

Overview Nurse Recruitment & Retention in the Grampians Region



Dr Allan Donelly
Regional Nurse Recruitment and Retention Coordinator
Grampians Regional Office
Department of Human Services

Background: Grampians Rural Nurse Recruitment and Retention Pilot

- 18 month pilot (July 2004 – December 2005)
- practical local response to *Nurse Recruitment and Retention Committee: Final Report* (DHS, 2001) and the *Nurse Workforce Planning report* (Auditor General Victoria, 2002)
- aim to trial a collaborative strategy in the Grampians Region that addressed the issues specific to rural nurse recruitment and retention.
- strong emphasis on collaboration between Grampians health services and other stakeholders,

Background: Grampians Rural Nurse Recruitment and Retention Pilot

- Objectives
 - the establishment of a regional nurse recruitment and retention advisory committee ✓
 - a review of the relevant literature ✓
 - a survey of nurses to identify the major recruitment and retention issues in the region ✓
 - the development of regional nurse recruitment and retention plan. ✓

Outcomes

- Ongoing funding from DHS for the Regional Nurse Recruitment and Retention position
- Consolidation of existing nursing policy/program areas under one person (ie, Continuing Nurse Education, Back Injury Prevention, Rural Maternity Initiative, GRENN, workforce planning, etc)
- Limited case management of nurses interested in working in the Grampians region (especially Overseas Trained Nurses)
- General problem solving/facilitation of communication between HSOs and between HSO and DHS
- Advancement of projects that developed from Grampians Nurse Recruitment and Retention 5-Year Plan) in particular:
 - Rural Health Bank/CasConnect Pilot
 - Grampians Loddon-Mallee eLearning project
 - Grampians health web portal
 - Wimmera Sub-regional Maternity Services Committee & Coordinator

Major issues/trends

- Rural and regional health services experiencing ongoing problems in filling generalist and specialist Division 1 positions (particularly management, aged care, mental health, midwifery, intensive care, emergency care)
- Situation is deteriorating – more health services affected now than in 2004 when I started.
- Those less affected by shortages tend to be located in geographically-advantaged areas (i.e., nearer Ballarat or Melbourne or located near border)
- Vast proportion of nursing workforce working part-time
- Increasing use of Division 2 nurses and PCAs to provide basic nursing care

Reasons for nursing shortages

- Ageing workforce
 - retirements, illness, death, lifestyle changes, out migration, family reasons
- Experienced nurses generally don't want to work in rural areas
 - social/professional isolation
 - lack of employment for spouse/children
 - lack of social infrastructure (schools, childcare, housing, transport)
 - (? perceived) lack of access to professional development
 - demanding nature of rural work (expected to be generalist)
 - declining communities/drought
 - negative image of rural nursing
- Retention a problem
 - for all of the above reasons plus:
 - negative workplace culture a factor in some health services
 - negative workplace factors typically associated with nursing (shift work, occupational violence and aggression, workload, bureaucracy, documentation, burnout)

Grampians Nurse Recruitment and Retention Plan

Section A: Workforce planning

- 4 issues with 13 recommendations

Section B: Nurse workforce recruitment issues

- 2 issues with 31 recommendations

Section C: Nurse workforce retention issues

- 6 issues with 35 recommendations

Can be found at:

http://www.grampianshealth.org.au/Regional_Groups/GRENN/index.aspx

Overview Grampians Nurse Recruitment and Retention Plan

Section A: Workforce planning

- Lack of consistent and reliable Grampians nurse workforce data (**3 strategies**)
- Lack of research that has explored core rural/regional issues affecting the Grampians nurse workforce (**2 strategies**)
- Lack of effective health workforce planning at both the regional and organizational level (**4 strategies**)
- Need for improved collaboration in the health care sector regarding health workforce recruitment and retention (**4 strategies**)

Overview Grampians Nurse Recruitment and Retention Plan

Section B: Nurse workforce recruitment issues

- Lack of graduate and experienced nurses interested in working in rural areas because of negative perceptions about rural nursing and/or rural life **(24 strategies)**
- Difficulty maintaining nursing competencies. Specialist nurses are unable to maintain their specialist skills and are expected to practice as generalists. Generalist nurses expected to take on increased responsibilities/expanded scope of practice **(7 strategies)**

Overview Grampians Nurse Recruitment and Retention Plan

Section C: Nurse workforce retention issues

- Inadequate social infrastructure and support services in rural and regional areas (especially in regard to childcare, housing, spousal employment, schools, and recreational resources) (**9 strategies**)
- Rural and regional nurses' relationships with health service managers, nursing peers and other health professionals needs to be strengthened (**7 strategies**)
- Rural and regional nurses report that their workplaces are changing and are becoming more complex to manage (**5 strategies**)
- A need for more continuing education programs for nurses working in rural and regional settings. More support needed for nurses to attend these programs (**4 strategies**)

Overview Grampians Nurse Recruitment and Retention Plan

Section C: Nurse workforce retention issues

- Nurses' rosters, shifts and leave entitlements are often inflexible and not family friendly (**3 strategies**)
- Difficulty maintaining nursing competencies. Specialist nurses are unable to maintain their specialist skills and are expected to practice as generalists. Generalist nurses expected to take on increased responsibilities/expanded scope of practice (**7 strategies**)

Possible foci for sub-regional collaboration?

Issue 7: Inadequate social infrastructure and support services in rural and regional areas (especially in regard to childcare, housing, spousal employment, schools, and recreational resources)

- R7.1 Broader consideration be given by health services when **advertising** for nurses
- R7.2 That DONs and CEOs from the Grampians health services liaise with local government CEOs to **increase the availability of childcare services** in local communities.
- R7.3 That regional stakeholders investigate the various **models of childcare services** that have been implemented previously in rural and regional areas in Australia and overseas.
- R7.4 That the outcomes of meetings in the Stawell area to address local childcare issues be reported back to GRENN.

Possible focus for sub-regional collaboration?

- R7.5 That Regional stakeholders investigate the possibility of **purchasing local houses** via funds provided by local businesses, philanthropic organisations and businesses with a 'social responsibility' focus.
- R7.6 That health services develop **closer links with real estate agents** and closely monitor the availability of housing and rental properties in their respective areas.
- R7.7 That health services **ensure that short-term accommodation** (for example, motel accommodation, hospital housing, subsidised housing) **is available** to (a) assist new nurses settle into a community and (b) provide overnight accommodation for nurses who travel long distances to work late/early shifts.
- R7.8 That health services regularly **liaise with local businesses**, local shires, and local employment networks **when advertising** and attempting to recruit nurses to work in the Grampians Region.

Possible focus for sub-regional collaboration?

- R7.9 That health services develop **information about local primary and secondary schools** and place this information on their websites.