



# Temporary Personnel Services in Operating Theatre Nursing

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## *Abstract:*

*Healthcare is one of the largest employment sectors in Germany. Nurses make up the quantitatively largest occupational group. Through economization, privatization and reforms in the billing system of health care facilities, the structures and conditions for care have changed. High quality work must be provided under increased time and financial pressure with fewer and fewer personnel. The additionally increasing demand for health services leads to a work-concentration up to the overloading of the nursing staff. The resulting emigration of nurses amongst others into the temporary employment agencies has consequences for hospitals. This contribution uses a survey to analyze the motivations of those who have decided against a permanent position in the hospital in favour of a position in temporary employment. The vast majority of temporary workers report that their expectations of temporary work have been met, and more than half even report that they would reorientate themselves if there were no temporary employment.*

*JEL Classification: I11, J49, R23*

**Keywords:** Temporary employment, surgical care, healthcare, work-life balance, hospital, nurses, operating theatre.

## 1 Background

The healthcare industry is a growing industry with annual growth of 3.8% over the last decade. In 2017, this accounted for around 12% of the gross domestic product in Germany (Federal Ministry of Health, 2019). Furthermore, healthcare is one of the largest employment areas in Germany. Nurses make up the quantitatively largest occupational group (Bräutigam et al., 2010). At the same time, however, there is also a serious shortage of skilled workers in this area. According to the Federal Employment Agency, around 15,700 vacant nursing jobs were registered in 2018, an increase of 7% compared to the previous year (Statistics of the Federal Employment Agency, 2019 b).

Through economization, privatization and reforms in the billing system of health care facilities, the structures and conditions for care have changed. Benefits must be provided under increased time and financial pressure with fewer personnel due to the shortage of skilled workers (Klöpfer, 2011). Increasing demand for health services leads to a work-concentration up to the overloading of the nursing staff.

A survey in 249 German hospitals as part of the Hospital Barometer showed that 53% of the hospitals surveyed used nursing staff in 2017 through temporary employment (Blum et al., 2018). For a long time temporary workers have filled gaps in hospitals in the case of short-term fluctuations or illness of permanent workers. Nowadays the situation has changed such that maintaining the company can no longer be guaranteed without the help of temporary workers (Bräutigam et al., 2010). The share of temporary workers in nursing staff is low at 2%, but the number of temporary workers in nursing has doubled between 2014 and 2018 to around 22,000 temporary workers (Bundesagentur für Arbeit statistics, 2019 b). With the introduction of lower-level care, clinics are required to ensure minimum staffing in certain areas, such as intensive care, otherwise penalties may be imposed. This could further increase the need for leasing professionals.

An analysis of job advertisements by temporary work agencies by the Hans Böckler Foundation revealed that there is a need for nursing staff, especially in the areas of anesthesia, operations and intensive care units. Staff shortages or shortages in these departments are difficult to compensate through internal recruitment, as a high level of specialized skills is required (Bräutigam et al., 2010). In the surgical area of a hospital, the core revenues are achieved. Unused capacities and breakdowns of operations due to staff shortages lead to considerable revenue losses and should be avoided as far as possible (Tschudi et al., 2017).

Due to the high demand for leasing staff in this area, this research focuses on the reasons why nurses prefer a position in temporary employment over a permanent position in the hospital. Furthermore, the conditions that have to be met by the clinics

in order to recapture temporary employees for permanent employment will be investigated.

## 2 Method

For this study, the data was collected using a standardized online survey. This procedure makes it possible to interview a high number of participants anonymously and discreetly. Distortions due to socially desirable behavior are avoided as far as possible. Study participants were acquired via the network of a temporary employment agency, which has branches throughout Germany. Due to the specifications of the temporary employment agency, the survey was limited to the areas of application of temporary staff in Hamburg, Bremen, Berlin, Lübeck and Hanover. The employees were contacted by e-mail through the company. The data collection took place in a survey period of 30 days from 31 January 2019 to 01 March 2019.

Prerequisite for participation in the study was the employment in a temporary employment agency, the occupational activity in the operating theater area, belonging to the occupational group of surgical nursing and the availability of technical resources, therefore the accessibility via a PC or a mobile device via the Internet.

The temporary employment agency contacted 81 people. In addition, the questionnaire was forwarded to other persons who also meet the criteria mentioned. This results in a sample size of 108 persons ( $n = 108$ ). The type of sample can be assigned to the non-probabilistic methods (Döring and Bortz, 2016).

## 3 Results

42 people participated in the online survey. This corresponds to a gross payout ratio of 38.9%. Two participants canceled the survey early and another questionnaire was flawed. Thus, 39 questionnaires were included in the evaluation, which corresponds to a net return rate of 36.1%.

The survey was attended by 35 women and 4 men. 54% of the participants were between 21 and 30 years old, 26% between 31 and 40 years and 20% were over 40 years old. 74.4% said they had no children, 15.4% have children who live in the household, and 10.3% have children who do not live in the household.

In terms of employment, 43.6% of participants worked less than one year in temporary employment, 20.5% one to two years, 12.8% two to three years, and 23.1% worked more than three years in temporary employment.

### 3.1 Motives

The survey participants were asked to rate the importance of different motives that were crucial for choosing a job in temporary employment. Table 1 summarizes the results and shows that especially the motives attributed to working time and private life were classified as very important. However, more than half of the respondents also said that the payment was a very important motive for a change.

<i>Category</i>	<b>Motive</b>	<b>very important</b>	<b>important</b>	<b>neither nor</b>	<b>less important</b>	<b>not at all important</b>
<i>working time and personal life</i>	flexibility	87,18	7,69	5,13	0	0
	reconciliation of private an professional life	79,49	15,38	5,13	0	0
	time for family and friends	76,92	12,82	10,26	0	0
	working hours	66,67	17,95	10,26	5,13	0
<i>salary</i>	salary	53,85	23,08	23,08	0	0
<i>employer</i>	dissatisfaction with previous employment	35,9	25,64	17,95	10,26	10,26
	check out potential new employees	10,26	25,64	23,08	12,82	28,21
	hospital did not allow part-time work	12,82	5,13	30,77	5,13	46,15
	no prospect of permanent employment after training	5,13	0	12,82	5,13	76,92
<i>vocational development</i>	gather work experience	35,9	23,08	28,21	0	12,82
	career oportunities	7,69	12,82	53,85	12,82	12,82
<i>thers</i>	moving to another city	10,26	7,69	12,82	7,69	61,54
	transition period	10,26	5,13	5,13	7,69	71,79

Table 1: Motives for switching to temporary work

(Note: These are the answers to the question “How important were the following reasons when deciding to work in a temporary employment agency?”)

### 3.2 Work-life balance (WLB), job satisfaction and health

Participants were asked to compare various aspects of their current employment relationship in temporary work with their previous permanent employment or training relationship in the hospital. These are assigned to the categories WLB, job satisfaction and health and compared with each other.

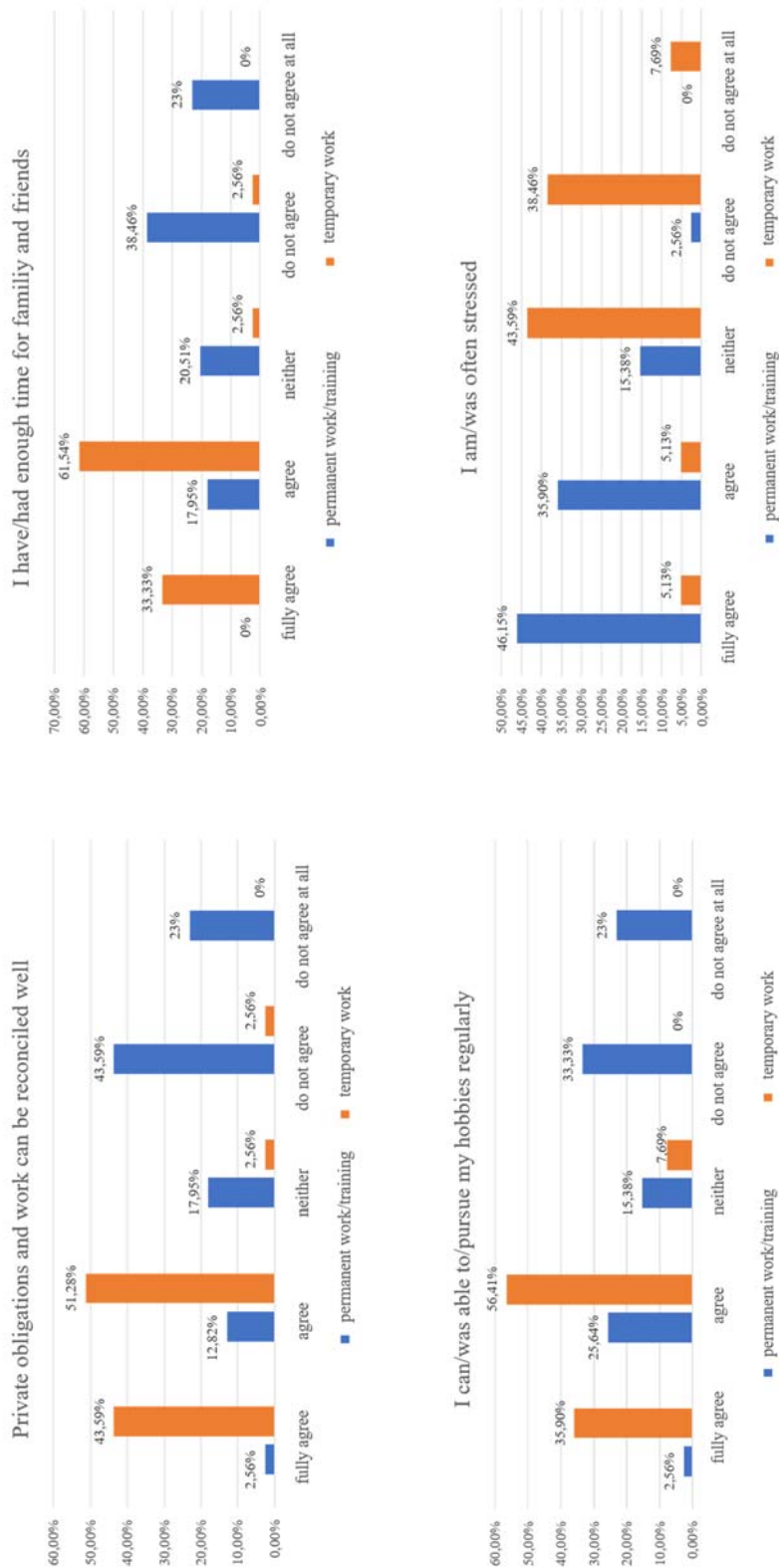


Figure 1: Comparison of different aspects of the work-life balance between permanent employment and temporary employment

In the field of WLB, Figure 1 shows that the change in temporary work has led to a large proportion of temporary workers making it easier to reconcile private obligations with work than was the case with permanent hospital work. As a temporary worker, it is also more likely to pursue one's hobbies regularly and spend time with family and friends. According to the respondents, the feeling of being stressed too often, decreases significantly with the change to temporary work. 90% of respondents are satisfied with the working time in temporary employment. Compared to their previous work in hospital, the figure was only 15.38%.

The participants were also asked how satisfied they were with various factors of their job. The largest increase in satisfaction was 56.41% in mutual acceptance and esteem and 53.85% in pay (Figure 2). With regard to the satisfaction with colleagues and the team, the slightest increase after switching to temporary work was found (17.95%). The only aspect in which the satisfaction in temporary work is lower than in the permanent position, is the training opportunity.

The last question in this session focused on satisfaction with one's own health. At the time of the survey, 82% of the interviewed temporary workers were very or rather satisfied with their health. Looking back to their position in permanent employment in a hospital, 21% said they were very or rather satisfied with their health.

### **3.3 Return to permanent employment**

Here, the results are considered in terms of the conditions that have to be met by the hospitals in order to give temporary workers an incentive to switch back to permanent employment. Respondents cite income as the most important factor, followed by work organization and more flexible working hours (Table 2). The colleagues and the team play an important role for 87.18%. The variety in everyday working life and the exclusion from shift work are also very important (variety 64.10%, exclusion from shift work for 64.11%).

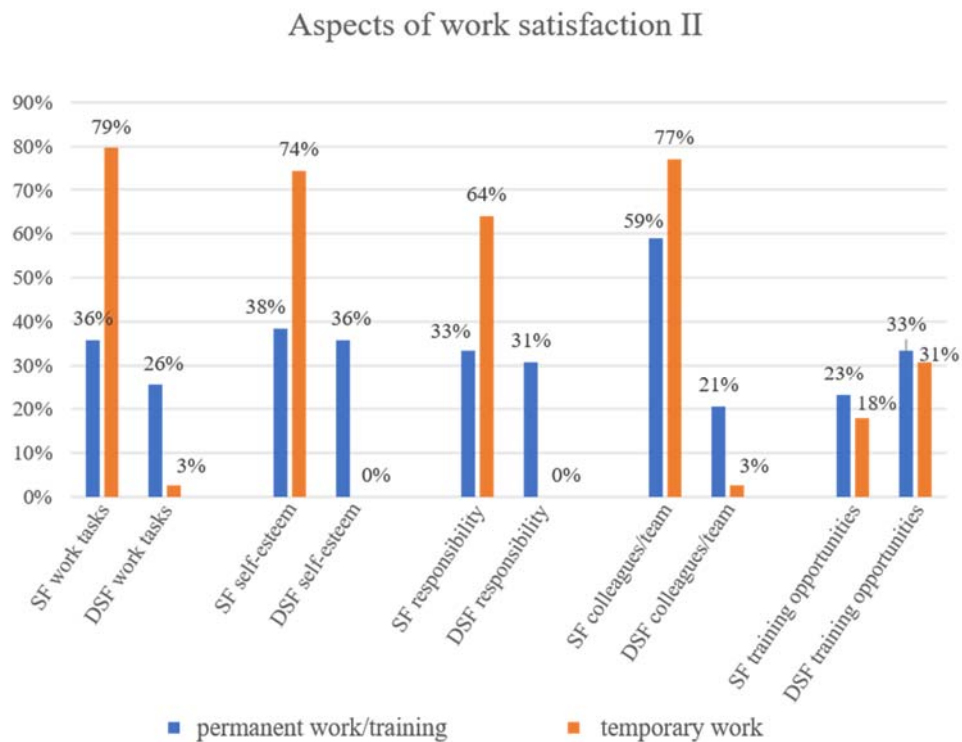
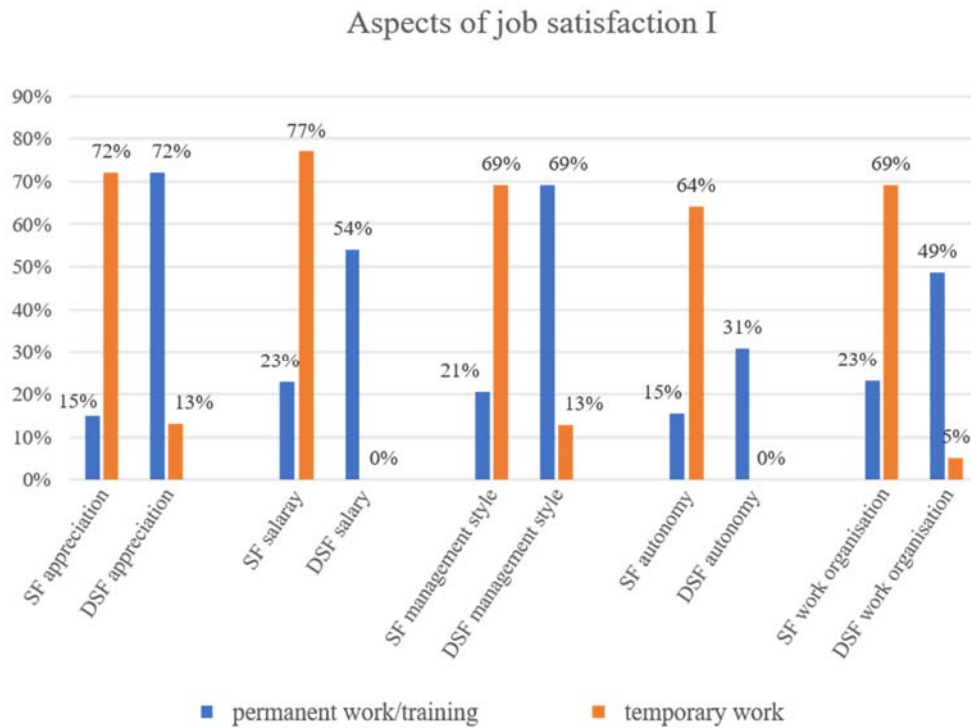


Figure 2: Different aspects of job satisfaction (Note: Comparison of partial aspects of satisfaction and dissatisfaction between permanent employment and temporary work. For satisfaction (SF) the frequencies of “very satisfied” and “rather satisfied” were summarized, for the dissatisfaction (DSF) “little satisfied” and “not satisfied at all” have been summed up.)

Conditions	very important	important	neither nor	less important	not at all important
salary	79,49	20,51	0	0	0
organisation at work	56,41	41,03	2,56	0	0
flexible working hours	74,36	20,51	5,13	0	0
colleagues/team	58,97	28,21	12,82	0	0
variety in every day work life	30,77	33,33	28,21	2,56	5,13
exclusion of shift work	41,03	23,08	23,08	12,85	0
career oportunities	33,33	23,08	33,33	5,13	5,13

Table 2: Conditions for returning to a permanent position (Note: These are the answers to the question: “To consider permanent employment in a clinic, the following aspects are important to me”)

### 3.4 If temporary work did not exist

Study participants were also asked to what extent they agreed with the statement that they would choose a different occupation if temporary employment did not exist. 17.95% fully agreed with this statement, 38.46% agreed, 10.26% voted “neither nor”, 23.08% of respondents disagreed and 10.26% fully disagreed. Of the 56.41% of respondents who supported the statement (“fully agree” or “agree”), 54.55% are aged 21–30 years, 81.82% of whom have no children. The majority of people work in temporary employment with 72.73% less than two years.

## 4 Discussion and Conclusion

The results of the survey show that switching to a temporary work agency has a positive impact on WLB, job satisfaction and health. Furthermore, the expectations for a change from permanent to temporary work have been met and satisfaction has increased in the areas investigated. Subjects have more time to spend on temporary work for family and friends, are able to practice hobbies on a regular basis, are less stressed, have more energy and are less exhausted at the end of the day than in their previous employment.

Particularly striking is the increase in satisfaction in the areas of appreciation of work, pay and the leadership style of the direct supervisor. Buxel (2011) also showed in his study that job dissatisfaction is the result of a lack of appreciation. In the results of this study, the importance of esteem reappears, considering the open ended questions of the interviewees, in which appreciation was repeatedly cited as an important factor, for leaving a permanent position in the hospital.

Appreciation can also be expressed through appropriate remuneration, as the monetary aspect is certainly the most important for the participants in the survey. This is



also reflected in the motives for switching to temporary employment. For 76.93%, the payment was an important reason to enter temporary employment. As a result, the assumption that temporary workers have worse work conditions than permanent employees can not be transferred to health care sector. As health care professionals are the most sought after and demand is high, nurses are in a good bargaining position, especially in functional areas such as the operating theater.

In order to determine the state of health, the questionnaire merely asked for satisfaction with one's own health. Satisfaction with the personally assessed state of health after switching to temporary employment improved or remained unchanged among all respondents. None of the subjects experienced a deterioration. This result may result from the elimination of the shift service and the improved WLB. Less stress and more free time also have a positive effect on health.

The increased satisfaction positively influences work performance. Healthy and satisfied employees are more efficient, motivated and less likely to be unfit for work. Therefore, this study allows conclusions to be drawn to problem areas of permanent employment and can help to find out in which areas the highest dissatisfaction exists.

Only the aspect of continuing education was rated slightly lower in temporary employment than in permanent employment. One possible explanation is the exclusion of leasing staff from in-house training in some hospitals. However, there has also been dissatisfaction with the training opportunities in the permanent employment. To this end, the temporary work agencies could offer internal training or finance the training at the sites. Some companies already offer support for part-time studies for their employees.

Many hospitals in Germany have to provide patients with a 24-hour care and there is no way to eliminate shift work completely. Despite the knowledge that choosing a career in a hospital implies shift work, the willingness of the caregiver to work under these conditions is decreasing. Assuming that improvements in the above factors, especially higher pay, would lead to more nurses switching to permanent employment, the workload for each individual would decrease. In addition, a more flexible roster structure would be possible because, for example, on-call services could be split among a larger number of people. As a result, the number of services per month would decrease for each employee. Thus, an increase in salaries could result in a tighter staffing level and, as a result, positively impact job satisfaction and WLB.

The change to temporary work relieves from the heavy burden in permanent employment. However the structural problems which result from a lack of skilled workers are exacerbated. By switching to temporary work, caregivers have found a way to change their employment. The positive effects are likely to keep them in their jobs instead of leaving the health care sector.

This work can serve as an orientation for the clinics, and health policy, as it is shown which motives for the respondents were crucial for a change in the temporary work and which aspects of the employees are generally important for a good working relationship. If there are no changes, if the development continues and more and more nurses decide on temporary employment, the quality of patient care could be significantly reduced in the future. Here, there is a need for research, since temporary workers are indispensable in some clinics, but for an adequate supply, the permanent staff is essential. In addition, studies should be recommended that examine the effects of the migration of many nurses into temporary employment on the remaining permanent staff.

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