

# Community Needs Driven Research Network

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## Staff Retention and Recruitment

Staff retention and recruitment is an issue in continuing care (CC) with unique characteristics. Participants identified this issue in terms of recruitment of staff and the retention and work environment.

### Front-line workers' recruitment concerns:

Staff expressed frustration and confusion regarding the difficulties of attracting nursing and rehabilitation staff to the CC sector. They describe the emphasis that is given to acute care and recovery settings during the formal training of these professionals. Their expectations are related to settings where the goal of interventions is in improvement and recovery. However, staff in the CC sector care for a population who is often severely disabled, or experiencing a compromised process and the goal is not so much to improve, but to maintain independence as much as possible and to promote quality of life. Challenges that can make promoting CC to young graduates difficult are the stigmas associated with mental health issues and the challenging behaviours that staff encounter across the continuum.

### Recruitment

An additional issue expressed by participants is in recruiting HCAs who have the personal skills necessary to care for clients and to manage the demands of the job. Participants referred to HCAs' unrealistic expectations, which lead to frustration and burden when placed with expectations of the job. It is assumed that a potential reason for this could be related to the training HCAs receive and the skills being developed through these training programs.



· "It's not a sexy area to go and work. It just isn't. But part of that is lack of knowledge and understanding of the benefits of having those disciplines and the impact of some of the quality of care."

· "What are we missing? Why are we not attracting the experienced or the eager nurses and health care aides and occupational therapists into continuing care settings? Or why are they leaving?"

· "How do we ensure that the people that we are hiring and training for these programs are gonna be the best fit? Because we all know that unless you've got the right temperament for working with this group, doesn't matter how smart you are, it doesn't matter how much you know, you are not gonna be good at it".

· "... because if they come from school (I don't know what they teach them in school) its different from what they're coming into."



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## Retention

Retention is another critical issue identified by participants as having a direct impact on quality of care. For example, HCAs often quit within a few months of starting a position, which in turn impacts in-service training, team development, and the costs related with additional hiring processes. Staff suddenly quitting also results in facilities having to rely heavily on temporary staff, which increases client and family confusion and impacts the procedures and routines of the site. Retention issues also increases the burden placed on remaining staff and increases the likelihood they may feel inclined to leave the job, or experience health-related issues. Other factors associated with retention are associated with pay, which participants feel does not match the amount and type of work they are asked to provide.



- “People aren’t valued when they’re seen to be ‘crazy,’ and therefore, anybody who works in an industry that’s caring for people with these mental health issues, their work isn’t really valued either. Outsiders aren’t real advocates of giving these people raises.”
- “... you want the long term dedicated staff. So what is it that we need to do to keep it that way? and that impacts knowledge translation because you are always trying to keep everybody up to speed.”
- “Once we get the right people in the door, what do we need to do as an organization to help them realize like ‘oh this is good place I want to stay at in the long term’ instead of ‘oh god this is just insane. I might as well apply for the next open job that comes up at Wal-Mart’...”
- “They would hire a health care aide and they [the HCA] would just work for two weeks and be gone. And I think clients and residents are suffering from this.”
- “And others even quit before starting. They don’t know what home care is and once they get to the houses where they are supposed to work they just say ‘oh this is hard’.”

### **What’s being done to address this issue?**

1. ICCER is facilitating a continuing care stream of the University of Alberta’s interdisciplinary team-based course for health professionals (IntD410) for the third year. One aim of the course is to encourage young professionals to look at continuing care as a potential career opportunity.
2. In follow-up to a related ICCER/AHS study (Optimizing Workforce Utilization to Inform Care Delivery in Continuing Care Facilities), a working group (AHS and ICCER) is examining strategies to address issues related to communications and casual staff. These are part of a CIHR planning grant project.
3. A research team (University of Alberta, Keyano College, and Health Canada) has been funded to further explore staff retention and recruitment in relation to the poor health status of Aboriginal peoples. The project will use a community consultation and engagement process to create and evaluate an educational model on Aboriginal health for those in continuing care (CC) in rural communities. A workshop will be created to build on the capacities of instructors at Keyano College for developing interprofessional scenarios that highlight the challenges of working in CC in these communities. The scenarios will be delivered and evaluated for students at Keyano College to support the development of the knowledge and skills necessary to work with Aboriginal populations in rural communities. With this experience, students may be more likely to work in these settings in the future, potentially leading to greater staff recruitment and retention in these areas.