



**SFIVET**

SWISS FEDERAL INSTITUTE FOR  
VOCATIONAL EDUCATION AND  
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*Swiss excellence in vocational  
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HORIZONTAL MOBILITY OF  
HEALTHCARE ASSISTANTS AND REGISTERED NURSES IN THE  
SWISS HEALTHCARE SYSTEM

**Miriam Hänni, Miriam Grønning, Ines Trede**

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# Background: two new professions with general orientation

- Education reform of health professions early 2000s: → two new very popular occupations: registered nurses (RNs; BSc or diploma of HE) and healthcare assistants (HCA)
- General orientation of both occupations enables graduates to work in all healthcare segments (long-term, acute, emergency care etc.)
  - secure flexibility when staffing needs change, facilitate individual mobility between segments
- Relevance: skill shortage of registered nurses, especially in long-term care. Horizontal mobility as one remedy against skill shortages?
  - Little is known about such individual mobility between segments (= horizontal mobility)

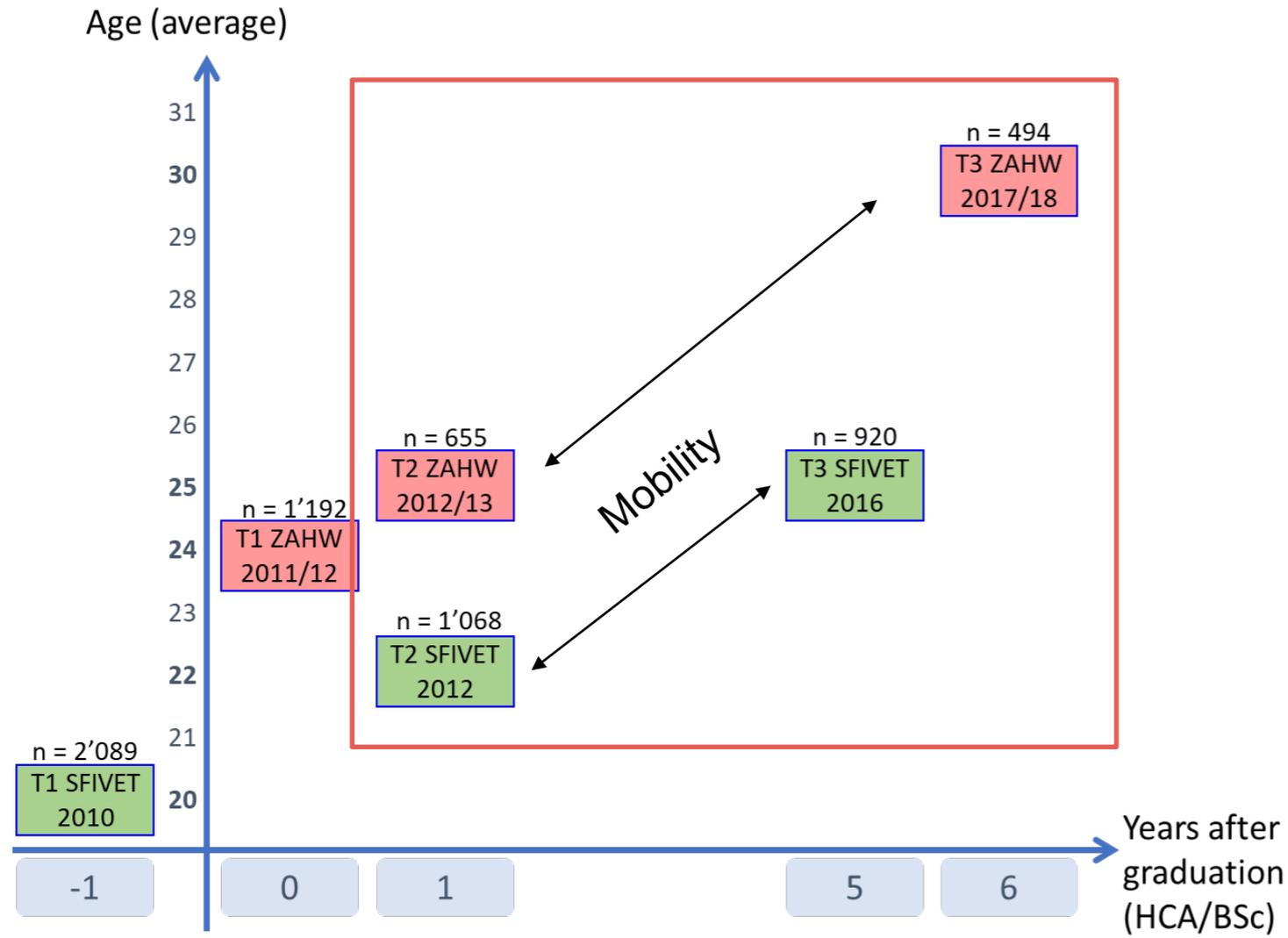
# Research questions

- How often do RNs and HCAs make use of the general orientation of their education and change healthcare segments during the first years after graduation? Where do they go?
- How do individual factors such as work satisfaction and career opportunities influence the likelihood to leave the initial healthcare segment?

# Varying attractiveness of healthcare segments

- Perception of attractiveness of healthcare segments differs among students
- Long-term care considered as least attractive by (nursing) students (Hayes, Orchard, et al., 2006)
  - More routine tasks (Hayes, Orchard, et al., 2006)
  - Less diverse work profiles (Grønning & Trede, 2019)
  - Fewer career opportunities, but not necessarily true for HCAs (Trede et al., 2017)
- Influence of general explanations of staff fluctuation
  - Job satisfaction
  - Career opportunities
  - Physical and emotional stress
  - Work-life balance
  - ...

# Data and Method

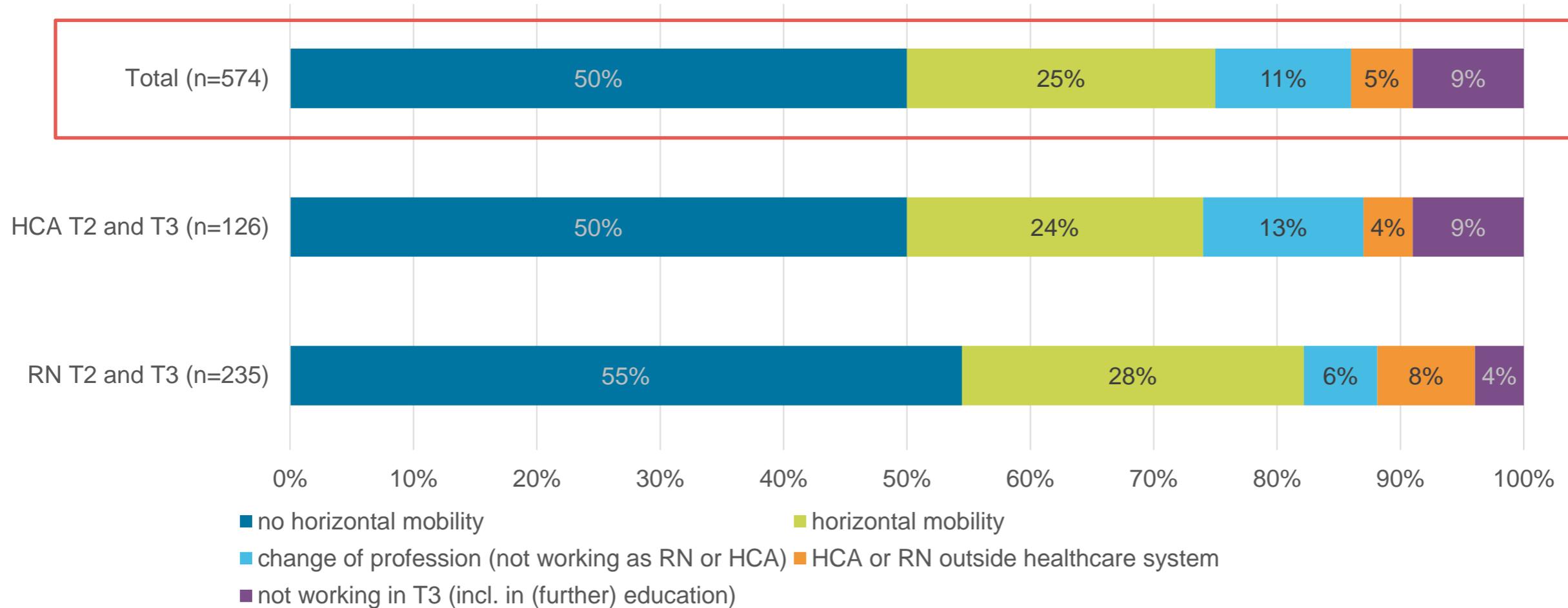


- Combination of two longitudinal studies with comparable designs
- Sample: persons working as HCA or RNs one year after graduation (T2), participation in T3, information on healthcare segment available (n=575)
- DV: mobility between healthcare segments from T2 to T3
- Method: descriptive analysis of patterns of horizontal mobility

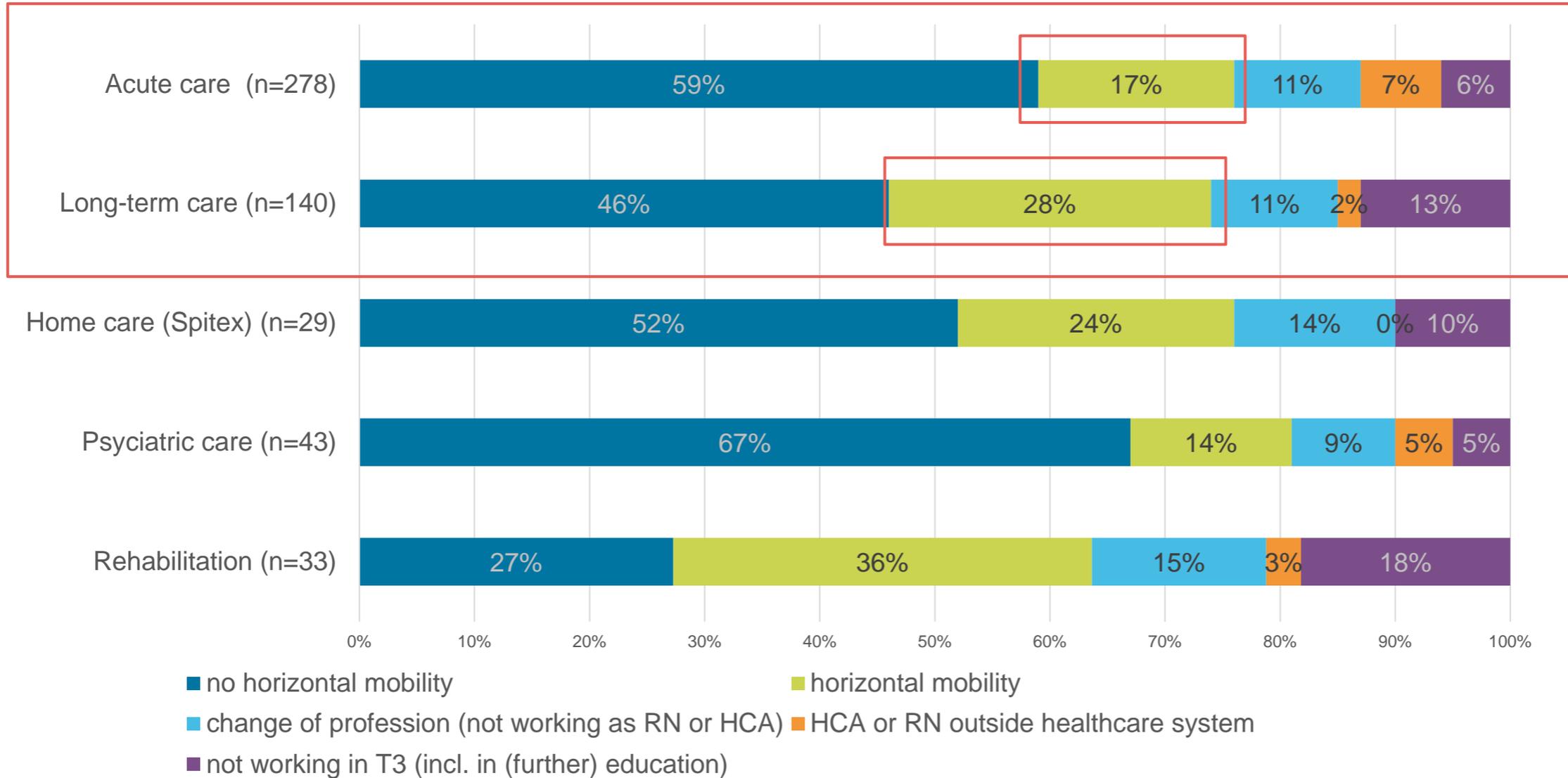
# Explanatory variables

- Occupation: HCA vs. RN
- Health care segment: long-term, acute, psychiatric, or home care (Spitex); rehabilitation, and other healthcare segments (e.g. emergency or ambulant care, institutions for individuals with disabilities)
- Satisfaction with current work; scale: 1 = does not apply at all – 6 = does fully apply
- Career opportunities: possibility to gain additional responsibilities without further formal education
  - HCA: additional responsibilities such as responsibility for a shift
  - RNs: managing tasks and responsibilities; tasks in education; other career opportunities with additional responsibility

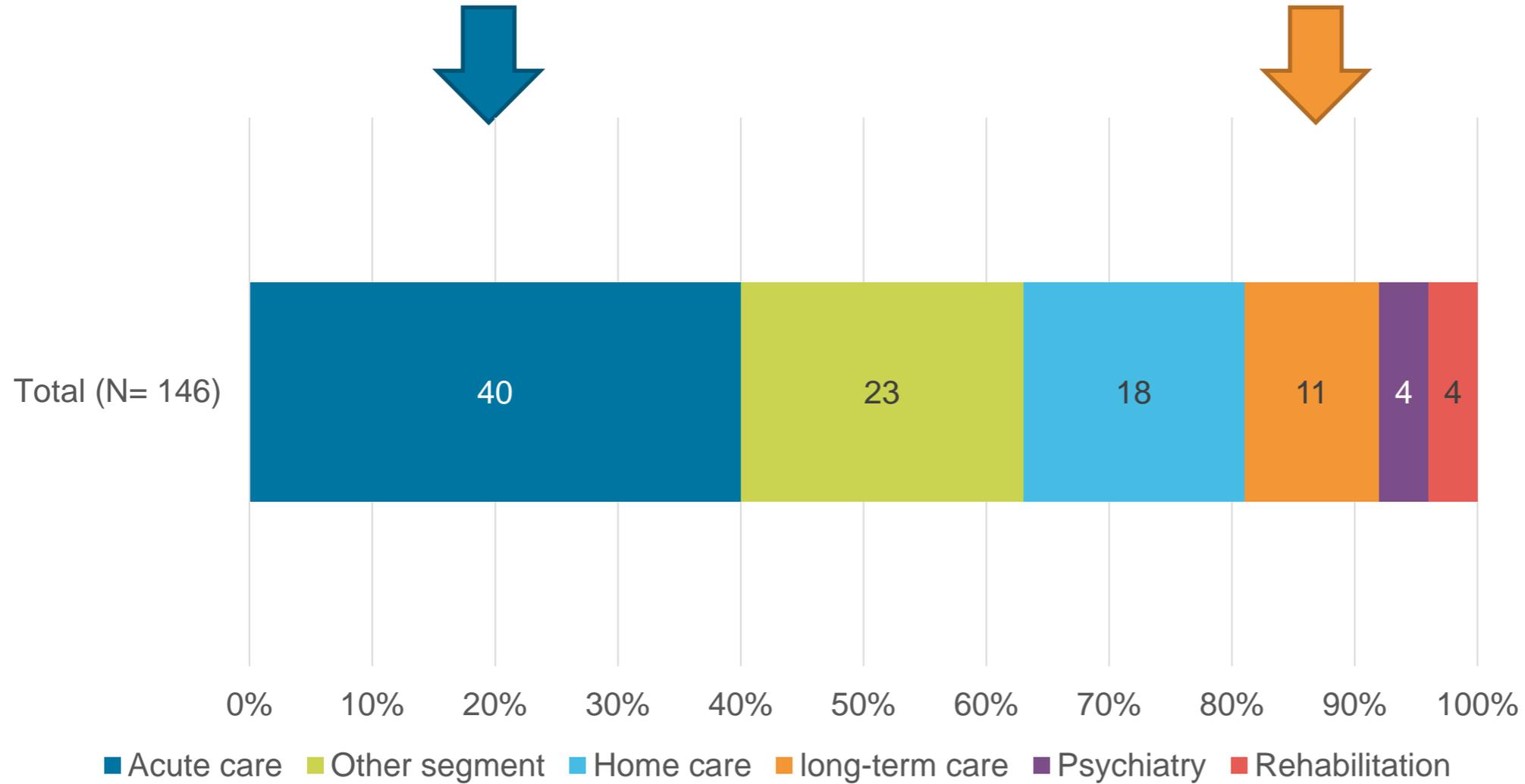
# Horizontal mobility between segments of HCAs and RNs



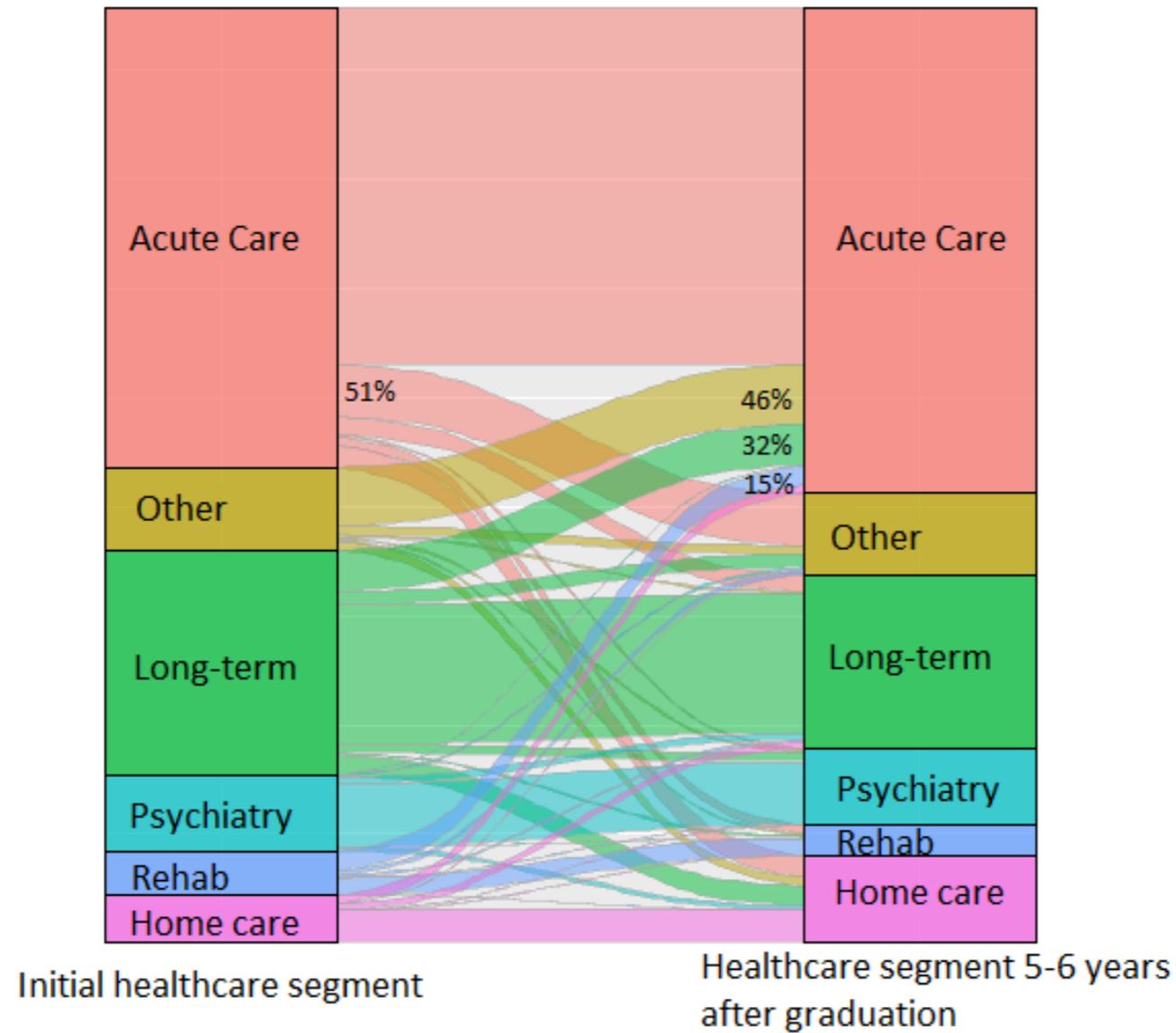
# Horizontal mobility differs by healthcare segment



# Where do they go?



# Mobility patterns during first years after graduation



# What individual factors explain horizontal mobility?

More horizontal mobility...

- from the long-term or rehabilitation segment
- among graduated RNs
- among individuals with little work-satisfaction
- among individuals with fewer career opportunities in first position

Horizontal mobility becomes less likely with more work experience...

# Conclusions and policy implications

- Many stay in the segment of their graduation (50%), but 25% change the healthcare segment during the early career
  - Unequal mobility: from less to more «attractive» segments
  - Long-term care and rehabilitation tend to «lose» graduates, acute care « gains » graduates → often in combination with RN education
  - General orientation and possibility of easy horizontal mobility does not suffice to reduce staff shortages in long-term care
  - But: short-term mobility, unclear how many return to their initial segment
- Policy implications for long-term care, rehabilitation
  - Create attractive image of long-term care in an integrated healthcare system → establish attractive education and career opportunities for RNs in long-term care
  - Market horizontal mobility as a strength and something to consider in career planning
  - Establish long-term care as attractive places for RN education to reduce loss of HCA when they continue their studies and even attract new students

# Further Information

Online:

<https://www.sfivet.swiss/obs/healthcare-and-nursing>

<https://www.ehb.swiss/obs/gesundheitsberufe>

Contact:

- Miriam Grønning: [miriam.groenning@ehb.swiss](mailto:miriam.groenning@ehb.swiss)
- Miriam Hänni: [miriam.Haenni@ehb.swiss](mailto:miriam.Haenni@ehb.swiss)
- Ines Trede: [ines.trede@ehb.swiss](mailto:ines.trede@ehb.swiss)

# Literature

- Grønning, M., & Trede, I. (2019). Does It Matter Where They Train? Transitions into Higher Education After VET and the Role of Labour Market Segments. *Social Inclusion*, 7(3), 65-78.  
<https://doi.org/10.17645/si.v7i3.2043>
- Hayes, L. J., O'Brien-Pallas, L., Duffield, C., Shamian, J., Buchan, J., Hughes, F., Spence Laschinger, H. K., North, N., & Stone, P. W. (2006). Nurse turnover: a literature review. *Int J Nurs Stud*, 43(2), 237-263.  
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- Trede, I., Grønning, M., Pregaldini, D., Kriesi, I., Schweri, J., & Baumeler, C. (2017). *Trained Healthcare Assistants - A Dreamjob or a Stopover? New results regarding the professional careers and educational pathways of vocational education and training graduates.*