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Figures show that the health sector is facing a dramatic shortage of care in the coming years and decades, which endangers the well-being of people. In order to recruit new staff and retain existing staff, improvements in working conditions are necessary, especially in nursing.

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Figures show that the health sector is facing a dramatic shortage of care in the coming years and decades, which endangers the well-being of people. In order to recruit new staff and retain existing staff, improvements in working conditions are necessary, especially in nursing. Important keywords here are higher pay, less workload, more recognition and opportunities for further training and development. However, we also have to look at the other framework conditions in the health sector. And this includes finally taking advantage of the great opportunities that digital technologies offer us in terms of relieving the burden on nursing staff (M. Burhart, PwC 2022 and own survey, maturity assessment of Swiss nursing care, 2021).

With a view to Switzerland

The report published by the Swiss Health Observatory Obsan calculates – in a medium scenario – that there will be a shortage of around 20,000 nurses at all levels of training by 2029. The increased training numbers are thus far from sufficient to close the gap. A long-term study by the ZHAW Institute of Health Sciences as part of the Competence Network Health Workforce concludes: with better working conditions and career opportunities, nurses can be kept in the profession longer. Nine out of ten qualified nurses are willing to work in nursing in the next ten years under better working conditions. More than half of the 600 nurses surveyed said they often felt tired and overworked at work. Around a third said that a full-time job would be too physically and mentally demanding. According to René Schaffert, project manager of the aforementioned longitudinal study 2011 – 2019, the compatibility of family and work and having time for one's private life are the two most important points that need to be reflected above all in the organisation of duty rosters. What is needed is more regularity and consideration of individual duty roster wishes. In reality, these expectations can often not be fulfilled. This discrepancy correlates with professional satisfaction and the thought of leaving the profession. Tiemessen and his team in an Innosuisse project on duty roster design for nurses with the market leader Polypoint and the Cantonal Hospital Aarau as partners are looking for a solution for intelligent and participative duty roster design as an answer to the nursing shortage. The software solution developed combines the needs of the employees with duty roster proposals for a more attractive duty roster in shift and weekend duty. The aim is to relieve nurses by means of accurate and fair staffing and thereby promote retention in the profession (D. Last et al., East/ Research, 2021). A discrepancy was also found in the mean-weighted salary and the opportunities to exploit one's own abilities in the job. Recognition through pay and support from management, among other things, are named as important factors for the attractiveness of the nursing profession. A higher visibility of managers and open and transparent communication are desired (T. Hänni, 2021).

With a view to Germany

With a view to Germany
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The Covid19 pandemic has shown that many hospitals are already working at the limit of their capacity. Less than one third of doctors and nurses in senior positions in Germany plan to stay in their current profession until retirement (M. Burkhart et al., PwC, 2022).

Figure 1: Planned duration/ remaining in nursing care profession – Source: Fachkräftemangel im Gesundheitswesen: Wenn die Pflege selbst zum Pflegefall wird, M. Burkhart et. al., PwC Studie 2022.

During the Covid19 pandemic, the public image of nursing professions has improved considerably, because it has become clear how systemically relevant nursing professionals are and what they achieve on a daily basis. At the same time, however, it is noticeable that the internal view is comparatively negative, as the Civey survey commissioned by PwC shows. The profession is considered to be very physically and mentally demanding and stressful. Only 28.4 percent agree with the statement that one can help people in the occupational field. For nurses, who have chosen the profession with a high intrinsic motivation and mostly out of conviction, this is obviously no longer true (M. Burkhart et al. PwC, 2022). A lack of recognition of nursing is also reflected in the fact that nursing activities are not relevant, or only to a subordinate extent, in billing.

The initial idealism is certainly present, but it is apparently lost with professional practice and must give way to a more realistic image of nursing, which is characterised by poor working conditions. The clear, sustainable and measurable improvement of working conditions should contribute to an increase in the length of stay in the profession and to a higher attractiveness as an employer. Genuine appreciation is not shown in short-term applause in crisis situations, but is tied to the realisation of the contribution professional care makes to the health and well-being of people in our society and what investments are

needed to raise this treasure (B. Klapper, PwC, 2022). The New Work approach with participative and/or holocratic approach enables more participation and recognition. New Work is accompanied by changes that enable people to realise themselves and at the same time develop their potential. These changes are often described by buzzwords such as: Work-life integration, flexibilisation of work, agility or meaningful work. It is already clear that New Work should by no means be limited to the digitalisation of working environments (T. Dauth, S. Kilz, IMW 2021). Rather, New Work describes a comprehensive transformation of work delivery, working methods, work organisation and company management (J. Hofmann et al, 2019). The shortage of skilled workers in this sector will become even more acute in the coming years due to demographic change and the increasing number of old, multimorbid people. Thus, a comprehensive transformation in work organisation and management in care is of enormous importance (T. Dauth, S. Kilz, IMW, 2021). The dimensions described by the Fraunhofer Centre for International Management and Knowledge Economy IMW are: Individuality, Leadership, Meaningfulness, Flexibility and Compensation (Work-Life Balance) and Technology/ Digitalisation. Proposals for implementation can be found below.

Implementation of New Work criteria and holocracy



Figure 2: Implementation of New Work criteria in nursing care – Source: T. Dauth, S. Kilz, IMW, 2021

Promising implementation

- Feedback and error culture, constructive feedback supports optimisation processes and creates a good basis of trust for cooperation when dealing with each other in an

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- Acceptance and training as enablers for change, managers are behind the change, employees are empowered and involved. Digital skills must be learned.
- Regular employee discussions on motivation, workload and further development.
- Needs analysis: A software-supported analysis of a working day can be used to identify peak workloads and to develop new working hours and shift schedules (considering the required qualifications).
- Digitisation of processes, technical tools used for work organisation in care. Automated processes can, among other things, create synergies in data collection and optimise processes e.g. duty scheduling (T. Dauth, S. Kilz, IMW, 2021).
- Higher and performance-oriented wages, e.g. allowances for stand-in duty
- More family-friendly working hours/models.
- Attracting and retaining care workers with appropriate positioning and image of the company in the labour market.
- Improve education, training and access, develop necessary data skills.
- Enable flexible career paths.
- Reduce bureaucracy; digital care documentation can save up to 60 minutes per 8-hour shift for the actual person-to-person activity (own survey on digital documentation, 2021).

What can hospitals and other healthcare facilities do to retain their workforce in the long term?

- Better pay and performance compensation
- Reduction of mental stress
- Reducing physical stress with adequate staffing levels
- Better working hours/models
- Career prospects, continuous and better further training opportunities, also at university level



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Digital transformation can contribute to relieving the burden on staff, especially in administrative activities. Digitalisation in healthcare and nursing aims to improve quality and reduce costs at the same time. Decentralised multiple data collection is to be replaced by centralised and secure access by health professionals (A. Hitz, 2022). This will open up the following potentials:

- General relief of the daily workload
- More intensive communication within the staff
- Improved patient safety
- Higher quality of care
- Better transparency for payers: this can help them to pay more for care services and to bear the costs in the transformation phase to digitalisation.

Incentives must be set for interdepartmental and standardised digitisation. Remuneration systems that are oriented to the quality of medical and nursing services instead of only to volume and flat rates can be created. The willingness and insight that digitisation projects take place across professions along patient paths and not exclusively within organisations must be forced (J.-N. Kramer 2022). Digitalisation in nursing under the term Nursing 4.0 offers technologies such as big data, robotics or artificial intelligence to relieve the burden of everyday nursing and improve care. Used correctly, they enable new diagnostic and therapeutic options, improve communication and facilitate the evaluation of data. The digital transformation of the healthcare system urgently needs to be advanced (M. Burkhart, PwC, 2022). This also includes better cross-sector networking with other service providers. Proprietary isolated solutions of current care applications need a uniform standard with modular inclusion and must be regularly checked for quality. The level of digitalisation in the Swiss healthcare industry is 44 percent. Only one third of Swiss nursing homes and Spitex (outpatient care) have a digitalisation strategy (B. Vogel et al., CSS im Dialog, Digitalisierung im Gesundheitswesen, Landkarte, 2022). In an international comparison, Switzerland is still at the back of the pack when it comes to digitalisation in the healthcare sector. Fax transmissions of occasionally poorly legible medication prescriptions, a lot of paper and redundant records are still part of everyday life. A central platform for storing and sharing data is lacking (A. Hitz, 2022). Risks: There is a risk that individual processes are digitised but not integrated into the overall digital strategy. Then a bad process easily becomes a bad digital process that does not relieve staff (M. Burkhart et al., PwC, 2022).



The fluctuation costs with the costs of personnel recruitment and induction phases far exceed the costs of in-house promotion of better working conditions for personnel retention (own master's thesis, 2011.) The competition for skilled workers in the health sector will intensify. In order for healthcare companies to be able to position themselves well in the future, it will become more important, according to the PwC study, to invest in their personnel management and to build up a positive employer brand (M. Burkhart et al., PwC, 2022).

There are three central fields of action:

1. Recruiting new skilled workers
2. Retaining the existing workforce
3. Training of junior staff

Good working conditions include career prospects, flexible and family-friendly working hours (e.g. through software-supported innovative working models), a performance-related salary and more recognition. Therefore, in the future, employees will give preference to companies that offer more attractive framework conditions. In this context, it is also conceivable to redistribute tasks among the individual professions. Nurses could be relieved of tasks that less qualified staff can perform and, for example, as Advance Practice Nurse APN or Nursing Expert:in (BScN/ MScN), take over activities that are currently still in the hands of the medical staff. One example is the current projects of the Hirslanden Group, Spitex Zurich and the ZHAW on home follow-up and care to avoid (re-)hospitalisation (#ehealthcarecircle June 2022).

The increasing bureaucratic burden allows less and less time for the actual person-to-person care process. Here, digitalisation can and must bring relief. An increase in the attractiveness of the profession is thereby realisable. Professionalisation in nursing IT and nursing management at university level are essential prerequisites.

The bureaucratic burden must be reduced. All existing and planned documentation and verification obligations must therefore be critically reviewed and reduced to the necessary minimum (<https://www.dkgev.de/dkg/positionen>, 2022).



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Als multikulturell geprägtes Stadtkind sowie Deutsch-Schweizer Doppelbürger bleibe ich weltoffen. Nursing Expert mit über 25 Jahren operative Erfahrung im Gesundheitswesen u.a. als RN, Pflegeexperte Nachdiplom NF, RS/ RA, PhD. in Ökonomie und Management, Master of Science in Corporate Development, Bachelor of Arts in Gesundheits- und Sozialwirtschaft. Master in General Management. Meinem Motto bleibe ich treu: "Wir arbeiten mit Menschen für Menschen." Excellence im Gesundheitswesen, Digitalisierung und integrierte Versorgung, setzen nicht nur die Leistungsqualität in den Fokus. Redundante Prozesse können vermieden werden und sparen dadurch Kosten. Meine Erfahrungen am Patienten und akademische Qualifikationen in der Gesundheitswirtschaft erlauben mir praxisrelevante und dadurch tragfähige Lösungen zu generieren. Ziel => bestmögliche Pflege- und Behandlungsqualität. Weitere Beiträge: Buchveröffentlichung: <https://www.grin.com/login/#document/1190309> Age of big data - increasing demands in swiss telemedical advices Open Access, Volume 9 | Issue 5 | 09 · 20. Mai 2021, Nursing Congress 2021, 4th Global Conference



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