Health Professions
Recruitment and Retention

What is the recruitment and retention of healthcare workers and why is it important?

Recruitment – focuses on attracting current health professionals and students to open positions or to future positions.

Programs that support health workforce recruitment exist at the federal, state, and local levels and may include the following:

- Scholarships
- Loans
- Signing bonuses
- Loan repayment programs

Health care organizations and communities may offer incentive programs that include the following:

- Enhanced total compensation including benefit packages
- Mentoring by experienced health care providers
- Work-life balance support

Why is recruitment important?

Recruitment efforts are important for many reasons. They focus on ensuring the necessary number and mix of providers are available to care for patients, identify individuals who are likely to practice in areas of high need, and may also focus on enhancing the diversity of providers.

Retention - focuses on keeping health care providers employed in their healthcare facilities and communities.

Successful recruitment and retention programs are based on recruitment for retention – making an appropriate match between candidates, their families, communities and healthcare facilities. Some examples of retention incentives that encourage workers to stay in their positions include the following:
• Competitive salary and benefit programs
• Loyalty bonuses
• Support for continuing education
• Opportunities for career advancement
• Work-life balance support

Why is retention important?

It is important to have strategies in place that focus on retaining employees and avoiding turnover. In addition to creating an environment where employees feel valued, retaining employees is much more cost effective.

The costs of turnover to an organization when a physician, nurse or other provider leaves the organization can be significant. A 2004 review article estimated recruitment costs and lost revenue due to physician turnover in a range from $200,000 up to $2 million. When you look at the combined cost of temporarily covering staffing needs while hiring and training a new worker, it can cost anywhere from $22-64,000 to replace a registered nurse, according to a 2009 report from the Robert Wood Johnson Foundation. The loss of experienced nurses is especially costly, according to the report, since nursing expertise takes years to develop.

How does the aging population impact the recruitment and retention of the health workforce?

The aging of the U.S. population and the health workforce presents many challenges in the health care industry, which both employs older workers and cares for a growing number of older patients, according to an NTAR Leadership Center issue brief entitled, The Aging Workforce: Challenges for the Health Care Industry Workforce.

A U.S. Census Bureau report on the older population projects that, from 2010 to 2050, the U.S. population will increase by 42 percent, from 310 million to 439 million. The population is also expected to become much older, with nearly one in five U.S. residents aged 65 and older in 2030. By 2050, the population 65 years or older will more than double, rising from 39 million to 89 million, according to another Census Bureau release.

The NTAR Leadership Center issue brief on the aging workforce reports that the U.S. Census predicts approximately 19 percent of the total workforce, or 19.6 million American workers, will be 65 years or older by 2050. More growth will be seen in older workers, those 65 years or older, a group expected to grow by 75 percent. The group of workers aged 25 to 54 will likely grow by only two percent.

The health care workforce is already older than the workforce for many other sectors of the economy, and there are fewer replacement workers available to fill vacancies left by retiring baby boomers. To ensure they can provide high-quality, safe care for patients, health care facilities must employ a sufficient, well-qualified workforce across the spectrum of positions, from direct care workers to physicians.
In a report by the Institute of Medicine entitled Retooling for an Aging America: Building the Health Care Workforce, the IOM predicts that, as the population of seniors with complex healthcare needs increases to comprise 20 percent of the U.S. population, the health workforce will not be adequate in numbers and preparation to meet their demands. According to the report, organizations must find creative ways to retain current workers, including those who are older, while attracting new workers to health professions.

For more information, see How can employers improve retention of older employees?

**How is health reform impacting recruitment and retention?**

The Affordable Care Act (ACA), which passed in 2010, will expand access to healthcare coverage for more than 32 million Americans by 2019. These expansions in coverage are predicted to increase the shortage of primary care physicians from 25,000 to 45,000 by 2020, according to the AAMC report The Impact of Health Care Reform on the Future Supply and Demand for Physicians: Updated Projections Through 2025. This gap between supply and demand will increase the challenges of recruiting, as more facilities will presumably be competing for an inadequate supply of providers.

To support the anticipated increased need for providers, the ACA increases National Health Service Corps (NHSC) and Title VII funding to provide more financial assistance for health professionals’ education, which can be used as an incentive in recruiting and retaining providers to safety net facilities.

The purpose of the NHSC is to eliminate shortages of health care providers in Health Professional Shortage Areas (HPSA). Through its Scholarship and Loan Repayment programs, NHSC provides financial support to students and clinicians in exchange for services in these areas of greatest need. Scholars receive tuition support and a stipend, while loan repayors get support to cover educational expenses already incurred.

The ACA has allowed NHSC to increase the maximum amount in annual loan repayment contracts and is allowing funding for half-time service options.

**How do changes in the economy impact recruitment and retention?**

The recent recession caused many healthcare professionals to delay retirement, those who had previously left to return to the workforce, and those who were working reduced hours to work fulltime. As the economy recovers, those who had delayed retirement may choose to leave the workplace or work reduced hours. An in-depth analysis by the University of Albany's Center for Health Workforce Studies, based on Bureau of Labor Statistics projections, predicts that we will need almost 7.5 million new health care workers to both fill new positions and replace retirees and those who have otherwise left the health care field.

According to a 2012 report entitled, A Narrative Review on the Effect of Economic Downturns on the Nursing Labour Market: Implications for Policy and Planning, decision-makers who may
not fully understand how the labor market behaves over time might support downsizing efforts that will have negative impacts in the future. The report encourages employers to prioritize long-term human resources needs over the short-term economic benefit of downsizing and to develop a stable and appealing work environment to help keep the nurses they have and attract the nurses they will eventually need to hire.

**How can health care facilities use social media for recruitment?**

A report by AMN Healthcare, [Use of Social Media and Mobile by Healthcare Professionals: 2011 Survey Results](#), found 31% of health care professionals responding to the survey used social media when job hunting, up from 21% in 2010. Job hunting via social media, broken down by profession:

- allied health - 36%
- nurses - 33%
- pharmacists - 29%
- physicians - 23%

The Alabama Office of Primary Care and Rural Health has produced a [social media toolkit](#) aimed at helping facilities recruit providers via social media, which includes tips on getting started, information on specific social media sites, and general etiquette guidelines.

**What can employers do to make sure their workplace is attractive to current employees?**

The best recruitment strategy is a good retention program – actively looking for ways to keep current employees. Those organizations successful in retention have components in place that make them a desirable place to work.

Some organizations are recognized through awards and credentials as being a great place to work. This type of recognition and visibility helps support the organization’s recruitment and retention efforts. The following are a few examples.

**Magnet Status**

Developed by the American Nurses Credentialing Center (ANCC), the Magnet Recognition Program® is a status for health care organizations recognizing "quality patient care, nursing excellence and innovations in professional nursing practice." According to ANCC, benefits of Magnet status for the registered nurse (RN) workforce include:

- Increased retention
- Lower burnout
- Decreased vacancy and turnover rates
- Increased satisfaction
Great Places to Work in Healthcare

Each year, Becker's Hospital Review and Becker's ASC Review publish an annual list of 100 Great Places to Work in Healthcare, which are developed through nominations and extensive research. According to the Becker’s Hospital Review website, those organizations selected “demonstrated excellence” by providing benefits, initiatives, professional development opportunities and atmospheres which resulted in high levels of employee satisfaction and low levels of turnover.

Best Companies to Work For

FORTUNE Magazine and the Great Place to work Institute partner annually to select the 100 Best Companies to Work For. Employees in corporate America are surveyed on topics such as:

- Job satisfaction
- Camaraderie
- Compensation practices
- Benefits programs
- Diversity efforts

Among other characteristics, companies selected for the designation tend to have lower turnover than other similar organizations.

What other steps can employers take to attract and keep health care workers?

According to an April 2011 feature article in Hospitals & Health Networks, "10 Keys to Maintaining an Adequate Workforce" (no longer available online), steps employers can take include:

- Redesigning internal processes to achieve better efficiencies
- Focusing on ways to retain, train and promote current workers
- Attracting a new generation of workers
- Providing competitive benefit packages, including non-traditional benefits – such as on-site child care, concierge services and flex scheduling – to assist employees with work/life balance.

Suggested methods of determining whether or not employees’ expectations are being met include:

- Daily employee rounds
- Periodic interviews
- Satisfaction surveys

Healthcare facilities can also work toward the future recruitment of healthcare professionals by fostering the workforce pipeline.
How can employers improve retention of older employees?

Healthcare organizations are using a range of strategies in order to retain current older workers. This usually begins with a workplace assessment that asks employees what it would take to keep them in the job longer. A few examples cited in the issue brief The Aging Workforce: Challenges for the Health Care Industry Workforce are as follows:

- Alternative types of part-time schedules such as weekends-only or seasonal months-off
- Options to work from home
- Allowing extended leave while maintaining benefits
- Flexible schedules
- Phased retirement
- Allowing employees 65 and older to work up to 24 hours per week and receive the same benefits they’d receive if they were fully retired;
- Adapting the work environment to ease the physical demands of older workers, to include:
  - Moving refrigerators for patient medications to countertops, rather than the floor;
  - Using anti-fatigue mats in locations where employees spend extended periods on their feet
  - Trying new technologies that can make work easier and more efficient, such as a blood pressure machine that "speaks" the measurements.

What additional challenges do rural communities face in recruiting and retaining healthcare providers?

According to an article entitled "If Only Someone Had Told Me…": Lessons From Rural Providers, those working in rural areas often encounter challenging situations that include high number of patients to see and patients that require more care. In the face of this heavy workload, the provider may also find it is difficult to take time off. There are also fewer opportunities for continuing education. Health care providers coming to practice in a rural setting who do not have familiarity with rural health care issues through education or experience are at greater risk of burnout and, potentially, turnover.

The article summarizes 18 focus groups of experienced rural providers and answers the question, “What are the 3 things you wish someone would have told you about delivering health care in rural areas?” Three overarching themes emerged from the study:

- The challenges of health care in a rural setting, such as relationship building and maintaining appropriate boundaries;
- Adapting to meet rural health care needs, through expanded professional roles and involvement in the community, for example;
- The personal rewards of a rural setting, with more access to the outdoors and a slower pace, as well as a heightened sense of professional accomplishment.
What strategies and tools can rural and underserved communities use to improve recruitment and retention efforts?

3RNet

As one of the largest and most comprehensive recruitment and retention resources, 3RNet (National Rural Recruitment and Retention Network), is a not-for-profit network funded by the Office of Rural Health Policy and member dues. Members are located in 49 states and the Commonwealth of the Northern Mariana Islands, and include the Indian Health Service, the Cherokee Nation and the Department of Veterans Affairs. According to executive director Mike Shimmens, more than 1,000 medical professional placements are achieved annually through 3RNet’s recruitment tools, with 90 percent of these placements in designated shortage areas.

Some of the services 3RNet offers include:

- A website where members maintain their state and regional pages
- A database including about 40,000 profiles of providers, including medical students, interested in rural services
- Educational webinars
- Consultation with 3RNet staff
- Strategic planning resources

The primary focus of 3RNet’s efforts is to facilitate the placement of primary care physicians in organizations known as “safety net providers.” These include:

- Critical Access Hospitals
- Rural Hospitals
- Federally Qualified Health Centers
- Public Health Agencies
- Free Clinics

According to Executive Director Shimmens, offering loan repayment or forgiveness is critical in recruiting primary care physicians to practice in underserved areas. Many of those reviewing online job boards and websites are especially interested in this benefit.

Shimmens indicated his concern that, “The number of primary care physicians available to serve in underserved areas is trending down, while the demand is increasing. Finding physicians to practice in these areas of need is becoming incredibly more important and more difficult to do.”

Leveraging Technology

Using technology to lessen isolation and provide support to the rural health workforce can make working in a rural setting more attractive. One example – South Dakota’s Avera Health eEmergency service, uses two-way video equipment in rural emergency rooms to communicate
with and get support from emergency-trained physicians and specialists at a central hub, 24/7. In Alaska, an e-ICU system allows rural providers to collaborate with Anchorage intensive care unit staff, who assist in monitoring and treating patients.

"Active" Recruitment

For some positions, traditional recruitment efforts might entail advertising a position in the “help-wanted” section of the newspaper or posting the opening online via the organization’s website. However, for many hard-to-fill positions, traditional or more passive recruitment methods alone aren’t enough to get the results needed.

According to a recent Rural Monitor article, Active Recruitment Pays Off for Small Town Clinics, many rural communities are becoming more involved in “active” recruitment efforts. Active recruitment helps recruited providers and recruiting communities develop a long-lasting relationship by seeking out communities that are a good match for the candidate and candidates that are a good match for the community. According to the article, “Recruitment and retention is really the same process. Recruitment isn’t going to be effective if you’re not simultaneously thinking about how you’re going to retain that individual.”

The article credits those organizations, such as 3RNet and others, working to change the image some have of rural America by marketing its benefits to providers and medical students, including:

- Shorter commutes
- More recreational time
- A better work-life balance
- Safer family environments
- Community relationships

The Community Apgar Program, developed by collaborative partners in Idaho, is a tool for improving rural communities’ recruitment and retention of family practice physicians in Critical Access Hospitals. It identifies and weights factors important to each community regarding physician recruitment and retention and assists with specific strategic planning and improvements.

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This publication is an archived version of a topic guide that appeared on the Health Workforce Information Center (HWIC) web site. HWIC was a national information resource covering a wide-range of health workforce issues. HWIC ceased operation as of February 2014. HWIC was operated by the Center for Rural Health at the University of North Dakota School of Medicine and Health Sciences and funded by the Bureau of Health Professions, Health Resources and Services Administration, U.S. Department of Health and Human Services.