



Summary of national study on recruitment and retention of consultant doctors

Introduction

This summary presents an overview of the findings of a nationally representative study on recruitment and retention of consultant doctors. A scoping review of the literature identified a wide range of factors that influence decisions to stay or leave a job, profession or organisation. These issues, which include factors relevant to the job, the organisation and the individual consultant working in the Irish health services are taken into account in this study.

Methodology

The study adopted a mixed methods sequential explanatory design and both qualitative and quantitative data were collected and analysed in accordance with their respective paradigms. A total of 700 consultants took part in an online survey and 12 consultants participated in telephone interviews. Six individuals working in HR in the HSE also took part in interviews. Descriptive, bivariate and regression analyses were conducted on the quantitative data and thematic analysis on the qualitative data.

Key findings from the study

- Results indicate that 30% of consultants intend to leave their job in the next two years. Of this 30%, about one-third intend to leave Ireland without a plan to return.
- Consultants perceive their work to have a significant impact on the lives of others, are highly engaged in their work and have positive views of their co-workers.
- Overall satisfaction with pay among consultants is low (mean index score: 30%). There is considerable anger about recent changes to newly-recruited consultants' pay scales. Inequities between training requirements and pay scales of consultants and public health doctors was considered unfair. Almost two-thirds of consultants (64%) who intended to leave their jobs in the next two years rated better opportunities elsewhere as highly relevant to this intention.
- Overall, consultants' level of satisfaction with information sharing and their involvement in decision-making was low. The information sharing index had a mean score of 32%. Consultants working in private settings reported significantly higher levels of information sharing and autonomy than those working in public settings. Interviews with consultants also highlighted a lack of involvement in decision-making as an area of frustration particularly when decisions have implications for clinical practice. There is also evidence of a loss of trust between consultants and HSE managers.
- The overall perceptions of managers index score for consultants is low at 41%. This reflects low satisfaction with management and is one of the lowest scores across all areas measured. Interviews with consultants highlighted a number of difficulties in their working relationships with HSE management: lack of transparency, fear of speaking out, and inequitable spread of facilities, personnel and resources. Working in the HSE environment was viewed less favourably than working in voluntary and private settings.

Results of the regression analysis

A total of 28 individual, employment, structural and perceptual / attitudinal characteristics were examined simultaneously in multiple regression models to establish which were the most important predictors of three outcomes – intent to stay or leave current job, organisation or medical profession.



Figure 1: Factors of key importance in understanding consultants' job and career intentions

Further analysis that focused on perceptions of the job and the organisation confirmed the importance of global job satisfaction, organisational commitment and burnout in predicting consultants' job intentions, and showed that different aspects of the work and the organisation underpin or drive these three elements.

- global job satisfaction is driven by: satisfaction with pay, perceived quality of workplace, information sharing, autonomy, effort-reward ratio, responsibility overload and perceptions of co-workers
- organisational commitment is driven by: perceived quality of workplace, perceptions of manager, perceptions of co-workers, information sharing, satisfaction with pay and impact
- burnout is driven by: responsibility overload, perceived quality of workplace, effort-reward ratio and information sharing.

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