

Evidence Brief: Retention and Resilience

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Produced by the HEE Knowledge Management team Evidence Briefs offer a quick overview of the published reports, research and evidence on a workforce-related topic. A starter for 10 on the evidence if you will.

Key publications – the big picture

[*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.

[*Securing a sustainable NHS workforce for the future*](#) NHS Improvement, June 2017

We've launched a major new programme to improve staff retention in trusts across England and bring down the leaver rates in the NHS by 2020. Nurses and all clinical staff are the backbone of the NHS and our retention programme will highlight why there's been an increase in

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staff choosing to leave and provide support to trusts so they can hold on to this expertise and experience.

[*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

[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,

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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.

[Fluctuating conditions, fluctuating support: improving organisational resilience to fluctuating conditions in the workforce](#) The Work Foundation, January 2015

This paper, the second from the Health at Work Policy unit, looks at the challenges faced by employers in managing a workforce where the prevalence of chronic and fluctuating conditions is set to rise to around 40 per cent of the UK's working age population by 2030. The paper argues that for those living with conditions where the symptoms fluctuate, such as asthma, depression or rheumatoid arthritis, the quality of support received also fluctuates far too much.

[Greater resilience better care: a resource to support mental of adult social care workers](#) Skills for Care, November 2015

This resource offers practical guidance to adult social care employers on how to develop resilience within their workforce.

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

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.

[Understanding staff wellbeing, its impact on patient experience and healthcare quality](#) Picker Institute Europe, June 2015

This briefing sets out to understand the pressures currently affecting the NHS workforce and the impact that they in turn may have on wellbeing both of individual staff and the health service as a whole. These include implications for patient care and experience and some consideration of the implications for improvement.

[The nursing journey: recruitment and retention](#) Good Governance Institute, July 2015

This report from GGI explores the issues of recruitment and retention of nurses in the NHS. To inform this paper we have read widely and also spoken to a range of senior nursing figures in and around the NHS.

Case Studies

[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.

[SAS doctors: support for the CESR training route](#) Calderdale and Huddersfield Hospitals NHS Foundation Trust, June 2018

The case study from Calderdale and Huddersfield Hospitals NHS Foundation Trust shares how it:

- Established a certificate of eligibility for specialist registration (CESR) support group

- Designed posts to enable speciality and associate specialist (SAS) and trust doctors to achieve the experience, knowledge and skills required to apply for CESR
- Created a supply of doctors who can progress into consultant positions

It also provides top tips for other organisations that may wish to introduce a similar support programme to address challenges faced by SAS and trust doctors around recruitment and retention

[NHS Employers: using reward as part of an effective recruitment strategy](#) NHS Improvement, May 2018

Northern Devon healthcare NHS Trust used reward, within its recruitment strategy to ease workforce supply pressure and reduced vacancy rates. This case study looks at some of the recruitment challenges faced by the trust and how it overcame them using the following key approaches:

- Recommend a friend scheme
- Welcome to North Devon video
- An individual approach to NHS Jobs
- Support on relocation

- Recognising achievements
- Dedicated recruitment website

[Improving new starter turnover](#) NHS Employers, August 2017

In this case study, read about how East Kent Hospitals University NHS Foundation Trust worked to improve experiences of staff in their first year of employment at the trust. The trust improved overall on-boarding experience including starting induction before day one in the role and introducing an online portal for new starter, along with the benefits and the challenges of doing so.

[General Practice Resilience Programme – Friends Road Medical Practice](#) NHS England, April 2017

A case study showing that through investment under the [practice resilience programme](#), a practice was enabled to manage their recruitment and develop new ways of providing care.

[Birmingham Children’s Hospital – Implementing health and wellbeing initiatives to reduce stress at work](#) NHS Employers, June 2015

Staff at Birmingham Children's Hospital (BCH) were struggling to cope with challenges and stress at work. The trust turned this around by making 'caring for BCH' everyone's responsibility. As a direct result of reducing stress, BCH have seen a 9 per cent decrease in stress-related absence and an increase in staff engagement. The strategy incorporated a full range of resources and interventions including resilience workshops, exercise classes, mental health workplace training and awareness campaigns. Find out more about how they implemented the strategy, initiatives offered, and what the trust did to make their vision a success by downloading the full case study.

[North Bristol NHS Trust adopts the John Lewis approach to values-based recruitment](#) NHS Employers, February 2015

North Bristol NHS Trust has successfully piloted a John Lewis inspired assessment centre approach to Values Based Recruitment (VBR). The approach involves using a range of methods for assessing candidates' values and early results from the pilot have seen an improvement in staff retention in the time commitment needed from managers.

HEE Star

More resources and tools are available in the “**Supply**” section of the HEE Star:

<https://www.hee.nhs.uk/our-work/hee-star>

Statistics

You can find relevant statistics on NHS Digital under “**Workforce**”

<https://digital.nhs.uk/data-and-information/areas-of-interest/workforce>

Published Peer Reviewed Research

Retention

Moving Roles

[How to approach changing jobs](#) British Journal of Nursing, October 2017

Abstract only available

Sam Foster, Chief Nurse, Oxford University Hospitals, reflects on the process of taking on a new role—from leaving a job to building relationships with new colleagues—and on empowering teams to promote staff retention

[Experiences of registered nurses transitioning from employment in acute care to primary health care-quantitative findings from a mixed-methods study](#) Journal of Clinical Nursing, January 2018

AIMS AND OBJECTIVES To describe the experiences of registered nurses who transition from acute to primary health care (PHC) employment. **BACKGROUND** Internationally the provision of health care in PHC settings is increasing. Nurses are moving from acute care employment to meet the growing demand for a PHC workforce. However, little is known about the transition experiences of these nurses. of specific support measures may assist in the transition process. Findings from our study should be considered by employers when recruiting nurses new to PHC, and when designing orientation and ongoing education programmes. **RELEVANCE TO CLINICAL PRACTICE** This study highlights the challenges faced by nurses who transition from acute care into PHC employment. Understanding the barriers and facilitators to successful transitions enhances the process for future recruitment and retention of PHC nurses. This evidence can inform managers, educators and

policymakers in developing support programmes for nurses moving into PHC.

General Practice and Primary Care

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

INTRODUCTION Rural communities continue to experience significant challenges recruiting and retaining physicians. The Community Apgar Questionnaire (CAQ) was developed in Idaho in the USA to comprehensively assess the characteristics associated with successful recruitment and retention of rural physicians. The CAQ has been utilised and validated across the USA; however, its value in rural Australia has not been examined. The objective of this study was to use the CAQ in rural Australia to examine its utility and develop a greater understanding of the community factors that impact general practitioner (GP) recruitment and retention. **CONCLUSIONS** 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.

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

BACKGROUND Reduced opportunities for children's schooling and spouse's/partner's employment are identified internationally as key barriers to general practitioners (GPs) working rurally. 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. **CONCLUSIONS** 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.

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

BACKGROUND 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. **CONCLUSIONS** 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.

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

BACKGROUND 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. **METHODOLOGY** 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. **RESULTS** 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. **CONCLUSIONS** 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.

[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.

[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 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.

[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. DESIGN AND SETTING: Synthesis of qualitative and quantitative research using seven electronic databases from 1990 onwards (Medline, Embase, Cochrane Library, Health Management Information Consortium [HMIC], Cumulative Index to Nursing and Allied Health Literature [Cinahl], PsycINFO, and the Turning Research Into Practice [TRIP] database). CONCLUSION: 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.

[To increase GP numbers we need to better support and retain locums](#) British Medical Journal, 2016

Athens log in required

Workforce strategies focus too much on recruitment, rather than maximising the contributions of locums to general practice.

Mentorship and Support

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

INTRODUCTION 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. CONCLUSIONS 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

Retention of students is critical to education programs and future workforce. A mixed methods study evaluated student engagement within a Bachelor of Midwifery program and connection with career choice through participation in student support circles. Centred on the Five Senses of Success Framework (sense of capability, purpose, identity, resourcefulness and connectedness) and including four stages of engagement (creating space, preparing self, sharing stories, focused conversations), the circles support and develop student and professional identity. Of 80 students 43 (54%) provided responses to a two item survey assessed against a five point Likert scale to determine utility. 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.

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

The UK's departure from the European Union (Brexit) is likely to result in greater immigration and employment restrictions on European Union/European Economic Area (EU/EEA) nationals within the United Kingdom. EU/EEA citizens constitute a significant proportion of the current social care workforce. Research evaluating the impact of Brexit on social care has highlighted potentially severe future workforce shortfalls, but has not engaged in detail with the experiences of social care personnel involved in day-to-day recruitment and retention activities. 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.

Allied Health Professionals

[Australian physiotherapy workforce at a glance: a narrative review](#)

Australian Health Review, September 2016

Athens log in required

Background The ability of the physiotherapy workforce to meet the growing demand in the Australian community is uncertain, despite increasing tertiary students and numbers of registered physiotherapists annually. **Objectives** The present narrative literature review investigates what is known about the Australian physiotherapy workforce, what factors contribute to attrition from the profession and what strategies could be implemented to improve retention of skilled physiotherapists. **Conclusion** Increasing retention of qualified and skilled physiotherapists nationally will help build workforce capacity, meeting the needs of the growing, changing and aging community. What is known about the topic? The demand for physiotherapists is growing significantly in Australia and the ability of the workforce to meet growing demands is uncertain. What does this paper add? Many physiotherapists in Australia leave the workforce and the profession early in their careers. Addressing modifiable factors of attrition could help improve the retention of practitioners and skills in the profession, building workforce capacity. What are the implications for practitioners? Professional support for current physiotherapists is crucial. Re-entry physiotherapists should be supported with flexible return-to-work programs, refresher training and mentorship.

[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

OBJECTIVE 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

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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. **CONCLUSION** 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.

[How Do Allied Health Professionals Construe the Role of the Remote Workforce?](#) New Insight into Their Recruitment and Retention PLoS ONE, 2016

PURPOSE Allied health workforce recruitment and retention in remote areas is a global problem. Using case studies from the Australian allied health workforce, this paper adds new information by combining personality trait information with a detailed understanding of how the cases construe the demands of remote work, which may be useful in addressing this problem. **CONCLUSIONS** The combination of two distinct lines of investigation, illustrates what more can be revealed about allied health professional's career choices by taking into account the fit or lack of fit between their personality tendencies, their construing of remote work and their life circumstances. Understanding the combined influence of perceptions and traits on an individual toward or away from remote work may enhance recruitment and retention internationally.

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

INTRODUCTION As with other allied health professions, recruitment and retention of dietitians to positions in rural and isolated positions is challenging. The aim of this study was to examine the early effects of the Northern Ontario Dietetic Internship Program (NODIP) on recruitment and retention of dietitians to rural and northern dietetics practice. The program is unique in being the only postgraduate dietetics internship program in Canada that actively selects candidates who have a desire to live and work in northern and rural areas. Objectives of the survey were to track the early career experiences of the first five cohorts (2008-2012) of NODIP graduates, with an emphasis on employment in underserved rural and northern areas of Ontario. **CONCLUSIONS** 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.

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.

Recruitment and Retention of New Emergency Medical Technician (EMT)-Basics and Paramedics December 2016

OBJECTIVES: 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. **CONCLUSIONS:** 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

OBJECTIVE: 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.

Nursing and Midwifery

Workforce Retention and Wages in Nursing Homes: An Analysis of Managerial Ownership Journal of Allied Gerontology, August 2018

Owner-managers are administrators that hold significant equity interests in the facility they operate. We examine how the presence

of owner-managers is related to the workforce outcomes of retention and wages in nursing homes (NHs). Using a sample of for-profit NHs in Ohio from 2005 to 2015, multivariate regression analysis compares workforce outcomes in facilities operated by owner-managers to salaried managers. On average, owner-managed NHs have higher workforce retention rates, with larger effects among chain-affiliated NHs. Better retention is not achieved through higher wages, as we do not find higher wages at owner-managed NHs. Further qualitative studies are warranted to identify the exact mechanisms which lead to owner-managers having better staff retention rates. Plausible mechanisms include greater autonomy to allocate resources and create policies that foster a work environment that achieves better retention while maintaining financial sustainability.

Ageing in the nursing workforce - a global challenge in an Irish context International Nursing Review, August 2018

BACKGROUND The 2008 financial crisis exacerbated an already mounting workforce challenge faced by most health services in the western world, namely the recruitment and retention of qualified nurses. AIM This paper examines two additional challenges of relevance to workforce planning in health care, an ageing nursing workforce and reliance upon migrant nurses to solve short-term workforce issues. CONCLUSION Failure to address this need is likely to lead to significant workforce difficulties for health services into the future and undermine current efforts to increase the number and long-term retention of qualified nursing staff.

Meeting Texas Nursing Workforce Needs Through Recruitment and Retention Initiatives Nursing Education Perspectives, January 2019

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.

Retaining early career registered nurses: a case study BMC Nursing, 2016

BACKGROUND A core objective of the Australian health system is to provide high quality, safe health care that meets the needs of all Australians. To achieve this, an adequate and effective workforce must support the delivery of care. With rapidly changing health care systems and consumer demographics, demand for care is increasing and retention of sufficient numbers of skilled staff is now a critical priority to meet current and future health care demands. Nurses are the largest cohort of professionals within the health workforce. Reducing the rates at which nurses leave the profession and supporting nurses to practice in their profession longer will have beneficial implications for the sustainability of a nursing workforce and, ultimately, to patient outcomes. The aim of the study was to describe and explain early career registered nurses' (ECRNs) experiences and support requirements during the first five years of practice for the purposes of identifying strategies that would support greater retention of ECRNs. CONCLUSIONS 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.

The Effectiveness of Nurse Residency Programs on Retention: A Systematic Review AORN Journal, August 2017

Athens 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.

The Lived Experience of Being a Male Nursing Student: Implications for Student Retention and Success Journal of Professional Nursing, 2018

BACKGROUND Despite the need to improve gender diversity in the United States nursing workforce, limited studies have explored the experience of former male nursing students and research is needed to provide guidance about teaching and mentoring strategies that can promote male student retention and success. PURPOSE This study was conducted to explore the lived experience of former male nursing students. CONCLUSIONS 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

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education for male students, addressing negative experiences in maternity clinical rotations, and implementing mentorship programs to provide male role models for male nursing students.

Transition experiences, intrapersonal resources, and job retention of new graduate nurses from accelerated and traditional nursing programs: A cross-sectional comparative study Nurse Education Today, December 2017

BACKGROUND With increasing numbers of new graduate nurses from accelerated nursing programs entering the workforce, it is important to understand their transition experiences, as they may differ from those of traditional graduates. OBJECTIVES The aim of this study was to describe and compare the intrapersonal resources, transition experiences, and retention outcomes of these two groups. CONCLUSIONS All new graduate nurses need to have a strong educational preparation and transition support, regardless of their age and previous work and career experiences.

Factors predicting Registered Nurses' intentions to leave their organization and profession: A job demands-resources framework Journal of Advanced Nursing, April 2018

AIMS To develop a comprehensive model of nursing turnover intention by examining the effects of job demands, job resources, personal demands and personal resources on burnout and work engagement and subsequently on the intention to leave the organization and profession. BACKGROUND 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. CONCLUSIONS 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.

[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. CONCLUSIONS 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.

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

Athens log in required

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.

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

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.

[A survey of burnout and intentions to leave the profession among Western Canadian midwives](#) Women and Birth: Journal of the Australian College of Midwives

PROBLEM Midwives are at high risk for burnout and occupational stress. This has implications for workforce retention and quality of maternity care. AIM 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. DISCUSSION/ CONCLUSION 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.

[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

Health care systems depend on viable health professional workforces. Nurse workforce projections for Australia indicate that by 2030 the demand for nurses will exceed supply. Retaining nurses is an ongoing problem both in Australia and globally. This study investigates nurse self-concept, practice environment and resilience, and how these three factors influence the retention of early career registered nurses (ECRNs). ECRNs are defined as RNs in the first 5 years of practice post-graduation. The researchers used a cross-sectional design for the study. Survey responses were elicited from 161 ECRNs in one Australian hospital and health service using four survey instruments: The Nurse Self-Concept Questionnaire, the Practice Environment Scale of the Nursing Work Index, the Connor–Davidson Resilience Scale and the Nurse Retention Index. 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.

[Student Nurses in the OR: Improving Recruitment and Retention](#)

AORN Journal, January 2016

Athens 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.

Mental Health

[Recruit and retain: planning to expand the mental healthcare workforce](#) British Journal of Nursing, October 2017

Athens log in required

Emeritus Professor Alan Glasper, University of Southampton, discusses an initiative by health secretary Jeremy Hunt to expand the mental health workforce of the NHS in England.

Rural and remote workforces (Australia)

[Factors Affecting the Retention of Indigenous Australians in the Health Workforce: A Systematic Review](#) International Journal of

Environmental Research and Public Health, May 2018

Indigenous Australians are under-represented in the health workforce. The shortfall in the Indigenous health workforce compounds the health disparities experienced by Indigenous Australians and places pressure on Indigenous health professionals. This systematic review aims to identify enablers and barriers to the retention of Indigenous Australians within the health workforce and to describe strategies to assist with development and retention of Indigenous health professionals after qualification. Four electronic databases were systematically searched in August 2017.

Supplementary searches of relevant websites were also undertaken. Articles were screened for inclusion using pre-defined criteria and assessed for quality using the Mixed Methods Assessment Tool. Fifteen articles met the criteria for inclusion. Important factors affecting the retention of Indigenous health professionals included work environment, heavy workloads, poorly documented/understood roles and responsibilities, low salary and a perception of salary disparity, and the influence of community as both a strong personal motivator and source of stress when work/life boundaries could not be maintained. Evidence suggests that retention of Indigenous health professionals will be improved through building supportive and culturally safe workplaces; clearly documenting and communicating roles, scope of practice and responsibilities; and ensuring that employees are appropriately supported and remunerated. The absence of intervention studies highlights the need for deliberative interventions that rigorously evaluate all aspects of implementation of relevant workforce, health service policy, and practice change.

[Patterns of resident health workforce turnover and retention in remote communities of the Northern Territory of Australia, 2013-2015](#) Human Resources for Health, August 2017

BACKGROUND The geographical maldistribution of the health workforce is a persisting global issue linked to inequitable access to health services and poorer health outcomes for rural and remote populations. In the Northern Territory (NT), anecdotal reports suggest that the primary care workforce in remote Aboriginal communities is characterised by high turnover, low stability and high use of temporary staffing; however, there is a lack of reliable information to guide workforce policy improvements. This study quantifies current turnover and retention in remote NT communities and investigates correlations between turnover and retention metrics and health service/community characteristics.

CONCLUSIONS NT Government-funded remote clinics are small,

experience very high staff turnover and make considerable use of agency nurses. These staffing patterns, also found in remote settings elsewhere in Australia and globally, not only incur higher direct costs for service provision-and therefore may compromise long-term sustainability-but also are almost certainly contributing to sub-optimal continuity of care, compromised health outcomes and poorer levels of staff safety. To address these deficiencies, it is imperative that investments in implementing, adequately resourcing and evaluating staffing models which stabilise the remote primary care workforce occur as a matter of priority.

[Building a sustainable workforce in a rural and remote health service: A comprehensive and innovative Rural Generalist training approach](#) The Australian Journal of Rural Health, April 2017

Athens log in required

BACKGROUND Historically it has been challenging to recruit and retain an appropriately trained medical workforce to care for rural and remote Australians. This paper describes the Queensland North West Hospital and Health Service (NWHHS) workforce redesign, developing education strategies and pathways to practice, thereby improving service provision, recruitment and retention of staff. **RESULTS** Since 2013 RMO locum rates have been <1%. Registrars on the ACRRM pathway and Interns increased from 0 to 7 positions each in 2015, with similar achievements in SMO staffing. Three RMOs expressed interest in a Registrar position, **CONCLUSIONS:** Appropriate governance is needed to develop and advertise the program. This includes the NWHHS, the RG Pathway and JCU.

Public Health

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

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.

Radiography

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

HEE Knowledge Management Team, February 2019

Postgraduate, Medical and Dental

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

PURPOSE/OBJECTIVES 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. CONCLUSION The study demonstrated that the aging part time work force 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.

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

Athens log in required

Background 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. Conclusion 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.

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

BACKGROUND 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. **CONCLUSIONS** 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.

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

BACKGROUND The failure of high-income countries, such as Ireland, to achieve a self-sufficient medical workforce has global implications, particularly for low-income, source countries. 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. **DISCUSSION** 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.

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

OBJECTIVES 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. **CONCLUSION** 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.

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

BACKGROUND: 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. **OBJECTIVE:** To report on the effects of the early sign-up for medical internship. **CONCLUSIONS:** The early sign-up model had a net contribution of proving additional physicians in the study area.

Healthcare and biomedical science

[Programs to Recruit and Retain a More Diverse Workforce in Biomedical Sciences Research](#) Journal of Best Practice Health Professions Diversity: research, education and policy, 2016
Athens log in required

To improve overall healthcare and to reduce health disparities, efforts must focus on increasing the diversity of personnel trained in the biomedical sciences. Here, we describe the development, implementation, and relative outcomes of three pipeline training programs in biomedical sciences research designed to increase workforce diversity institutionally, regionally, and nationally. We report on their effectiveness in improving the recruitment and retention of underrepresented minorities with the long-term goal of remedying health inequities and disparities.

Staff engagement

[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. IMPLICATIONS FOR NURSING MANAGEMENT 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
Staff shortages are serious and widespread and, for many trusts, the cost of temporary staff is not sustainable. In many cases, the

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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.

Resilience

Allied Health Professionals

[Developing resilience: Stories from novice nurse academics](#) March 2016

BACKGROUND 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. AIM 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. CONCLUSIONS 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.

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.

General

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

Emeritus Professor Alan Glasper, from the University of Southampton, discusses government strategies to ensure a future healthcare workforce that is sustainable and does not rely on overseas recruitment.

Paediatrics

[Resilience: surviving and thriving in the paediatric workplace](#)

Archives of diseases in childhood: education and practice, December 2018

Athens log in required

The health of the medical workforce, within the UK, has been described as an unmet public health need. Reports of stress, burnout and ill health are continuing to rise. Burnout is when meaningful and challenging work becomes unpleasant and unfulfilling; energy turns into exhaustion; enthusiasm turns into cynicism and efficacy turns into ineffectiveness. Stress is an individual's physical and psychological response to single or multiple pressures. Low-level stress, or 'healthy stress', is essential. Stress becomes unhealthy when pressures exceed one's perceived ability to cope and the response to the pressures becomes counterproductive, leading to a decrease in performance. Resilience is the capability to develop and adapt to challenges and discover new ways forward, without negative consequences on one's well-being. 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.

Emergency

[Coping behaviour and risk and resilience stress factors in French regional emergency medicine unit workers: a cross-sectional survey](#)

Journal of Medicine and Life, 2016

Athens log in required

The Emergency Department (ED) has the highest workload in a hospital, offering care to patients in their most acute state of illness, as well as comforting their families and tending to stressful situations of the physical and psychological area. Method. A cross-sectional survey of 366 Emergency Unit staff members including medical doctors, medical residents, medical nurses and ward aids, was undergone. Study participants came from four periphery hospitals in the Moselle Department of Eastern France with similar workforce and daily patient loads statistics. The instruments used were the Perceived Stress Scale PSS-10 and the Brief COPE questionnaire. Conclusions. Perceived work overload and overall stress is strongly related to work hours and tend to have a stronger influence on doctors than on the nursing staff. Substance use is a common coping method for medical interns, consistent with prior research. The regular assessment of the ED staff perception of stress and stress related factors is essential to support organizational decisions in order to promote a better work environment and better patient care.

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Nursing and Midwifery

[Strengthening mental health nurses' resilience through a workplace resilience programme: A qualitative inquiry](#)

Journal of Psychiatric and Mental Health Nursing, June 2018

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.

[Why nurses chose to remain in the workforce: Portraits of resilience](#)

Collegian (Royal College of Nursing), 2016

AIM 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. CONCLUSION 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.

[Sustainability and resilience in midwifery: A discussion paper](#)

Midwifery, September 2016

BACKGROUND midwifery workforce issues are of international concern. Sustainable midwifery practice, and how resilience is a

required quality for midwives, have begun to be researched. How these concepts are helpful to midwifery continues to be debated. It is important that such debates are framed so they can be empowering for midwives. Care is required not to conceptually label matters concerning the midwifery workforce without judicious scrutiny and diligence. AIM 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. CONCLUSIONS 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

AIM This paper acknowledges the relationship between resilience and the new managerialism of contemporary nursing. METHODS Qualitative portraiture methodology. CONCLUSION This paper describes some of the hallmarks of new managerialism where workforce pressures force practices that do not value the 'human resource'. IMPLICATIONS FOR NURSING MANAGEMENT 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.

HEE Knowledge Management Team, February 2019

Developing resilience: the role of nurses, healthcare teams and organisations Nursing Standard (Royal College of Nursing), October 2018

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.

Exploring Environmental Factors in Nursing Workplaces That Promote Psychological Resilience: Constructing a Unified Theoretical Model Frontiers in Psychology, 2016

Building nurses' resilience to complex and stressful practice environments is necessary to keep skilled nurses in the workplace and ensuring safe patient care. A unified theoretical framework titled Health Services Workplace Environmental Resilience Model (HSWERM), is presented to explain the environmental factors in the workplace that promote nurses' resilience. The framework builds on a previously-published theoretical model of individual resilience, which identified the key constructs of psychological resilience as self-efficacy, coping and mindfulness, but did not examine environmental factors in the workplace that promote nurses' resilience. 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.

Nurse leaders' strategies to foster nurse resilience Journal of Nursing Management, November 2018

AIM To identify nurse leaders' strategies to cultivate nurse resilience. BACKGROUND High nursing turnover rates and nursing shortages are prominent phenomena in healthcare. Finding ways to promote nurse resilience and reduce nurse burnout is imperative for nursing leaders. CONCLUSIONS 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.

Resilience as part of nursing education: supporting nurses in times of austerity British Journal of Nursing, July 2017

Athens 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.

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.

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

INTRODUCTION 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. **DISCUSSION** 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 during disaster

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

Enhancing citizens' and communities' resilience is critical to adapt successfully to ongoing challenges faced by communities, as well as acute shocks resulting from disasters. While significant progress has been made in this area, several research and practice gaps remain. A crucial next step to advance resilience is the development of a resilience-oriented workforce. 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

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

BACKGROUND 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. **OBJECTIVES** 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.

CONCLUSION 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 legitimates its costs for societies, faculties, and professional bodies.

[*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.

General Practice and Primary Care

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

BACKGROUND Modern demands and challenges among healthcare professionals can be particularly stressful and resilience is increasingly necessary to maintain an effective, adaptable, and sustainable workforce. However, definitions of, and associations with, resilience have not been examined within the primary care context. **AIM** To examine definitions and measures of resilience, identify characteristics and components, and synthesise current evidence about resilience in primary healthcare professionals. **DESIGN AND SETTING** A systematic review was undertaken to

identify studies relating to the primary care setting. **METHODS** Ovid(®), Embase(®), CINAHL, PsycINFO, and Scopus databases were searched in December 2014. Text selections and data extraction were conducted by paired reviewers working independently. Data were extracted on health professional resilience definitions and associated factors. **RESULTS** Thirteen studies met the inclusion criteria: eight were quantitative, four qualitative, and one was an intervention study. 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. **CONCLUSION** 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.

[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. **CONCLUSION** 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.

[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. CONCLUSION 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.

[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. CONCLUSION 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.

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

CONTEXT Burnout impacts adversely on professional and personal life, and holds implications for patient care. Current research on burnout mainly focuses on established general practitioners but it is unclear how early the signs of burnout really start. This work seeks

to identify whether specific GP trainee groups are particularly at risk of burnout and the aspects of training they find stressful.

CONCLUSIONS 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.

[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.

Dementia Care

[We are not all coping: a cross-sectional investigation of resilience in the dementia care workforce](#) Health expectations: an international of public participation in health care and health policy, December 2016

OBJECTIVE To review employee stress and coping in response to high job demands in community-based dementia care organizations in Tasmania, Australia. CONCLUSION Aged care workplaces that advocate employee well-being and support employees to cope with their work roles may be more likely to retain motivated and committed staff. Future research should consider employee stress and coping at the workforce level, and how this can influence high-quality care delivery by applying the measures identified for this study. Comparative research across different care settings using meta-analytic studies may then be possible.

Postgraduate medical and dental

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

PURPOSE OF THE STUDY The aim of this study was to measure resilience, coping and professional quality of life in doctors.
CONCLUSIONS 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.

Guides and Toolkits

[*Career planning and development*](#) NHS Improvement, 30th January 2019

A collection of resources to help organisations support staff with their career planning and development to improve staff retention.

[*Supporting new starters and newly qualified staff*](#) NHS Improvement, January 2019

A collection of resources to help organisations support new starters and newly qualified staff to improve retention.

[*Supporting the experienced workforce*](#) NHS Improvement, January 2019

A collection of resources to help organisations support their experienced workforce to improve staff retention.

[*Developing a retention strategy*](#) NHS Improvement, January 2019

A collection of resources to help your organisation develop a staff retention strategy. These resources offer general guidance and are a good starting point for the creation of a retention improvement plan and/or strategy. Use of these resources well with further use of resources grouped in our specific themes.

[*About our retention programme*](#) NHS Improvement, Updated January 2019

An overview of our retention support programme to help NHS organisations to improve our staff retention. We've designed this programme to support trusts with the retention of clinical staff within the NHS, by sharing knowledge and tools to improve retention locally, and by encouraging trusts to share their good practice.

[*Inspire attract and recruit toolkit: an interactive toolkit to support your workforce supply*](#) NHS Employers, December 2018

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.

[Infographic: your future nurses – the different routes to recruiting your workforce](#) NHS Employers, August 2018
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.

HEE Knowledge Management Team, February 2019

[Using rotational posts](#) NHS Employers, January 2018
This briefing explores how employers in the NHS can develop and implement rotational posts within the workforce, and the benefits of providing these types of roles. There's also examples from NHS organisation and tips to help you get started with providing rotational posts in your organisation.

[Improving staff retention: a guide for employers](#) NHS Employers, September 2017
Read our comprehensive guide for improving staff retention. Aimed at employers, the guide was developed from work took place during 2016-17 where NHS Employers engaged a large number of NHS organisation to help equip them with tools and resources to shape and implement effective workforce retention plans.

[Workforce supply – attracting and retaining local talent](#) NHS Employers, June 2017
Since the UK's EU referendum vote in June 2016 there have been many discussions in the media, in parliament, in health and care organisations and with the public about the impact of leaving the EU on workforce supply.

[Things to consider when designing a refer a friend scheme](#) NHS Employers, October 2016
Incentivising employees to refer candidates through your reward offer encourages them to think about who they might know that has the right skills, knowledge and values

for your organisation. Refer a friend schemes can be a useful tool to help you meet some of your workforce challenges, such as recruiting hard to fill posts, increasing staff retention and reducing recruitment time and costs. Our guide looks at the things you could consider when designing and implementing a refer a friend scheme including:

- The business case and defining what you want to achieve
- The terms and conditions of the scheme and qualifying criteria
- Gaining buy in from key stakeholders
- Communicating the scheme to your staff
- Evaluating whether the scheme has been successful

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Where a report/ journal article or resource is freely available the link has been provided. If an NHS OpenAthens account is required this has been indicated. It has also been highlighted if only the abstract is available. If you do not have an OpenAthens account you can [self-register here](#).

If you need help accessing an article, or have any other questions, contact the Knowledge Management team for support KnowledgeManagement@hee.nhs.uk