

ORIGINAL ARTICLE

Managers' perspectives on recruitment and human resource development practices in primary health care

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Received 15 April 2010; Accepted 18 October 2010

ABSTRACT

Objectives. The aim of this study is to describe primary health care managers' attitudes and views on recruitment and human resource development in general and to ascertain whether there are any differences in the views of managers in the southern and northern regions of Finland.

Study design. A postal questionnaire was sent to 315 primary health care managers, of whom 55% responded.

Methods. The data were analysed using descriptive statistics and cross-tabulation according to the location of the health centre.

Results. There were few differences in managers' attitudes and views on recruitment and human resource development. In the southern region, managers estimated that their organization would be less attractive to employees in the future and they were more positive about recruiting employees abroad. Furthermore, managers in the northern region were more positive regarding human resource development and its various practices.

Conclusions. Although the results are preliminary in nature, it seems that managers in different regions have adopted different strategies in order to cope with the shrinking pool of new recruits. In the southern region, managers were looking abroad to find new employees, while in the northern region, managers put effort into retaining the employees in the organization with different human resource development practices.

(Int J Circumpolar Health 2010; 69(5):462–469)

Keywords: primary health care, managers, human resource management

INTRODUCTION

The core issue in health care is that the quality of services, accountability and effectiveness of the system ultimately depend on how human resources are developed, managed, structured and allocated at all levels in these systems, and how well both managers and staff members succeed in sharing knowledge and improving knowing processes in a single workplace (1,2). Due to the fact that increasing numbers of workers are retiring and decreasing numbers of younger workers are available to replace them, human resource management (HRM) has been emphasized in recent years in health care (3). The role of human resources is even greater in community-based care, which uses less equipment and advanced technology but is dependent on skilful personnel (4). In peripheral and sparsely populated areas, the issue of human resources is a particularly important issue. The role of primary care services has recently been growing in various countries, but HRM issues have not gained the same attention (5,6), although emphasizing primary health care has been seen as a part of the solution to health care problems in future (7).

The discussion continues as to how well primary health care organizations are functioning, how well the division of labour is organized between the professions and how professional development opportunities are provided in primary health care organizations. In many countries, there have been numerous problems recruiting new professionals in primary health care, and the same problem also concerns different regions (8). Primary health care units have not been considered as attractive as specialized care units among young workers (6,8,9). New recruits will be needed sooner in

primary health care since the average age of the primary care worker is higher than those in specialized care (6). Lack of human resources is due not only to demographic or macro-economic facts but also the demand for reasonable working hours and salaries, professional development opportunities, decreasing job satisfaction and diminishing interest in health care work (5,8,10,11). Additionally, rising workloads, which are partly due to the division of labour between physicians and nurses, unfilled vacancies and competition between public and private sectors, have undermined the attractiveness of public primary health care (6,12–14). It has even been claimed that primary health care needs a facelift in order to be a more attractive workplace in the future (7).

Concurrently, the managers' work environment has become more intense and more complex (15–17). Despite these challenges, the reality of HRM is still limited to personnel administration tasks covering only some aspects of HRM, focusing on individuals and lacking strategic, long-term steering (2,4,18). Current HRM practices have been estimated to enhance the utilization of 60–70% of the human resources available in an organization (18). On the one hand, this is because health care organizations have been built on strong individuals who are independent experts in their own specialized fields and whose first loyalty is to their own profession and knowledge bases (19–21). These individuals form powerful groups in health care by reason of their professional expertise. However, current ideas in HRM emphasise the formation of teams and knowledge-sharing instead of individuals, informal learning at work instead of traditional individual based expertise and flexible use of knowledge instead of strict

boundaries between professional groups and units. On the other hand, primary health care managers lack data on workforce planning and development purposes (5,6), making a more comprehensive development and utilization of human resources quite difficult.

Human resource management has not been profoundly studied in primary health care (6,22-24). However, effective HRM policy and practices can have a significant positive effect on organizational performance (3,20,25). The aim of this study is to describe primary health care managers' attitudes and views on 2 crucial HRM practices, namely recruitment and human resource development, and to ascertain whether there are any differences in the views of managers working in the southern and northern regions of Finland.

MATERIAL AND METHODS

The data for this study were collected in Finland 2005. The Finnish primary health care system and its management system are unique. Primary care covers primary medical care and public health. Health centres (194 in 2009) provide primary care and they are owned by a single municipality or federation of municipalities. In addition, every municipality must be a member of a hospital district (n=21), which provides secondary care services. In middle-sized and large health centres management includes several managers, while in small health centres the head is typically the chief physician. In larger health centres there is typically a dual management system, meaning 1 strand for nurses and another for doctors. In addition, there is 1 director of finance in a health centre. In Finland, HRM is a crucial part of first-line

and middle level managers' work in health care, it is not a separate function performed by HR professionals (26).

The data for this study were collected by postal questionnaire. The health care organizations were selected purposefully for this study on the basis of their geographic location and organization type. Altogether, 18 different primary health organizations located in 6 hospital districts in different parts of Finland were selected. From each hospital district, a health centre owned by a central city, a federation of municipalities and a single municipality was enrolled in this study. The questionnaire was sent to all the primary health care managers (n=315) working in these organizations. Both operational level managers (medical and nursing managers) and strategic level managers with responsibility for the municipality's social and health care sector were included. Altogether, 172 primary health care managers responded (for a response rate of 55%). The questionnaire was developed specifically for this study on the basis of the relevant HRM literature (27). The questionnaire included questions on recruitment and human resource development practices used in primary health care organizations in addition to other dimensions of HRM. The questions were mainly 5-point Likert scale statements. The respondents were also asked whether they used 3 HRD practices (mentoring, in-service training programs and descriptions of staff members' educational needs) in primary health care.

The data were analysed with SPSS for Windows (15.0) software using descriptive statistics and cross-tabulation according to the location of the health centre. The health centres (n=6) located in 2 hospital districts in southern Finland were coded as southern region, while

other health centres (n=12) located in the other 4 hospital districts were coded as the northern region. The Likert scale was re-coded because our interest was in finding out whether the respondents agreed or disagreed with the statements. Furthermore, "do not know" answers were excluded from this stage of analysis due to irrelevance to the focus of interest. Statistical significances of differences between groups were tested with chi-square tests using a significance level of 0.05 or less (*p<0.05, **p<0.01, ***p<0.001).

RESULTS

The majority of the respondents were women (82%) and over 50 years of age (79%). Of the respondents, 68% were nursing managers, 17% medical managers and 15% belonged to

the group of other managers. They were quite experienced in their work, 36% having over 10 years of work experience in their current position. Almost half of the respondents had a university degree (44%).

Primary health care managers widely agreed that recruitment is a crucial process for their organization and they were willing to participate in these processes (Table I). However, their views diverged when considering the attractiveness of their organization. Managers from the northern region (29%) were also more positive than managers from the southern region (11%) that their organizations would be attractive to employees in the future. The most significant difference between these manager groups was found in views on the recruitment of employees abroad. Two-thirds (68%) of the managers from the southern region were positive about employing professionals

Table I. Primary health care managers' views on recruitment.

	Agree % (n)	Disagree % (n)
Recruitment is a crucial process for the organization and as a manager I will participate in the process.		
southern Finland	97 (67)	3 (2)
northern Finland	99 (95)	1 (1)
Our organization will be an attractive workplace in future and there will not be recruitment problems. ** (p<0.01)		
southern Finland	11 (8)	89 (62)
northern Finland	29 (27)	71 (67)
We increasingly recruit health care professionals abroad. *** (p<0.001)		
southern Finland	68 (45)	32 (21)
northern Finland	19 (15)	81 (64)
Formal qualification is the most important selection criterion when recruiting new professionals.		
southern Finland	46 (32)	54 (38)
northern Finland	34 (32)	66 (62)
Open recruitment processes are supported in our organization.		
southern Finland	72 (44)	28 (17)
northern Finland	69 (64)	31 (29)
Headhunting is not used in our organization when recruiting key personnel.		
southern Finland	83 (39)	17 (8)
northern Finland	71 (43)	29 (18)
In the recruitment process, we always discuss career opportunities with new professionals. (p=.058)		
southern Finland	67 (43)	33 (21)
northern Finland	81 (71)	19 (17)

from abroad, while only one-fifth (19%) of the managers from the northern region considered this an option. By contrast, headhunting as a recruitment method was used more often in the northern region than in the southern region. Still, open recruitment processes were supported in both regions. Managers' views on formal qualifications as a basis for selection varied, though this variation did not correlate to the location of the primary health care organization nor was it statistically significant. Career planning opportunities at the recruitment phase were discussed more often with health care managers in the northern region than in the southern region.

Almost all the respondents agreed that organizational needs steered human resource development in their organizations (Table II). However, half of the respondents considered that the competencies required at work were not defined on the basis of the organization's strategy. Furthermore, almost 40% of the managers from the southern region considered continuous professional development to be everyone's individual responsibility, while only one-fourth of managers from the northern region agreed with the statement. Nevertheless, over 80% of all managers disagreed that it is acceptable that not everyone is willing to develop professionally.

Table II. Primary health care managers' views on human resource development.

	Agree % (n)	Disagree % (n)
Organizational needs form a basis for human resource development in our organization.		
southern Finland	84 (62)	16 (12)
northern Finland	89 (84)	11 (10)
Professional development is everyone's individual concern. * (p<0.05)		
southern Finland	39 (29)	61 (45)
northern Finland	24 (23)	76 (73)
Competencies required at work have not been defined on the basis of organization's strategy.		
southern Finland	54 (35)	46 (30)
northern Finland	45 (39)	55 (47)
It is important to promote process-related and procedure-related skills and knowledge in addition to professional development.		
southern Finland	99 (68)	1 (1)
northern Finland	98 (91)	2 (2)
It is acceptable that not everyone is willing to develop professionally.		
southern Finland	14 (10)	86 (62)
northern Finland	19 (18)	81 (78)
Staff members' skills and knowledge are evaluated regularly with other means than annual appraisals and employee reviews.		
southern Finland	51 (35)	49 (34)
northern Finland	53 (49)	47 (44)
More experienced staff members guide the inexperienced at the beginning. *** (p<0.01)		
southern Finland	82 (60)	18 (13)
northern Finland	95 (89)	5 (5)
Individuals' skills and knowledge are taken into consideration when sharing tasks in our unit. * (p<0.05)		
southern Finland	85 (61)	15 (11)
northern Finland	95 (92)	5 (5)
Staff members' development needs are taken seriously and opportunities are created to improve the needs.		
southern Finland	79 (56)	21 (15)
northern Finland	88 (85)	12 (12)

Almost all of primary health care managers agreed that their staff members' process-related and procedure-related knowledge and skills needed to be improved (Table II). Individual skills and knowledge were better taken into consideration when discussing the division of labour in the northern region (95%) than in the southern region (85%). Furthermore, more experienced staff members guide the inexperienced at the beginning more often in the northern region (95%) than in the southern region (82%). However, only half of all managers agreed that they evaluate their employees skills and knowledge systematically by other means than annual appraisals and employee reviews. The majority of the managers agreed that individual needs for human resource development were taken into consideration and opportunities were created to develop these needs.

The respondents were asked whether they used 3 human resource development practices in their organizations. Mentoring (southern region 54%, northern region 69%, $p=.050$), in-service training programs (southern region 78%, northern region 93%, $p=.006$) and descriptions of staff members' educational needs (southern region 69%, northern region 82%, $p=.045$) were used more often in the northern region than they were in the southern region.

DISCUSSION

The aim of this study is to describe primary health care managers' attitudes and views on recruitment and human resource development in general and to ascertain whether there are any differences in the views of managers in southern and northern regions of Finland. In

general, there were few differences between the views of managers for both southern and northern primary health centres on recruitment and human resource development.

Problems in recruitment have been considered a challenge for primary health care organizations, especially in rural and sparsely populated areas (4,9). However, this study showed that managers in northern regions did not consider recruitment a problematic issue as much as their southern counterparts did. Mobility and migration of workers have been seen as a means to improve both the recruitment situation and human resource development in various countries (7). Managers' attitudes in the southern region were more positive towards recruiting new professionals from abroad, which was not an issue in the northern region. This creates new challenges for managers and the organizations in the southern region. For instance, are they prepared for multicultural human resource management?

Furthermore, a challenge for primary health care organizations is the attractiveness of the organizations (6,7,9,10). It is astonishing that many of the managers did not consider their organization to be an attractive workplace. What does this finding indicate about primary health care in general, if even the managers do not see it as an attractive career option? However, managers are in a key position, since previous studies (1,8,10,20) suggest that emphasizing HRM can be a part of the solution to future health care problems. Similarly, how will the primary health care organisations attract new managers to organizations, if qualified managers do not consider them to be attractive?

Skilled personnel are crucial for primary health care (4). These results suggest that in

the northern region issues of recruitment and human resource development have been taken more seriously than in the southern region in order to find new employees and to retain them in the organizations. It seems that in the northern region a wider conception of HRM has been adopted, while in the southern region managers only tackle personnel administration tasks (2,4,18). An indicator of this was seen in the northern region, where managers used more human resource development practices that promote knowledge-sharing and learning together.

In summary, although the results are preliminary in nature, it seems that managers in different regions have adopted different strategies in order to cope with the shrinking pool of new recruits. In the southern region, managers were looking abroad to find new employees, while in the northern region, managers put effort into retaining the employees already working in the organization with different human resource development practices. The northern managers were more aware of the principles of and requirements for HRM, suggesting that these issues must already have been taken into consideration in that region.

Validity of the study

The response rate for this study was satisfactory (55%). Nonetheless, all the questionnaires returned were well completed. On the basis of the background information, the respondents were a good representation of Finnish primary health care managers. The formulation of the statements was pilot tested in order to avoid misunderstandings and to improve the validity of the measure. Since the subject matter was related to HRM and human resource development, the managers may have felt some

motivation to give positive and socially desirable answers. The questionnaires were developed specifically for this study, and the results reflect the views of Finnish primary health care managers. The results therefore cannot be generalized internationally.

Human resource management in primary health care organizations is a field which has been given little study. However, HRM issues have to be taken into consideration in addition to changes within the structures of organizations in order to develop and reform primary health care (20). HRM issues seemed to have been emphasized differently in southern and northern regions. Why this is so, how great the differences are and what kinds of information managers have for management purposes is a topic for another study. Moreover, information is needed on how the primary health care organizations cope in this competition for a shrinking pool of new recruits.

Acknowledgements

This study is a part of the research program on health services research funded by the Academy of Finland; the Association of Finnish Local and Regional Authorities; and Sitra, the Finnish Innovation Fund. We would like to acknowledge and thank the other members of the HumanRe project team for their valuable contributions in planning the study and formulating the questionnaires.

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