

Switzerland - SCOHPICA - Swiss Cohort of Healthcare Professionals and Informal Caregivers : healthcare professionals part

PEYTREMANN-BRIDEVAUX Isabelle, OULEVEY BACHMANN Annie, GILLES Ingrid

Report generated on: March 18, 2025

Visit our data catalog at: <https://data.unisante.ch/>

Identification

SURVEY ID NUMBER
10.16909-dataset-46

TITLE
SCOHPICA - Swiss Cohort of Healthcare Professionals and Informal Caregivers : healthcare professionals part

ABBREVIATION OR ACRONYM
SCOHPICA

TRANSLATED TITLE
French : SCOHPICA - Cohorte suisse des professionnel·les de la santé et des proches aidant·es ; German : SCOHPICA - Schweizer Kohorte der Gesundheitsfachkräfte und pflegenden Angehörigen ; Italien : SCOHPICA - Coorte svizzera di professionisti/e della salute e familiari curanti

COUNTRY

Name	Country code
Switzerland	CH

STUDY TYPE
Labor Force Survey [hh/lfs]

SERIES INFORMATION
SCOHPICA is an open cohort with a yearly questionnaire.

ABSTRACT

The Swiss health system faces several challenges: aging population, increasing prevalence of chronic diseases, health workforce shortages and increasing health costs. Healthcare professionals and informal caregivers play critical roles in health systems, yet recent publications have highlighted continuing health workforce shortages, difficult working conditions, growing mental and physical strains, early exits from the profession, lack of good quality and comprehensive data, precluding appropriate monitoring and management of the health workforce. Establishing favorable conditions for the sustained engagement of healthcare professionals (HCPs) is essential for a resilient and high-performing healthcare system. Switzerland lacks comprehensive and longitudinal data to guide such efforts. The Swiss COhort of Healthcare Professionals and Informal CAregivers (SCOHPICA) seeks to fill this gap, producing knowledge that will support evidence-informed health workforce policies and initiatives.

The main objectives of the HCPs part of SCOHPICA (SCOHPICA-HCPs) are to understand the career trajectories, wellbeing and lived experiences of HCPs to identify the conditions and circumstances that influence their intention to stay in the health sector. By observing determinants over time, SCOHPICA-HCPs will provide insights into creating optimal conditions for professional practice.

This national cohort includes a wide range of HCPs (e.g. general practitioners, specialists, nurses, pharmacists, paramedical staff, support workers, etc.) from various health sectors—including inpatient, outpatient, community, and homecare, and practicing in a variety of settings, irrespective of their working status.

By considering a mixed-methods approach, gathering quantitative and qualitative data through instruments such as annual online surveys, life calendars, and focus group discussions, SCOHPICA will allow an in-depth analysis of the elements influencing intention to stay and well-being.

Through long-term longitudinal follow-up of career trajectories, wellbeing, socio-demographic and socio-professional characteristics as well as factors contributing to sustained engagement or attrition, SCOHPICA will be able to generate practical recommendations to enhance the health and sustainability of the healthcare workforce.

KIND OF DATA
Sample survey data [ssd]

UNIT OF ANALYSIS
Individuals (healthcare professionals)

Version

VERSION DESCRIPTION

version 1

VERSION DATE

2024-11-30

Scope

NOTES

HEALTHCARE PROFESSIONALS: Socio-demographic characteristics, Socio-professional characteristics, Career trajectories

STUDY VARIABLES OF INTEREST: Intention to stay, Intention to leave, Well-being

DETERMINANTS: Perceived workload, Control over working time, Resource (adequacy), Possibilities for professional development, Work-life conflict, Transformational leadership, Influence at work, Sense of community at work, Interprofessional collaboration, Recognition at work, Preparedness to work reality, Meaning of work, Perceived quality of care (since 2023), Self-reported health, Burnout, Perceived stress (since 2023), Job satisfaction, Moral Resilience (only in 2022), Intolerance to uncertainty (only in 2022)

KEYWORDS

Keyword
Health and healthcare professionals
Intention to stay
Professional trajectories
Well-being
Work conditions
Cohort study
Survey
Switzerland

Coverage

GEOGRAPHIC COVERAGE

National coverage

UNIVERSE

Any type of HCP practicing in Switzerland (e.g., general practitioners, specialist physicians, nurses, nurse aides, paramedics, medical assistants, pharmacists, physiotherapists, psychologists, dieticians, etc.), working directly with patients, across a variety of healthcare settings (e.g., hospitals, private practices, clinics, nursing homes, community services, etc.), regardless of their employment status (i.e., whether self-employed or salaried)

Producers and sponsors

PRIMARY INVESTIGATORS

Name	Affiliation
PEYTREMANN-BRIDEVAUX Isabelle	DESS Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland
OULEVEY BACHMANN Annie	La Source School of Nursing, HES-SO University of Applied Sciences and Arts of Western Switzerland and DESS Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland

GILLES Ingrid	Lausanne University Hospital (CHUV) and DESS Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland
---------------	---

PRODUCERS

Name	Affiliation	Role
JUBIN Jonathan	La Source School of Nursing, HES-SO University of Applied Sciences and Arts of Western Switzerland and DESS Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland	Head of the healthcare professionals cohort
ANTILLE-ZUERCHER Emilie	DESS Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland	Data manager
ROTH Leonard	DESS Department of Epidemiology and Health Systems, Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland	Statisticien

FUNDING AGENCY/SPONSOR

Name	Abbreviation
Académie Suisse des Sciences Médicales	ASSM
Fondation pour l'Université de Lausanne	FUNIL
Observatoire suisse de la santé	Obsan
Office fédéral de la santé publique	OFSP

Sampling

SAMPLING PROCEDURE

The estimates of the number of healthcare professionals to be included in SCOHPICA were made with the goals of:

1. Achieving reasonable precision around the dichotomous and continuous primary outcome estimators of the baseline measures
2. Analyzing cross-sectionally and/or longitudinally the intent to stay in or leave the profession, well-being, and their determinants
3. Identifying clusters of professional trajectories

While doing so, the estimations considered the following aspects:

- * In addition to full sample analyses, stratification by linguistic regions ($N_{max} = 3$) and/or cantons ($N_{max} = 26$), by types of profession ($N_{max} =$ not yet known), by gender ($N_{max} = 3$) or age categories ($N_{max} = 4$) would be desirable to increase the granularity of the results. These stratified analyses will be considered if the sample size is large enough.
- * In the SCOHPICA cohort, we will recruit on a continuous basis because recruitment of healthcare professionals is usually hard (i.e., low participation rate in surveys). Thus, we will adapt recruitment strategies according to the participation of the different professional groups, if necessary. Moreover, continuous recruitment will allow us to progressively increase the number of SCOHPICA participants.

The parameters needed for sample size calculations are, among others:

- * Primary indicators - intent to stay in or leave the profession, assumed here to be dichotomous to stay as conservative as possible, and well-being, which is measured via the Flourish Index and can take values ranging from 0 to 10.
- * The expected values (and variabilities) of the outcomes, which are taken from the literature.
- * The type I error rate (alpha level) - 0.05.

With all this in mind, we present below sample size calculations for the full sample analyses. 95% confidence intervals (CI) around possible values of the outcomes are shown to give an idea of the precision that can be attained with minimal sample sizes. Those initial numbers can however be multiplied by the number of categories (linguistic regions, types of occupation, etc.) to allow for stratified analyses. Thus, the larger the number of participants, the better, which is why we aim to recruit "as many healthcare professionals as possible". To conduct the first overall analyses, we aimed at recruiting at least 1500 participants at the 2022 baseline; the following annual recruitments (e.g. in 2023 and 2024) should permit to increase the

sample size of participating healthcare professional. Larger sample sizes will thus allow sub-group analyses, providing more detailed and precise information to healthcare stakeholders.

Recruitment and screening procedure

HCPs will be contacted using multiple recruitment strategies. Indeed, as the project targets all type of HCPs, working in a variety of settings and across Switzerland, it is important to consider multiple communication and recruitment strategies so that they are aware both of the existence and conduct of the project, and of its importance. They are the following:

1) HCPs will be contacted through their professional associations, at the national and/or cantonal level. For each type of HCP, professional representatives have been/are being contacted by a SCOHPICA team member, who presented/ will present the SCOHPICA cohort, and ask whether the association is willing to help recruiting their members. Recruitment support by professional associations will be done by transmitting information on SCOHPICA and the link to its website to their members, in an ad-hoc email, on their website or in their newsletter, for example. A list of all professional associations accepting to support SCOHPICA's recruitment, will be prepared. It will contain the contact details of the person in charge of that task, the preferred communication mean, and the date of contact of their members. The supporting professional associations will receive a copy of the final version of the questionnaire, for confirmation of their participation. They are also informed that both themselves and their members, will have access to the results of the study through an interactive platform that will be developed for this purpose. Brief articles will also be published in the journals of the professional associations, when permitted.

2) Large employers of HCPs (e.g. hospitals, home care) will be contacted and asked to support SCOHPICA's recruitment. If they accept, a process similar to the one described just above (1) will be considered.

3) HCPs will also be reached through the pages of the social networks of the institutions involved in the project (Unisanté, Institut et Haute Ecole de la Santé La Source, CHUV). This social media information will be shared and reposted by anyone interested in diffusing the existence of the study (as for example, the HES-SO network or the Competence Network Health Workforce). Posts directed towards HCPs, in general or specifically, will be produced by two of the communication services of the institutions conducting SCOHPICA (Unisanté and Institut et Haute Ecole de la Santé La Source).

4) SCOHPICA will be presented at the Swiss HCPs annual conferences, when possible, as well as during SCOHPICA's serie of conferences on the healthcare workforce; during these conferences, recruitment for SCOHPICA will be reminded and participation information provided.

5) If email addresses are available, HCPs will be directly contacted.

6) General communication about SCOHPICA, via standard media and social media, will be considered. Both HCPs and patients will hear about SCOHPICA and be able to participate in or talk about it.

All the above mentioned persons/institutions will transmit, in an ad-hoc email, on their website or in their newsletter, an URL to the SCOHPICA website (www.scohpic.ch); the link to the electronic survey will be included on this SCOHPICA's website. On the website, potential participants will also find general information about the project and have access to a formal electronic information sheet which will present, in detail, both the ins and outs of their participation and of their rights.

Data collection

DATES OF DATA COLLECTION

Start	End	Cycle
2022.10.01	2023.01.31	Baseline 2022
2023.10.01	2024.02.15	Baseline 2023
2023.10.01	2024.02.15	Follow-up 2023
2024.10.01	2025.01.31	Baseline 2024
2024.10.01	2025.02.28	Follow-up 2024

DATA COLLECTION MODE

Internet [int]

Questionnaires

QUESTIONNAIRES

The questionnaires were proposed to participants in French, German and Italian.

All questionnaires are provided as Excel question books, in the three languages.

Data Processing

DATA EDITING

Data were cleaned in order to protect participant and scores of the scales were calculated according to the literature, or adapted when needed.

Access policy

CONTACTS

Name	Affiliation	Email	URL
SCOHPICA secretariat	Unisanté, Center for Primary Care and Public Health & University of Lausanne, Lausanne, Switzerland	scohpic@unisant.ch	Link

CONFIDENTIALITY

ACCESS CONDITIONS

Licensed dataset, accessible under conditions and following review.

CITATION REQUIREMENTS

Peytremann-Bridevaux, Isabelle; Oulevey Bachmann, Annie; Gilles, Ingrid. The Swiss Cohort of Healthcare Professionals and Informal Caregivers (SCOHPICA): Datasets. Center for Primary Care and Public Health (Unisanté), University of Lausanne, Switzerland. Version 1.0 of the licensed dataset (December 2024), provided by the Unisanté Research Data Repository. DOI:10.16909/dataset/46

ACCESS AUTHORITY

Name	Affiliation	Email	URL
SCOHPICA secrétariat	Center for Primary Care and Public Health (Unisanté), University of Lausanne, Switzerland	scohpic@unisant.ch	Link
Documentation and data unit (UDD)	Center for Primary Care and Public Health (Unisanté), University of Lausanne, Switzerland	udd.data@unisant.ch	Link

LOCATION OF DATA COLLECTION

Unisanté Data repository

Disclaimer and copyrights

DISCLAIMER

The user of the data acknowledges that the original collector of the data, the authorized distributor of the data, and the relevant funding agency bear no responsibility for use of the data or for interpretations or inferences based upon such uses.

COPYRIGHT

(c) 2024, Unisanté, University Center for Primary Care and Public Health, Lausanne, Switzerland

Metadata production

DDI DOCUMENT ID

10.16909-dataset-46

