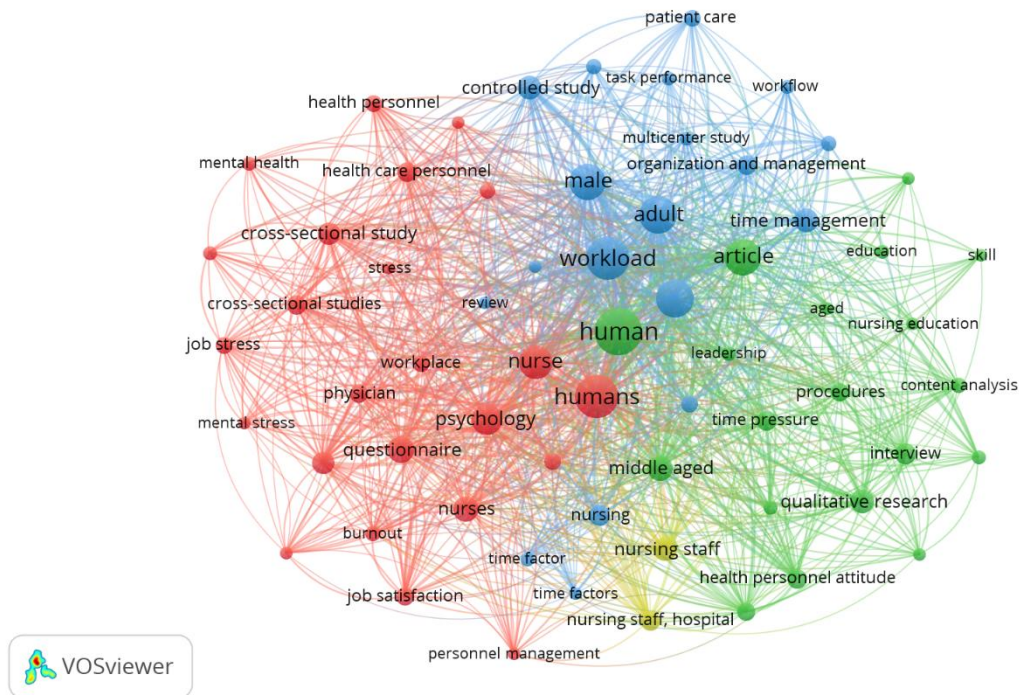


Figure 4. Keyword co-occurrence network (VOSviewer)

Figure 4 displays a map of the interrelationships between keywords in the corpus analyzed using VOSviewer, where node size represents the frequency of keyword occurrence and connecting lines indicate the strength of co-occurrence relationships. The most central nodes are dominated by general/population terms such as human/humans, adult, male, as well as index terms such as article, which serve as cross-topic links. Furthermore, prominent thematic terms at the center of the network are workload and nurse, indicating the primary focus of the literature on nursing workload. Three main clusters are visible: the red cluster emphasizes issues of work stress and mental health in the context of healthcare (e.g., job stress, stress, mental stress/mental health, burnout, job satisfaction, questionnaire, cross-sectional study), the blue cluster represents aspects of workload and service management/operations (e.g., workload, organization and management, workflow, task performance, controlled study, patient care), while the green cluster emphasizes qualitative approaches and education/competence (e.g., qualitative research, interview, nursing education, education, skill, leadership, procedures, content analysis, time pressure).

Figure 6 displays a VOSviewer density map, where the bright yellow area indicates keywords with the highest frequency of occurrence and co-occurrence, while the green-blue area reflects lower intensity. The main hotspot appears to be centered on generic and highly central terms such as human/humans, article, and population characteristics (adult, male), which serve as cross-theme links. Around this center, medium-high density areas emerge, confirming the literature's focus on workload and nursing issues, demonstrated by the keywords workload and nurse, which are closely linked to psychological aspects and measurements such as psychology and questionnaire. Other prominent density areas describe the work pressures and well-being of healthcare workers, such as job stress/stress, mental health/mental stress, burnout, and job satisfaction, as well as organizational contexts and work processes such as organization and management, workflow, time management, and time pressure. Meanwhile, more peripheral but still relevant themes include methodological approaches and capacity building, such as qualitative research, interviews, content analysis, education/nursing education, skills, and leadership, as well as service context terms (patient care, health personnel, nursing staff, controlled study). Overall, the density pattern indicates that the research corpus focuses on the relationship between nurse workload, stress/psychological outcomes, and organizational-procedural factors in the healthcare environment.

DISCUSSION

The corpus of research on nurse workload demonstrates that “workload” is not simply understood as the number of tasks, but as a systemic mechanism linking work design, service governance, and the psychological well-being of healthcare workers. In many service contexts, workload becomes a “pressure point” because it influences daily work processes (workflow, role allocation, time pressure) while also shaping individual responses (stress, emotional exhaustion, job satisfaction) (Mauro et al., 2025). In other words, workload acts as a bridge variable: it connects organizational and mental health issues within a single service ecosystem (Puolitaival et al., 2022).

A reading of the keyword map shows that the study landscape is still strongly supported by generic population terms (e.g., human/humans, adult/male/aged) and indexing terms (article). This is conceptually important: the dominance of generic terms often indicates that the research field is still operating within a descriptive-epidemiological framework, where the primary focus is on mapping relationships between variables across broad populations, rather than on a more nuanced conceptualization of the types of workload (physical, cognitive, emotional), the sources of demands (administrative, clinical, technological), or the causal mechanisms that link workload to burnout (Vincent et al., 2022). Consequently, workload often appears as a “big label” that unites many phenomena, but its operational definition can vary and risk reducing comparability across studies (Yu et al., 2023).

Substantively, the close relationship between the keywords workload–stress–burnout strengthens the argument that many studies still position burnout as the primary outcome, while system determinants (e.g., shift arrangements, staffing, documentation load, case complexity) are often mapped as drivers. This aligns with theoretical frameworks such as Job Demands–Resources (JD-R): increasing work demands without resource buffers lead to burnout and decreased motivation (Mortelmans et al., 2023). However, the dominance of survey approaches (as evident from the keywords questionnaire and cross-sectional design) implies limitations: a statistically strong relationship does not automatically answer more important questions for practice, namely which interventions are most effective, at which unit level (individual, team, organization), and with what consequences for service quality (Adeboye et al., 2025; Lapage et al., 2023).

The strong themes of organization (workflow, organization and management, time pressure/time management) signal that the field is shifting from “who experiences burnout” to “how work systems generate workload.” This is a constructive development, as workload in healthcare is often not the result of low individual resilience, but rather the result of process engineering: inefficient

workflows, task fragmentation, documentation demands, and time-consuming cross-professional coordination (Wright et al., 2024). The increased focus on time pressure and procedures can be read as an attempt to explain concrete bottlenecks in the field—which are more easily translated into policy (e.g., improved staffing, simplified documentation, redistribution of tasks, support for technology that actually saves time) (Koch et al., 2024).

The emergence and strengthening of qualitative approaches (interviews, qualitative research, content analysis) is also relevant for deepening issues often "missing" in surveys: the meaning of workload for nurses, coping strategies, team dynamics, leadership, and the organizational cultural context that shapes the experience of stress (Rodríguez-García et al., 2024). This approach is crucial for answering mechanistic questions: when does workload become distress, why some units are more vulnerable, and what factors contribute to the success or failure of interventions (Koch et al., 2024). Thus, the strengthening qualitative signal can be understood as a methodological response to the field's needs: it is not enough to simply measure; the field needs to understand processes (Paque et al., 2024).

Future implications include encouraging a more "actionable" research agenda: (1) clarifying the workload taxonomy (physical–cognitive–emotional–administrative) and linking it to specific outcomes; (2) increasing longitudinal studies and evaluations of organizational interventions (not just individual training), including measuring the impact on patient safety and quality of care; (3) integrating dimensions of leadership, safety culture, and team support as protective resources that balance demands; and (4) expanding evidence across health system contexts so that recommendations are not tied to a single service model. In this direction, the field of workload–burnout does not stop at diagnosing the problem, but contributes directly to the design of healthier work and safer services.

CONCLUSION

This bibliometric analysis shows that research on workload, job stress, and burnout in nurses has experienced a strengthening of scientific attention during the analysis period, with publication contributions still tending to be concentrated in countries with established research ecosystems. VOSviewer mapping shows that the keyword landscape is still dominated by general population/indexation terms (e.g., human/humans, adult, male, aged, article), but the most prominent thematic nodes emphasize workload and nurse as the main axis connecting occupational mental health themes (e.g., stress, job stress, burnout, job satisfaction) with organizational factors and work processes (e.g., organization and management, workflow, time pressure/time management). Practically, these findings confirm that burnout management is not solely individual-based, but rather requires targeted work system improvements through streamlining service flows, strengthening time/time pressure management, leadership support, and developing nursing capacity and education. Future research should expand geographic coverage, strengthen prospective/longitudinal designs and evaluations of organizational interventions, and standardize the definition and measurement of workload to produce more comparable and robust evidence to support healthcare worker well-being policies and service quality.

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