Recruitment and Retention of the Health Workforce in Europe

Executive Summary
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EXECUTIVE SUMMARY

Recruitment and retention of health workers is everybody’s concern; everybody is a patient at some point in their lives. Patients deserve access to high quality care from a well-qualified workforce. Equally, health staff deserve to work in well-supported environments, with staffing levels that promote safe, high quality care.

Many EU countries report difficulties both in retaining and recruiting health staff. These are frequently allied with the challenge of balancing the right number of healthcare staff with the right skills in the right geographical areas to meet the changing needs of populations and health systems. Recruitment and retention problems are becoming increasingly urgent as healthcare demands increase and the health workforce shrinks, with many workers reaching retirement age, risking the future sustainability of Europe’s health systems and access to care.

Labour market trends and skills forecasts predict skills shortages in the health and social care sector in the medium term. At their Council meeting in July 2012, EU health ministers discussed the high employment potential of healthcare and the need for innovative approaches and strategies to attract and equip young people with the right skills in the health sector (European Commission, 2012).

This study, the result of a tender awarded in 2013 by the European Commission, aims to identify and analyse effective strategies for the recruitment and retention of health professionals. It also aims to provide lessons and inspiration for the development of organisational strategies and human resource policies in Europe. It consists of a review of the literature, eight case studies on recruitment and retention – covering 40 interventions from 21 countries – and two workshops that brought together experts and stakeholders in the area of recruitment and retention of health workers.

The eight case study topics cover the trajectory of a health professional’s career and are:

<table>
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<th>Eight topics selected for in-depth study</th>
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<tbody>
<tr>
<td>Attracting young people to healthcare</td>
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<td>Attracting and retaining GPs to strengthen primary care</td>
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<td>Providing training, education and research opportunities</td>
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<td>Attracting nurses through the extension of practice</td>
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<td>Providing good working environments</td>
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<td>Making the hospital workplace more attractive</td>
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<td>Return to practice for healthcare professionals</td>
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<td>Providing supportive working environments for the ageing</td>
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Responses to recruitment and retention problems show great variation between countries. The most common recruitment and retention interventions are the education of health professionals, e.g. the content, structure and the length of the curriculum and continuing education, to attract professionals into particular occupational groups or in exchange for commitment to work in rural or remote settings. Another target are the working conditions and environment, including compensation, benefits, work schedules, career progress and management and supervision. Two other important dimensions are professional and personal support and regulation.

GOOD PRACTICES: CONDITIONS FOR SUCCESS

While no “one size fits all” solution can be found to problems in recruitment and retention, our study identified a number of success factors, which are particularly relevant for specific types of recruitment and retention interventions and which could help governments and health organisations tailor policies to attract and retain healthcare staff.

Education

- Offer (time for) Continuous Professional Development (CPD), education and research opportunities to professionals as a mechanism for career progression.
- Provide training and job opportunities in healthcare for young people from deprived areas and/or the unemployed. These benefit both the participants and the healthcare sector struggling with staff shortages.
- Make use of the expertise of a commercial marketing or communication agency when implementing national promotional campaigns to attract young people to healthcare education and make full use of social media.
- Designate sufficient time and space to mentors to fulfil their role in educational interventions.

Regulation

- Review the scope of practice of healthcare professionals. Allow them to take on more extended roles and enable task substitution to increase the attractiveness of a profession (most applicable to the nursing profession).

Financial Incentives

- Combine financial incentives with other types of recruitment and retention measures, for example educational interventions, opportunities for career progression underpinned by good working environments, as financial incentives on their own are rarely sufficient to improve recruitment and retention.
- Offer benefits that are both convincing and attractive when using financial stimuli to attract professionals to underserved areas and to keep them there long term.

Professional and Personal Support

- Create supportive working environments to improve recruitment and retention, preferably tailored to individual employees’ life stages (e.g. specific measures for employees with young children, the ageing workforce, etc.)
- Implement activities to support the physical and emotional wellbeing of staff and make protected time available to enable staff to participate in these activities.

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2 Based on the WHO’s ‘Global policy recommendations on increasing access to health workers in remote and rural areas through improved retention’ (World Health Organization, 2010)
➢ Provide childcare facilities and services to support staff in combining their work and family responsibilities.

**Mix/Other Types of Interventions**

➢ Include measures from different domains in recruitment and retention packages, for example combining education with professional support measures.

**RECOMMENDATIONS**

Our study identified key themes and good practices that recurred across many of the interventions in Europe. Most of the recommendations are relevant for recruitment as well as retention interventions whether from ‘source’ and ‘destination’ countries.

It is important to emphasise that there is much more helpful detail in the body of the report. Policy makers and managers in health and social care can optimise recruitment and retention results by using these recommendations to design interventions that meet their distinctive, context-specific needs.

**Choosing the right interventions**

The success of recruitment and retention interventions to a large extent depends on partnership working and the fit with local economic, political, legal, cultural and organisational environments.

➢ Mobilize your stakeholders in a collective strategy to generate action.
➢ Design and implement interventions in accordance with the characteristics of the target group (for example medical interns require a different approach than older nurses).

**Implementing recruitment and retention interventions**

For most recruitment and retention interventions, change processes are complex, highly dependent on context and supported by little evidence.

➢ Offer interventions with enough freedom to allow different actors to select the elements that suit their needs and skills set, but with sufficient structure to ensure that all actors work towards a common goal.
➢ Design interventions with enough flexibility to be customised to different local contexts within country.

**Monitoring and evaluating interventions**

The vast majority of interventions do not use an explicit definition of effectiveness and do not propose measurable objectives. A more robust evidence base to underpin the recruitment and retention of health workers could help the business case.

➢ Formulate concrete objectives and time frames for interventions to facilitate monitoring and evaluation.
➢ Invest in monitoring systems to establish the long-term effects of a recruitment and retention intervention. Indicators may include: employment status; staff stability index; staff turnover rates; vacancy rates and/or time taken to replace staff; student enrolment numbers and job satisfaction levels.
ACTIONS AT EUROPEAN LEVEL ON RECRUITMENT AND RETENTION

European wide cooperation or knowledge exchange in this area is underdeveloped given the national, regional and local organizational context for recruitment and retention measures. EU investment in research and dissemination could stimulate and support innovation in health staff recruitment and retention.

- Share good practice in the EU by building a European repository of good practices to facilitate, and increase the success of, recruitment and retention in the health sector.
- Promote and disseminate monitoring and evaluation toolkits including sets of standard indicators that countries can use as a reference for the development of their own strategies.
- Support active cross-country learning and dissemination of recruitment and retention good practices.
- Activate existing networks, collaborations, including the Sectoral Social Dialogue Committee for the Hospital Sector and the Joint Action on health workforce planning and forecasting, at the European level to involve and mobilise governments, social partners, and other relevant stakeholders to ‘jump start’ recruitment and retention strategies and facilitate cross-border cooperation.
- Promote support for Research & Development in the funding of recruitment and retention interventions, particularly the evaluation of the effectiveness of recruitment and retention interventions and the development of innovative working practices.

CONCLUSION

Recruitment and retention of health workers is not an abstract challenge: it is an immediate and urgent problem which needs addressing by policy-makers, healthcare managers and healthcare workers in order to maintain high quality healthcare.

Urgent problem

Shortages of staff highlight areas of weakness in our healthcare systems and risk patient care. These can be unattractive jobs, due to lack of support or poor management, or few opportunities for CPD or promotion, through to staffing levels that staff believe are too low to be able to provide safe quality healthcare. The need for a flexible policy framework underpinned by political support is clear from our study.

Long-term vision

Tackling recruitment and retention requires both short-term action and longer term planning. While crises can foster innovation, recruitment and retention needs to stay on the policy agenda over the long term to maintain a stable well-trained health workforce.

Include all relevant actors at policy and organisational level

The causes of shortages and imbalances of healthcare staff result from a combination of different factors that vary across countries in Europe. Many solutions need thoughtful and decisive action across the system as part of wider reforms.

Context-sensitivity

While no “one size fits all” solution can be found to problems in recruitment and retention of health workers in Europe, the good practices outlined in the report highlight the key factors that maximise the chances of success.
Influence of management

Technical and managerial capacity is a key ingredient in the success or failure of implementation. The quality of management and leadership that staff experience is vital to staff retention.

Need for more evidence

There is a need for more evaluative research to assess the effectiveness of recruitment and retention interventions. But research to provide tools, definitions and advice on recruitment and retention processes is just as much needed.

What the EU can do

Further stimulate the exchange of good practice as policy makers, health professionals and managers need to be able to talk to their counterparts in other countries and observe interventions in practice. EU funded cross-border study visits and the development of student mentoring and communities of interest would help support the widespread adoption of the approaches found in this report.

The future is now

It is crucial to look to the future as well as considering current problems. What do we want our health systems to do for whom and what kind of health professionals do we want? Inevitably when looking at examples of good practice across the EU, the focus is on the past – on what has been done. However this teaches us important lessons and this report is an important contribution to the debate.
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