

# Factors affecting individual task prioritisation in a workplace setting

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## Aims

This review aimed to identify the factors influencing task prioritisation in a workplace setting using existing literature both from healthcare and other professions.

## Methods

The following databases were searched for relevant studies: British Nursing Index, Cumulative Index of Nursing and Allied Health Literature, Embase, MEDLINE and PsycINFO. The literature search used the following terms (including British English and American English spellings) 'task prioritisation' and 'task management'. The reference lists of relevant articles and review papers were also searched to identify further studies and a Google Scholar search was undertaken. Data were extracted from the studies using a pro forma which included author, title and date of publication; study population; study objectives; study intervention and study outcome.

## Results

Twenty relevant papers were identified from a wide range of fields including management, aviation and healthcare. Task prioritisation ability differed across individuals and was associated with personality and experience. Tasks were generally prioritised based on length, urgency, importance, procedure and reward. The context and source of the task influenced prioritisation in a healthcare setting. Task notification intrusiveness improved task performance. In high-stress scenarios, people were more likely to choose shorter tasks with more immediate rewards. With practise, people become more efficient at task prioritisation. No studies studied task prioritisation involving multiple locations.

## Conclusion

Most studies relating to task prioritisation were theoretical and outside the healthcare setting hence real world application is

unclear. The principles discovered include individual, task and non-task related factors. Practical applications include undergraduate and postgraduate education, personalised task management software and intrusive notifications. Additional research is needed to assess the effects of such interventions in a healthcare setting.

## Conflict of interest statement

None declared.

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