



Nurses' experiences of the job rotation programme in KKH

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Background

KKH introduced the job rotation programme in 2017 as a strategy to build a future ready nursing workforce by equipping nurses with broad-based skills to practice across care settings. By reviewing nurses' perceptions and experiences with job rotation, this research aims to enhance KKH's efforts in promoting continuous staff upgrading.

Method

All newly graduated staff nurses who joined the institution in 2016 were enrolled in the study with nurses working in the Intensive Care Units (ICU) and Emergency Department (ED) being excluded from the study due to the highly specialised nature of work involved. The duration of the job rotation programme was two years, with each posting lasting one year. Nurses recruited for the study started their first job rotation in June 2017. Staff nurses were rotated hospital-wide, either across departments (Paediatrics and Obstetrics & Gynaecology) or across disciplines (Medical & Surgical). Nurses were given choices on which department they wanted to be rotated to and requests were granted as much as possible.

Survey questionnaires which were developed by members of the study team were used as the data collection tool for the study. The study consisted of 2 phases, with data collection being conducted via survey questionnaires prior to the rotation (Phase 1), and upon completion of the first job rotation after 12 months (Phase 2). The Phase 1 survey questionnaires assessed nurses' perceptions of the benefits, as well as their willingness and readiness for job rotation. The Phase 2 survey questionnaires allowed them to reflect on their experiences with job rotation retrospectively and determine their view on job rotation.

Results

An overall response rate of 91% (n=90) was achieved in Phase 1 and 74% (n=63) in Phase 2 (Figure 1). The demographic data of study participants are presented on Figure 2.

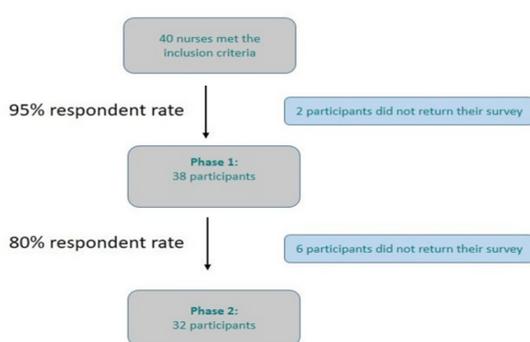


Figure 1: Flowchart on participant recruitment

Demographic data	Percentage (%)
Nationality	
1. Singaporean	44.4
2. Malaysian	19.4
3. Chinese	25
4. Burmese	11.1
Education	
1. Diploma	91.9
2. Degree	8.1
Employment history	
1. First employment	81.1
2. Not first employment	18.9
Age (years)	
1. 20-22	36.1
2. 23-24	50
3. 25-26	8.3
4. 26-27	5.6

Figure 2: Demographic data of study participants

Results from phase 1 indicated that the participants recognized that the job rotation program would broaden their perspectives and professional knowledge. However, they showed signs of apprehension towards the job rotation programme, indicating that they were not ready to leave their current work setting (36.8%) and were not familiar enough with their current discipline to become a novice again in a new discipline (31.6%). Participants also thought that job rotation was introduced too soon in their career (23.7%)

In phase 2 of the study, the participants still agreed that the job rotation programme indeed broadened their horizons, and allowed them to gain more professional knowledge and skills. In addition, despite their initial apprehension on job rotation, 13.2% more participants felt that they were up to the challenges associated with working in the new setting that they were rotated to as compared to phase 1. However, 28.1% of the participants were still not in favour of job rotation after their experience, and felt that the frequency of job rotation was too fast (59.4%). Also, 93.8% of participants preferred job rotation to be optional rather than mandatory in phase 2, a 17.5% increase as compared to phase 1.

Discussion

Despite the participants initial resistance towards the job rotation programme, phase 2 results recorded improved morale (66.7%), reduced complacency (61.3%) and participants also reported that the job rotation inspired them to perform better (65.6%). In the study, preceptors were assigned to the newly rotated staff nurses, such that they would be adequately guided in their new work setting. With a support system in place, the Phase 2 results thereafter were rather encouraging, with 64.5% of participants reporting themselves being well supported in their new work settings. This therefore reiterates the importance of providing nurses with adequate support during this transition phase whereby they have just transferred to a new department (Nowrouzi et al., 2015).

Phase 1 results showed that 36.8% of participants felt that they were not ready for the job rotation, yet, in phase 2 of the study, 81.3% of the participants felt that they were up to the challenges associated with working a new setting. This contrast in the perceptions pre and post rotation was also evident in past studies, which showed that when nurses first began working in a new work environment, they often faced apprehension, stress and anxiety (Nowrouzi et al., 2015), but described job rotation to be a 'positive experience after the initial shock' (Jarvi & Uusitalo, 2004). Therefore, the participants' initial responses that they were not ready for the rotation could be due to resistance to change instead of the issue of job rotation being introduced too early.

In Phase 2 of the study, 59.4% of the participants felt that the frequency of job rotation (every 12 months) was too short, but did not think that 2 years for the entire job rotation programme was too long. This suggests that participants in the study possibly required more time to adapt and learn in each job setting that they were rotated to. Therefore, future job rotations need to look into implementing strategies to ensure that nurses' learning needs are not compromised by the frequency of job rotation and tailoring rotation plans based on nurses' experience and learning ability.

Conclusion

The job rotation programme has achieved its aim of equipping nurses with broad-based skills which enables them to practice across care settings. Supportive measures from the nursing management such as the assigning of preceptors were helpful in allaying nurses' concerns and allowing them to embrace the challenges and develop themselves through the job rotation programme. Despite acknowledging the benefits of job rotation, nurses still expressed resistance towards the job rotation programme. Moving on, developing strategies to reduce nurses' resistance and enhance their' experiences would be helpful in future job rotation programmes.

Recommendations

One strategy would be to tailor the job rotation programme to accommodate individual nurses' learning capability and adjustment time. Instead of introducing job rotation to nurses at a fixed time-point of one year into their careers, nurse managers could do regular reviews with nurses pertaining to their learning needs and readiness for job rotation, and involve nurses in scheduling their job rotation once their learning needs in the current department are met. This would empower nurses to take ownership of their own learning and potentially improve nurses' experiences of the job rotation programme.