

NURSE MANAGERS' EXPERIENCES OF THE GOAL-ORIENTED JOB ROTATION

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Master's Thesis
June 2014

Master's Degree Programme in Health Care and Social Services Development and
Management
Social Services, Health and Sport



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Author(s) Partanen, Anna-Liisa	Type of publication Master's Thesis	Date 09062014
	Pages 72 pages, 5 appendices (14p)	Language English
		Permission for web publication (X)
Title NURSE MANAGERS' EXPERIENCES OF THE GOAL-ORIENTED JOB ROTATION		
Degree Programme Master's Degree Programme in Health Care and Social Services Development and Management		
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Abstract Job rotation is used as a tool for personnel development in the working life, and it has various descriptions depending on the organization where it is practiced. Central Finland Health Care District emphasizes job rotation as goal-oriented and aims to implement it systematically in personal, communal and organizational levels. Goal-oriented job rotation supports individual's professional growth and career development, and it brings awareness of the new perspectives for the working communities in nursing. The evaluation of the set and achieved goals is essential. As the part of the Central Finland Health Care District's nursing strategy for 2011–2013 was to create a new, functional model for the goal-oriented job rotation, the organization's job rotation -team needed to know in what capacity it was implemented. The job rotation -team created a questionnaire about the implementation of goal-oriented job rotation model for the organization's 76 nurse managers and the data received was handed over to the author of this study. The purpose of this study was to describe nurse managers' experiences of the goal-oriented job rotation in the Central Finland Health Care District's work units. The aim was to examine how model in question was used in the work units and whether there were any needs to develop the model according to the nurse managers' point of view. The questionnaire was answered by 55 nurse managers, giving the response rate of 72 %. Nominal scaled and open-ended questions were analyzed by using appropriate statistical methods. Goal-oriented job rotation model had been used only in the organization's 15 work units. Rotation had been mainly internal and unilateral during years 2009 to 2011, and registered nurses had participated most to it. The average rotation time was three to six months. Carefully planned goal-oriented job rotation which was organized by all participators before the actual rotation happened functioned best, and the nurse managers played an important role in the success of it. Better and modern information flow inside the organization about goal-oriented job rotation should be developed and openness of the communication about the subject should be increased. Willingness to learn, high motivation and set goals in the personal, communal and the organizational levels are keys to a successful goal-oriented job rotation. This study is part of the Double Degree Programme -studies, joint with CUAS.		
Keywords goal-oriented job rotation, nurse manager, job rotation, nursing		
Miscellaneous		



Tekijä(t) Partanen, Anna-Liisa	Julkaisun laji Opinnäytetyö	Päivämäärä 09.06.2014
	Sivumäärä 72 sivua, 5 liitettä (14 sivua)	Julkaisun kieli Englanti
		Verkojulkaisulupa myönnetty (X)
Työn nimi OSASTONHOITAJIEN KOKEMUKSIA TAVOITTEELLISESTA TYÖKIERROSTA		
Koulutusohjelma Sosiaali- ja terveysalan kehittäminen ja johtaminen		
Työn ohjaaja(t) Mir, Eva Professori, Carinthia University of Applied Sciences, Itävalta Tuomi, Sirpa Yliopettaja, Jyväskylän ammattikorkeakoulu, Suomi		
Toimeksiantaja(t) Ylihoitaja Erja Humalamäki, Keski-Suomen sairaanhoitopiiri		
Tiivistelmä Työkiertoa käytetään henkilöstön kehittämisen työkaluna työelämässä ja sitä kuvataan monin eri tavoin riippuen organisaatiosta, missä sitä harjoitetaan. Keski-Suomen sairaanhoitopiiri painottaa työkiertoa tavoitteellisena työkiertona ja pyrkii toteuttamaan sitä systemaattisesti henkilö-, yhteisö- ja organisaatiotasolla. Tavoitteellinen työkierto tukee yksilön ammatillista kasvua ja urakehitystä ja se tuo tietämystä uusista näkökulmista hoitotyön työyhteisöihin. Asetettujen ja saavutettujen tavoitteiden arviointi on olennaista. Koska Keski-Suomen sairaanhoitopiirin hoitotyön strategiassa 2011–2013 oli osana luoda uusi, toimiva tavoitteellisen työkierron malli, organisaation työkiertotyöryhmän tarvitsi tietää millä kapasiteetilla sitä toteutettiin. Työkiertotyöryhmä loi kyselyn tavoitteellisen työkiertomallin toteutumisesta organisaation kaikille 76 osastonhoitajalle ja saatu data luovutettiin tämän opinnäytetyön tekijälle. Tämän tutkimuksen tarkoituksena oli kuvata osastonhoitajien kokemuksia tavoitteellisesta työkierrosta Keski-Suomen sairaanhoitopiirin työyksiköissä. Tavoitteena oli selvittää kuinka kyseinen malli oli käytössä työyksiköissä ja oliko mallissa jotain kehitettävää osastonhoitajien näkökulmasta katsottuna. Kyselyyn vastasi 55 osastonhoitajaa antaen vastausprosentiksi 72 %. Nominaaliasteikko- ja avoimet kysymykset analysoitiin käyttäen sopivia tilastollisia menetelmiä. Tavoitteellinen työkiertomalli oli ollut käytössä vain 15 organisaation työyksikössä. Se oli ollut pääosin sisäistä ja yhdensuuntaista vuosina 2009–2011, ja sairaanhoitajat ottivat eniten osaa kiertoon. Keskimääräinen kiertoaika oli ollut kolmesta kuuteen kuukautta. Ennen itse kiertoa tapahtuva, kaikkien osanottajien toimesta huolellisesti suunniteltu tavoitteellinen työkierto toimi parhaiten, ja osastonhoitajilla oli tärkeä rooli sen onnistumisessa. Parempaa ja modernimpaa tiedonkulkua pitäisi kehittää organisaation sisällä tavoitteellisesta työkierrosta ja viestinnän avoimuutta asiasta kuuluisi lisätä. Halu oppia uutta, korkea motivaatio ja asetetut tavoitteet henkilö-, yhteisö- ja organisaatiotasolla ovat avaimia menestyksekkääseen tavoitteelliseen työkiertoon. Tämä opinnäytetyö on osa Double Degree Programme -tutkintoa, yhteistyössä CUAS:in kanssa.		
Avainsanat tavoitteellinen työkierto, osastonhoitaja, työkierto, hoitotyö		
Muut tiedot		

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1 Introduction

The success of an organization is based on the professionalism and motivation of the personnel. A competent personnel is important capital of the organization and personnel's development is essential investment in the strategy of the organization (Paloniemi 2004, 19). In order to maintain their professionalism and motivation, the personnel should enjoy their work and feel important for the organization. Hence, personnel's well-being at work should receive attention. Wellbeing at work can be improved in many different ways; for example, by giving feedback, giving rewards, arranging the working-time more flexibly for an individual employee or recreational days for the staff, providing meaningful training for the staff or arranging performance appraisals. The key factor to a successful organization is a personnel with a high state of wellbeing. When a person feels good he can work efficiently, learn, develop and produce creative solutions and innovations. Thus, person's own resources become power for the whole organization. (Viitala, 2009, 212.)

Job rotation has been recognized as a good practice for personnel development in the social- and health care field. (Laaksonen, Niskanen & Ollila 2012, 196; Hamilton & Wilkie, 2001.) It promotes the professional competence of an individual as well as supports co-operation between work units. In Finland, universities of applied sciences provide the basic nursing education, but qualifying to certain area of professional nursing expertise requires more education and knowledge as well as experience. For example, in Finland some university hospitals train their staff to special nursing fields with the aid of job rotation. (Laaksonen, Niskanen & Ollilla (2012, 196).

In the United Kingdom the National Health Service (NHS) Staff Council has produced a framework of "Improving Working Lives in the NHS" which provides examples of good practice in the working life of social- and health care. One mentioned aim is to develop good human resources that will not only improve the working lives of staff,

but will also lead to improved outcomes for service users. The framework states, that an organization should provide opportunities for job coaching, mentorships, learning sets, job rotation, secondments, project work and sabbaticals in terms of learning possibilities. (Improving Working Lives in the NHS – A Framework Developed by the NHS Staff Council 2009, 25.)

As leaders of competence and know-how, superiors can promote the development of knowledge and its utilization by their actions in the organization. Knowledge management relates to the maintenance and development of the personnel's competence. In order to achieve the goals of an organization its action must be based on co-operation, trust, learning and innovation activities. Open discussion and dialogue between people is important in a learning organization. (Viitala & Jylhä, 2005, 160–166.)

A part of Central Finland Central Hospital's nursing strategy for 2011–2013 was to create a functional new model for goal-oriented job rotation for the nursing staff. The overall purpose of the Central Finland Health Care District was to invest in job satisfaction, recruitment, knowledge management and student counselling. Job satisfaction and the sense of work community will increase by developing work and its content. One tool for developing this is renewing the goal-oriented job rotation model to be more well-functioning and diverse. Central Finland Health Care District's job rotation -team consists of directors of nursing, nurse managers and registered nurses. The main goal of this team is to renew and improve the goal-oriented job rotation model and to increase the number of the job rotation participants by 10 % annually. (Keski-Suomen sairaanhoitopiirin hoitotyön strategia 2011–2013 2012.)

In order to achieve the set goals, the multi-professional job rotation -team needed to know how much job rotation was used, where it was used and in which way it was carried out in different work units in the Central Finland Health Care District. The members of the job rotation -team devised a questionnaire (see Appendix 1.), and the data for the present study was collected with this questionnaire addressed to all the nurse managers in the Central Finland Health District with the help of Webropol

2.0 -survey and analysis application (Webropol 2.0) on the internet. The results of the survey were handed over to the author of this study and one other master's degree student of JAMK for the analysis. The author of this study examined the findings concerning especially the nurse managers' experiences of goal-oriented job rotation.

The purpose of this study was to describe nurse managers' experiences of the goal-oriented job rotation in the Central Finland Health District's work units. The aim was to examine how goal-oriented job rotation model was used in the work units and whether there were any needs to develop the model according to the nurse managers' point of view. The results of this thesis can be used in the development of goal-oriented job rotation in the nursing and health care sector.

2 The Background of the Job Rotation Study

Work has a very important role in the overall wellbeing of a person. Nowadays employees tend to place ever increasing expectations towards work content itself and the employers increase the demands of the employees at work. Employees' motivation to progress as professionals should increase with the development of their work content. If the expectations for work and its content differ vastly from the reality, the employee will be disappointed and his/her wellbeing is in danger to falter. (Alasoini 2011, 21.)

Wellbeing at work increases ability to work and ultimately develops the working life towards something better. An awareness of the symbiosis between a person's ability to work and his wellbeing at work has grown in Finland during the last ten years. For instance, during the years of 2004 to 2009 Finnish State Council's Työelämän kehittämisohjelma (Tykes), The Programme for Developing Work Life, funded various projects of which every fifth project aimed at developing employees' ability to work and cope with work. Many of these projects focused on employees' workload and the aim was to try to alleviate the workload by flexible working time arrangements, substitute employee systems and job rotation possibilities. In addition, in almost every fourth Tykes' project during the period of 2004 to 2009 included a target for external networking. Networking of different organizations enables and improves the mobility of personnel between private, public and the third sector meaning non-profit organizations. At its best, it creates a partnership in which the networking organizations can unite their powers in order to create more effective production of services and products. (Alasoini 2011, 78–87.)

2.1 Networking Organizations

Job rotation is one of the means to develop human resources also in the City of Jyväskylä. The human resources policy of the city is guided by Jyväskylä-sopimus ("Jyväskylä Agreement"), which outlines the measures for co-operation, human resources planning and recruitment, development of the human resources, well-

being of the personnel and salaries. The aim is to sustain and develop the professional competence of the staff and the functioning of the work community. With the help of this kind of developmental work, Jyväskylä City seeks to respond to the new demands of working life. The structural changes of the city promote the internal mobility of the personnel. (Jyväskylän kaupungin henkilöstöpoliittinen linjaus. Jyväskylä-sopimus 2006.)

In order to develop and renew their goal-oriented job rotation model, the Central Finland Health Care District's job rotation -team visited the responsible persons for the Jyväskylä City's job rotation in February 2013. Jyväskylä published a new guide for the job mobility of the City's personnel. Central Finland Health Care District's job rotation -team found this guide very interesting and useful for the future remodelling of the existing goal-oriented job rotation model in their organization. The job mobility guide of the City's personnel gives a structure to how job rotation is carried out in the organization, how job rotation should be prepared for and how to proceed with different kinds of variations of job rotation. (Sisäinen liikkuvuus – työvaihtoon tai varjostamaan 2012.) This guide and its definitions of job rotation are under closer look later in this thesis.

This visit of the Central Finland Health Care District's job rotation -team gives a good example of the future co-operation between the personnel from primary health care (Jyväskylä City) and the personnel from specialized health care (Central Finland Central Hospital of Central Finland Health Care District). Perhaps there will be more job rotation between these two organizations in the future as there will be a launch of a new hospital within Central Finland Health Care District in 2019. The new hospital project involves a Tekes-project "Innovatiiviset palveluhankinnat ja työelämän kehittäminen" ("Innovative service contracts and development of working life" translated by the author), in which one of the themes is to integrate specialized nursing care, primary nursing care and partly social care, for example in terms of rehabilitation and organizing the care pathway of patients. (Uusi sairaala -hanke 2013; Tekes-hanke 2012).

2.2 Job Rotation in the Central Finland Health Care District's Nursing Strategy 2011-2013

Job rotation was chosen as one of the development targets in the area of Central Finland Health Care District in the year 2004, and during next year 2005 a multi-professional job rotation -team of Central Finland Central Hospital created a goal-oriented job rotation plan and the associated guide for the nurse managers of the work units. (Partanen 2009, 36).

In 2008, Central Finland Central Hospital's job rotation -team composed the goal-oriented job rotation model of Central Finland Health Care District. This model's theory was based on a careful selection of literature and research findings.

Moreover, job rotation and its methods were widely discussed in the job rotation -team's meetings. (Keski-Suomen sairaanhoitopiirin tavoitteellinen työkierto-malli 2008).

A member of the Central Finland Health Care Districts' job rotation -team, A. Partanen, an RN, (2009) made her master's thesis about nurse managers' perceptions of goal-oriented job rotation's influence on wellbeing at work. This particular study was one of the main resources for the job rotation -team when composing a goal-oriented job rotation model. In this research Partanen (2009) suggested, that nurse managers' experiences of goal-oriented job rotation could be studied more extensively in the future. Another reason for further research, according to Partanen (2009), was to form an understanding of the nursing directors' view of their role as nurse managers' supporters during the implementation of the goal-oriented job rotation in the work units. She stated as well that it would be essential to investigate goal-oriented job rotation as a tool for employees' wellbeing in the other organizations that belong to the network of Health Promoting Hospitals, originally an international network of hospitals established by the World Health Organization. (Partanen 2009, 8–9, 83.)

The Central Finland Health Care District is a founding member of the Finnish Health Promoting Hospitals – association. Furthermore, health promotion is nowadays condensed in Central Finland Health Care District's nursing strategy 2011 to 2013 to three strategic visions:

- to sustain the attractiveness of nursing by leadership of the human resources
- to develop the evidence based practices in nursing and
- to ensure the nursing practice, that promotes patients' health

The first strategic vision of the three above mentioned ones, sustaining the attractiveness of nursing, includes a procedure that aims to develop the content of work and increase job rotation and diversification of it, which would ultimately increase wellbeing at work. By developing the evidence-based practices in nursing, as the second strategic vision, the nursing practice and the actions taken will be easier to be justified by the personnel, for example. The third strategic vision, which aims to ensure that the nursing practice promotes patients' health, includes for example, procedures designed to promote the patients' participation and their own health. With the help of these procedures the co-ordination and the continuity of care is improved as they create practices to share the professionalism of nursing between specialized nursing, primary nursing and social care. These three visions aim for the ultimate strategic vision: patient-oriented, evidence-based nursing practice in an attractive and multi-professional working environment. (Keski-Suomen sairaanhoitopiirin hoitotyön strategia 2011–2013 2012.)

3 Many Forms of Job Rotation

In the theoretical part of this study, previous research and literature on job rotation, goal-oriented job rotation and many different forms of job rotation as well as nurse managers' experiences of the subject are looked into.

3.1 The Background of the Job Rotation Literature Review

In this study, the theoretical part has its basis in the literature review which focuses on the essential literature on the topic of this study: research articles, previous studies made about the subject and other essential publications. In order to understand and gain awareness of the topic of this study a literature review was carried out. With the aid of the literature review the researcher forms an idea how much the topic has been studied before, what kind of studies have been conducted about the topic and whether the research at hand has any similarities to previous studies. In other words, a literature review gives the theoretical background and framework on which the study can be based. (Hirsjärvi, Remes & Sajavaara 2012, 121.) A literature review supports the author in constructing the theoretical background of the study and helps the reader to understand the mind-flow of the author and the basis made for the new information.

During the research process essential literature was used to form the theoretical background for the study. The author collected information from Finnish (Arto and Medic) and international electronic databases (CINAHL, PUBMED and COCHRANE Library). The electronic information retrieval system called "Nelli-portal" in the Jyväskylä University library and the JAMK University of Applied Sciences library offered a profound way for searching information in scientific databases, e-journals and other electronic resources. Some material was received by ordering it from other Finnish university libraries. Written material (books, scientific magazines) was also borrowed and read from both of the above mentioned libraries as well as the Jyväskylä City Library and the scientific library of the Central Finland Central Hospital. An example of some of the preliminary findings of the key words searches in the electronic databases is documented in Appendix 2.

One can notice that during the preliminary literature research from the electronic databases the author of this study had not yet decided which word she would use in English as a reference to the Finnish word "osastonhoitaja" or "lähiesimies". The author found out during the literature review process that these Finnish words had

been translated into English in many different ways depending on the authors of the studies. The closest and the most used English equivalents for the Finnish word “osastonhoitaja” were “sister”, “ward sister”, “charge nurse”, “head nurse” or “nurse manager” and the closest English descriptions for “lähiesimies” were “the immediate superior” or “the immediate supervisor”.

During the research process, the author of this study had to make a decision which terms she would ultimately use in order to make the thesis more readable, logical and serve its purpose. In the United Kingdom, the Royal College of Nursing (RCN) had studied the perceptions of the ward sisters’ or charge nurses’ about their role in nursing and the health care. During the research process, ward sisters and charge nurses had focus group interviews’ and according to the results, all ward sisters wished for a title that would identify them in charge of the ward as the lead nurse. However, the ward sisters unanimously rejected the title “ward manager” to be used of them as their desire was to motivate and manage ward’s employees and ward based on a passion for nursing, rather than on a desire to be “a manager”. To give support RCN published an initiative based on the research findings in order to clarify and strengthen this important role of the ward sister or charge nurse. In the recommendations of the initiative it is clearly stated, that ward sisters or charge nurses should assume a title that expresses a clear identity as the nurse leader of the ward. The ward sister or charge nurse is a clinical nursing expert who manages and leads the ward staff and the ward environment as well as gives education. (Breaking Down Barriers, Driving Up Standards 2009, 10, 17-18.) Referring to these findings of the Royal College of Nursing and discussions held with some English peers and Finnish experts in the nursing education, the author of this study decided to use the title “nurse manager” in this study when referring to the above discussed various titles in the Finnish and English languages.

Moreover, there are various terms describing job rotation at the work place and usually these terms are synonyms: job rotation, personnel/staff rotation, task rotation, and career rotation. The use of the term varies by organization. Personnel mobility can also be referred to with the term secondment which has a slight

difference comparing to the term “job rotation”. The meaning of secondment is clarified later in this study. In this study, all of these terms are used freely when referring to the source materials; otherwise term “job rotation” is used.

The author of this study discovered that studies made about job rotation were mostly on the master’s thesis -level in Finland. Regarding to the data research, for example, in the United Kingdom secondment has been studied more in nursing than job rotation as such. In order to form an international perspective of personnel mobility in nursing, the author of this study decided to include some of the research findings related to secondment in this study, because job rotation and secondment have similar characteristics of personnel mobility.

Job rotation has been studied rather extensively in other working fields. According to Partanen (2009, 29) the experiences of job rotation from librarians, bank employees, paper mill employees, mobile phone company employees and employees of the military academy have been studied. From the international perspective, job rotation in other working fields has been studied, for example, in terms of ergonomics in manufacturing technology (Aryanezhad, Kheirkhah, Deljoo & Mirzapour Al-el-hashem 2009) and in technical production with an idea to rotate workers in a meaningful manner that balances the cost of an assignment with the boredom felt by the workers (Bhadury & Radovitsky 2006). Furthermore, there are studies on job rotation as a career development strategy in the largest manufacturing conglomerate in Thailand (Wailerdsak & Suehiro 2004), as well as on conducting job rotation according to the decision criteria in government agencies, private service companies and private manufacturing companies in Thailand (Jaturanonda, Nanthavanij & Chongphaisal 2006) and in certain Danish private sector firms (Eriksson & Ortega 2006).

3.2 Government Personnel Rotation Guides' Definitions of Staff Rotation

When forming the goal-oriented job rotation model in Central Finland Health Care District, the organization's job rotation -team used "Henkilökierto-opas" ("Personnel rotation guide" translated by the author) published by the Finnish Ministry of Finance in 2001 as one of the basic guidelines for the model. In 2012 the Ministry of Finance published a renewed guide, "Valtionhallinnon henkilökierto-opas" ("The Personnel Rotation Guide of the State Administration" translated by the author), which defines personnel rotation as follows: "*Suunnitelmallinen henkilöstön kehittämisen menetelmä, jossa työntekijä vapaaehtoisesti siirtyy määräajaksi omalla paikallaan toiseen tehtävään.*" (A systematic method to develop personnel, in which the employee is being transferred voluntarily from his own position to another duty for a fixed time period. Translated by the author.) It is stated in the guide, that personnel rotation benefits the government administration, organization and the individuals themselves. Personnel rotation promotes the strategic renewal of the government administration, diversifies and aids the competence and the networking of the organizations and supports the professional development of the individual by increasing the motivation and opening up new possibilities to progress in individual working careers. The important role of the superior is emphasized in the process of personnel rotation, in both sending and the receiving organizations. All of the parties of personnel rotation have to participate in planning it, setting the goals for it and monitoring its progress in order to make personnel rotation goal-oriented. (Valtionhallinnon henkilökierto-opas 2012, 7).

The personnel rotation happens in many forms, and the type of the rotation depends on where the rotation period is going to happen or what kind of competences are desired to be developed. In the "Valtionhallinnon henkilökierto-opas" (2012) personnel rotation is divided into two different types of rotation: personnel rotation according to the target and personnel rotation according to the task.

The personnel rotation according to the target consists of:

- the internal mobility of the staff
- the mobility of the staff to another organization and
- the international rotation of the personnel.

The internal mobility of the staff is an organization's personnel rotation in which the person changes work tasks inside his own work unit or moves to another unit inside the organization. The goals of the internal mobility of the staff could be substitution or an employee or management of a temporary task, strengthening of a task or a project requiring expertise, spreading and developing of good working practices or evening out the workload inside the work unit or between different work units. In personnel rotation according to the target an employee can also *be transferred to another organization* that can be a strategic partner or an unknown organization which the sending organization wants to learn from or improve its co-operation with the receiving organization. In other words, the rotation of the personnel can consist of staff mobility from the public to private sector or vice versa without forgetting the third sector which consist of charity organizations, for instance. This kind of co-operation will enhance the "learning from the best" -attitude, in other words, benchmarking. *The international rotation* of the personnel can be focused on the partnership network of the individual's own professional field, for example. The aim could be to deepen the network co-operation, to learn new modes of action, to develop a joint project or to improve language skills.

Personnel rotation according to the task includes:

- staff mobility that enhances expertise
- staff mobility that strengthens multiple skills and
- the mobility of the management and the superiors.

In the *staff mobility enhancing expertise* the focus is on the expertise, development of competence or strengthening special expertise. It is also possible to leave in order to familiarize oneself with working methods of another organization in this mode of staff mobility. *The staff mobility that strengthens multiple skills* expands one's own

job description and area of expertise. This form of staff mobility focuses on adding to the know-how of a person, supports his self-confidence and develops his ability to learn. This type of staff mobility also gives a possibility to explore new practices and different organizations. *The mobility of the management and the superiors* emphasizes extensive management skills, familiarizing oneself with the different forms of management practices as well as methods, and learning from peers and receiving peer support. (Valtionhallinnon henkilökierro-opas 2012, 13–17.)

According to Lindeman-Valkonen (2001) in *Henkilökierro-opas* (“Personnel rotation guide” translated by the author) published by the Finnish Ministry of Finance, personnel rotation can be divided into different forms. The mobility of the staff can happen inside the organization or it can be mobility that is directed outside the organization. Personnel rotation can be *unilateral mobility*, in which there is no one coming from the receiving organization and only one person leaves for rotation. Personnel rotation can also be *reciprocal mobility*, in which two persons exchange their jobs with each other. Many different organizations can take part in *chained rotation* of the personnel. Alternatively, chained rotation can also be some sort of internal mobility, in which the work units’ superiors change their jobs at the same time with each other. Personnel rotation can also be *linked to a project* or a task. (Lindeman-Valkonen 2001, 12–13.) Central Finland Health Care District utilizes these definitions of the rotation of the personnel in their own goal-oriented job rotation model created in the year 2008 and studied in this thesis.

3.3 The Goal-Oriented Job Rotation in the Central Finland Health Care District

Central Finland Health Care District has decided to use the term goal-oriented job rotation when referring to the phenomenon “job rotation”, because the organization desires to emphasize job rotation as goal-oriented and implemented systematically in personal, communal, as well as in the organizational levels. In the goal-oriented job rotation model, which was put to use in the organization during the year 2008, the aim is to learn from experience in personal and communal levels. (Keski-Suomen

sairaanhoitopiirin tavoitteellinen työkierto-malli 2008.) According to the findings stated by the Central Finland Health Care District (2008) learning from goal-oriented job rotation supports individual's professional growth and own career development, but it also provides an opportunity for the working communities to develop in bringing up new perspectives and noticing them at the workplace. One of the most important issues in the goal-oriented job rotation is to evaluate the fulfillment of the set and achieved goals of the job rotation in all the above mentioned three levels.

The goal-oriented job rotation process in Central Finland Health Care District has three important stages: *before, during and after the job rotation*. *Before the job rotation* process the nurse manager plans the job rotation in the working unit's action- and education plan early. All the employees are expected to annually make individual plans for their career- and educational development. This plan involves an overview of the skills in need of development for the individual's professional growth. During performance appraisals the nurse manager discusses skills development with the employees and encourages and motivates them to participate in the rotation. Before the job rotation starts, the nurse manager plans the details related to rotation from the employee's own working unit to another: the time, the length and the form of the job rotation (e.g. unilateral, reciprocal etc). When the receiving work unit has been found, co-operation starts between the nurse managers of both units and the person taking part in the job rotation, who will draw up personal goals for the job rotation in writing. The nurse manager then informs the unit about the coming job rotation in the staff meeting and plans the job rotation goals of the work community in writing together with the staff and the person taking part in the job rotation. The nurse manager in the receiving work unit plans the implementation of the job rotation together with the sending nurse manager and employee taking part in the rotation. They discuss together about the orientation to the work unit and about the mentoring of the newcomer. During the staff meeting the nurse manager in the receiving work unit informs his/her staff about the coming job rotation and plans goals for the job rotation within the working community in writing. (Keski-Suomen sairaanhoitopiirin tavoitteellinen työkierto-malli 2008.)

During the job rotation process an assigned mentor in the receiving work unit welcomes the person who rotates (the actor), and works together in the same work shifts with him/her. The relationship between the mentor and the actor is expected to become confidential and discussion should be open and free. The person rotating is obligated to implement the job rotation according to the personally set goals and work in co-operation with the mentor and the nurse managers in the work community.

After the job rotation the person who rotated will evaluate the attainment of the personal goals of the job rotation, the overall implementation of the job rotation and assesses the personal learning from the job rotation experience during the final discussion with the receiving work unit's nurse manager and the mentor as well as in the performance appraisal talks with his/her own nurse manager. After this, the person who took part in the job rotation process is expected to share his/her experiences of the goal-oriented job rotation in a staff meeting or several staff meetings and inform everyone about the job rotation process. All the nurse managers will evaluate the attainment of the set goals after the job rotation on the individual and communal levels. They also discuss together how the overall job rotation process succeeded according to the opinions of the actual rotator and the mentor. Then a plan is drawn for the future follow-up activities in the annual reports of the work units. (Keski-Suomen sairaanhoitopiirin tavoitteellinen työkierto-malli 2008.) Figure 1 on the next page created by the author of this study shows the job rotation process according to the goal-oriented job rotation plan in the Central Finland Health Care District.

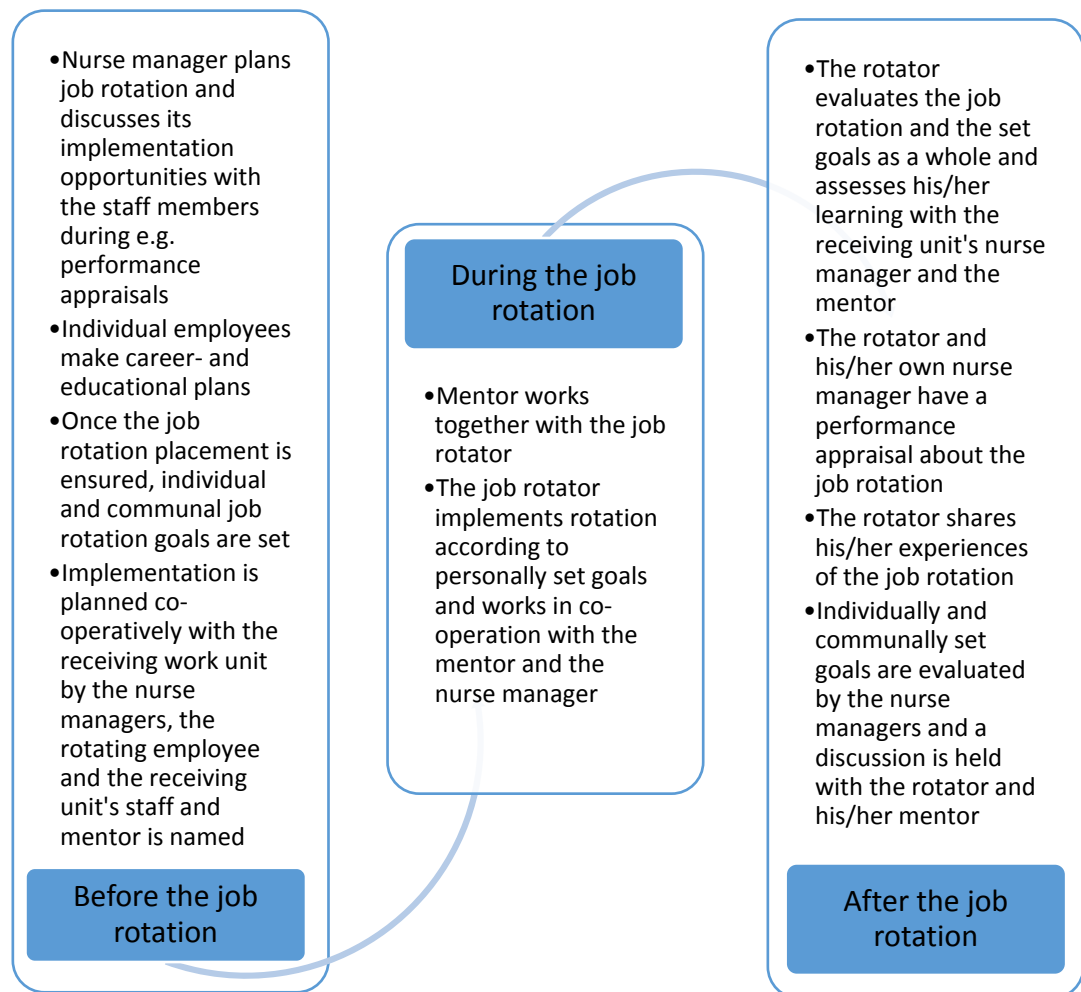


Figure 1 Goal-Oriented Job Rotation Process in the Central Finland Health Care District

3.4 Other Types of Staff Mobility

Although the time period of the staff mobility can change from few days to months, it is essential to set goals for the rotation so that all the parties (the one who leaves to rotate, the sending party and the receiving party) could gain the maximum amount of benefits from the rotation. The ultimate goal of staff mobility is to strengthen the competence of the personnel and to develop the function of the organization. There are different methods to improve staff mobility in organizations and each organization should develop a mobility method that supports the organization. (Valtionhallinnon henkilökierro-opas 2012, 29–31.)

According to the Finnish Ministry of Finance (Valtionhallinnon henkilökierto-opas 2012), the rotation of the personnel can be *systematic rotation inside an organization, a quality journey to a peer's organizations, the work pair method, work pair or group, or a short meeting*. (Valtionhallinnon henkilökierto-opas 2012, 29–31.) In the *systematic rotation inside an organization* the rotation of the personnel is regular and continuous, it can last from one week to several months and it can happen between professionals with similar work tasks. This type of systematic rotation strengthens the consistency of the practices of the organization and spreads the good practices.

The peer partners of the organizations can make a so called *quality journey to the peer's organizations* at the same time. The quality journey is based on the Common Assessment Framework (CAF) -model, which is a quality evaluation model co-operatively produced by the member countries of the European Union for public sector organizations. A quality journey can last for a few months, but it does not require continuous co-operation between organizations. This kind of form of mobility serves especially in strengthening the personnel's knowledge and the knowledge related to the work practices of the organization.

In *the work pair method* two employees from the same organization or from different organizations form a work pair that will work together for a certain period of time and familiarize themselves with each other's work. This method that usually lasts from a few days to a few weeks unites learning from the good work practices as well as strengthens the professionalism and learning new skills of the pair of persons who work on the same project or work tasks.

One type of personnel mobility is to become familiar with an organization as a *work pair or a group*. Rotation of the personnel can also be implemented in pairs or in a group in which the persons working with the same tasks will leave for a short visit to another organization and to learn from their peers. The focus of this pair or group visit is to especially learn from peers and to learn to know new working methods and

to recognize new business cultures. This kind of visit can last from a few weeks to a few months.

In *the short meeting* one shadows another person, which is a good way to become familiar with a work duty, project, methods or activity in another organization or inside one's own organization during a few days. This kind of staff mobility supports especially networking of the organizations and persons. (ibid., 29–31.)

The City of Jyväskylä launched a guide for its personnel in 2012 about the internal mobility of the staff. The guide outlines two different types of internal mobility: *reciprocal traineeship* and *shading*. In the *reciprocal traineeship* the employee is transferred voluntarily to another duty for a pre-agreed time limit, which could last from one to twelve months. The reciprocal traineeship is an effective and systematic way to develop professionalism for a longer period of time. On the other hand, *shading* means a short-term period for familiarization with another work unit and its operations. Usually, shading lasts from one to three days. (Sisäinen liikkuvuus – työvaihtoon tai varjostamaan 2012.) In addition, the staff exchange agreement between the Jyväskylä City, which provides primary health care, and the Central Finland Health Care District, that provides mostly specialized health care, enables the networking and mobility of the personnel between these two organizations.

As the healthcare organizations are facing challenges to recruit and retain nursing staff, the opportunities to undertake *secondment* have become increasingly common in the United Kingdom according to the literature review of this thesis. In the NHS (National Health Service) the use of secondment has become a widespread, positive and popular vehicle for staff and service development (Hamilton & Wilkie 2001). NHSG Secondment Policy (2009) defines the term secondment as “*the temporary placement of an employee to another organization, or to a different part of the same organization, for a specific purpose and specific time to the mutual benefit of all parties*”. Secondment is either internal or external, and secondment opportunities for an employee range from major commercial businesses to public sector organizations without forgetting small local charities, groups or schools. Paid

secondments are full-time work which require formal arrangements and may last up to one year. The key issues to be noted before, during and after the secondment are mentioned in the secondment guideline or factsheet. In the secondment process the clarity of the agreement, training requirements, strategies for keeping in touch and the importance of evaluation are well-noted. (NHSG Secondment Policy 2009; Factsheet on Secondment 2013; Dryden & Rice 2008.) The private sector uses its own definitions of secondment. Secondment can be, for example, “developmental” in order to develop the individual’s specific skills to improve career development or “conflict resolution support” in which the secondment period can help to reduce the personnel problems. (Dryden & Rice 2008; Secondments That Work 2014.)

The secondment offers many advantages, such as career enhancement, security to gain experience in different work posts while own work posts awaits, enablement to learn, several opportunities, network possibilities, diversity, motivation and education. It enhances personal and professional development and nurtures individuals if clear objectives are set and regular constructive feedback is given. It is valuable to see the same issues from another perspective and with the aid of the secondment, this is often achieved. (Critchley 2009.)

4 The Job Rotation in the Field of Nursing

For the past few years health care has gone through big changes in Finland. Over-supply of labor has turned quickly to labor shortages. On the other hand, the population is aging, and the demand and the need for various welfare and health services grows. Lately the focus has been turned to the wellbeing of the staff in the health care field. However, the professionals are still working under a great deal of pressure. (Ronkainen 2011.) In order to succeed in its task, the social- and health care field is dependent upon motivated and skillful personnel committed to its work. (Vesterinen 2013, 16).

The complexity of work has an impact on an individual's intellectual abilities, which in turn influence on the individual's career development. In working life, it is important to give a possibility to an individual to solve new problems, to face new challenges and to progress onwards to new tasks which can bring variety and renewal at some level. Job rotation can help individuals to understand the meaning of their own contribution in the organization in a holistic manner and to understand the basics of good working style. Job rotation also gives individuals a better understanding of their colleagues' work and expands the views of the individual. Understanding the importance of variety at work is essential in a learning organization. Organizations may set goals in their strategies, but they cannot order how people do their work. The actions of the people are guided by their understanding. (Karlöf, Lundgren & Edinfeldt Froment 2003, 54–56.)

Nurses' professional development is based on constant learning and evaluation, and job rotation can strengthen their special expertise and skills, which, in turn, has an impact on the quality of the given care. A nurse manager, who promotes personnel's career development, has opportunities to create a good basis for the learning of new things, the self-development of an individual and the feeling of being able to control one's work. With the aid of increasing knowledge and skills, the nursing personnel strengthens multidisciplinary co-operation, which is a characteristic of an attractive organization. (Blixt & Uusitalo 2006.)

4.1 The Benefits of the Job Rotation

When studying the nursing staff's experiences of organization's internal job rotation's influence on the learning skills and wellbeing at work it was found out that job rotation had a positive effect on the employees' social communication skills as well as their self-esteem. Job rotation promotes decision making skills, information acquisition skills, ability to influence at the work place and motivates self-development. One's appreciation towards others' expertise increases. Professional skills, one's own knowledge capital and competence increases and technological competence multiplies. (Hongisto 2005, 82–84.)

Pitkänen (2007, 47–50) and Blixt and Uusitalo (2006) also came to a similar conclusion about effects of the job rotation. Job rotation is an excellent opportunity for self-development. Job rotation activates the maintenance of one's professional knowledge and its development. Self-esteem grew with self-knowledge, attitudes changed and individuals felt freshened up by job rotation. (Pitkänen 2007, 47–50).

Könönen (2005) has also come up with the same kind of results regarding job rotation. Her master's thesis consisted of registered nurses' experiences about job rotation. The registered nurses felt that job rotation was a good method to develop professional growth and maintain expertise. Job rotation also increased the sense of meaningfulness and gave desired challenges to nursing work. On the other hand, not all the registered nurses felt that job rotation would develop them professionally, and they desired for the equal development of other methods (performance appraisal, further education etc.) which underlines the role of the nurse manager as the supporter of an individual learner. (Könönen 2005, 58–64.)

4.2 Job Rotation Supports Learning

According to Asikainen's (2008) research about job rotation of registered nurses in specialized nursing care, job rotation is a valuable method for registered nurses to develop their individual learning skills. Job rotation emphasizes the job rotator's own motivation, the role of one's superior and the positive atmosphere among the work community. (Asikainen 2008, 83–84.) In addition, Järvi and Uusitalo (2004) came to the same conclusion that the motivation of the employee is the foundation of successful development activities, such as job rotation, which can increase the innovation of the employees and thus lead to a learning organization in practice.

A job rotation education experiment was implemented during autumn 2001 and spring 2002 as one of the educational events related to nurses' career model (SURAKE) developed in Central Finland. The aim was to find out and describe how job rotation supports the learning of the participants and their support persons, the mentors. The essential outcome of the experiment was that job rotation widened nurses' competence and that it was seen as a good method of learning through work.

Job rotation had a positive influence on the individual's life skills, communication and co-operation skills, learning and information acquisition skills, leadership and management skills as well as accelerated changes and innovations. (Walle 2003.)

In her study about job rotation as a part of the development of the personnel in nursing, Pitkänen (2007) noted that job rotation gave an opportunity to familiarize with different kinds of working methods, circumstances and work tasks. The appreciation towards other persons' work grew. Job rotation helps people to evaluate their actions and reflect on themselves against others as employees. A job rotation experience gave inspiration to learn new things and deepen one's current knowledge. (Pitkänen 2007, 49.)

4.3 Nurse Manager's Role in the Job Rotation Process

Ojala (2008) states that the role of the nurse manager in nursing is very important in terms of the promoting employees' learning and supporting their knowledge skills. It is also essential for the nurse manager to recognize the contents of the employees' work in order to be able to demand competence from them. In Ojala's (2008) research it was found out that shift work does not support job rotation made in teams or the knowledge in different work units. (Ojala 2008, 79–81, 88.) Job rotation increases employees' wellbeing at work, gives opportunities of self-development and deepens expertise. The nurse manager has a key role in successful goal-oriented job rotation as an important supporter during the different phases of job rotation. (Partanen 2009 47, 71–72; Walle 2003.)

The nurse managers' encouragement is essential for the employees' successful career development. (Järvi & Uusitalo 2004). The commitment of the superior to the enablement of the job rotation is important for the flexible arrangements of the practice of job rotation and for raising awareness and discussing it in the performance appraisals with the employees (Walle 2003). Giving and receiving feedback during the performance appraisal discussions between the nurse manager and the employee has been found out to be one of the most important factors influencing the professional development of a registered nurse. Performance

appraisals can also be seen as instigators of the self-assessment of a registered nurse. Thus, the practice of performance appraisals can trigger the process of the professional development of an employee. (Tuominen, Kankkunen & Suominen 2006; Nurmeksela, Koivunen, Asikainen & Hupli 2011.) Constructive feedback and assessments given from a nurse manager during performance appraisals brings motivation to the employees and with the help of the motivation they are willing to acquire even more knowledge. (Vasset, Marnburg & Furunes 2011). Feedback, rewarding practices, successful collaboration, social support and fairness of the leadership of the nurse managers influence staff nurses' work attitudes and wellbeing. (Kanste 2011).

Performance appraisals enable the development of nurse managers' knowledge management skills as they can help to identify the educational needs and skills necessary for changes in the work unit. Performance appraisals enable the consideration of the importance of work in relation to the organization's and work unit's own goals and helps in implementing changes. (Nurmeksela et al 2011.)

The nurse managers know what kind of new knowledge and learning would be needed to the work community, and job rotation could be one source of these. The nurse managers' co-operation is the key factor during the planning of the job rotation between different working communities. (Walle 2003.) Again, if the nurse manager lacks the knowledge of his/her work unit's training and development plans, it is regarded a lack of leadership skills from the employees' point of view. (Tuominen et al 2006). Knowledge leadership can be achieved by processing information and creating awareness with its help. This again creates dialogue and develops the systems of and approaches to learning within the organization. (Viitala 2005, 188). According to Kanste (2005), Finnish nurse leaders were found to be transformational leaders who reward their subordinates. However, also laissez-faire leadership and active and passive management-by-exception appeared in their leadership behavior, which again differed from the leadership styles of the nurse leaders in the United States, but had similarities to the leadership behavior to the nurse leaders in the Central Europe. (Kanste 2005).

Job rotation is mentioned in the strategy of the Central Finland Health Care District as a tool to develop the content of work and human resources. Huotari (2009) found out in her study that superiors in the social- and health care field lacked the knowledge about strategy and the human resource strategy of their organization. Thus, strategic knowledge management should be developed in order to achieve the planned strategic goals. (Huotari 2009, 191).

4.4 Job Rotation Must Be Carefully Planned

Organized job rotation is seen necessary in the future when the demands of nursing job increase, the circumstances of work change rapidly and the job description of a nurse broadens. Riekki (2012) studied job rotation as a method to develop the competence of registered nurses, and states that nowadays job rotation should not be based on voluntariness, but that it rather should be added to the basic working tasks and career pathway of a registered nurse. An individual and goal-oriented job rotation process would be tailored for every employee, and this could have a positive effect also on the development of the work community's expertise. In other words, individually tailored job rotation in a goal-oriented form would be flexible with the coming years of work, and the model of job rotation could be developed in this process by evaluating the attainment of the outcomes on the way. (Riekki 2012, 64–65.) Järvi & Uusitalo (2004) noted that in order to achieve the objectives to improve and deepen the professional expertise of the new nurses, the job rotation should be carefully planned.

The implementation of job rotation, e.g. orientation and changes in the work places, requires activity from the nurse managers as well as the personnel. If the job rotation is successful, it can diminish the turnover of the nursing staff. The lack of nursing staff complicates the implementation of the job rotation. From the economic point of view, job rotation has not increased costs. (Blixt & Uusitalo 2006.)

Unilateral job rotation with set goals can have a big influence in the health care field and particularly on nursing. A critical care practitioner left for a rotation period for over four months to the acute medicine unit in the Heart of England, NHS

Foundation Trust, Birmingham in order to develop the acute assessment skills of the unit's nurses and to implement a new patient assessment framework in acute care. The job rotation was structured, the goals were set before the job rotation, the existing practices and issues were explored in the acute medicine unit and a new assessment framework was introduced for the acute medicine unit. After six months of the practitioner's job rotation its effect was evaluated in the practice by reviewing the multi-professional patient records which revealed that the new assessment framework was still used in practice. Nurses were supported to embrace new skills which again resulted a change in the practice. (Lees & Hughes, 2009.)

4.5 Secondment Experiences as Job Rotation in Nursing

In a survey of Hamilton & Wilkie (2001) about nursing staff's individual and organizational views on secondment it was found out that secondment was seen as an opportunity which allows individuals to develop new knowledge and skills, progressing their career and gain wider strategic perspective.

Two nurse managers shared their secondment experiences in interim nursing director posts in an article appearing in the Nursing Management journal in 2008. According to their secondment experiences, nurse managers should take into account the professional skills and the knowledge needed during the job rotation in a new position. They gained personal, professional and organizational benefits, for example, by joining networks of directors in the local health economy and worked, learned and identified new role models among more experienced chief executive officers and colleagues and considered career changes. The two nurse managers also emphasized that prior to secondment they developed personal work plans and set of objectives, which helped them to remain focused during the experience. Planning and reporting are essential during the secondment experience, and this kind of opportunity should be part of the development of modern nursing careers in all areas of practice. (Jones & Kedward 2008.)

According to Dryden & Rice (2008), in the secondment process the framework, clarity and the evaluation are the key factors to successful secondment for all the parties

involved. Secondment aids the retention of staff if all the criteria are fulfilled and guidelines are followed. Managers have the essential role as motivators of secondment.

Secondment also brings challenges to individuals. In the NHS Scotland's Nursing and Midwifery Practice Development Unit eight employees left for job rotation and according to their feedback, the challenges were varied and linked to their previous experiences. Two of them had difficulties to adapt themselves to a minor role; they used to being the ones in charge and now found it difficult to adapt to positions with none of those management responsibilities while two others faced challenges because of the lack of experience being in charge of chairing meetings or facilitating groups. Political issues and establishing productive relationships with "difficult individuals" were also highlighted as challenges in job rotation as well as feeling of isolation in a different work role. (Bond 2002.)

Hamilton & Wilkie (2001) also had similar results in their survey about the use of secondment in a teaching hospital. The lack of a role definition for the individual and the organization and difficulties to adjust to a new environment and culture were some of the barriers inhibiting successful secondment.

4.6 Job Rotation and Role Stress

In a nursing study conducted in two Southern Taiwanese hospitals it was found out that in order to increase the nurses' job satisfaction and to reduce the high turnover of nurses in an organization, a hospital could promote the benefits of job rotation while implementing it periodically and fairly. The role stress and its effect on job satisfaction and organizational commitment was also taken into account in this study. Role stress was referred to as the stress which is formed by the combined expectations of an individual's behavior from all circles, and this stress can lead the individual, for example, to performance reduction and burnout. The conclusion of this study was that reduction of role ambiguity in role stress has the best effect on nurses in view of enhancing their organizational commitment, and that job rotation

could have effects on nurses' job satisfaction as well as organizational commitment. (Ho, Chang, Shih & Liang 2009.)

There were also similar findings regarding role stress in a Japanese study about the experiences of Japanese clinical nurses undertaking ward rotation in a general hospital. In Japanese hospitals ward rotation is periodically scheduled for improving nursing services, encouraging nurses' career development and stimulating quality ward activities. Ward rotation is not only the change of the work place but it can also mean a transition in the nurse's role. According to the findings, the participants of this study experienced role overload, role incongruity and/or role under-load, role over-qualification or role ambiguity in the new environment. Role stress created emotional distress among nurses. The nurses' high desire for career development facilitated the process, while the lack of preparation inhibited it. Appropriate ward rotation enhances nurses' in personal and professional development and confidence. (Fujino & Nojima 2005.)

Job rotation in nursing has been studied especially from the employees' point of view, but there is very little research conducted on job rotation as described and analyzed by the nurse managers. The essential findings of the previous, chosen studies of job rotation and nursing are in Appendix 3.

5 The Study Aims and Questions

The purpose of this study was to describe the nurse managers' experiences of goal-oriented job rotation in the Central Finland Health Care District's work units. The aim was also to examine how the goal-oriented job rotation model was used in the work units and whether there were any needs to develop the model according to the nurse managers' point of view. The results can be used to develop goal-oriented job rotation in the nursing and health care sector.

Research questions are:

1. What was the starting point of the goal-oriented job rotation model implementation in Central Finland Health Care District's work units as described by the nurse managers?
2. How did the nurse managers feel about the functioning of the job rotation model used in the work units?
3. According to the nurse managers in question, are there any needs for the development of job rotation in general?

6 The Empirical Part of the Study

6.1 The Methodological Background of the Study

This study had a descriptive and quantitative approach. The intent was to explore and describe the real-life situation; the experiences of the nurse managers. The purpose of descriptive research is to provide new information about a phenomenon that has been studied very little or at all. (See Burns & Grove 2005, 44). Experiments, questionnaires and surveys are traditional quantitative approaches made to advance the nursing science. (Fain 2004, 6). Originally, survey type of research in a form of a questionnaire was chosen by the Central Finland Health Care District's job rotation –

team in order to obtain a great deal of information about a particular phenomenon in a short period of time. Questionnaires can also be called as measurement instruments, and devising the questionnaire is the most critical phase in the quantitative research, because the questionnaire must be sufficiently precise and measure comprehensively. A reliable and extensive literature review is an important basis of the formed questionnaire. (Kankkunen & Vehviläinen-Julkunen 2009, 87.)

The aim in quantitative research is to be objective. Yet one of the basic requirements of quantitative research is for the researcher to be able to understand the research results and interpret them in a right manner. This means that the researcher must have some theoretical and empirical knowledge about the object of the study.

(Alkula, Pöntinen & Ylöstalo 1994, 20–21.) The author of this study is a registered nurse, has been a substitute nurse manager in the primary nursing care field as well as worked as a registered nurse in the studied organization in Central Finland Central Hospital. Job rotation in nursing has become familiar to the author of this study by having employees who have participated in job rotation, as well as from the literature regarding the subject and earlier studies made about the topic.

6.2 The Data Collection and Sample

One of the most classical methods of research data collection is questionnaire, and one can study, for example, facts, values, knowledge, attitudes, beliefs and opinions of particular persons with the help of a questionnaire. Using a questionnaire is the essential method in survey research. The related data collection is standardized when all the questions are same for all the respondents, and a questionnaire enables this. Usually the data that is collected with the help of a survey is analyzed by using quantitative means. (Hirsjärvi, Remes & Sajavaara 2012, 193–199.)

One can say that the success of the whole research is dependent on the questionnaire in the survey type of research. The design of a good questionnaire is an ensemble in which the content and the statistical factors meet. It is crucial to ask the “right” questions. (Vehkalahti 2008, 20.) The questionnaire in this study had both multiple choice questions and open-ended questions.

When studying the experiences of certain persons, the usual way is to interview them, but as a research method, an interview takes a great deal of time. Hence, as there are many nurse managers working in the Central Finland Health Care District, the job rotation -team decided to create a questionnaire consisting of multiple choice questions and open-ended questions. The data was received by the author of this study, and therefore it can be named as secondary data. The permission for the study was granted by Central Finland Central Hospital and the Central Finland Health Care District. When given secondary data, one has to be critical towards the reliability of it in terms of resources. Many times, secondary data must be adjusted, interpreted and combined together in order to make the data comparable. The researcher can neither decide what is to be studied nor seek a closer contact with the informant group of the research. (Hirsjärvi et al. 2012, 186–190.)

According to their discussion, the Central Finland Central Hospital's multi-professional job rotation -team formed a questionnaire for the nurse managers about goal-oriented job rotation. A link to the questionnaire was sent to the nurse managers via the internal email system of the Central Finland Health Care District. The questionnaire had been created by using Webropol 2.0. This survey and analysis application can be used as a tool for inquiry and enables the organizations both in the public and private sectors to understand their clients better and to develop organization's own areas of responsibility. Webropol 2.0 helps to create new kind of expertise and supports organization's management and leadership by bringing the desired information from inside of the organization with the help of different kind of analysis tools and methods. (Webropol kysely auttaa ymmärtämään asiakkaiden ajatuksia. 2012.)

The questionnaire included semi-structured multiple choice questions in the beginning concerning the respondent's work place and work unit for basic background information for the survey. The job rotation -team had decided that other background information was not relevant for the study, for example, if the respondent was male or female etc. The first question in the questionnaire asked if the goal-oriented job rotation model created in the year 2008 was used in

respondent's work unit. If the respondent had answered "No", then she/he was asked to continue to answer the last four open-ended questions. If the respondent had answered "Yes" to the first question, then she/he followed through the whole questionnaire which included multiple choice questions, questions with claims in which the respondent could answer "Yes" or "No" and open-ended questions to support and enliven the chosen claims and answers to the multiple-choice questions. Open-ended questions give a possibility for the respondents to tell in their own words what they actually have in mind whereas multiple-choice questions can chain the respondent to the ready-made choices of the researcher. In addition, open-ended questions help the researcher to interpret the deviant multiple choice answers. (Hirsjärvi et al. 2012, 201.)

The survey was done in the Central Finland Health Care District during November 2011 to October 2012 via an internet link to the questionnaire in the Webropol 2.0 in an email. The reason for the long period of the survey time was the fact that the first round of the survey from November 2011 to April 2012 produced too few results (48 answers). Secondly, the results of the second survey round during June 2012 were not recorded in the Webropol 2.0 for some reason. The job rotation -team sent out a third email to call all of the nurse managers in the beginning of October 2012 and reminded that it was still possible to answer to the survey during October 2012. After this third round of the survey the number of the respondents was satisfactory: 55 answers in total.

The questionnaire was sent by the Central Finland Health Care District's job rotation -team members to all of the nurse managers. According to the Central Finland Health Care District's technology specialist, who helped the job rotation -team to use the Webropol 2.0 in the survey, the link to the questionnaire was sent according to nurse managers' electronic, organization's internal mailing -list in the Central Finland Health Care District. This mailing list had names of 76 nurse managers. All of the nurse managers had opened the email with an internet link to the questionnaire according to the Webropol 2.0. From these nurse managers 55 had answered the questionnaire. The response rate was 72 %. In the internal nurse managers' email

list were also nurse managers who were free of work duties during the survey times. In addition, some of the nurse managers were in charge for many work units at the same time. Those were possibly some of the reasons why all of the nurse managers could not or did not answer the questionnaire.

6.3 The Data Analysis

According to Burns & Grove (2005), the analysis of the data is carried out in order to give meaning to the data, to organize it and to reduce it. A quantitative research analysis involves, for example, the use of descriptive and exploratory procedures. (Burns & Grove 2005, 43.) The data in this research was analyzed by using the Webropol 2.0 and MSExcel-spreadsheet programme.

The questions in the questionnaire were mainly nominal scaled or open-ended questions. The nominal scale data was analyzed directly in frequency distributions and cross-tabs. With the aid of the open-ended questions, the job rotation -team wanted to know more about certain aspects of the implementation of the job rotation process. These questions were formed according to the studied theory and the nominal scaled questions according to the job rotation -team. The analysis of the open-ended questions started by looking at the original answers of the respondents, grouping them accordingly and forming the theoretical main categories according to the features of the answers. (See Tuomi & Sarajärvi 2009, 111–112.)

The answers of the open-ended questions were coded and classified on the basis of similarities and differences, in statements or the respondents' answers. After classification, the data were analyzed quantitatively as frequencies. In quantitative research the data is described by using frequencies and percentages, but in this research the sample was very small for counting the percentages. Frequency is one of the basic elements of a quantitative research report, and it can be described as numbers in charts. Frequency means the amount of classified, statistical units.

(Kankkunen & Vehviläinen-Julkunen 2009, 103–104.) An example of the data analysis conducted by the author of this study can be found in the Appendix 4.

7 The Results

The internet link to the questionnaire about the goal-oriented job rotation was sent out to all of the nurse managers in the Central Finland Health Care District via email, and 55 nurse managers answered to the questionnaire.

7.1 Job Rotation Model Implementation Described by the Nurse Managers

The goal-oriented job rotation model that had been created in 2008 was used in 15 work units and not used in 40 work units. According to the results, the model had been mostly in use in the Operative operational area, in six work units. Only one respondent from the emergency operational area had answered to the questionnaire and in this respondent's work unit the model in question had not been in use. Table 1 below describes the implementation of the goal-oriented job rotation model in the Central Finland Health Care District's work units, the respondents' operational areas and the number of the respondents (n=55) in the survey.

Table 1. The implementation of the goal-oriented job rotation model in Central Finland Health Care District's work units (n=55).

Operational area	Goal-oriented job rotation model is used	Goal-oriented job rotation model is not used
	n	n
Operative operational area	6	10
Conservative operational area	5	19
Psychiatric operational area	3	6
Emergency operational area	0	1
Regional health care center	1	4
Total	15	40

The respondents (n=40) who had answered that the goal-oriented job rotation model had not been used in the work units were asked to give the reasons why it was not

used. Out of these 40 respondents 32 described the reasons. Also later to another open-ended question in the questionnaire 52 respondents also listed the factors that prohibited the implementation of the goal-oriented job rotation in the work unit. The reasons and the factors stated were similar in these two open-ended questions' answers. All of these respondents' answers were analyzed together by looking for similarities and differences in the statements.

Six different kind of reasons were raised from the answers: *the lack of resources, no willingness to rotate, other kind of job rotation, problems with the indoor air quality, not familiar with the subject, and no one taking part in the job rotation.*

Table 2. Justified reasons why goal-oriented job rotation model has not been implemented and the frequency of the statements in the answers.

The justified reason	Total number of the similar statements in the answers
The lack of resources	36
No willingness to rotate	20
Other kind of job rotation	13
Problems with the indoor air quality	9
Not familiar with the subject	7
No one taking part in the job rotation	3

The most commonly stated reason for not taking part in the goal-oriented job rotation was *the lack of resources*; lack of time and lack of staff with special expertise. Goal-oriented job rotation was not possible because of the specific nature of the work unit or the special skills being required from the nursing staff in that work unit. One respondent stated that regardless of the encouragement, the staff was not willing to rotate so much, and if the number of the work unit's staff was

small, then a deficit in the know-how of the staff during job rotation could be possible, and that this in turn would put the given care at risk.

The second most frequently given reason for not implementing the goal-oriented job rotation model in the work unit was that there was *no willingness to rotate*. Although the nurse manager had informed about the possibility to take part in the goal-oriented job rotation, the staff had had no interest in it because they were already rotating inside the work unit's workstations and there had been a lot of changes inside the work unit recently.

“Hoitajat työskentelevät useammassa eri työpisteessä tälläkin hetkellä ja muutoksia on ollut viime vuosina paljon. Tämän vuoksi ei ole löytynyt innokkuutta lähteä työkiertoon ihan eri yksikköön, vaikka sitä mahdollisuutta on tarjottu säännöllisin väliajoin.”

(The nurses work in many different workstations at the moment, and there has been a lot of changes during the last few years. Because of this there is no eagerness to take part in the job rotation to a totally different unit, although this possibility has been offered regularly.

Translated by the author.)

There had been *some other kind of job rotation* in the work units. Some work units that were formed from many different special workstations had internal job rotation and sharing of the knowledge and personnel between these special working fields. There had also been natural job rotation or common job rotation and not goal-oriented job rotation as such. *The indoor air quality* influenced in many different kinds of ways on the nursing staff and it had an impact on the overall functioning of the work unit. At worst, the work unit had been closed down because of the poor indoor air quality, and the staff had been moved to work elsewhere inside the organization. This was stated as “natural job rotation” according to one respondent. The poor indoor air quality influenced also vice versa: some employees could not work in units other than their own because they had had allergic symptoms while working somewhere else inside the organization. The phenomenon “goal-oriented

job rotation” was *not familiar* or the culture of job rotation was new. Also it was stated simply, that *no one was taking part in the goal-oriented job rotation*.

In total 52 respondents described, that they had had other kind of job rotation in their work units. In total six different kinds of reasons for other kind of job rotation were stated by the 52 respondents: *work unit’s personnel’s job rotation inside the operational area, job rotation because of the closure of the work unit, job rotation because of the indoor air quality problems, no job rotation, job rotation between operational areas and job rotation between organizations*.

Table 3. The other kind of job rotation implemented in the work units.

The Method	Total number of the similar statements in the answers
Work unit’s personnel’s job rotation inside the operational area	34
Job rotation because of the closure of the work unit	5
Job rotation because of the indoor air quality problems	5
No job rotation	5
Job rotation between operational areas	4
Job rotation between organizations	3

Internal job rotation in the operational area was mentioned in different ways in 34 statements. In the Central Finland Health Care District one operational area could consist of many different kinds of specialized nursing care work units, and thus, the rotation of the personnel was included into the nature of these work units. Again, one work unit could consist of many different kinds of working posts, that demanded special kind of expertise, or it had different working teams or modules. One work unit could also consist of even an outpatient clinic and a day ward, or a work unit could only be considered an outpatient clinic or in-patient ward, for example. One

respondent stated that inside the work unit there are three different working posts being rotated by the nursing staff, and one other respondent stated, that there was internal job rotation between three different working teams inside one work unit. According to one respondent, there were five different special nursing fields presented inside one outpatient clinic and there had been some sort of internal job rotation between these nursing fields. In short, internal job rotation inside one operational area could be job rotation between work units (for example between inpatient wards and outpatient clinics) or job rotation inside the work units (between an outpatient clinic and a ward, working posts, working teams, working modules or specialized nursing fields).

In five of the statements *the closure of the work unit* had caused job rotation of the nursing staff. According to one respondent the nursing staff was able to move to the work units of their choice.

Indoor air quality problems was one of the stated reasons for nursing staff's job rotation. According to the five statements, the work unit had either received nursing staff because of the poor indoor air quality of the other work units, or the nursing staff had had to leave their own work unit because of the poor indoor air quality. In addition, the reason "*no job rotation*" was stated in five different statements. In four statements it was mentioned, that there had been *job rotation between different operational areas*. This job rotation was described as giving help, substituting or giving help by making transfers of the nursing staff to other operational area. There were also other three statements concerning *the job rotation between different organizations*: between primary and specialized nursing care organizations and specialized nursing care organization and JAMK.

According to the results of the survey, the goal-oriented job rotation model launched in the year 2008, was used in the 15 respondents' work units. However, only 13 respondents answered to the question of the participation in job rotation inside or outside the organization according to the survey results. Goal-oriented job rotation has been mainly done inside the organization (n=12) and less outside the

organization (n=4). These results mean that there had been multiple job rotators in some work units that had been participating in goal-oriented job rotation either inside or outside the organization or both ways. (Table 4.)

Table 4. Goal-orientated job rotation inside and outside organization (n=13).

Goal-oriented job rotation	Yes	No
Inside organization	12	0
Outside organization	4	6
Total	16	6

The nurse managers had participated in the unilateral goal-oriented job rotation and also in a project linked to goal-oriented job rotation. The total number of the nurse managers taking part was the same, regardless of the year. This small figure is rather surprising when taking into account that as the head of the work unit, nurse manager should show an example to the employees and lead the way to increase goal-oriented job rotation. On the other hand, the work units have their special features and expertise, and the job rotation for nurse managers would be very challenging. According to 45 respondents of the study, goal-oriented job rotation had mainly been happening inside the organization during the years 2009-2011. (Table 5.)

Table 5. Nurse managers' goal-oriented job rotation in 2009–2011 (n=45).

The form of the job rotation	2009 n	2010 n	2011 n
Unilateral	1	1	2
Reciprocal	0	0	0
Chained	0	0	0
Linked to the project	1	1	0
Total	2	2	2

Registered nurses had mostly participated in goal-oriented job rotation during the above mentioned years (n=59), and the most common form of goal-oriented job rotation (n=26) had been unilateral job rotation, in which one person leaves to rotate and no one is coming to “replace” the employee. The number of registered nurses

taking part in the goal-oriented unilateral job rotation had increased by over 50 % when comparing the years 2009 and 2011. Chained job rotation had appealed only to registered nurses, and this kind of form of the job rotation usually happens inside the organization. Overall, the number of the registered nurses in the goal-oriented job rotation during 2009 to 2011 had been fairly the same: 18 registered nurses in year 2009, 21 registered nurses in year 2010 and 20 registered nurses in year 2011. (Table 6.)

Table 6. Registered nurses' job-rotation in 2009–2011 (n=45).

The form of the job rotation	2009 n	2010 n	2011 n
Unilateral	5	10	11
Reciprocal	7	8	7
Chained	2	1	1
Linked to the project	4	2	1
Total	18	21	20

According to the survey, midwives had taken part in goal-oriented job rotation with the same amount of volume (two persons each year) and in the same forms of job rotation (unilateral and linked to the project) in 2009 and 2010. In 2011 midwives had not been part of any goal-oriented job rotation. (See Appendix 5.)

Understandably the ward secretaries had been able to take part in the reciprocal job rotation, in which two employees change their work units with each other. Unilateral job rotation would not have been possible because of the fact that every ward needs a secretary. In addition, every year ward secretaries had taken part in the goal-oriented job rotation that had been linked to a project. (See Appendix 5.)

Goal-oriented job rotation among the practical nurses was minimal according to the survey. This might be because most of the answers received in the survey were from work units inside Central Finland Central Hospital, and the number of the practical nurses working in the organization is smaller than that of the registered nurses due to the fact that Central Finland Central Hospital provides specialized nursing care.

Moreover, many practical nurses working posts have been changed into registered nurses working posts. (See Appendix 5.)

Interestingly, the number of the nursing staff taking part in goal-oriented job rotation was the same during the years 2010 and 2011. Overall, the volume of the nursing staff taking part in goal-oriented job rotation had been mainly the same during years 2009 to 2011. The results are divided into the three tables according to the year. (See Appendix 5.)

7.2 The Functioning of the Job Rotation Model as Described by the Nurse Managers

As the process of goal-oriented job rotation had been clearly defined in the Central Finland Health Care District, the job rotation -team wanted to know, if all the steps of the process were followed. The answer rate to the question about the implementation of the goal-oriented job rotation model was low due to the fact that the model in question was used only in 15 work units, while 40 work units did not implement goal-oriented job rotation literally, and most of those units had some other kind of job rotation in use. The practical implementation of the goal-oriented job rotation is described in the Table 7.

Table 7. The practical implementation of the goal-oriented job rotation (n=14).

The practical implementation of the goal-oriented job rotation	Yes n	No n
The welcoming of the job rotator is organized in the ward	14	0
A performance appraisal is done with the one who takes part in the job rotation	13	1
A final discussion/evaluation has been arranged	13	1
The return discussion with the immediate superior has been arranged	13	1
The valuation of the other unit increased	13	0
A job rotation plan has been made	12	2
Job rotator's own learning experiences increased his/her own working community's learning, skills and development of the work practices	12	1
The entity of the patient's care process became clearer	12	1
Competence and the information flow increased between the units	12	1
A mentor has been named	11	3
The learning experiences have been shared during staff meeting	11	3
The job rotator's counselling skills of the patients/students increased	11	2
Giving help between different work units became easier	9	4
A description of the work community is done	9	4
The learning outcomes of the work community are defined	8	6
The flexible usage of staff between work units increased	6	7

According to the survey results, the goal-oriented job rotation model had been put effectively into the practice in the units where it had been in use. The person who had come to job rotation period to the ward had been welcomed, and most of the persons who had left for the job rotation period had had performance appraisal, closure discussion and assessment with the nurse manager before and after the job rotation.

The plan for the job rotation period had been made between all the participants (the job rotator and the nurse managers) and with the help of the job rotation the valuation of the other units had increased.

The job rotators' knowledge and skills increased, the knowledge of the nursing care process of the patients in the units became more clarified, and the learning experiences of the persons in job rotation added to the overall learning of their own workplace. Furthermore, rotation seemed to enhance the flow of information and the development of the work practices between units that participated in the job rotation process.

The persons participating in the job rotation had overall been welcomed and taken good care of, and there had been a mentor in the unit for the newcomer. After the job rotation period, the job rotators had shared their learning experiences in the ward's staff meetings.

Persons who took part in the job rotation process felt that their own mentoring skills in nursing and counselling the nursing students had expanded. On the other hand, the respondents did not fully agree that goal-oriented job rotation would increase the flexible usage of the staff between work units. Moreover, the definition of the learning outcomes of the work community needs more attention in the future.

The respondents of the survey were asked to tell more about the practical implementation of goal-oriented job rotation. This open-ended question was answered by eight nurse managers. Based on these eight answers it was discovered that it is important to set a mutual goal for goal-oriented job rotation. This is

beneficial for the individual, the unit and the organization. This will also contribute to the advancement of professionalism and expanding one's own work image.

According to the findings of the survey, the nurse managers felt that the implementation of goal-oriented job rotation requires a common, broad-based approach and seamless co-operation between the nurse managers. If the job rotation had not been organized well or if the organizational matters had been unclear, the job rotation experience had not been satisfactory. One of the respondents felt that some of the survey questions were difficult to answer as job rotation was still in process in the respondent's work unit. Furthermore, one respondent informed that because of the unilateral goal-oriented job rotation practiced in the unit, the questions about the implementation of goal-oriented job rotation in the survey did not match with the reality.

The question about the length of the goal-oriented job rotation period was answered by 14 respondents. Goal-oriented job rotation had been mostly arranged for three- to six-month-long time periods (n= 4, in each). Six-week-long goal-oriented job rotation periods had been experienced by 2 respondents, and one respondent had had a circa nine-week-long goal-oriented job rotation period. In addition, three respondents had experienced different lengths of job rotation periods: from six to twelve months, for two years and a project lasting about one year. (Table 8.)

Table 8. The average length of the goal-oriented job rotation period (n=14).

The length of the time period	n
3 moths	4
6 months	4
6 weeks	2
9 weeks	1
6 to 12 months	1
2 years	1
As long as the project; about one year	1
Total	14

The work units where the goal-oriented job rotation model was practiced found it very useful and beneficial.

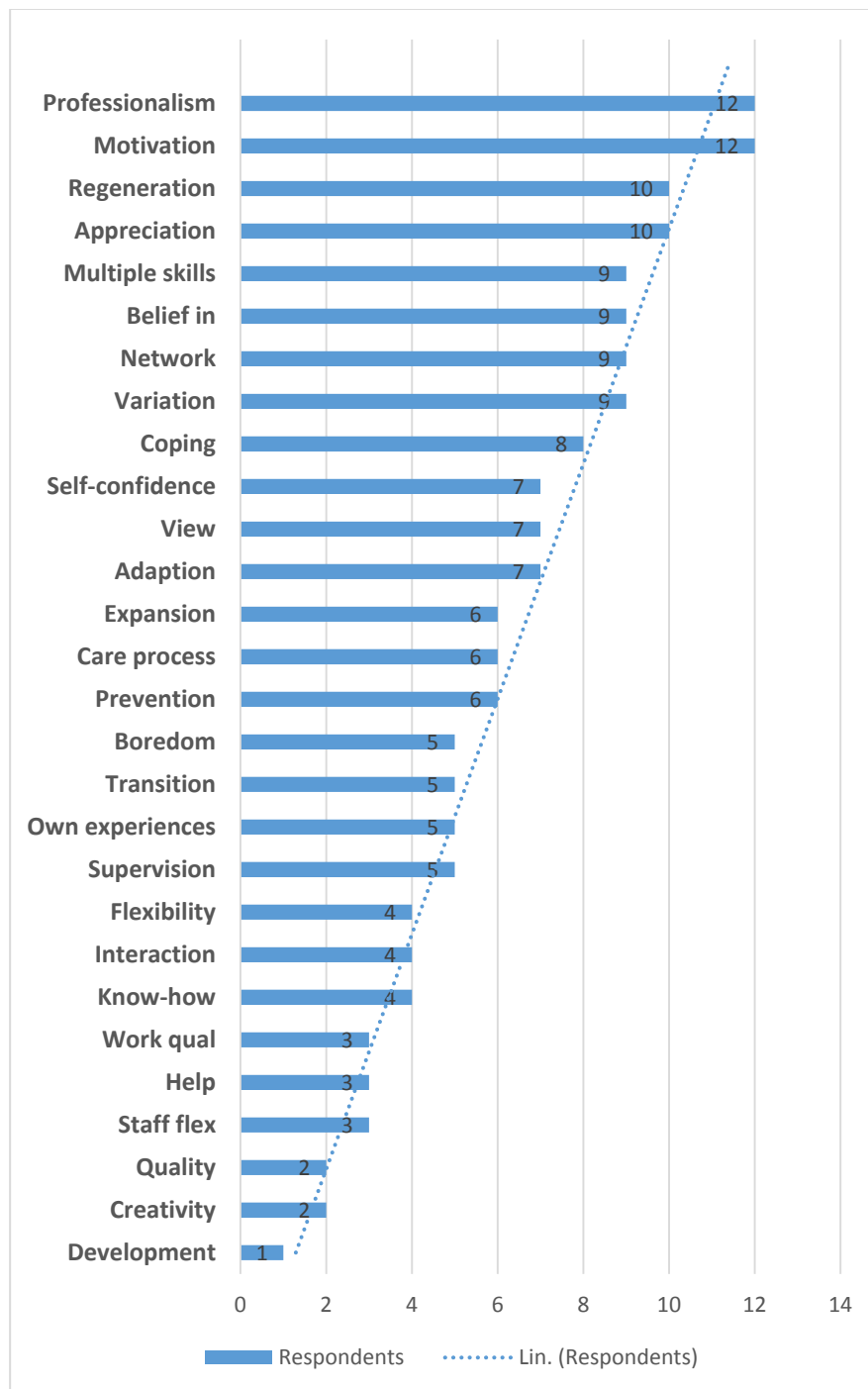


Figure 2 The benefits of the goal-oriented job rotation (n=12)

Goal-oriented job rotation increased and renewed professionalism, skills, experiences, motivation, and appreciation towards the other working units. Goal-oriented job rotation also maximized faith in the individual's own coping with the ever challenging nursing work. This led to better coping at work and growth in self-confidence. Job rotation brought the desired variation, expanded the contact network, increased the multiple skills of the persons as well as their faith in their coping and learning skills. (Figure 2.)

The nurse managers (n=12) who responded to the survey question about the benefits of the goal-oriented job rotation, stated that with the help of a goal-oriented job rotation experience nurses' adaption skills towards change and their views of others' work conditions and work requirements had improved.

On the other hand, they also felt that goal-oriented job rotation had not increased the flexibility of the staff, interaction between the staff or exchange of knowledge and information between the participating units.

Surprisingly, goal-oriented job rotation had neither any impact on improving the quality of work, nor did it further facilitate giving help between the units. The survey also showed that some of the nurse managers did not feel that goal-oriented job rotation would increase the creativity, productivity or loyalty of the working staff. Finally, goal-oriented job rotation did not help to increase the nursing staff's work-development activities.

7.3 The Development Needs of the Job Rotation Described by the Nurse Managers

The nurse managers were asked to make suggestions in order to develop job rotation. This open-ended question was answered by 37 respondents. The answers were analyzed by looking for the differences and similarities of the statements, and after this, summarizing the similar statements. Six different suggestion categories for

the development of job rotation were formed based on the respondents' statements: *more communication, less bureaucracy, inducements, compulsory job rotation, enough time and staff and more versatility.* (Table 9.)

Table 9. The suggestions to develop the job rotation.

The Suggestion	Total number of the similar statements in the answers
More communication	16
Less bureaucracy	9
Inducements	6
Compulsory job rotation	5
Enough time and staff	5
More versatility	5

Most of the statements dealt with the phenomenon "*more communication*" with regard job rotation. This category included the suggestions for more open discussion and information about the possibility to participate in job rotation. According to the findings of the survey, the nurse managers felt that job rotation should be developed by improving the communication and the information flow inside the organization. Other very important ways to develop and increase job rotation were sharing the staff's experiences of job rotation openly and discussing job rotation, for example, during individual performance appraisals. The nursing staff needs more encouragement and support in order to take part in job rotation. The nurse manager's positive attitude towards job rotation was also seen as an important factor to be developed more. Three of the respondents also hoped that their superiors (meaning directors of nursing) would commit to job rotation and take part in it, discuss about the subject with the personnel and encourage the personnel to participate. "An electronic notice board" in the hospital district's internal SANTRA-

internet-pages was suggested as a useful platform and as means of open communication for informing about the possibilities of goal-oriented job rotation.

“Olisi jonkinlainen sähköinen ilmoitustaulu mihin voisi laittaa infoa jos työkierto kiinnostaa. Kertoa, millaista paikkaa hakee ja kysellä myös keskinäisestä vaihdosta kiinnostunutta. Voisi helpottaa ratkaisun tekoa jos näkisi millaisessa paikassa ”paikka auki” olisi.”

(There could be some kind of electronic notice board in which one could put information if there was interest in job rotation. You could tell what kind of place one is looking for and also ask about the interests in reciprocal exchange. It might be easier to make the decision if one could see in what kind of place the “open position” would be.

Translated by the author.)

The overall job rotation process was seen as *bureaucratic* and complicated to follow up in nine statements. The bureaucracy concerning job rotation was seen stiff in the organization. Two respondents stated that job rotation should be made easy to implement and the arrangements for it simplified. However, other two of the respondents wished for forms to be filled in or a model to support the planning of job rotation. On the other hand, two of the respondents desired to have as little forms as possible to be filled in.

Suggestions for *inducements* for the ones who take part in job rotation were mentioned in six statements. Congruent salary and rewarding the job rotator were seen as the major inducements to influence the nursing staff's eagerness to participate in job rotation. One of the respondents asked for training for job rotation, and one respondent stated that job rotation should be voluntary.

However, *compulsory job rotation* was seen in five statements as one possibility to develop job rotation. *“Ihan pakolliseksi kaikille esim. 5 vuoden välein jokaisen oltava*

muualla töissä!" (Compulsory to everybody, for example, every 5 years everybody should be working elsewhere! Translated by the author.)

It was also stated that job rotation could be included in the orientation of the new staff. After certain years of working in the work unit, the staff member should rotate to another, and from there job rotation could be expanded to a larger co-operation. One of the respondents desired for a job vacancy which could be specially made for training or orientation. With the aid of this vacancy, the person could take part in the job rotation process as "an extra staff member" and have more time to settle in to the new working environment .

Enough time and adequate numbers of staff were factors in the category "*enough time and staff*" mentioned in five statements. A sufficient amount of time for the job rotation process was wished for. The time for orientation in the job rotation process was seen too short. Lastly *more versatile* job rotation possibilities were mentioned in five statements; for example, implementing different kinds of methods and models to rotate inside and outside the organization. It was also suggested that job rotation could happen between defined partnership work units.

7.4 Nurse Managers' Ways to Encourage Their Staff to Participate in the Job Rotation

The nurse managers were asked to state in what ways they had encouraged their staff to take part in job rotation. 49 respondents had answered to this open-ended question, and three main categories of the method similarities were found: *performance appraisal, emphasizing benefits and encouragement*. (Table 10.)

Table 10. The methods to encourage the personnel to leave for job rotation (n=49).

The method	n
Performance appraisal	21
Emphasizing benefits	17
Encouragement	11

The most important means of encouragement to take part in job rotation was with the help of a *performance appraisal*. Regular performance appraisals were seen as the main way to bring up the possibility to promote and remind about the job rotation possibility according to 21 respondents. In different work units, the nursing staff had made small presentations about the process of goal-oriented job rotation and the persons who had experience of job rotation had shared information about it. It had also been discussed in the staff meetings as well as other more informal talks. *“Asiasta keskustellaan säännöllisin väliajoin ja henkilöstöä kannustetaan uusiin haasteisiin.”* (The subject is being discussed regularly and the staff is encouraged to new challenges. Translated by the author). “Openness” was seen as a major factor in the communication.

One way to present the possibilities of goal-oriented job rotation was by *emphasizing the multiple benefits* it could bring on the individual, communal and organizational levels. According to 17 respondents, the most emphasized benefit that was gained from the job rotation was increased know-how. Job rotation was also seen as beneficial in terms of an individual’s own learning. After the job rotation experience one would learn to appreciate his/her work unit and other work units as well. Job rotation was seen as empowering and a full of challenges. Job rotation would increase networking and bring joy to working life.

“Vaihtelun, työn rikastamisen, oppimisen ja osaamisen laajentamisen perusteilla. Lisäksi on hyvä välillä vaihtaa roolia ja päästä kyselemään, tuntea itsensä epävarmaksi ja vielä saada siitä oppimisen ja

selviytymisen kokemuksia. Jo uudet työkaverit voivat virkistää ja voimauttaa.”

((Job rotation brings) variation, job enrichment and it increases learning and the know-how. Also at times it is good to change one's role and get a possibility to question, to feel oneself uncertain and still get the experiences of learning and survival. Even new colleagues can refresh and empower. Translated by the author.)

Some employees who had taken part in goal-oriented job rotation had told about their experiences to their fellow colleagues and nurse managers. In one of the units, goal-oriented job rotation was included in the work unit's action plan, whereas in one work unit it had been jointly agreed that goal-oriented job rotation would be made regular inside the unit.

According to 11 respondents in the work units where the goal-oriented job rotation model was in use, the nurse managers had simply *encouraged* the personnel in many different ways to participate in goal-oriented job rotation. Two nurse managers mentioned the importance of a positive attitude towards job rotation. One nurse manager stated that personnel had been reminded about the earlier good experiences of the earlier job rotations, for example, extending one's knowledge, taking one's own knowledge and skills forward to other units, networking, learning new things, being challenged and finding joy in working. According to this respondent's point of view, job rotation is part of the nursing strategy and a common goal in Central Finland Health Care District. One nurse manager had indicated that everyone has a possibility to participate in goal-oriented job rotation if equivalent staff is possible to find to come to rotate into the unit.

8 Discussion and Conclusions

8.1 Main Findings and Discussion

According to the findings of this study, the use of the goal-oriented job rotation model in the Central Finland Health Care District's work units had been low. Although generalization is risky, one can state that the work units of the Central Finland Health Care District may not know how to take advantage of the goal-oriented job rotation model. Based on the results, it is seen as a too complicated and bureaucratic model to use for job rotation. Alternatively, the work unit's own internal job rotation methods are strong and considered to be normal routine of the work unit's practice. As the study in question shows, the lack of time and lack of staff with special expertise, no willingness to rotate because of the many different kinds natural reasons, a work unit's own job rotation practices as well as problems with indoor air quality, poor knowledge of the subject and no one taking part in job rotation were reasons why the goal-oriented job rotation model was not in use.

Goal-oriented job rotation was mainly internal and unilateral in the Central Finland Health Care District during the years 2009 to 2011, and registered nurses were the biggest participating professional group of all the nursing staff. The nurse managers, practical nurses, midwives and ward secretaries had also taken part in goal-oriented job rotation. The average time of the goal-oriented job rotation had been from three to six months.

From the nurse managers' point of view, the goal-oriented job rotation model had been useful in the work units where it had been applied effectively. The goals were set on the individual and work community levels before sending employees to goal-oriented job rotation, the receiving work unit was prepared for the job rotator to come, and performance appraisals, discussions and assessments had been carried out before and after the job rotation between the nurse managers and the job rotator. Goal-oriented job rotation had been well-planned and all of the affected

participants (the job rotator and the nurse managers) had been included in the planning, implementing and evaluating the process. In the respondents' answers it was found out that the setting of the mutual goal in goal-oriented job rotation was beneficial to the individual, work unit and the organization. If the goal-oriented job rotation had not been organized well or if the organizational matters had been unclear, the job rotation experience had not been satisfactory. According to Asikainen (2008), all the participants of goal-oriented job rotation should understand the deepest meaning of it as the possibility of learning in order it to be goal-oriented, planned and educative. In her study she found out that in the operating environment of specialized nursing this was not quite so and that goal-oriented job rotation supported well only the employee's competence development on the individual level rather than work on the community level. (Asikainen 2008, 79–80.)

On the individual level, goal-oriented job rotation increased and renewed job rotator's professionalism, skills, experiences, motivation and knowledge. Hongisto (2005) had similar findings in her study about the positive effects of job rotation on the nursing staff's know-how and work wellbeing. (Hongisto 2005, 82). Also Partanen (2009, 74–75), Blixt and Uusitalo (2006) Järvi and Uusitalo (2004), Könönen (2005, 61), Pitkänen (2007, 47) and Asikainen (2008, 78) had come to similar conclusions in their studies about effects of job rotation on the individual level in nursing. Overall, job rotation has this positive effect in other working fields too, according to the studies used in the theory part of this particular study.

Persons who had participated in goal-oriented job rotation felt that their own mentoring skills had expanded in terms of nursing and counselling of nursing students in the future. In terms of the individual's professional growth in the social- and health care field, it is important that the development of the competence and new experiences brings new possibilities to gain new areas of responsibility and work tasks. (Laine, Kokkinen, Kaarlela-Tuomaala, Valtanen, Elovainio, Keinänen and Suomi 2011, 97).

According to the findings of this study, goal-oriented job rotation maximized faith in one's own ability to cope with the challenging nursing work, which lead to better coping at work and helped person's self-confidence to grow. In addition to that, Asikainen (2008) found out that job rotation requires social flexibility, good self-knowledge, motivation, the right attitude, tolerance of stress and uncertainty, and perseverance from an individual. (Asikainen 2008, 80). According to the findings of this study, the contact network expanded and adaption to change became better with the aid of goal-oriented job rotation. As in this study, also Hongisto (2005) found out in her study that job rotation helped to increase the valuation of peers' knowledge and competence. (Hongisto 2005, 82).

From the communal and organizational point of view, goal-oriented job rotation clarified the nursing care process of the patients in the work units and increased the understanding and learning of one's own work place as well as the community's learning, skills and development of the work practices. However, the learning outcomes of the work community should be more precisely defined in the future. Moreover, the respondents of the study did not agree that the goal-oriented job rotation would increase the flexible usage of staff between the work units, the interaction between the staff or exchange of the knowledge and information between the participating work units. According to the respondents of this study, goal-oriented job rotation had little impact on the improvement of the quality, creativity, productivity, or loyalty of the nursing staff. Goal-oriented job rotation did not increase the nursing staff's work-development activities. According to Asikainen (2008), a positive attitude towards the development of the work community supports its learning. Furthermore, common and clear ground rules for the implementation of job rotation should be created in order to meet the ever increasing demands of nursing in the future. (Asikainen 2008, 80).

In terms of the developmental needs of the goal-oriented job rotation model, the nurse managers desired to have more communication about the subject, less bureaucracy, inducements, enough time and staff, more versatility and the fact that

goal-oriented job rotation could be compulsory. Especially more openness in the communication was emphasized, and a better and modern information flow inside the organization about goal-oriented job rotation should be developed. The nurse managers' positive attitude towards job rotation was seen as an important factor that had impact as well. In nursing, communication has traditionally been carried out from managers to employees and vice versa, but according to Asikainen (2008), the employees are not ready to give, or the work communities are not ready to receive, feedback from peers. (Asikainen 2008, 79). Referring to the study findings of Hongisto (2005), the participation in job rotation should be voluntary, and nurse managers should encourage, not force, the employees to take part in it. Job rotation should also be made part of the personnel strategy. (Hongisto 2005, 84). The author of this study states that Central Finland Health Care District shows great appreciation towards the importance of the goal-oriented job rotation as a tool to develop the work content of the employees, because the organization has included goal-oriented job rotation in its personnel strategy.

The nurse managers stated the ways how they had encouraged their staff to participate in job rotation. Emphasizing the benefits of goal-oriented job rotation and simply encouraging the staff to participate were methods that nurse managers had used. Interestingly enough, although nurse managers desired to have more openness and communication related to goal-oriented job rotation inside the organization, the most frequently used method by the nurse managers was, in fact, encouraging the staff to job rotation by communicating with them, especially during the performance appraisals and also during staff meetings, sharing experiences etc. This supports the findings of Laine et al. (2011) who studied the working conditions and wellbeing of social and health care staff in Finland. They found out that performance appraisals were useful for social and health care employees' own work performance and self-development, and that the information flow in a hospital setting between the management and the employees, between different professions and between the work units was seen as insufficient. (Laine et al 2011, 92, 135). On the other hand, Könönen (2005) came to a different kind of conclusion in her study about job

rotation as a means of professional development in nursing. According to her study findings, performance appraisals had the least effect on professional development. (Könönen 2005, 59). The nurse managers are expected to activate and support the development of the competence of the personnel. (Asikainen 2008, 79).

According to the personnel report of the Central Finland Health Care District from 2013, the following tools of the knowledge management were renewed: performance appraisals, goal-oriented job rotation, supervision of work and mentoring with the co-operation of the Jyväskylä City. The strategic goal of the performance appraisals held in the Central Finland Health Care District is 100 %. According to the supervisors, 76 % of the personnel participated in the performance appraisals in 2013, while during 2012 the participation rate was 84 %. Central Finland Health Care District sees that a performance appraisal is an important strategic management tool and that the organization should renew the practices and the forms accordingly. The anticipation of skill needs will be put into a greater focus in the future and the performance appraisals will focus on the work unit's basic task, the common understanding of it and the future competence needs. (Henkilöstökertomus 2013.)

8.2 Trustworthiness of the Study and Ethical Considerations

The quality of a scientific, quantitative study is evaluated by its *reliability* and *validity*. During the planning of the research the reliability and the validity should be taken into consideration in order to ensure scientific, accurate results. Reliability and validity are impossible to improve after the data collection is completed. (Kananen 2011, 125).

Reliability of research is measured by the accuracy of the results and how well the chosen meter is measuring examined feature. The chosen meter must be reliable and stable, and the measured results must also feature stability and consistency. The only way to ensure that the meter is reliable is to repeat the measurement and find out if

the result outcomes are the same, but often this is challenging and expensive.
(Kananen 2011, 126.)

The chosen meter for this research was a questionnaire, which was made by the Central Finland Health Care District job rotation -team. Before the members of the team formulated the questionnaire, they researched and read scientific material (research articles, previous studies made about the subject as well as other literature) about goal-oriented job rotation, and made decisions on what they wanted to find out in order to form a questionnaire for Central Finland Health Care District's nurse managers.

A questionnaire is an essential component in a quantitative study which reflects the theory and the concepts of it. With the help of the questionnaire's questions the concepts of the theory are measured. The questions in the questionnaire are the basis of successful research. The definition of the concepts is important in a questionnaire, and it should be easy to read and understand. A questionnaire must always be based on theory, and the questions must not be randomly invented, otherwise they do not measure anything or they measure wrong issues. The reliability of a study can be evaluated with control questions in the questionnaire. With the help of the control questions the researcher tests if the same kind of questions are asked the same way. The researcher must change the appearance of the question without the respondent's noticing it. One should not underestimate the respondent either, because by proposing the same question the researcher can bring frustration to the respondent, who might then lose interest to answer. Good characteristics for a questionnaire are that it has a clear and logical layout as well as an appropriate length, it makes the respondent feel important, it is easy to analyze with a scientific analysis programme and, finally, that the questionnaire is pre-tested.
(Valli 2001, 28–30.)

The data was given as second-hand data to the author of this study, which means the author had not participated in the making of the study questionnaire, nor had she

had any opportunity to pre-test the scientific nature of the questionnaire before the actual data collection on the internet with the help of the Webropol 2.0. According to the Central Finland Health Care District's job rotation -team, the questionnaire was not pre-tested, and this fact diminishes its scientific reliability. Nevertheless, the questionnaire used in this study had also some of the important characteristics based on which the reliability of the study could be measured. The questionnaire was easy to answer and very logical. Some of the open-ended questions formed the control questions for testing if the respondent answered in the same way to the nominally scaled questions. Although regarded as qualitative data, the use of open-ended questions can be justified when using quantitative measures. Some of the respondents' answers were used as examples of the original answers in the questionnaire to enliven the layout of the thesis. Because of the questionable scientific nature of this questionnaire and the author's inexperience in using second-hand data, one can only evaluate if the results are accurate and if they could be generalized to apply to the whole Central Finland Health Care District. The results of this thesis are only indicative and unique, and the reader of the study can consider if the results are comparable to his/her work unit.

With the help of a questionnaire used in a quantitative study, the researcher cannot interfere or impact the answers by his/her presence. In addition, reliability is strengthened by the fact that all the respondents have the same, written questions. Although a survey is flexible to conduct with a questionnaire and the chosen population can be easily and economically reached via mail (traditional or electronic), as in this study, the researcher has limited possibilities to control the number of the received answers and one might have to re-send the questionnaire again if the total percentage of the received answers is too low. (Valli 2001 30-33; Fain 2004, 144.)

In this study sending the link to the questionnaire in the Webropol 2.0 by email had to be repeated three times in order to achieve the sufficient number of answers from the nurse managers. During the second round, the answers of the respondents were not saved to the Webropol 2.0 for some unknown reason. There is a possibility that

the same person might have answered even three times to the same questionnaire, because he/she might have also thought that they were his/her answers that were not saved in the Webropol 2.0. According to the statistics of the Webropol 2.0, the questionnaire had been opened 107 times. Originally, the email with the link to the questionnaire in the Webropol 2.0 was sent to the internal emailing list consisting of all the 76 nurse managers in the Central Finland Health Care District.

The respondents who answered to the questionnaire had chosen the questions which to answer. One is left wondering why questionnaire was not answered by all of the nurse managers. As the email was sent to the nurse managers' private work email address, the purpose was that they would have a possibility to answer to the questionnaire during their working time. Still one has to consider that not all of the nurse managers are able to check their email regularly, and if so, they might not be able to answer all of the emails at the time of the opening of the email. People are also forgetful, and nowadays nurse managers' work is very demanding and hectic, not the mention the possibility of holidays, trainings or meetings which take time away from the computer. Maybe some of the nurse managers did not find the research topic interesting, and likely possibility is that many nurse managers did not feel that the topic, goal-oriented job rotation, would consider their work unit. Also Könönen (2005, 56) and Hongisto (2005, 78–79) battled with similar adversities in their master's thesis research.

Validity in research means that it is measuring what is supposed to measure. It is important to reduce the systematic errors. Validity can be divided into *external validity* which determines how well the results of the research are to be generalized and *internal validity*, which measures how well the research was conducted.

(Kananen 2011, 125–126.)

In this research, *the external validity* as such is not important to consider because the population of the study was small and it attempted to include all the nurse managers in the Central Finland Health Care District. This study examined a limited group of

people in a certain workplace. The study focused on these nurse managers' individual experiences of goal-oriented job rotation, and thus it cannot be generalized. The Central Finland Health Care District's job rotation -team did not include in questionnaire any questions of background variables of the chosen population. They had decided, that for example, the gender, the age or the number of the working years as a nurse manager were not important factors in this research. As the questionnaire was targeted to nurse managers, and a link was sent only to them via their private work email, the job rotation -team assumed that only nurse managers would answer the questionnaire. However, through the open-ended questions' answers the author of this study found out that some nurse managers who had responded to the questionnaire were, in fact, substitute nurse managers, who had only few years of experience as a nurse manager, and who did not have any experience of goal-oriented job rotation. Therefore the consideration of the background variables would have given more validity to this particular research and should have been taken into account when forming out the questionnaire of this study. In this research the author has documented the research process precisely, chosen the research design, and aimed to base the result outcomes on the existing theory of the subject. Therefore the author of this study aimed to justify *the internal validity* of this research.

This research has *content validity* as it measured what it was supposed to measure, which in this case refers to nurse managers' experiences of goal-oriented job rotation in Central Finland Health Care District. With the aid of a thorough literature review and the inclusion of earlier research data on the subject *the criterion validity* of this research is justified. It has been stated in this research that the previous researches made about goal-oriented job rotation and job rotation in nursing have had similar results. *The theoretical validity* of this research also refers to the data collection by the author of this study. (See Kananen 2011 125–126.)

Research should be conducted according to *good scientific practice* in order to be acceptable, trustworthy and its results credible. (Hirsjärvi et al 2009, 23–25). In a

study which involves human participants the considerations of ethics is essential. The researcher must ensure the rights, safety and wellbeing of the participants of the research. Behind these principles are respect for human dignity, protecting the integrity and the individual interests. In a study it is important that the participants do not feel pressured to take part. Individuals have right to make decisions by themselves and choose their course of action. This *autonomy* of an individual must be ensured in a research process. *An informed consent form* should be obtained before the research. The informed consent consists of information about the research, mentioning of voluntariness and comprehension of the actions taken during research. Depending on the type of research this form can be also sort of a cover letter explaining the research implementation. In this study, nurse managers received an email which had link to the questionnaire in the Webropol 2.0, and the email had a clear cover letter regarding the research.

Privacy and confidentiality of the participants of the research must be ensured. People have *autonomy* to decide how much they will share or withhold information. *Anonymity* is preserved by coding the data so that the participants cannot be identified at any point of the research process. (le May & Holmes 2012, 96–98.) According to Mäkinen (2006, 93) the anonymity of the respondents brings freedom to the researcher. Questionnaires can raise problems, if the researcher knows the chosen population or if the respondents' identity can be deduced. In this study the researcher did not know the respondents and could not infer their identity as she did not work in the organization at the moment, nor had contacts with the staff in the work units. *Data protection* is an important factor of confidentiality. The storage and the retention of data must be carefully planned, and the storage physically secured, e.g. locked cupboard or password protected. This study's data was password protected electronically, and the author of this study destroyed the paper copies of the results after their use.

Justice in a research process can be demonstrated by treating the participants of the research morally right and fairly without discrimination. Research should be

conducted under the principles of *beneficence and non-malificence*. *Beneficence* means that research should maximize benefits and benefit others. The intention is to generate knowledge which produces benefits for everyone. *Non-malificence* in research means that the research or the researcher should do no harm. (Ie May & Holmes 2012, 98–99.) The author of this study states that this study will benefit the Central Finland Health Care District's personnel and nursing in general.

8.3 Conclusions

According to the findings of the study, goal-oriented job rotation functions best when it is carefully planned and organized by all the participants before the actual rotation happens. The nurse manager plays a very important role in the success of goal-oriented job rotation. Willingness to learn, high motivation and goals set for the personal, communal and the organizational levels are keys to successful goal-oriented job rotation. Motivation makes the adaptation to new situations more flexible. It also helps to develop the operation of the organization. Motivated employees are ready to develop and renew themselves as professionals and ready to invest in their jobs.

Organizations have a strategy and vision, and a range of choices leads towards them. One of the key elements of the strategic leadership is the development of the human resources strategy. In order to reach the vision, the organization discusses what kind of personnel is needed, how many professionals are needed and with what kind of know-how and competence. When employee has a profound knowledge base and broad views, it is easier to continue towards the vision and the common goal.

The experiences of the nurse managers of the goal-oriented job rotation in nursing have been studied very little. This study gave an insight to how the certain nurse managers experienced goal-oriented job rotation, although many of them had not

individual experience of the actual job rotation, rather they had participated in the implementation of it.

The author of this study has come up to the next conclusions and suggestions for the further study:

-The new goal-oriented job rotation plan should be planned carefully and its implementation should happen in co-operation with all of the participators in the goal-oriented job rotation process. The nurse managers play an important role in the true success of goal-oriented job rotation. Better and more modern information flow and openness in the communication in the organization about the possibilities of goal-oriented job rotation should be increased.

-The nurse managers' role is to lead the staff towards the vision, encourage the staff and give them support. In order for the staff to become the resource of the organization, the organization should be aware of its personnel's knowledge, skills, experiences and aspirations. With the help of goal-oriented job rotation all of these factors can be developed in the individual, communal and the organizational levels if all the aspects of goal-oriented job rotation are carefully examined and implemented. Therefore the functional model of a goal-oriented job rotation plan is essential, and it needs to be renewed if its usage is not successful in working life.

-As the Central Finland Health Care District plans to increase job rotation participants by 10% in the future and renew and better the goal-oriented job rotation model, it would be interesting to study the experiences of the employees taking part in the renewed goal-oriented job rotation in the organization.

-As the co-operation and networks increase in nursing and overall in social and health care in the public, private and the third sector, a future comparison of the experiences of the job rotation implementation between, for example, the primary

nursing care and the specialized nursing care would provide new horizons to this tool of professional development.

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Appendices

Appendix 1. The Questionnaire Used in the Goal-Oriented Job Rotation Study

Keski-Suomen Sairaanhoidopiiri

Hoitotyön Strategia

Työhyvinvoinnin lisääminen,

työkierrotöryhmä

5.3.2012

KYSELY KESKI-SUOMEN SAIRAANHOITOPIIRIN OSASTONHOITAJILLE TAVOITTEELLISESTA TYÖKIERROSTA

Toimialue

Vastuualue

Vastuuyksikkö

Seututerveyskeskus

1. Toteutetaanko yksikössäsi shp:ssä vuonna 2008 käyttöön otettua tavoitteellista työkiertomallia?

Kyllä _____, siirry kysymykseen 2.

Ellei, perustele miksi? Siirry kysymykseen 8.

2. Yksikköni henkilökunta on ollut tavoitteellisessa työkierrrossa

- | | | |
|------------------------------|-------|----|
| • Organisaation sisällä | Kyllä | Ei |
| • Organisaation ulkopuolella | Kyllä | Ei |

3. Vuosina 2009-2011 tavoitteellista työkiertoa toteuttanut hoitohenkilöstö ammattiryhmittäin/lukumäärät

Amm.ryhmä	Vuonna 2009					Vuonna 2010					Vuonna 2011				
	Yksi-puol.	Vastavuor.	Ketjuuntunut	projekt.sidottu	Muu	Yksi-puol.	Vastavuor.	Ketjuuntunut	projekt.sidottu	Muu	Yksi-puol.	Vastavuor.	Ketjuuntunut	projekt.sidottu	Muu
oh															
aoh															
sh															
klö															
ph/lähih.															
last.hoit.															
rtg-hoit.															
lab.hoit															
fys.terap.															
os.siht.															
muu															

4. Tavoitteellisen työkierron käytännön toteutus

Kuvaus työyhteisöstä on tehty	Kyllä	Ei
Kehityskeskustelu työkiertoon lähtevän kanssa on käyty	Kyllä	Ei
Työyhteisön oppimistavoitteet on määritelty	Kyllä	Ei
Työkierron suunnitelma on tehty	Kyllä	Ei
Rinnalla kulkija on nimetty	Kyllä	Ei
Työkiertoon tulevan vastaanotto on järjestetty	Kyllä	Ei
Loppukeskustelu/arviointi on käyty	Kyllä	Ei
Omaan työyhteisöön paluu/keskustelu esimiehen kanssa on käyty	Kyllä	Ei
Oppimiskokemukset on jaettu osastotunnilla	Kyllä	Ei
Omat oppimiskokemukset lisäsivät oman työyhteisön oppimista, tietoja ja työkäytäntöjen kehittämistä	Kyllä	Ei
Potilaan hoitoprosessin kokonaisuus selkeytyi	Kyllä	Ei
Avun antaminen eri yksiköiden välillä helpottui	Kyllä	Ei
Osaaminen ja tiedon välitys lisääntyi yksiköiden välillä	Kyllä	Ei
Potilaiden/opiskelijoiden ohjaus osaaminen laajeni	Kyllä	Ei
Toisen työyksikön työn arvostus lisääntyi	Kyllä	Ei
Henkilöstön joustava käyttö yksiköiden välillä lisääntyi	Kyllä	Ei

5. Mitä muuta haluat kertoa käytännön toteutuksesta?

6. Tavoitteellisen työkierron jakson pituus on ollut keskimäärin?

- 6 viikkoa
- 9 viikkoa
- 3 kk
- 6 kk
- Muu, mikä _____

8. Millaista muuta työkiertoa kuin tavoitteellista työkiertoa yksikössäsi on toteutettu?

9. Mitkä tekijät ovat estäneet tavoitteellisen työkierron toteuttamista yksikössäsi?

10. Millä keinoin olet kannustanut henkilöstöäsi lähtemään työkiertoon?

11. Ehdotuksia työkierron kehittämiseksi?

KIITOS VASTAUKSESTASI!

Appendix 2. Documentation of the Literature Review

Database	Date of Research	Key Words	Limitation of the Results	Results
EBSCO (CINAHL)	06102013	Nurse Administrators	Published in the last 10 years, Linked full text	1196
EBSCO (CINAHL)	06102013	Nurse Administrators AND job rotation	Published in the last 10 years, Linked full text	None
EBSCO (CINAHL)	06102013	Nurse AND job rotation	Published in the last 10 years, Linked full text	1
EBSCO (CINAHL)	06102013	Job rotation	All databases, Linked full text	5
EBSCO (CINAHL)	06102013	Work rotation	All databases, Linked full text	3
EBSCO (CINAHL)	06102013	Charge nurse	Published in the last 10 years, Linked full text	45
EBSCO (CINAHL)	06102013	Charge nurse AND rotation	Published in the last 10 years, Linked full text	None
PUBMED	06102013	Nurse job rotation	Published in the last 10 years	32
PUBMED	06102013	Charge Nurse Role	Published in the last 10 years	694
COCHRANE Library	06102013	Charge Nurse	Published in the last 10 years	1
COCHRANE Library	06102013	Job rotation	Published in the last 10 years	6
Arto (Reference Database of Finnish Articles)	06102013	Työkierto (=Job Rotation)	Published from 2000-2013	11
Medic (Reference Database of Finnish Medical Articles, Master's thesis etc)	06102013	Osastonhoitaja(=Charge Nurse)	Published in the last 10 years	12

Appendix 3. Evidence Table of the Essential Findings of the Chosen Research'

Author(s), year, type of research	The title of the study	The target group/ research data	Research method	The main findings/results
Asikainen, 2008, Master's thesis	Job Rotation as a Method of Developing Nurses' Professional Competence within Special Health Care	7 registered nurses	Thematic interview	Positive approach to job rotation is adopted when it is understood as a possibility for one's professional development and competence. A nurse taking part in job rotation should be persistent, socially flexible and bear uncertainties and stress. Superior's support furthers positive experiences of job rotation.
Dryden & Rice, 2008, A scientific article	Using Guidelines to Support Secondment: a Personal Experience	Clinical nurse specialist	360 degrees evaluation process and literature review	Secondment is safe and valuable method of staff development. If the guidelines are followed and strategies are in place, the secondment has positive influence on increasing knowledge and skills, raising motivation and aiding retention.
Fujino & Nojima, 2005, Nursing research	Effects of Ward Rotation on Subsequent Transition Processes of Japanese Clinical Nurses	21 clinical nurses who had experienced ward rotation	In-depth interview	Nurses experienced role overload role incongruity and/or underload, role overqualification or role ambiguity in the new environment during ward rotation process. Emotional distress was emphasized. The appropriate ward rotation enhances nurse's confidence and personal and professional development.
Hongisto, 2005, Master's thesis	The Effect of Job Rotation on the Know-how and Work Well-being of Nursing Staff, Based on Their Own Experiences	64 registered nurses	Survey-questionnaire	Job rotation improved nursing staff's know-how and work well-being. Nursing directors need to support and encourage nursing staff who take part in job rotation.

Ho, Chang, Shih & Liang, 2009, Nursing research	Effects of Job Rotation and Role Stress among Nurses on Job Satisfaction and Organizational Commitment	532 registered nurses who had had job rotation experience	Survey-questionnaire	Job rotation is practical and excellent strategy for manpower utilization and hospital could promote job rotation to both individuals and the hospital while implementing job rotation periodically and fairly. The reduction of role ambiguity in role stress has the best effect on enhancing the organizational commitment of nurses.
Järvi & Uusitalo, 2004, Nursing research	Job Rotation in Nursing: A Study of Job Rotation among Nursing Personnel from the Literature and via a Questionnaire	84 ophtalmic nurses	Survey-questionnaire	Job rotation is a positive experience and the employee's motivation is the foundation of successful job rotation. Superior's encouragement is essential for successful career development and the success of a learning organization.
Könönen, 2005, Master's thesis	Job Rotation as a Mean for Professional Development in One University Hospital	61 registered nurses	Survey-questionnaire	Job rotation was a good mean of professional development, maintaining expertise, increasing work well-being and bringing challenges in work. Job rotation should be based on voluntary actions.
Ojala, 2008, Master's thesis	Medical Laboratory Technologists' Experiences of Professional Competence and Management of Competence by Immediate Supervisor	1 st phase of the research: 37 laboratory technologists. 2 nd phase of the research: 10 laboratory technologists.	1 st phase of the research: Quantitatively collecting the research material, 2 nd phase of the research: Thematic group interview	Working in different units increased learning and maintained competence, whereas shift work weakened work rotation and competence. Competence management's key areas are: knowledge of the content of employees' work, promotion their learning and supporting their know-how.
Partanen, 2009, Master's thesis	Job Rotation as a Purposeful Method. The Views of Immediate Superiors of Public Health about Job Rotation as an Instrument of Well-being at Work.	7 immediate superiors of public health	Thematic group interview	The immediate superiors were not aware of all of the implementation possibilities of job rotation. Job rotation promoted employees' well-being at work, developed employees and deepened their expertise. Target-oriented job rotation was seen as positive. The immediate superiors' role in implementation of job rotation was significant. Target-oriented job rotation should be listed as part of staff's career development and listed to the strategy.

Pitkänen, 2007. Master's thesis	Job rotation as a part of development means of personnel.	8 persons of South-Carelia Health Care District and Lappeenranta city	Thematic individual interviews	Job rotation is an excellent opportunity to develop oneself. Job rotation activates to sustain ones professional knowledge and its development. Self-esteem grew with self-knowledge, attitudes changed and individuals felt freshen up by the job rotation.
Riekki, 2012, Master's thesis YAMK	Työkierto osaamisen kehittämisen menetelmänä. Työkiertosuositus Oulun yliopistollisen sairaalan, kardiologisen vastuualueen hoitohenkilökunnalle. (Job rotation as a method of developing know-how. Job rotation recommendation for Oulu University hospital's nursing staff in the cardiology department.)	63 nurses (registered and practical nurses)	Survey-questionnaire	This developmental task clarified the know-how and the developmental needs of the staff in cardiology wards. Job rotation of the nursing staff affected positively the patient care and developed nursing staff's learning. Job rotation was recommended as a method of development of nursing in cardiology remit.
Walle, P. 2003. A scientific article	Mentored Job-Rotation Widened Nurses' Competency	8 registered nurses participated to the education experiment event, but only 4 of them participated to job rotation	A pilot education experiment event, part of the nurses' career development model (SURAKE) in the Central Finland.	The aim was to describe how the job rotation supports the participants (registered nurses) and their mentors. Job rotation widened nurses' competency and was seen as a good method of learning through work. It had positive influence on individual's life skills, communication and co-operation skills, learning and information acquisition skills, leadership and management skills as well as accelerating changes and innovations. The role of the superior in the job rotation was found as essential factor in order to experience a successful process.

Appendix 4. An Example of the Data Analysis

Kysymys 10. Millä keinoin olet kannustanut henkilöstöäsi lähtemään työkiertoon?(n= 49). (Question no 10. In What Ways Have You Encouraged Your Staff to Leave For Job Rotation? (n= 49))

- kehityskeskustelu
 - Kehityskeskustelu
 - kehityskeskustelu
 - kehityskeskustelu
 - kehityskeskustelu
 - kehityskeskustelu, työkierrosta keskustellaan usein
 - kehityskeskustelussa muistuttanut vaihtoehtoista
 - kehityskeskustelut ja asia otettu puheeksi
 - kehityskeskustelu
 - kehityskeskustelu
 - kehityskeskustelu
 - kehityskeskustelussa aina puheeksi
 - kehityskeskustelussa kartoitetaan jokaiselle sopivaa oppimista ja uusiutumista
 - kehityskeskusteluissa
 - kehityskeskustelut
 - keskustelulla ja avoimuudella ja siihen kannustamisella, osaamisen laajentaminen ja osaamisvaatimusten näkökulmaa avaamalla
 - keskustelemalla
 - otettu asia puheeksi
 - keskustelua käyty
 - keskusteltu säännöllisin väliajoin
- Performance appraisal**
-
- oli sovittu, että aloitetaan säännöll. työkierto yksikön sisällä
 - mahdollisuus annettu
 - kannustamalla
 - työkierrossa olleet toimivat kannustimena/esimerkin
 - kannustanut ja mahdollistanut
 - osastolle tullut työkierrossa olevia/esimerkinä
 - muistuttamalla, että on mahdollista, tuetaan jos on kiinnostusta
 - suhtauduttu myönteisesti
 - myönteinen asenne
 - kannustamalla
- Encouragement**

- kannustettu uusiin haasteisiin
- työkierrossa olleet kokemukset jakaminen
- korostamalla omaa oppimista ja työyhteisön oppimista
- perustelemalla hyötyjä (osaamisen vahvistuminen)
- mahdollistamalla opiskelun, projektit
- olen antanut pos.huomiota, etuja ja mahdollisuuksia korostaen
- perustelemalla hyötyjä (osaamisen laajentuminen, haasteita työhön)
- mahdollistamalla halukkuuden vaihtoon
- korostamalla ammattitaidon kapea-alaistumisen ehkäisemisen,
- yksikössä tehtävien töiden arvostamisen kasvattaminen,
- henkilöstön...työkierro vähentää tunnetta siitä, että urautuu yhteen tehtävään
- muistuttamalla hyvistä aiemmista kokemuksista (osaamisen laajentuminen,
- oman osaamisen vieminen yksikön ulkopuolelle, verkostoituminen,
- uuden oppiminen, haasteita, työn ilon löytäminen.
- Kuuluu hoitotyön strategiaan ja on yhteinen tavoite Ksshp:ssä.
- korostamalla oppimiskokemuksella, vaihtelulla, voimaannuttavalla vaikutuksella
- sisällyttänyt työkierron toimintasuunnitelmaan. Pitänyt asian esillä.
- tuotu asiaa esille kokouksissa
- järjestetty osastotunti
- korostamalla vapaaehtoisuutta, ei liian pitkäkestoinen, yksikön toimintaa ja
- osaamisen laajentamista tukevaa
- korostamalla osaamisen laajentumista sen myötä, osaamisesta hyötyä myös omaan
- potilasohjaukseen
- osaamisen laajentaminen ja toiseen yksikköön tutustuminen mutu-tuntuman sijaan
- työn rikastaminen, vaihtelu, osaamisen laajentaminen, hyvä välillä vaihtaa roolia,
- tuntea itsensä epävarmaksi, saada oppimisen ja selviytymisen kokemuksia

**Emphasizing
benefits**

Appendix 5. Nursing Staff's Job Rotation in the Years 2009-2011

Table 1. The total amount of the nursing staff according to the professional group taking part in goal-oriented job rotation during year 2009 and the forms of goal-oriented job rotation (n= 45).

The form of the job rotation	The professional group	Year 2009
Unilateral	Nurse manager	1
	Registered nurse	5
	Midwife	1
	Practical nurse	1
	Total	8
Reciprocal	Registered nurse	7
	Ward secretary	3
	Total	10
Chained	Registered nurse	2
	Total	2
Linked to the project	Nurse manager	1
	Registered nurse	4
	Midwife	1
	Ward secretary	2
	Total	8
Total number of all professional groups taking part in the goal-oriented job rotation in 2009		28

Table 2. The total amount of the nursing staff according to the professional group taking part in goal-oriented job rotation during year 2010 and the forms of goal-oriented job rotation. (n= 45)

The form of the job rotation	The professional group	Year 2010
Unilateral	Nurse manager	1
	Registered nurse	10
	Midwife	1
	Total	12
Reciprocal	Registered nurse	8
	Total	8
Chained	Registered nurse	1
	Total	1
Linked to the project	Nurse manager	1
	Registered nurse	2
	Midwife	1
	Ward secretary	1
	Total	5
Total number of all professional groups taking part to the goal-oriented job rotation in 2010		26

Table 3. The total amount of the nursing staff according to the professional group taking part in goal-oriented job rotation during year 2011 and the forms of goal-oriented job rotation. (n= 45)

The form of the job rotation	The professional group	Year 2011
Unilateral	Nurse manager	2
	Registered nurse	11
	Practical nurse	2
	Total	15
Reciprocal	Registered nurse	7
	Total	7
Chained	Registered nurse	1
	Total	1
Linked to the project	Registered nurse	1
	Ward secretary	2
	Total	3
	Total number of all professional groups taking part in the goal-oriented job rotation in 2009	26