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Looking good? The attractiveness of the NHS as an employer to potential nursing and allied health profession staff

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Additional Information:

- This is a Report Prepared for the Department of Health based on research conducted as part of the Human Resources Research Initiative. Also attached is the Executive Summary.

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Business School

Looking Good?

*The Attractiveness of the NHS as an Employer
to Potential Nursing and Allied Health Profession Staff*

Executive Summary

May 2003

A Report Prepared for the Department of Health based on research conducted as part of the Human Resources Research Initiative.

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Looking Good?

The Attractiveness of the NHS as an Employer

Final Report

May 2003

■ *What encourages potential recruits and returners to work for the NHS and what turns them off?*

■ *What encourages potential recruits and returners to work as a nurse, physiotherapist or radiographer?*

■ *How can current NHS recruitment strategies be improved?*

The research investigated perceptions of the NHS as an employer for the nursing and allied health professions (represented by physiotherapy and radiography). A total of 1356 people provided data.

Findings from this work include:

- The best thing about working in the NHS was working with patients. Job security and availability, a good pension, task variety, team working and learning were also mentioned.
- Understaffing and associated pressures at work were the strongest barriers to working for the NHS. Issues to do with the convenience, flexibility, length of work hours and low pay were also mentioned.
- Working for the NHS as a nurse or AHP was thought to be a rewarding career.
- The starting pay levels for nursing, physiotherapy and radiography are often underestimated.
- Qualified staff currently working outside the NHS were unlikely to return. Agency staff are slightly more likely to do so, but are still not enthusiastic.
- Unqualified people (students, school pupils, general public) were positive about the NHS.

Conclusions include:

- Use realistic job previews.
- Emphasise job security and availability, pension provision and career progression prospects in recruitment publicity.
- Further publicise the starting pay levels for qualified staff.
- Further opportunities for senior staff to retain direct patient contact should be made available and publicised.
- Offer all staff (not just those with children) some control over their work hours.
- Effort should be concentrated on attracting new recruits, more than existing qualified staff working outside the NHS.

Specific Policy–Related Conclusions

Recruitment publicity

Realistic Job Previews

NHS publicity should clearly reflect the experiences, both positive and negative, of those who do the work, preferably in their own words. It might even include the perspectives of people who have subsequently left the NHS. The impression would be one of a challenging work environment that will require people to use all their potential while making an important social contribution.

The main negative points conveyed by realistic job previews should be (i) there is not always as much time as one might like to help patients and establish relationships with them and colleagues; and (ii) some staff find that pressure and unsociable hours eventually wear them down.

Promote the NHS's Reputation

It is worth investing in the protection and promotion of the NHS's reputation as an employer even to people who never intend to work for it, because those people's opinions about working for the NHS appear to influence those for whom it is an option.

Publicity for the NHS as an employer should emphasise the socially responsible nature of the NHS mission, and the contribution to the public good made by those who work for it. This emphasis is likely to encourage people to feel a sense of responsibility for contributing to the NHS, even if they do not personally identify with it.

Male Role Models

Recruitment publicity for nursing and allied health professions in the NHS should present role models that potential applicants can relate to as ordinary (not super-human) people. A good proportion of the role models should be male.

Security and Availability of Jobs

Recruitment publicity should also emphasise (as long as it remains true!) the relatively ready availability of NHS jobs as qualified nurses and allied health professionals, including the wide variety of NHS settings and locations potentially available.

The NHS should emphasise job security and availability, pension provision and career progression prospects in its recruitment publicity. This may help to attract people (especially men) with slightly different values who would not previously have considered nursing, physiotherapy or radiography work in the NHS.

Attempts to persuade people that their values and identity are in line with the NHS should not be a focus of recruitment publicity. This is because identifying with the NHS appears not to affect intention to work for it.

Publicise Staffing Increases

Improvements in NHS operation and service delivery, particularly increases in staffing levels, should be publicised and specifically portrayed as representing more opportunity for staff to enjoy job satisfaction through opportunities to thoroughly care for and get to know patients.

NHS Work and Careers

Increase Staffing Levels

Wherever possible, increase staffing levels or reorganise work in order to increase opportunities for staff to give patients more personalised care.

Publicise Starting Pay Levels

The starting pay levels for qualified staff (especially nurses) need to be publicised yet more, because they are higher than many people think.

Although pay was not the most salient issue, to some extent it was seen as a barrier to entering nursing and the allied health professions. Therefore increasing pay levels is likely to have a significant, albeit small, positive impact on recruitment and retention.

Career Development Opportunities

Opportunities for career development, especially in the form of promotion and salary increases, should be maintained, publicised, and where possible expanded.

Further opportunities for more senior staff to retain direct patient contact should be made available wherever possible, and publicised.

Flexible Working for all Staff

To the extent that it is possible, it is important to offer all staff (not just those with children) some control over their work hours, and publicise the fact. This is likely to be valuable even if the control is partial (for example, choice between alternative shift patterns, or between staying on the same pattern long-term vs changing frequently). The NHS's existing initiatives to accommodate flexible working (including childcare support) could be publicised more and perhaps further innovations encouraged at local level.

Specific Subgroups of Potential Staff

Qualified Staff

Pursuing qualified nursing and AHP staff currently working outside the NHS is likely to lead to diminishing returns. Therefore effort should be concentrated at least as much on attracting new recruits, whilst recognising that the benefits will be less immediate.

AHPs

The allied health professions should pay particular attention to raising their public profile, in terms of both name recognition and understanding of their roles in healthcare.

Unqualified People

Even though they may be quite ill-informed about the NHS, unqualified people who make enquiries (e.g. to NHS careers line) may well be very positively disposed, and are well worth following up.

Minority Ethnic Groups

As a general rule (acknowledging different cultural traditions and expectations) the NHS should use the same strategies in trying to persuade ethnic minority and ethnic majority people to work for the NHS as a nurse or AHP, once they have expressed an initial interest.

Males

As a general rule, the NHS should use the same strategies in trying to persuade men and women to work for the NHS as a nurse or AHP, once they have expressed an initial interest.

Young People

NHS recruitment efforts are more effectively targeted at younger people (under about 30) rather than older ones. This is because younger people are more inclined to intend to work for the NHS.

Qualification and Training

Financial Support

Consideration should be given to either further publicising the financial and other support already available for getting qualified, or to increasing that support. This is particularly important for nursing.

Refresher Training

Refresher training, possibly somewhat tailored to individuals, must be conspicuously and readily available to potential qualified returners.

Flexible Routes to Qualifications

Yet more consideration should be given to flexible and financially supported routes to qualification, particularly for healthcare assistants. Flexibility could include the opportunity to train part-time whilst still working in a different job.

Access courses should be provided wherever there is the demand, because they seem to attract and/or nurture people with positive attitudes and intentions towards working for the NHS as a qualified member of staff.

Findings of the Study

Images of the NHS

Operational Difficulties

The most frequently mentioned images of the NHS concerned its operational difficulties (for example, staff shortages) rather than its purpose of helping and curing people. Nevertheless, the image of the NHS as providing free health care to all was often cited.

The NHS was not seen solely as a caring organisation, but as one under enormous pressure and struggling to provide a good service. A probable implication is that even people who see themselves as caring and helping will need to find additional good reasons to enter the NHS.

Working under high pressure was a frequently mentioned image associated of the NHS, but reducing pressure was rarely suggested as a way of making the NHS more attractive. Respondents had a strong expectation that working for the NHS would mean a lot of pressure but they attached relatively low importance to avoiding it. One interpretation of these findings is that respondents felt that working for the NHS as a nurse or AHP would inevitably involve pressure.

Sources of Images

Images of the NHS were derived from a variety of sources, including the media (especially television news), personal experience as a worker and/or patient and the experiences of family and friends. Those with experience of working in the NHS also said that the media influenced them.

Publicity

Overall, it was felt that the NHS needed to publicise itself better as an employer by avoiding too much focus on nurses and doctors and by steering a middle course between the extremes of over-glamorising NHS work and appearing desperate for employees.

Images of the Professions

Nursing

Nursing as a profession was viewed primarily in terms of hard work and long hours, more so than caring and helping. Nurses were nevertheless seen as caring and dedicated, but also poorly paid.

Recruitment to Nursing

Perceptions of nursing as a profession were much more similar to those of the NHS as an organisation than were perceptions of physiotherapy and radiography. It is therefore likely that recruitment to nursing will be much more closely tied to the perceived ups and downs of the NHS than recruitment to the allied health professions.

Physiotherapy

Physiotherapy was primarily seen as associated with sport by those unfamiliar with it. Those who were familiar with it saw it as a profession that is insufficiently recognised by the public and other professions and as requiring shorter working hours than other health related professions.

Radiography

Radiography was also seen as insufficiently recognised, though more by the public than by other professions. It was viewed as harder work than physiotherapy.

Best Aspects of Working for the NHS

Working with Patients

Participants indicated that the best thing about working in the NHS was perceived to be various aspects of working with patients. Job security and availability, pension, task variety, team working and learning were also mentioned quite often.

People have very high expectations of NHS work providing various positive work features (especially satisfaction derived from positive relationships with patients and colleagues), and many become disillusioned if these are not met.

In an era of employment insecurity and new uncertainties about career, respondents saw the NHS as an employer that still offers career progression, employment security, a pension scheme and the opportunity to find work in most parts of the country. These attributes were valued highly.

Worst Aspects of Working for the NHS

Understaffing

Working somewhere that is understaffed was a strong expectation of NHS employment, and respondents were keen to avoid working in such an environment. Understaffing got the highest rating of the eleven barriers to entering NHS employment listed in the structured questionnaire.

Working Hours

Issues to do with the convenience, flexibility and length of work hours were frequently mentioned as the worst aspects of working for the NHS. Respondents to the questionnaire expected to work unsociable and/or long hours, and not to have much choice in the matter.

Level of Pay

The findings from the interviews indicated that low pay was seen as one of the worst things about working in the NHS and improving pay was the most frequently mentioned way of making NHS employment more attractive. However, responses to the structured questionnaire indicated that respondents did not expect to work for low pay in the NHS and were not overly concerned even if they did have to work for low pay. The level of pay was a greater concern in London and the Southeast of England than elsewhere. Pay was overall the third most highly rated barrier to entering NHS employment.

The starting pay levels in nursing, physiotherapy and radiography (particularly nursing) were often underestimated by respondents, but rarely overestimated.

Litigation

A significant concern to some study participants was negative attitudes and potential litigation from patients. As the NHS attempts to offer a more 'customer-orientated' service it will be important that staff and potential staff feel that they too have protection and support when they need it.

On the whole the negative impact of barriers (such as understaffing and awkward work hours) on attitudes and intentions to work for the NHS was more than counteracted by the positive perceptions of job satisfaction, rewarding career, teamwork, and good relationships with patients. However understaffing and work pressure tended to undermine some of the positive work features (particularly time to spend with patients) that were considered highly important by participants.

Profession Specific Issues

In general, respondents thought that working for the NHS as a nurse or allied health professional constituted a rewarding career. Nevertheless, some respondents saw career opportunities as being too restricted. In particular there was a perceived need to permit promotion to quite high levels without becoming too heavily involved in management and administration.

Qualification concerns undermined intention to work for the NHS more for those interested in nursing than physiotherapy or radiography.

Best Aspects of Working Outside the NHS

The best things about working in private hospitals were lower pressure and more attractive work surroundings. Agency work scored well on pay and autonomy.

Worst Aspects of Working Outside the NHS

The worst thing about working in private hospitals was demanding patients. There was also some concern about losing the variety of work and skill development that the NHS could potentially offer. The worst things about agency work were job insecurity and not being an integral part of the team.

Personal Values and the NHS

There was **no** strong tendency for participants to identify with the NHS. Some participants nevertheless felt personally in tune with the principles of free and universal care.

Identifying with the principles of the NHS appeared to influence peoples' attitudes towards it but not their intention to work for it.

Moral Obligation to the NHS

Generally, people did not feel a strong sense of moral obligation to work for the NHS.

Nevertheless, the more that people felt such an obligation, the more positive were their attitudes/intentions to NHS work.

Perceptions Held by Family and Friends Toward Working for the NHS

Most participants felt other people who were important to them were (or would be) supportive if they decided to work for the NHS as a nurse, physiotherapist or radiographer. This is a notable finding, and perhaps surprising in the light of perceptions of the NHS as under pressure.

Furthermore, statistical analyses showed that perceived support from friends and family had an important influence on respondents' attitudes and intentions to work for the NHS. This was especially the case for the physiotherapy and radiography professions. This finding highlights the importance of attempting to maintain respect for the NHS and the professions.

Diversity Issues and the NHS

Minority Ethnic Groups

There was little perception of systematic racial or gender discrimination in the NHS. To the extent that it was perceived, it was thought to emanate from patients more than staff.

Ethnic minority participants did not have radically different views from white participants. However, in comparison with white participants, staff shortages seemed less salient to them. The possibilities of discrimination on the basis of race, and the importance of avoiding it, were slightly more important.

Ethnic minorities did not generally perceive the NHS as discriminatory and were similar in their attitudes and intentions to white people. The questionnaire respondents from ethnic minorities were more positive toward working for the NHS than the white respondents.

Males

Deep-rooted gender roles and stereotypes and the lack of 'bread-winner' wages were suggested as the main reasons why few men work in nursing, physiotherapy or radiography in the NHS. There was some optimism that better publicity in the education system might go some way to counteracting stereotyping.

When asked for their own personal perceptions, men and women generally perceived the NHS in similar ways, although women desired positive work features, equality and avoiding pressure/hours more than men. There was no tendency for men to be more worried than women about pay. However, this may be a sample-specific finding (see last point in the 'Background' section of this summary).

Views of Specific Groups of Potential Recruits

Independent Sector and Agency Staff

Qualified staff currently working outside the NHS were unlikely to return. Agency staff were slightly more likely to do so, but still not enthusiastic on the whole. Qualified independent sector staff were unlikely to be attracted back to the NHS by more pay. For them, pressure and lack of time to deliver quality care were key. Qualified staff currently outside the NHS felt a need for refresher training but doubted its availability.

Healthcare Assistants represent an informed and positive group for conversion to qualified status but their intention was undermined by qualification concerns.

Those on, and interested in, Access courses should be encouraged and supported as they hold positive attitudes and intentions regarding NHS work.

Unqualified people were quite positive about the NHS, particularly those in education or other forms of employment.

The older people were, the lower their intention to work in the NHS. This was the case even after adjusting for factors like confidence about completing the qualification process.

Background to the Study

The research and analysis were undertaken primarily at Loughborough University Business School between September 2000 and December 2002.

The final report is presented in two parts. The first part is concerned with the interview-based first stage of the research project, and the second focuses on the survey stage. The final section provides integrated conclusions and recommendations.

The research was designed to investigate the perceptions of the NHS as an employer for the nursing and allied health professions

(represented by physiotherapy and radiography) held by six different sample groups:

1. School pupils;
2. Mature students;
3. Students undertaking professional training;
4. NHS staff not qualified as nurses or AHPs;
5. Qualified staff working for agencies; and
6. Qualified staff working for the independent sector.

The second stage of the study also investigated qualified and unqualified people currently in other forms of employment, or not employed.

It is important to note that on the whole the participants in the research had expressed some initial interest in working for the NHS as a nurse or AHP, and/or already had experience of doing so.

Research Objectives

The primary objectives of the study were to:

1. Identify the influence of factors that determine the attractiveness of nursing/AHPs as professions.
2. Identify the strength of individuals' intention to enter nursing/AHPs, relative to other realistic career options.
3. Identify the influence of factors that determine the attractiveness of the NHS as an employer.
4. Identify the strength of individuals' intention to work for the NHS, relative to other potential employment options.
5. Identify specific factors that influence the attitudes and intentions of minority and under-represented groups.
6. Recommend strategies to expand the recruitment base for nursing and AHPs.
7. Identify changes in employment practice to strengthen the positive features of working for the NHS in nursing and AHPs. This will focus on those changes that are most salient to potential recruits.
8. Recommend effective promotion/marketing strategies for the NHS as an employer, based on the findings combined with other relevant research and theory.

Methodology

A two-stage strategy was adopted combining qualitative and quantitative methods. The first stage of the study involved semi-structured individual and group interviews with 231 participants across England. The second stage of the research assessed the relative importance of the issues identified in the stage one interviews. This was achieved by a questionnaire to which 1125 usable responses were received. Respondents included all of the groups of primary interest in this research, but also some other groups, most notably adults not qualified in nursing or an AHP and currently working in a range of occupations or none. Gathering data from a substantially larger sample of respondents than the number used in stage one enhances the generalisability of the findings from the study.

Our thanks to those who gave their time to participate in this study

Attractiveness of the NHS as an Employer

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