

Evidence Brief: Retention and resilience

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Evidence Brief: Retention and resilience

Produced by the Knowledge Management team Evidence Briefs offer an overview of the published reports, research, and evidence on a workforce-related topic.

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Key publications – the big picture

[International Retention Toolkit](#) NHS Employers, May 2023

There is no single action that will solve retention. Retaining staff is a result of the combined actions that are taken by an organisation or system at each stage outlined in this toolkit. As an integral part of your international recruitment process teams, organisations and systems should work collaboratively to support retention activities and share good practice.

For systems working towards a collaborative approach to international recruitment, this toolkit provides resources to initiate and support preliminary discussions. It may be useful to consider how you can use your workforce data to learn more about the experience(s) of international staff currently working within your organisation.

[Using flexible retirement to support retention](#) NHS Employers, May 2023

This guidance aims to

- Support employers to understand, promote and discuss flexible retirement options with staff to encourage retention.
- Ensure employees approaching the end of their careers feel rewarded and recognised by their employer for their experience, service and commitment.
- Help employers to develop effective flexible retirement policies.

[Retaining NHS nurses: what do trends in staff turnover tell us?](#)

The Health Foundation, April 2023

Workforce shortages are one of the biggest challenges facing the NHS and adult social care in England. In the quarter to December 2022, vacancies in NHS trusts stood at around 124,000 full-time equivalent (FTE) staff, which is well above pre-

pandemic levels. Nursing remains a key area of shortfall: in NHS trusts, while registered nurses and health visitors make up around a quarter (26%) of FTE roles, nurse vacancies accounted for more than a third (35%, around 43,600 FTE) of all vacancies in the quarter to December 2022. While seriously understaffed, the NHS continues to grapple with spiralling elective care waiting lists and ongoing industrial action.

In this context, there is mounting concern about whether the NHS can motivate and retain staff it desperately needs, particularly nurses. Overall, the staff leaver rate in NHS trusts has been on the increase in the last two years, from 9.6% in the year to September 2020 to 12.5% in the year to September 2022.

In the same period, the leaver rate for NHS nurses and health visitors also increased from 9% to 11.5%. This runs counter to the NHS Long Term Plan's stated (albeit pre-pandemic) ambition to bring the nursing vacancy rate down to 5% by 2028. The absolute number of NHS nurse and health visitor leavers also increased sharply from just under 30,000 to nearly 40,900 in this period, the highest level on record (NHS Digital trend data begin in the year to September 2010).

[Inspire attract and recruit toolkit: an interactive toolkit to support your workforce supply](#) NHS Employers, December 2022

Our interactive toolkit has been developed for HR professionals, recruitment teams and managers in the NHS to help you inspire, attract and recruit your future workforce. The toolkit contains guidance, top tips and best practice examples:

- Understanding your workforce supply and your audience
- The importance of being a leading employer and attracting the right people to your organisation
- Simplifying and improving your recruitment process to create a positive candidate experience

- This toolkit will help you reflect and consider what you and your organisation can do to help improve your workforce supply, along with practice information on how to get started.

[Improving the retention of registered nurses and midwives: A toolkit for line managers and employers](#) NHS Employers, October 2022

The aim of the nursing and midwifery retention self-assessment tool is to enable organisations to undertake a self-assessment against the seven elements of the People Promise plus key elements that support staff to deliver high quality care, enhance job satisfaction and support the retention of nurses and midwives.

The self-assessment tool has been developed by the national retention programme in the people directorate in collaboration with a range of key stakeholders including the nursing directorate, and in conjunction with nurses, midwives, human resources professionals and subject matter experts. It brings together a synthesis of evidence on factors which are influential in nursing and midwifery retention.

[Factors associated with staff retention in the NHS acute sector](#) Institute for Fiscal Studies, August 2022

In this report we add to this evidence base by examining how a range of individual staff characteristics, regional economic conditions and trust characteristics are associated with whether individual staff members decide to leave the NHS acute sector. We use the Electronic Staff Record (ESR), the monthly payroll of the NHS, to analyse how much of the variation in retention rates between NHS acute trusts can be explained by these characteristics, and to examine which factors were associated with the leaving decisions of medical consultants, nurses and midwives, and HCAs between 2012 and 2021.

While these findings cannot distinguish the causal impact of different factors on retention, they provide new evidence on the characteristics of staff who are most likely to leave the NHS acute sector, and can guide further policy interventions to improve the retention of these groups.

[Improving staff retention](#) NHS Employers, March 2022

This improving staff retention guide aims to support line managers and employers to consider the key areas which affect workforce retention. It includes the enablers of retention, the organisational priorities which need to be in place to support our NHS people and the practical interventions which directly impact on your employees' experience at work. It is aimed at anyone who has a responsibility for improving staff experience and morale, and reducing turnover in their organisation, including HR managers and line managers.

[Workforce burnout and resilience in the NHS and social care](#)

Department of Health and Social Care, February 2022

The committee's report explored several key issues, including:

- the scale and impact of workforce burnout and its contributing factors
- the impact of workplace culture on burnout and the further work needed to create an inclusive and compassionate working environment that better supports staff in the health and care sector
- the unique impact that the coronavirus (COVID-19) pandemic has had on the workforce
- how more comprehensive workforce planning is necessary to ensure the health and care sector has the number of staff it needs both now and in the longer term

[Infographic: your future nurses – the different routes to recruiting your workforce](#) NHS Employers, January 2021

Until recently, the routes into nursing have been limited, with university degree education being the primary way to train registered nurses. However, the introduction of the nursing degree apprenticeship gives a new opportunity to employers to train nurses. On top of this, the creation of the new nursing associate role can also be a bridge between healthcare assistants and graduate registered nurses. All the new options for recruiting registered nurses can create a confusing picture for employers and so we have developed an infographic to support you to make the most of the new and existing routes into nursing.

[A critical moment: NHS staffing, trends, retention and attrition](#)

The Health Foundation, February 2019

The third annual report analysing the staff profile and trends in the NHS [workforce](#) in England. It is intended to be read as an annual update, examining changes in the overall profile of NHS staffing in 2018.

[Improving health and social care service resilience over public holidays: report](#) Scottish Government, December 2017

Report from a review of the resilience of health and social care services over public holidays and in particular the Christmas and Easter festive periods.

[The state of pre and post-graduate medical recruitment in England](#) British Medical Association (BMA), September 2017

This briefing examines the current state of medical recruitment in England, with additional UK-wide data for the foundation programme. Looking at data from 2013 onward, it identifies some of the ongoing issues facing medical recruitment, and recommends how some of these key concerns can be addressed.

[Voluntary and social care recruitment](#) Iriss ESSS, January 2017

This evidence summary seeks to identify some best practice recruitment strategies from voluntary social care and other relevant sectors and industries. It provides background information about social care recruitment in Scotland and identifies the key challenges identified in the evidence.

[The recruitment, retention and return of nurses to general practice nursing in England](#) Ipsos MORI, August 2016

The research provides us with helpful evidence from GPNS about their role and the challenges they face, backed up with proposals to help:

- Increase the number of pre-registration nurse placements
- Improve retention of the existing nursing workforce
- Support for return to work schemes for practice nurses and
- Improve the training capacity in general practice

[General Practice Resilience Programme](#) NHS England, July 2016

The General Practice Resilience Programme was announced as part of the General Practice Forward View. The programme will provide £40 million over four years (until 2020) to support GP practices and to build resilience into the system.

[Study into the impact of a values-based approach to recruitment and retention](#) Skills for Care, April 2016

The Skills for Care report assesses the longer-term impact of a values-based approach to recruitment and retention by capturing key business performance indicators such as staff retention, absence and performance measures.

[General practitioner recruitment and retention: an evidence synthesis](#) PRUComm, February 2016

In order to support a review of the 10 Point Plan in 2016, NHS England and the Department of Health commissioned the Policy Research Unit in Commissioning and the Healthcare System (PRUComm) to undertake an evidence synthesis on GP recruitment, retention and re-employment. The review work was undertaken alongside analysis of the Work/life survey commissioned in January 2015 (Gibson et al 2015) and a further study commissioned by NHS England from Ipsos MORI. This report summarises the findings of an evidence synthesis of published reviews and UK relevant primary studies. The review focuses on recruitment and retention as less evidence was identified re-employment.

Case Studies

[Conscious retention – creating a more secure workforce](#) NHS Employers, March 2023

At LCHT, the work of the FTSU guardian has acted as a conduit for staff to share their thoughts about retention and we have seen staff deciding to stay because of the conversations, flexibility and support offered. In one service several clinicians decided to stay, when four of these staff had raised concerns. These successful retentions were all results of a certain way of working. A way we might define as 'conscious retention work'.

[Increasing recruitment and retention through reward](#) NHS Employers, October 2021

The people directorate worked on the benefits package and decided to use this as part of the recruitment and retention campaign. Working with numerous departments across the trust, the benefits booklet was revamped and featured new and relevant benefits including:

- the annual leave scheme
- the NHS Pension scheme
- retire and return options.

The trust realised these should be promoted as a benefit of working for the trust, as compared to other sectors these schemes are extremely generous.

[Improving retention at all stages of nurses' careers: United Lincolnshire Hospitals NHS Trust](#) NHS Employers, August 2020

United Lincolnshire Hospitals NHS Trust (ULHT) developed a detailed retention action plan which outlined the steps the trust could take to reduce nurse turnover rates. Target areas for interventions were identified based on the findings from extensive staff engagement, with the trust focusing activity across all stages of a nurse's career.

[New initiatives to support staff retention](#) Guy's and St Thomas' NHS Foundation Trust, April 2018

In the first of our joint case studies working with NHS Improvement, Guy's and St Thomas' NHS Foundation Trust shared how it has introduced a number of new initiatives to support staff retention. The case study features key learning points, explores how the trust overcame certain challenges, and highlights a number of additional resources which may be useful to organisations looking to develop an approach to workforce retention.

The Star for workforce redesign

More resources and tools are available in the **Supply** section of [the Star](#)

Statistics

You can find relevant statistics on the [Health and Care Statistics Landscape](#) under “**Health and Care**” and use the “**Workforce**” filter

National Data Programme

Workforce, Training and Education staff can look at the [National Data Warehouse \(NDL\)](#) SharePoint site to find out more about datasets and Tableau products.

Published Peer Reviewed Research

Retention

General Practice and Primary Care

[*Burnout and Health Care Workforce Turnover*](#) *Annals of Family Medicine*, January 2019

Purpose: Levels of burnout among primary care clinicians and staff are alarmingly high, and there is widespread belief that burnout and lack of employee engagement contribute to high turnover of the workforce. Scant research evidence exists to support this assertion, however. Conclusions: High rates of burnout and turnover in primary care are compelling problems. Our findings provide evidence that burnout contributes to turnover among primary care clinicians, but not among staff. Although reducing clinician burnout may help to decrease rates of turnover, health care organizations and policymakers concerned about employee turnover in primary care need to

understand the multifactorial causes of turnover to develop effective retention strategies for clinicians and staff.

[*Twelve tips for the recruitment and retention of general practitioners as teachers of medical students*](#) *Medical Teacher*, March 2018

Primary care physicians have become a fundamental aspect of teaching in modern medical school curricula worldwide with a significant proportion of undergraduate teaching taking place in primary care. There are calls for this to increase with more patient care occurring in the community but teaching capacity in primary care is a potential challenge. Medical schools, therefore, need strategies to be able to increase their primary care physician teaching workforce. We asked all Heads of General Practice Teaching in UK medical schools to share their three top tips for recruiting and retaining GPs to teach undergraduate students. The majority (two-thirds) of medical schools responded and we have summarized the answers into the following twelve tips. Although the twelve tips are varied and comprehensive, including broad topics such as finances and training, one clear theme running through the majority of tips is good communication and relationships between education teams and GPs. The solutions to recruiting and retaining GPs to teach undergraduate medical students are clearly multifactorial and complex. We hope that by presenting suggestions from UK GP heads of teaching as these twelve tips provides some helpful, thought-provoking ideas and inspiration for both the UK and internationally.

[*Is practice placement capacity helping the NHS to recruit healthcare professionals?*](#) *British Journal of Healthcare Management*, 2018

Practice placements are a fundamental aspect of preparing students for working in the NHS and will influence where, and in what specialities, students work. Additionally, NHS leaders now

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consider the issue of recruitment and retention of NHS staff to be as serious as concerns over funding. NHS Providers have outlined the issues although there appears to be little, or no, consideration in terms of plans required for the most immediate future workforce. It is hypothesised that there is link between student healthcare placement capacity and workforce gaps. The policy of increasing training places and of funding practice placements may have a positive effect on practice placement provision and if so contribute to increasing the NHS workforce, but without further detail this impact remains unknown. Along with most aspects of service delivery, planning practice placements using the best available evidence will ensure that the impact on service delivery is minimised while maximising the experience for the next generation of NHS employees.

[Family effects on the rurality of GP's work location: a longitudinal panel study](#) Human Resources for Health, October 2017

This paper aims to measure longitudinal associations between the rurality of GP work location and having (i) school-aged children and (ii) a spouse/partner in the workforce. This is the first systematic, national-level longitudinal study showing that GP work location is related to key family needs which differ according to GP gender and educational stages of children. Such non-professional factors are likely to be dynamic across the GP's lifespan and should be regularly reviewed as part of GP retention planning. This research supports investment in regional development for strong local secondary school and partner employment opportunities.

[Addressing the crisis of GP recruitment and retention: a systematic review](#) British Journal of General Practice, 2017

BACKGROUND: The numbers of GPs and training places in general practice are declining, and retaining GPs in their practices is an increasing problem. AIM: To identify evidence on

different approaches to retention and recruitment of GPs, such as intrinsic versus extrinsic motivational determinants. Although the published evidence relating to GP recruitment and retention is limited, and most focused on attracting GPs to rural areas, the authors found that there are clear overlaps between strategies to increase recruitment and retention. Indeed, the most influential factors are idiosyncratic and intrinsic to the individuals.

[A systematic review of strategies to recruit and retain primary care doctors](#) BMC Health Services Research, April 2016

There is a workforce crisis in primary care. Previous research has looked at the reasons underlying recruitment and retention problems, but little research has looked at what works to improve recruitment and retention. The aim of this systematic review is to evaluate interventions and strategies used to recruit and retain primary care doctors internationally. This is the first systematic review of interventions to improve recruitment and retention of primary care doctors. Although the evidence base for recruiting and care doctors is weak and more high quality research is needed, this review found evidence to support undergraduate and postgraduate placements in underserved areas, and selective recruitment of medical students. Other initiatives covered may have potential to improve recruitment and retention of primary care practitioners, but their effectiveness has not been established.

[Community assets and capabilities to recruit and retain GPs: the Community Apgar Questionnaire in rural Victoria](#) Rural and Remote Health, 2016

Hume, in rural Victoria, was the first international site to implement the CAQ to differentially diagnose a community's relative strengths and challenges in recruiting and retaining GPs, while supporting health facilities to prioritise achievable goals to improve long-term retention strategies. It provided each community with a tailored gap analysis, while confidentially

sharing best practices of other health facilities. Within Hume, open communication and trust between GPs and health facility leadership and nursing staff ensures that GPs can feel valued and supported. Possible solutions for GP recruitment and retention must consider the social, employment and educational opportunities that are available for spouses and children. Participation in the program was useful as it helped health facilities ascertain how they were performing while highlighting areas for improvement.

Allied Health Professionals

[*Challenges in recruitment and retention: Securing the therapeutic radiography workforce of the future*](#) Radiography, February 2019 (Abstract only*)

In this issue of the Radiography journal, we have published a Letter to the Editor from E.R. Andersen which argues that the development of therapeutic radiography as a profession across Europe is limited by a lack of visibility. The author makes a plea to therapeutic radiographers to '*let the world know that we exist*'. He argues that the lack of public and professional awareness of the profession as well as variation in the scope of practice from country to country is limiting our potential to engage in cross-European projects and multi-disciplinary work that could benefit our patients.

[*The first year experience of occupational therapy students at an Australian regional university: Promoting student retention and developing a regional and remote workforce*](#) The Australian Journal of Rural Health, February 2017 (OpenAthens log-in required*)

Student retention at regional universities is important in addressing regional and remote workforce shortages. Students attending regional universities are more likely to work in regional areas. First year experience at university plays a key role in

student retention. This study aimed to explore factors influencing the first year experience of occupational therapy students at a regional Australian university.

The importance of the first year experience in retaining occupational therapy students is highlighted. Engagement with other students and staff and academic support are important factors in facilitating student retention. It is important to understand the unique factors influencing students' decisions, particularly those from regional and remote areas, to enter and continue in tertiary education to assist in implementing supports and strategies to improve student retention.

[*Strengthening the rural dietetics workforce: examining early effects of the Northern Ontario Dietetic Internship Program on recruitment and retention*](#) Research Support, 2017

This study provides early evidence that the NODIP distributed and community-engaged learning model has been very successful in its goal of augmenting the rural and northern dietetics workforce, with a majority of graduates accepting and remaining in rural positions during their first 2 years of practice. Whether graduates remain in rural practice, however, depends on a number of other factors, including career aspirations, availability of professional supports and personal commitments. This suggests that additional supports, above and beyond the NODIP internship, may be needed to encourage graduate dietitians to stay in rural and northern practice locations over the longer term.

[*Recruitment and Retention of New Emergency Medical Technician \(EMT\)-Basics and Paramedics Prehospital and Disaster Medicine, December 2016*](#) (Abstract only*)

The purpose of this paper is to describe factors important for the recruitment and retention of Emergency Medical Technician (EMT)-Basics and EMT-Paramedics new to the Emergency

Medical Services (EMS) field (defined as two years or less of EMS employment) through an analysis of 10 years of Longitudinal EMT Attributes and Demographic Study (LEADS) data. The findings provide guidance for recruiters, educators, employers, and governmental EMS policy organizations and will provide better insight into how to attract and retain new entrants to the field.

[Why do Emergency Medical Services \(EMS\) Professionals Leave EMS? Prehospital and Disaster Medicine, December 2016](#)

The objective was to determine why Emergency Medical Technician (EMT)-Basics and Paramedics leave the Emergency Medical Services (EMS) workforce. CONCLUSIONS: Given the anticipated increased demand for EMS professionals in the next decade, continued study of issues associated with retention is strongly recommended. Some specific recommendations and suggestions for promoting retention are provided.

[Boosting the recruitment and retention of new graduate speech-language pathologists for the disability workforce Journal of Clinical Practice in Speech-Language Pathology, June 2016](#)

New graduate speech-language pathologists (SLPs) will play an integral role in meeting the anticipated growth in demand for a highly skilled disability workforce under the National Disability Insurance Scheme (NDIS). However, NDIS implementation will have major implications for factors known to support new graduate recruitment and retention in the disability sector. In this article, we consider how the NDIS is likely to affect (a) clinical placements in disability while at university, and (b) access to clinical supervision and continuing professional development (CPD) in the workplace, and propose strategies to address these challenges.

Nursing and Midwifery

[Assessing the impacts of nurse staffing and work schedules on nurse turnover: A systematic review International Nursing Review, May 2023 \(OpenAthens log-in required*\)](#)

Fourteen articles were reviewed. Among them, 12 studies investigated the relationship between nurse staffing and turnover, and four examined the impact of work schedules on nurse turnover. Nurse staffing levels are strongly related to nurse turnover in the expected direction. However, few studies have found that work schedules are significantly related to nurse turnover. Inadequate and unsafe nurse staffing leads to increased nurse turnover rates. More studies are needed to investigate the impacts of work schedules on nurse turnover.

[Nurses' motivations to leave the nursing profession: A qualitative meta-aggregation Journal of Advanced Nursing, May 2023 \(OpenAthens log-in required*\)](#)

This review provides an in-depth and meaningful understanding of motivations for nurses to leave the profession. Among others, poor working conditions, a lack of opportunities for career development, a lack of support from managers, work-related stress, a discrepancy between nursing education and practice and bullying behaviour were motivations to leave the profession, which calls for targeted action to retain nurses in the profession.

[A survey of burnout and intentions to leave the profession among Western Canadian midwives Women and Birth: Journal of the Australian College of Midwives, August 2019 \(Abstract only*\)](#)

Midwives are at high risk for burnout and occupational stress. This has implications for workforce retention and quality of maternity care. We set out to understand how burnout and occupational stress are experienced by midwives in Western Canada, and whether burnout is linked to intentions to leave the

profession and other factors. The current study identified occupational stressors that are unique to the caseload model. Findings from this study can inform policies and strategies to support the growth and sustainability of caseload midwifery in Canada.

[Meeting Texas Nursing Workforce Needs Through Recruitment and Retention Initiatives Nursing Education Perspectives, January 2019 \(Abstract only*\)](#)

Evidence demonstrates health inequities can be ameliorated by a workforce whose diversity reflects the population served. The diversity of the Texas nursing workforce, however, is not reflective of the Texas population. This article reports on a project to recruit and retain minority nurses in Texas. The project goals were to improve enrolment for minority students, specifically Hispanic students, in an online South Texas baccalaureate nursing program (traditional BSN, second-degree BSN, and RN to BSN); facilitate student success; and promote student satisfaction. These goals were successfully achieved at one academic institution.

[Supporting student nurses who have their first clinical placement in the community nursing team British Journal of Community Nursing, October 2018 \(Abstract only*\)](#)

First year student nurses are increasingly undertaking their first placement with community nurses. The importance of how this initial learning experience is introduced by the higher education institution, as well as how the student is welcomed and integrated into the community nursing team, cannot be underestimated. Following positive anonymous feedback from students, which indicated that they had benefitted from the introduction, welcome and integration they experienced, the university and mentors reviewed how this had been done to identify good practice to share with colleagues. Students indicated that their welcome and integration had helped them to

feel part of the team and enhanced learning, because they were so well supported, and mentors had facilitated learning experiences by acknowledging that this was their first placement experience. It is notable that mentors were committed to the students' learning and used workplace social capital to optimise the student experience. At a time when retention of students is essential to increase the future workforce, mentors dedicated to student learning are acting as ambassadors for the community workforce, and may well encourage students to have a career in community nursing.

[Factors predicting Registered Nurses' intentions to leave their organization and profession: A job demands-resources framework Journal of Advanced Nursing, April 2018 \(Abstract only*\)](#)

The ageing population and a growing prevalence of multimorbidity are placing increasing strain on an ageing nursing workforce. Solutions that address the anticipated nursing shortage should focus on reducing burnout and enhancing the engagement of Registered Nurses (RNs) to improve retention. Employee burnout and work engagement play an important role in transmitting the impacts of job demands, job resources, personal demands and personal resources into RN intention to leave the organization and profession. Work-life interference and high workloads are major threats to nursing retention while challenge demands and higher levels of self-efficacy support better retention.

[The Lived Experience of Being a Male Nursing Student: Implications for Student Retention and Success Journal of Professional Nursing, 2018 \(Abstract only*\)](#)

This study was conducted to explore the lived experience of former male nursing students. Based on study findings, recommendations to promote male nursing student retention and success include improving media portrayals of male nurses,

providing faculty development to heighten self-awareness of gender bias and understanding of barriers and facilitators in nursing education for male students, addressing negative experiences in maternity clinical rotations, and implementing mentorship programs to provide male role models for male nursing students.

[*The Effectiveness of Nurse Residency Programs on Retention: A Systematic Review*](#) AORN Journal, August 2017 (OpenAthens log-in required*)

New graduates account for the highest numbers of nurses entering and exiting the profession. Turnover is costly, especially in specialty settings. Nurse residency programs are used to retain new graduates and assist with their transition to nursing practice. The purpose of this systematic review of the literature was to examine new graduate nurse residency programs, residents' perceived satisfaction, and retention rates, and to make recommendations for implementation in perioperative settings. Results indicate increased retention rates for new graduates participating in residency programs and that residency participants experienced greater satisfaction with their orientation than those not participating in residency programs. Residency participants also perceived the residency as beneficial. Because residency programs vary in curricula and length, effectively comparing outcomes is difficult. More longitudinal data are needed. Data on residency programs specific to perioperative nursing are lacking. Considering the aging perioperative nursing workforce, residency programs could address critical needs for succession planning.

[*Retention of early career registered nurses: the influence of self-concept, practice environment and resilience in the first five years post-graduation*](#) Journal of Research in Nursing, August 2017 (Abstract only*)

This study investigates nurse self-concept, practice environment and resilience, and how these three factors influence the retention of early career registered nurses (ECRNs). Study findings demonstrate correlations between ECRN retention intentions and nurse self-concept, practice environment and resilience. The significance of these factors at different points during the first five years of practice emphasises the need for judicious and well-timed use of strategies to positively influence nurse retention. Longitudinal research investigating the significance of influencing factors over time would further contribute to our understanding of ECRN retention intentions.

[*Retaining nurses in metropolitan areas: insights from senior nurse and human resource managers*](#) Journal of Nursing Management, November 2016

In contexts where multiple organisations compete for nurses, addressing retention through strategic leadership is likely to be important in paying due attention and apportioning resources to effective strategies.

[*Student Nurses in the OR: Improving Recruitment and Retention*](#) AORN Journal, January 2016 (OpenAthens log-in required*)

Changes in nursing education have made it difficult for students to find or participate in perioperative clinical experiences, which makes it difficult for employers to find experienced perioperative nurses. We developed a perioperative preceptorship for senior-level nursing students, to provide them with the opportunity to learn RN circulator skills based on AORN's Guidelines for Perioperative Practice. Senior nursing students had the opportunity to demonstrate critical thinking skills within the context of patient-centered care while integrating knowledge and skills learned in the classroom. The students applied the

knowledge and skills learned in the classroom in the OR setting during a required minimum 210-hour clinical commitment. We believe the course has been successful in providing the foundation needed to become a competent perioperative nurse, because, to date, all students who were hired are still employed in the OR.

[Retaining early career registered nurses: a case study](#) *BMC Nursing, 2016*

Reducing turnover and improving retention relies on understanding the factors that influence nurses' decisions to leave or remain within an organisation and the profession. Ensuring nurses in the current workforce remain engaged and productive, rather than leave the profession, is reliant on addressing factors that cause attrition and implementing strategies that strengthen retention rates and workforce sustainability.

[Transition to Practice Program: A New Direction for Recruiting and Retaining Enrolled Nurses in Mental Health](#) *Journal for Nurses in Professional Development, 2016 (Abstract only*)*

One health service in one Australian jurisdiction introduced a specialist mental health transition to practice program for newly qualified enrolled nurses. A process evaluation with the first cohort (n = 7) was undertaken in 2014. The program increased enrolled nurse confidence in mental health nursing and appears to be a viable solution to address the mental health nursing workforce shortage. Further research to evaluate components that effectively increase confidence and long-term retention is recommended.

Public Health

[Why Do People Work in Public Health? Exploring Recruitment and Retention Among Public Health Workers](#) *Journal of Public Health Management, 2016 (Abstract only*)*

CONTEXT The public health workforce is critical to the functioning of the public health system and protection of the population's health. Ensuring a sufficient workforce depends on effectively recruiting and retaining workers. **OBJECTIVE** This study examines factors influencing decisions to take and remain in jobs within public health, particularly for workers employed in governmental public health. **CONCLUSIONS** It is important to recognize the value of competitive benefits for both current and potential employees. Public health agencies should maintain these if possible and make the value of these benefits known to policy makers or other agencies setting these benefit policies. Job security associated with governmental public health jobs also appears to offer public health an advantage in recruiting and retaining employees.

Postgraduate, Medical and Dental

[Physician perceptions of recruitment and retention factors in an area with a regional medical campus](#) *Canadian Medical Education Journal, March 2018*

The factors that influence physicians to establish and maintain their practice in a region are variable. The presence of a regional medical campus (RMC) could influence physicians' choice. The objective of this study was to explore the factors influencing physician recruitment and retention, and in particular the role of a RMC, in a region of Quebec. This study highlights the role of RMCs in physician recruitment and retention via multiple impacts on the quality of practice of physicians working in the same area.

[What factors are critical to attracting NHS foundation doctors into specialty or core training? A discrete choice experiment](#) BMJ Open, March 2018

Multiple personal and work-related factors influence medical trainees' career decision-making. The relative value of these diverse factors is under-researched, yet this intelligence is crucially important for informing medical workforce planning and retention and recruitment policies. Our aim was to investigate the relative value of UK doctors' preferences for different training post characteristics during the time period when they either apply for specialty or core training or take time out. This is the first study focusing on the career decision-making of UK doctors at a critical careers decision-making point. Both location and specific job-related attributes are highly valued by F2 doctors when deciding their future. This intelligence can inform workforce policy to focus their efforts in terms of making training posts attractive to this group of doctors to enhance recruitment and retention.

[Failing to retain a new generation of doctors: qualitative insights from a high-income country](#) BMC Health Services Research, February 2018

In the past decade, Ireland has doubled the number of doctors it trains annually, but because of its failure to retain doctors, it remains heavily reliant on internationally trained doctors to staff its health system. To halve its dependence on internationally trained doctors by 2030, in line with World Health Organisation (WHO) recommendations, Ireland must become more adept at retaining doctors. Understanding the medical workforce from a generational perspective requires that the health system address the issues of concern to a new generation of doctors, in terms of working conditions and training structures and also in terms of their desire for a more acceptable balance between work and life. This will be an important step towards future-proofing the

medical workforce and is essential to achieving medical workforce self-sufficiency.

[Credentialing and retention of visa trainees in post-graduate medical education programs in Canada](#) Human Resources for Health, June 2017

Visa trainees are international medical graduates (IMG) who come to Canada to train in a post-graduate medical education (PGME) program under a student or employment visa and are expected to return to their country of origin after training. We examined the credentialing and retention of visa trainees who entered PGME programs between 2005 and 2011. Visa training programs represent another route for IMG to qualify for and enter the physician workforce in Canada. The growth in the number of visa trainees and the high retention of these physicians warrant further consideration of the oversight and coordination of visa trainee programs in provincial and in pan-Canadian physician workforce planning.

[Retention and recruitment of general dentists in an adjunct teaching model-A pilot study](#) PLoS ONE, 2017

Retention and recruitment of part time clinical adjunct faculty members in dental education is becoming increasingly difficult as dental schools come to rely on this workforce for their increased involvement in clinical education. Contributing factors include full time faculty shortage, aging workforce, practice and student debt, practice and family commitments, and financial compensation. This study attempts to ascertain barriers to teaching so appropriate strategies can be formulated to address this issue. The study demonstrated that the aging part time workforce is a great concern and new part time clinical adjunct faculty members must be recruited. Barriers to recruitment and retention of faculty must be considered and addressed to sustain this teaching model.

[Designing medical internships to improve recruitment and retention of doctors in rural areas](#) International Journal of Circumpolar Health, 2017

The medical internship as a way of exposing young doctors to training in a rural context is regarded as a useful tool to recruit and retain doctors in rural areas. Norwegian health authorities tested an arrangement of early sign-up for medical internships in the Finnmark County in Norway. The early sign-up model had a net contribution of proving additional physicians in the study area.

Mentorship and Support

[Evaluation of a Formal Pediatric Faculty Mentorship Program](#) The Journal of South Dakota State Medical Associate, June 2018 (Abstract only*)

The purpose of this article is to describe how a formal mentoring program in pediatrics can prepare new physicians and scientists for their roles and conflicting responsibilities within a community-based medical school. While research supports the impact of faculty mentoring, quality partnerships are reportedly low in academic medicine and can negatively affect junior faculty who are preparing for certifying examinations, orienting to a new role and balancing career and personal life.

Although the sample sizes were small for pre-post comparisons, the results provided a longitudinal evaluation and program best practices. Overall, a structured mentoring program was of value to faculty and resulted in partnerships that likely would not occur otherwise. The findings suggest that programs should assist junior faculty with onboarding and enculturation, career goals and focus, time management, work-life balance and promotion clarification and preparation.

[Promoting retention, enabling success: Discovering the potential of student support circles](#) Nurse Education in Practice, September 2016

Using a nominal group technique, student's voices gave rich insight into the personal and professional growth that participation in the student support circles provided. Evaluated as helpful to first year students in orientating to university study and early socialisation into the profession, the circles appear to influence the development of a strong sense of professional identity and personal midwifery philosophy based on the relational nature of the midwife being with woman rather than doing midwifery. This suggests that student support circles positively influence perceptions and expectations, contributing to a shared sense of purpose and discipline connection, for enhancing student retention and future workforce participation.

Staff engagement

[Teaching and learning modalities for continuing professional development in the long-term care: A rapid synthesis review](#) Nurse Education in Practice, July 2023 (Abstract only*)

Continuing Professional Development is a key activity that organisations undertake to achieve effective workforce planning, recruitment, retention and upskilling strategies in long-term care settings. During the Covid-19 pandemic there was a rapid move to online modalities of Continuous Professional Development, but there is a paucity of evidence in relation to their effectiveness compared with face-to-face, or in-class learning.

[Effects of ethical climate in association with tenure on work addiction, quality of care and staff retention: a cross-sectional study](#) BMJ Quality & Safety, May 2023 (OpenAthens log-in required*)

Understanding the underlying mechanisms which affect the intention to quit the profession and the perceived quality of care,

such as work addiction, is of paramount importance for healthcare organisations worldwide. As such, ethical climate should be valued, especially so for HCWs with lower tenure, as it has a beneficial relationship with these outcomes. Future research could study whether specific differences exist between various professions in healthcare regarding work addiction, ethical climate, quality of care and/or intention to quit the profession. Identifying differences in perceptions could help researchers better understand how to support specific healthcare professionals. These differences could also provide valuable information for practitioners when developing resources management programmes tailor made for a specific profession.

[Keeping the frogs in the wheelbarrow: how virtual onboarding creates positive team-enabling cultures](#) BMJ Leader, February 2023 (Abstract only*)

In this paper, we illustrate our experience in building an employee onboarding programme as an efficient mechanism not only to immerse new professionals into existing teams but also to improve workplace culture and reduce team turnover. Key to its effectiveness, and in contrast with traditional large-scale culture change programmes, is that our programme provided a local cultural context via videos of our existing workforce in action.

[Retaining nurses in metropolitan areas: insights from senior nurse and human resource managers](#) Journal of Nursing Management, November 2016

Aim: To investigate the views of senior nurse and human resource managers of strategies to retain hospital nurses in a metropolitan area. Aside from good human resource management practices for all, strategies tailored to different segments of the nursing workforce are likely to be important. This metropolitan study suggests attention should be paid to strategies that address remuneration, progressing nursing careers and the immediate work environment.

[Improving staff retention and career progression](#) Nursing Times, May 2016

Staff shortages are serious and widespread and, for many trusts, the cost of temporary staff is not sustainable. In many cases, the existing workforce has the skills necessary to fill vacant posts. A trust [University College London Hospitals Foundation Trust] developed an initiative to maximise use of its nurses' expertise and minimise staff attrition. This article describes the scheme and how it increased job satisfaction, promoted development opportunities and cut costs.

Inclusion

[Retention of ethnic minority staff is critical to resolving the NHS workforce crisis](#) BMJ, March 2023

We know that the main reasons staff leave the NHS are workload pressures, poor work-life balance, mental ill health, and poor development opportunities. These have been worsened by understaffing and the pandemic. Pay and pensions are clearly important too, although increasing pay is unlikely to be enough to encourage staff to stay if working conditions are not improved. It is also clear that staff from ethnic minority groups and international staff are more likely than their white British colleagues to experience many of the predictors of attrition, such as low pay and poor career progression, and have also been disproportionately affected by the pandemic.

Brexit

[What does Brexit mean for the UK social care workforce? Perspectives from the recruitment and retention frontline](#) Health and Social Care in the Community, November 2018

This article explores how social care managers evaluate Brexit's prospects for future workforce sustainability, through the prism of

their organisation's workforce requirements. This qualitative study incorporated in-depth semi-structured interviews and questionnaire surveys with domiciliary and residential care managers. Data collection focused on an urban conurbation in south-west England, with demographic characteristics likely to make post-Brexit recruitment and retention in social care particularly challenging. A key finding is that, irrespective of whether they employ EU/EEA workers or not, research participants have deep concerns about Brexit's potential impact on the social care labour market. These include apprehensions about future restrictions on hiring EU/EEA nurses, as well as fears about increased competition for care staff and their organisation's future financial viability. This article amplifies the voices of managers as an under-researched group, bringing their perspectives on Brexit to bear on wider debates on social care workforce sustainability.

COVID-19

[Exploring experiences of moral injury and distress among health care workers during the Covid-19 pandemic](#) *Psychology and Psychotherapy: Theory, Research and Practice*, May 2023
(*OpenAthens log-in required**)

NHS clinical staff described potentially morally injurious and distressing events throughout the pandemic. These experiences were often trust related, including perceptions of betrayal by management, and having to adhere to decisions which they felt may compromise patient care. However, participants typically did not label their experiences as morally injurious; either because they viewed their roles as unaffected by these experiences, or in some settings, such as intensive care units, they saw morally injurious experiences as 'part of the job'. The experiences nevertheless affected participants' wellbeing, including symptoms consistent with post-traumatic stress disorder; reduced compassion; and in some cases, a desire to leave their

profession entirely. Health care staff may benefit from psychoeducation and psychological support to help them to recognise, acknowledge and cope with their experiences. Team discussions may help to acknowledge moral distress and its impact, and explain reasoning behind difficult decision-making processes. Further research is needed to evaluate support strategies.

Resilience

General

[In critique of moral resilience: UK healthcare professionals' experiences working with asylum applicants housed in contingency accommodation during the COVID-19 pandemic](#) *Journal of Medical Ethics*, May 2023

This paper, which describes experiences of NHS staff working within a specialist service in a unique setting during the pandemic, makes empirical and theoretical contributions to existing literature. We provide an empirical insight into how contemporary hostile bordering practices in the UK play out in healthcare. We add to a literature problematising bordering in healthcare, shedding new light on the practitioners' perspective. Some redeployed staff, having never previously worked with people seeking asylum, expressed disbelief at the state-sponsored neglect they were subject to. For some, the injustice and suffering they witnessed resulted in reflections on their own lives with guilt, gratitude, or both. Illuminating these responses provides a social commentary on the current punitive governmental approach to immigration, and its human cost.

[Improving the resilience of the healthcare workforce](#) *British Journal of Nursing*, November 2016

Emeritus Professor Alan Gaspas, from the University of Southampton, discusses government strategies to ensure a

future healthcare workforce that is sustainable and does not rely on overseas recruitment.

Allied Health Professionals

[*Developing resilience: Stories from novice nurse academics*](#)
[Nurse Education Today, March 2016](#)

It is acknowledged that novice nurse academics face many challenges on commencement of their new role. Most are recruited from the clinical arena, with little understanding of the academic triumvirate of teaching, research and service. They struggle with role expectation and experience feelings of isolation and anxiety. The aim of this paper is to report on an exploration of 14 new nurse academics from two major nursing education institutions as they utilised and developed resilience building strategies.

The strategies utilised by the participants in this study were key factors in the development of resilience which assisted in the transition from clinical nurse to academic. These strategies were often tacit and it is imperative that in a time of acute nurse academic shortages where retention is paramount, that employing organisations support employees and contribute to resilience development. Education on resilience building strategies is fundamental for all new academics and is essential in the transition from clinical nurse to academic.

[*Exploring the nature of resilience in paramedic practice: A psycho-social study*](#)
[International Emergency Nursing September 2016](#)

Previous research has identified that paramedics experience high levels of stress and sickness rates which have escalated in recent years due to changes to workforce restructuring. While a number of studies have investigated resilience among healthcare professionals, there is little research exploring how paramedics

address work challenges and how they become resilient. Using psycho-social methodology, seven paramedics participated in Free Association Narrative interviewing; all were based at one regional centre. In line with the study design, data analysis adopted a psycho-social approach that generated four themes and 10 sub-themes which, characterised participants' experiences. Coping and resilience was impacted upon via formal methods of support including management, debriefing and referral to outside agencies. Alongside this, more informal methods aided resilience. Informal methods included peer support, support from family and friends and the use of humour. Uniquely, this study uncovered how detachment is used to manage emotions. The study has implications for the services need to support the emotional needs of paramedics.

Nursing and Midwifery

[*Nursing Faculty Job Satisfaction During COVID-19: A Mixed-Methods Study*](#)
[Nursing Education Perspectives, May 2023](#)
(Abstract only)*

Compassion satisfaction and resilience were positively correlated with job satisfaction; stress and job satisfaction were negatively correlated. Feeling safe to teach, feeling supported by administration, and spending more hours teaching online were positively associated with job satisfaction. Three themes were identified: challenges in the workplace, struggles with personal stressors, and building capacity in the face of the unknown. Faculty reported a strong professional commitment to nursing education during the COVID-19 pandemic. Leadership that supported faculty through concern for their safety contributed to participants' ability to respond to the challenges experienced.

[Relationships of individual and workplace characteristics With nurses' moral resilience](#) *Nursing Ethics*, May 2023 (Abstract only*)

Resilience was noted to have significant small correlations with burnout, secondary traumatic stress, compassion satisfaction, and organizational mission/behavior congruence. Burnout and secondary traumatic stress predicted less resilience, whereas compassion satisfaction and perceived congruence between organizational mission and behaviors predicted higher resilience. Burnout and secondary traumatic stress, increasingly experienced by nurses and other health professionals, have negative effects on moral resilience. Compassion satisfaction can increase resilience, which is especially important in nursing. Organizational practices promoting integrity and confidence can have positive effects on resilience. Continued work to confront workplace well-being issues, especially burnout, is needed as a way of increasing moral resilience. Studies of organizational and work environment factors to bolster resilience are likewise needed to assist organizational leaders in devising the best strategies.

[Psychological capital, grit and organizational justice as positive strengths and resources among registered nurses: A path analysis](#) *Empirical Research Quantitative*, May 2023 (OpenAthens log-in required*)

Nurse leaders and managers play a key role in improving RNs' well-being, health, and retention. This study suggests that at the same time as effective strategies are implemented to develop RNs' practice environments and organizational resources, investments might also be directed to strengthening RNs' positive, individual strengths. Especially PsyCap was associated with many positive, work-related outcomes in this present study. Therefore, RNs could benefit from evidence-based interventions developed to increase their PsyCap.

[Exploring nurse perceptions and experiences of resilience: a meta-synthesis study](#) *BMC Nursing*, January 2022

Emphasizing resilience, a positive force for overcoming adversity, to nurses can play a very significant role in improving the quality of nursing care. In this study, nurses showed resilience to grow and develop themselves by focusing on their inner selves and finding ways to solve problems on their own. These can be considered as categories of nurse resilience and provide a framework to guide the development of an intervention program for improving nurse resilience. Based on the results of this study, to improve the quality of nursing care we should try to develop varied intervention programs that enhance nurses' inner strength.

[Nurse leaders' strategies to foster nurse resilience](#) *Journal of Nursing Management*, November 2018

Fostering nurse resilience is an ongoing effort. Nurse leaders are instrumental in building a resilient nursing workforce. The strategies identified to foster nurse resilience will not only impact the nursing staff but also improve patients' outcomes.

[Developing resilience: the role of nurses, healthcare teams and organisations](#) *Nursing Standard* (Royal College of Nursing), October 2018 (Abstract only*)

Discussions about the sustainability of the healthcare workforce have placed considerable emphasis on improving the resilience of healthcare professionals. However, when discussed in relation to individuals, the contextual aspects of resilience are often lost. This means that individuals are burdened with the responsibility of increasing their resilience so that they can better manage the challenges they experience, rather than examining the external and environmental factors that can affect resilience. This article explores the concept of resilience and suggests ways in which resilience can be developed by individuals and in collaboration with others, resulting in resilient healthcare teams and

organisations capable of supporting individuals effectively. It aims to assist healthcare professionals to develop their resilience, while also improving their understanding of the complex factors that can affect their coping capacity, as well as how community influences the resilience of everyone.

[Strengthening mental health nurses' resilience through a workplace resilience programme: A qualitative inquiry](#) *Journal of Psychiatric and Mental Health Nursing*, June 2018 (Abstract only*)

What the paper adds to existing knowledge?: This qualitative inquiry is the first study to report mental health nurses' perspectives and experiences on a workplace resilience programme. Strengthening mental health nurses' resilience through a resilience programme involved a process of understanding resilience, and applying resilience strategies such as positive self-talk, managing negative self-talk, detaching from stressful situations, being aware of and managing emotions, and showing more empathy, to address workplace challenges. To address the range of resources needed to support mental health nurses' resilience, a social-ecological approach to workplace resilience can be used to promote resource provision at individual, work unit, organizational and professional levels.

[Methods for Alleviating Stress and Increasing Resilience in the Midwifery Community: A Scoping Review of the Literature](#) *Journal of Midwifery and Women's Health*, November 2017 (Abstract only*)

Work-related stress and exposure to traumatic birth have deleterious impacts on midwifery practice, the midwife's physiologic well-being, and the midwifery workforce. This is a global phenomenon, and the specific sources of this stress vary dependent on practice setting. This scoping review aims to determine which, if any, modalities help to reduce stress and increase resilience among a population of midwives. While

modalities such as mindfulness-based stress reduction show promise, further studies with a cohort of midwives should be conducted. These studies should include interventions aimed at addressing the needs of midwives to improve psychological outcomes related to employment-related stress on a global scale and specific to each health care context.

[Resilience as part of nursing education: supporting nurses in times of austerity](#) *British Journal of Nursing*, July 2017 (OpenAthens log-in required*)

Janet Scammell, Associate Professor (Nursing), Bournemouth University, discusses the challenging environment nurses are working in and the role of resilience in creating a sustainable NHS workforce.

[Sustainability and resilience in midwifery: A discussion paper](#) *Midwifery*, September 2016

The aim of this discussion paper is to explore the concepts of sustainability and resilience now being suggested in midwifery workforce literature. Whether sustainability and resilience are concepts useful in midwifery workforce development is questioned. The impact that midwifery models of care may have on sustainable practice and nurturing healthy resilient behaviors remains uncertain. The notion of resilience in midwifery as the panacea to resolve current concerns may need rethinking. Resilience may be interpreted as expecting midwives 'to toughen up' in a workplace setting that is socially, economically and culturally challenging. Sustainability calls for examination of the reciprocity between environments of working and the individual midwife. The findings invite further examination of contextual influences that affect the wellbeing of midwives across different models of care.

[Resilience as resistance to the new managerialism: portraits that reframe nursing through quotes from the field](#) *Journal of Nursing Management*, January 2016 (Abstract only*)

This paper describes some of the hallmarks of new managerialism where workforce pressures force practices that do not value the 'human resource'. The quotes from the field give insight into the nurse's world view and have implications for managers, educators and employers, as well as for consumers of nursing care.

[Why nurses chose to remain in the workforce: Portraits of resilience](#) *Collegian (Royal College of Nursing)*, 2016 (Abstract only*)

This study explored why nurses chose to remain in the Western Australian workforce and to develop insights into the role of resilience of nurses and to identify the key characteristics of resilience displayed by these nurses. This paper describes the hallmarks of resilience demonstrated by nurses. Resilience and its relationship to coping in times of adversity are captured within the portraits presented.

[Exploring Environmental Factors in Nursing Workplaces That Promote Psychological Resilience: Constructing a Unified Theoretical Model](#) *Frontiers in Psychology*, 2016

This unified theoretical framework was developed using a literary synthesis drawing on data from international studies and literature reviews on the nursing workforce in hospitals. The most frequent workplace environmental factors were identified, extracted and clustered in alignment with key constructs for psychological resilience. Six major organizational concepts emerged that related to a positive resilience-building workplace and formed the foundation of the theoretical model. Three concepts related to nursing staff support (professional, practice,

personal) and three related to nursing staff development (professional, practice, personal) within the workplace environment. The unified theoretical model incorporates these concepts within the workplace context, linking to the nurse, and then impacting on personal resilience and workplace outcomes, and its use has the potential to increase staff retention and quality of patient care.

[Can We Predict Burnout among Student Nurses? An Exploration of the ICWR-1 Model of Individual Psychological Resilience](#) *Frontiers in Psychology*, 2016

The nature of nursing work is demanding and can be stressful. Previous studies have shown a high rate of burnout among employed nurses. Recently, efforts have been made to understand the role of resilience in determining the psychological adjustment of employed nurses. A theoretical model of resilience was proposed recently that includes several constructs identified in the literature related to resilience and to psychological functioning. As nursing students are the future of the nursing workforce it is important to advance our understanding of the determinants of resilience in this population. Student nurses who had completed their final practicum were invited to participate in an online survey measuring the key constructs of the ICWR-1 model. 422 students from across Australia and Canada completed the survey between July 2014 and July 2015. As well as several key demographics, trait negative affect, mindfulness, self-efficacy, coping, resilience, and burnout were measured. We used structural equation modeling and found support for the major pathways of the model; namely that resilience had a significant influence on the relationship between mindfulness, self-efficacy and coping, and psychological adjustment (burnout scores). Furthermore, as predicted, Neuroticism moderated the relationship between coping and burnout. Results are discussed in terms of potential approaches to supporting nursing students who may be at risk of burnout.

General Practice and Primary Care

[Professional resilience in GPs working in areas of socioeconomic deprivation: a qualitative study in primary care](#) British Journal of General Practice, December 2018

Aim: To understand how GPs working in areas of high socioeconomic deprivation consider professional resilience. Professional resilience is about more than individual strength. Policies to promote professional resilience, particularly in settings such as areas of high socioeconomic deprivation, must recognise the importance of flexibility, adaptability, working as teams, and successful integration between work and personal values.

[Barriers, facilitators, and survival strategies for GPs seeking treatment for distress: a qualitative study](#) British Journal of General Practice, October 2017

AIM To establish what might help or hinder GPs experiencing mental distress as they consider seeking help for their symptoms, and to explore potential survival strategies.
CONCLUSION Systemic changes, such as further information about specialist services designed to help GPs, are needed to support individual GPs and protect the profession from further damage.

[GPs' perceptions of resilience training: a qualitative study](#) British Journal of General Practice, October 2017

Aim: To explore GPs' perspectives on the content, context, and acceptability of resilience training programmes in general practice, in order to build more effective GP resilience programmes. A multimodal, flexible approach based on individual needs and learning aims, including resilience

workshops within undergraduate training and in individual practices, is likely to be the optimal way to promote resilience.

[How can educators support general practice \(GP\) trainees to develop resilience to prevent burnout?](#) Education for Primary Care, November 2016

This work seeks to identify whether specific GP trainee groups are particularly at risk of burnout and the aspects of training they find stressful. This research demonstrates that high levels of burnout are experienced in GP trainees as early as the first year of training. Early identification of burnout amongst trainees is essential by GP educators to help protect the future GP workforce.

[Resilience of primary healthcare professionals working in challenging environments: a focus group study](#) British Journal of General Practice, July 2016

Aim: To explore what primary health professionals working in challenging environments consider to be characteristics of resilience and what promotes or challenges professional resilience. A model of health professional resilience is proposed that concurs with existing literature but adds the concept of personal traits being synergistic with workplace features and social networks. These facilitate adaptability and enable individual health professionals to cope with adversity that is inevitably part of the everyday experience of those working in challenging healthcare environments.

[Resilience of primary care healthcare professionals: a systematic review](#) British Journal of General Practice, May 2016

Aim: To examine definitions and measures of resilience, identify characteristics and components, and synthesise current evidence about resilience in primary healthcare professionals.

Resilience, although multifaceted, was commonly defined as involving positive adaptation to adversity. Interactions were identified between personal growth and accomplishment in resilient physicians. Resilience, high persistence, high self-directedness, and low avoidance of challenges were strongly correlated; resilience had significant associations with traits supporting high function levels associated with demanding health professional roles. Current resilience measures do not allow for these different aspects in the primary care context. Health professional resilience is multifaceted, combining discrete personal traits alongside personal, social, and workplace features. A measure for health professional resilience should be developed and validated that may be used in future quantitative research to measure the effect of an intervention to promote it.

Postgraduate medical and dental

[*A study of the relationship between resilience, burnout and coping strategies in doctors*](#) *Postgraduate Medical Journal*, August 2017 (*OpenAthens log-in required**)

The aim of this study was to measure resilience, coping and professional quality of life in doctors. Despite high levels of resilience, doctors had high levels of burnout and secondary traumatic stress. Doctors suffering from burnout were more likely to use maladaptive coping mechanisms. As doctors already have high resilience, improving personal resilience further may not offer much benefit to professional quality of life. A national study of professional Quality of Life, Coping And Resilience, which we are proposing to undertake, will for the first time assess the UK and Ireland medical workforce in this regard and guide future targeted interventions to improve professional quality of life.

Palliative Care

[*Strategies for Promoting High-Quality Care and Personal Resilience in Palliative Care*](#) *AMA Journal of Ethics*, June 2017

Palliative care (PC) clinicians are faced with ever-expanding pressures, which can make it difficult to fulfill their duties to self and others and lead to moral distress. Understanding the pressures that PC clinicians face and the resources that could be employed to ease their moral distress is crucial to maintaining a healthy PC workforce and to providing necessary PC services to patients. In this paper, we discuss recommendations related to two promising pathways for supporting PC clinicians in providing high-quality PC: (1) improving systemic PC delivery and (2) strategies to promote ethical practice environments and individual resilience. Enacting these recommendations holds promise for sustaining higher-quality and accessible PC and a more engaged PC workforce.

Paediatrics

[*Resilience: surviving and thriving in the paediatric workplace*](#) *Archives of diseases in childhood: education and practice*, December 2018 (*OpenAthens log-in required**)

This paper discusses stress and burnout within the healthcare profession; strategies to cope with the demands of the workplace through a reflective scenario, along with well-being and mindfulness resources for managing stress and promoting resilience. The five ways to well-being and mindfulness practice are simple measures that can be built into one's daily life to increase resilience against excess stress and pressures. The coping matrix is a practical tool to encourage reflecting upon and developing one's own coping strategies. A good healthcare professional is one who is compassionate to themselves and their own well-being, enabling them to care and treat their patients.

Disaster response

[*Environmental Factors in Nursing Workplaces that Promote Resilience during Pandemics: Scoping Review*](#) *Prehospital and Disaster Medicine*, May 2023 (Abstract only*)

The main workplace environmental factors that were identified included communication, inter-professional collaboration, access to equipment, targeted training, and supporting well-being. Recognition of these key environmental factors in the workplace will help to implement more effective actions to promote resiliency prior to and during emergency situations. It will also enable managers to include, in any preparation planning, contingencies to protect these factors with the view of sustainable resilience of nursing staff throughout the emergency event.

[*Psychological trauma among nurses during the COVID-19 pandemic with strategies for healing and resilience: An integrative review*](#) *Journal of Clinical Nursing*, April 2023 (OpenAthens log-in required*)

Findings suggest dysfunctional responses for some nurses to COVID-19 trauma, or living fearful, uncertain and unstable. Findings also reveal numerous potential regenerative healing and resilience strategies for nurses, or living whole, optimistic and supported. Individual actions of self-care, adjustment, social connection and finding meaning, coupled with workplace changes, hold potential to improve nurses' future. Risks to nurses' mental health from COVID-19's extraordinary intensity and duration of trauma warrant timely research.

[*Beyond Disaster Preparedness: Building a Resilience-Oriented Workforce for the Future*](#) *International Journal of Environmental Research*, December 2017

This narrative review examines existing literature to determine key components of a resilience-oriented workforce, with a focus on organizational structures, training and education, and leadership models. Reviewed articles spanned a variety of study types, including needs assessments of existing workforce, program evaluations, and reviews/commentaries. A resilience-oriented workforce spans many disciplines and training programs will need to reflect that. It requires a collaborative organizational model that promotes information sharing structures. Leadership models should foster a balance between workforce autonomy and operation as a collective entity. Optimal strategies to develop a resilience-oriented workforce have yet to be realized and future research will need to collect and synthesize data to promote and evaluate the growth of this field.

Education

[*Educational innovations to foster resilience in the health professions*](#) *Medical Teacher*, February 2017

Stress and burnout of healthcare providers has become a major healthcare issue that has implications for not only workforce projections, but the cost and quality of care and the lives of healthcare providers and their families. Burnout, characterized by loss of enthusiasm for work, feelings of cynicism and a low sense of personal accomplishment is associated with early retirement, alcohol use, and suicidal ideation. Healthcare professional "wellbeing" or "care of the caregiver" is a topic that has not been significantly addressed in the education of healthcare professionals. The culture that has dominated much of education has been one where students have been expected to forego personal needs, endure stressful environments, and emerge from highly competitive and often dysfunctional

environments to work in care settings where health and wellbeing is also largely ignored. Three curricular innovations are highlighted that target pre-professional students, students enrolled in health professions education and practicing health care professionals. Strategies are highlighted that both help individuals cultivate resiliency and wellbeing in their personal and professional lives and that address system issues that contribute to unhealthy learning and work environments.

[*Caring for tomorrow's workforce: Moral resilience and healthcare ethics education*](#) *Nursing Ethics, February 2016 (OpenAthens log-in required*)*

Preparing tomorrow's healthcare workforce for managing the growing complexity of care places high demands on students, educators, and faculties. In the light of worrying data about study-related stress and burnout, understanding how students manage stressors and develop resilience has been identified as a priority topic of research. In addition to study-related stressors, also moral stressors are known to characterize the students' first clinical experiences.

However, current debates show that it remains unclear how healthcare ethics education should address them. In order to clarify this issue, this study first develops the notion of moral resilience as a response to moral stressors involving both situations of moral complexity and moral wrongness. Second, it explores the potential of healthcare ethics education in fostering moral resilience. For this purpose, it defines moral resilience operationally as a reduction of moral distress in a given axis of time measured by a validated tool.

In times of global scarcity of educational resources, healthcare ethics education has an important contribution to offer in the promotion of students' mental and physical health by strengthening the knowledge base of moral resilience. This

legitimizes its costs for societies, faculties, and professional bodies.

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