

THE NATIONAL CENTER FOR HEALTH IN PUBLIC HOUSING

Making the Connection with your Community

A Recruitment and Retention Toolkit for PHPC
Health Center Programs



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This toolkit describes how four Public Housing Primary Care health center programs have implemented staff recruitment and retention strategies targeting undergraduate medical students and public housing residents in order to reduce staff turnover

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The National Center for Health in Public Housing (NCHPH), a project of North American Management, is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09734, a National Training and Technical Assistance Cooperative Agreement (NCA) for \$608,000, and is 100% financed by this grant. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.



Employing Public Housing Residents and Pre Medical Students in Public Housing Primary Care Health Center Programs

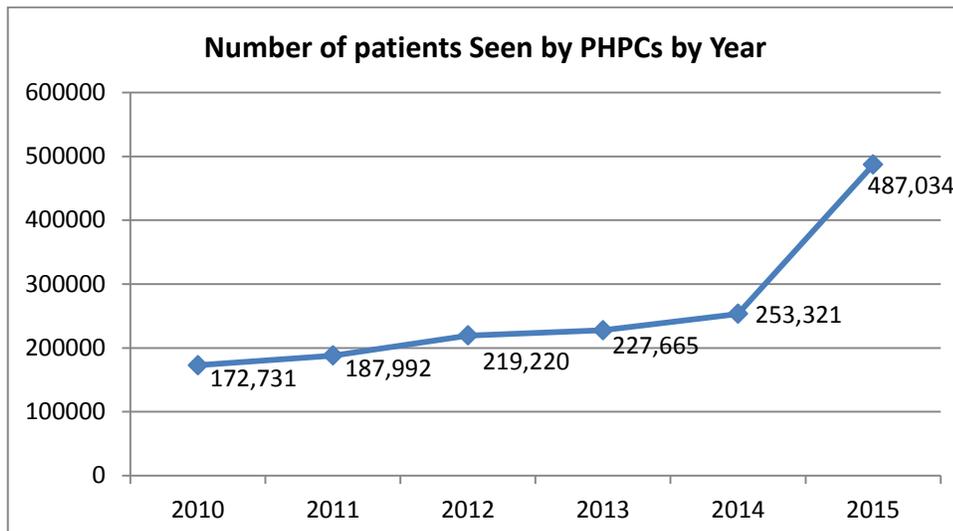
Introduction:

Public Housing Primary Care Health Center Programs (PHPCs) provide a wide range of employment opportunities for **public housing residents** and are a natural fit for **undergraduate medical students**. With a singular mission to serve the community, PHPCs offer a unique opportunity for undergraduate medical students and public housing residents to participate in community-based health care initiatives, networks, and cooperative agreements. The purpose of this toolkit is to provide PHPCs with the information they need to establish or expand their hiring and/or retention strategies based on public housing resident and undergraduate medical student recruitment and retention.



Public Housing Primary Care Overview:

According to the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA), Health Center Program grantees employ over 180,000 staff throughout the country¹. In 2015, health center staff included over 11,000 physicians, more than 6000 nurse practitioners, more than 2600 physicians assistants, and over 600 certified nurse midwives². The number of patients seen in community health centers has continued to increase significantly over the last several years. For example, in 2015 Public Housing Primary Care Health Center Programs (hereafter PHPCs)³ served over 400,000 patients, whereas in 2014 the reported number of patients seen in PHPCs was over 253,000⁴. It is important to note that the spike in the number of patients between 2014 and 2015 was due, in part, to the revised interpretation of the definition of public housing patients⁵



Source: HRSA Website "2014 Health Center Data"
<https://bphc.hrsa.gov/uds/datacenter.aspx?year=2015&fd=p>

¹ Table 5- Staffing and Utilization
<https://bphc.hrsa.gov/uds/datacenter.aspx?q=t5&year=2015&state=>

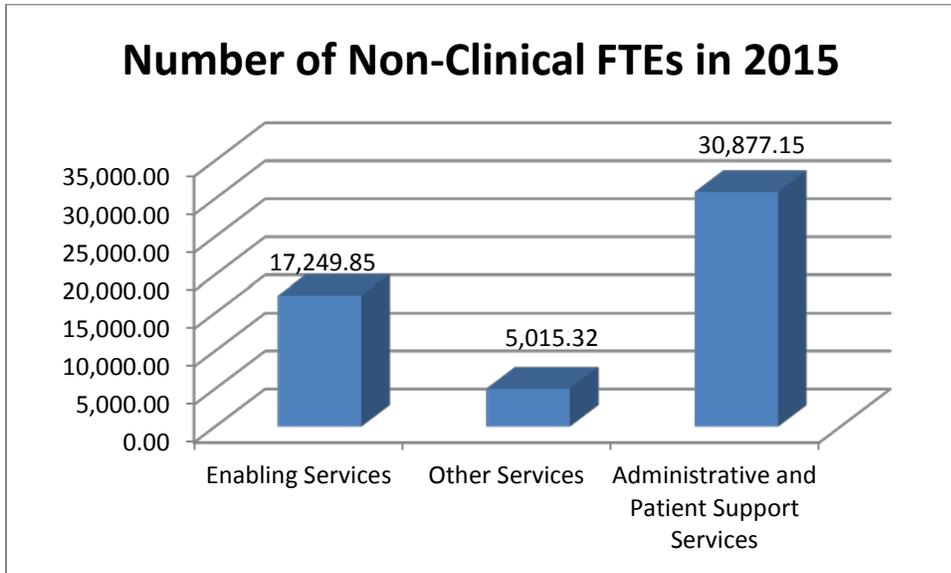
² Ibid

³ The Public Housing Primary Care Program (PHPC) provides residents of public housing with increased access to comprehensive primary health care services. Services are provided on the premises of public housing developments or at other locations immediately accessible to residents.

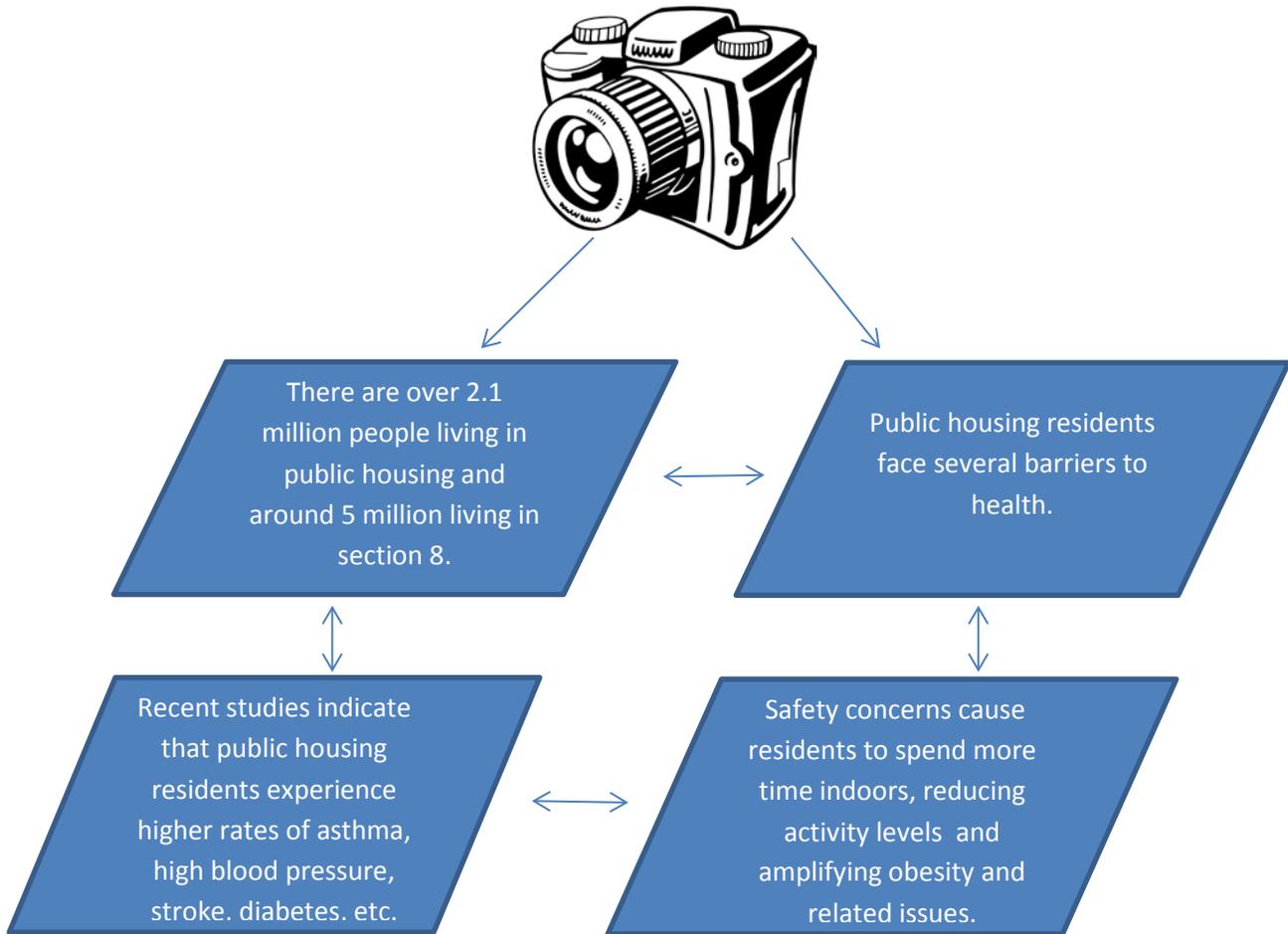
⁴ 2014 Health Center Data: Public Housing Primary Care Program Data
<http://bphc.hrsa.gov/uds/datacenter.aspx?year=2014&fd=ph>

⁵ <https://bphc.hrsa.gov/datareporting/reporting/2014udsmanual.pdf> (page 36)

As new programs and services are established, the community health centers' workforce is growing and becoming more diverse. In addition to clinical staff, the demand of new services has created new job opportunities for those working in enabling services or administrative positions. In 2015, health centers had a total of 67,961.50 support and non-clinical full-time employees⁶ which included workers such as IT specialists, fiscal and billing analysts, interpreters, education specialists and outreach workers.



Public housing Residents – Snapshot:



Public Housing Primary Care Program – Snapshot⁷



Number of PHPC Centers:	105
Number of States Represented:	98

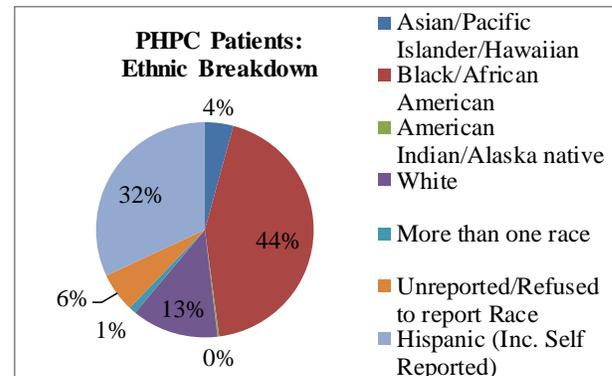
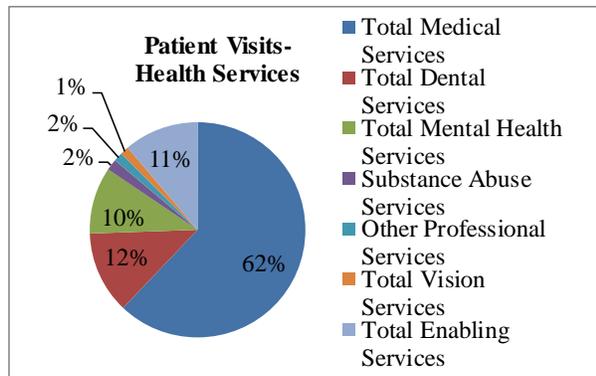
⁷ PHPCs: National Overview (HRSA UDS 2015 data)

Total Number of Patients Served:	487,034
Total Number of Clinic Visits:	809, 941



Patient Characteristics:

Male	40%
Female	60%
Children (Ages 0-19)	30.9%
Seniors (Ages 65+)	6.8%
Annual Income 100% and below	81.6%
Without Private Insurance	89.1%
On Medicaid	53.1%
Best served in a language other than English	26.1%



Source: HRSA Website "2015 Staffing and Utilization"
<https://bphc.hrsa.gov/uds/datacenter.aspx?q=t5&year=2015&state=&fd=>

PHPCs – Recruitment and Retention Synopsis:

Recruitment and retention issues are especially important for health center programs serving public housing residents, which are located in resource-poor, medically underserved, and at-risk communities.

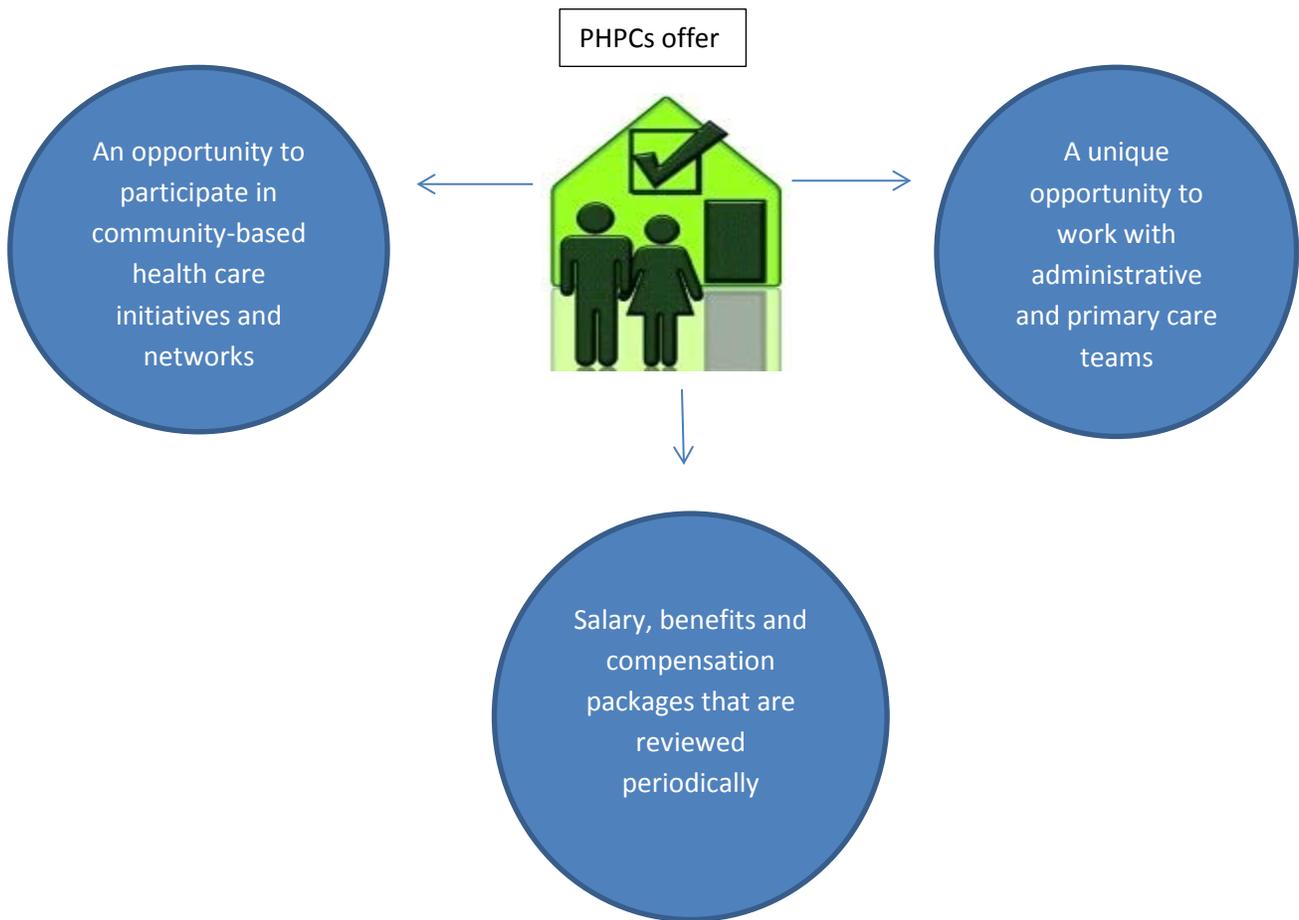
It is estimated that if the system for delivering primary care in 2020 were to remain fundamentally the same as today, there will be a projected shortage of 20,400 primary care physicians in the United States⁸. Literature suggests that

access to primary care has progressively decreased across the United States. The primary care physician shortage is due to several factors, including the aging of the U.S. population⁹. Additionally, the number of medical graduate students accepting placements in primary care residency programs continues to decline, and many current physicians are nearing retirement (in 2010, four in ten active physicians were age 55 or older)¹⁰. Thus, the primary care workforce is shrinking as demand for primary care increases. As a means of recruiting primary care professionals to provide care for their patients, PHPC health center program grantees participate in a variety of staff recruitment and retention strategies at all levels, including the hiring of undergraduate medical students who can volunteer at community health centers while simultaneously obtaining an opportunity for hands-on training. Undergraduate medical students, for instance, can act as interpreters, patient advocates, or receptionists and, in turn, PHPCs offer valuable and unique training opportunities given their range of services and the diverse, complex patient populations they serve. In addition to hiring undergraduate medical students, PHPCs also hire public housing residents for administrative positions. Appropriate persons can be selected as community health workers, receptionists, interpreters, or similar positions. The Promotora model, used by several health centers serving Hispanic or other immigrant populations, encourages the hiring of people within the community to communicate health messages in ways that are culturally acceptable to the intended audience. Culturally and linguistically sensitive recruitment strategies not only lead to effective identification and use of people within the community but also guard PHPCs' reputation in the community.

⁹ Projecting the Supply and Demand for Primary Care Practitioners through 2020.
<http://bhpr.hrsa.gov/healthworkforce/supplydemand/usworkforce/primarycare/index.html>

¹⁰ Lbid

¹⁰ 2012 Physician Specialty Data Book
<https://www.aamc.org/download/313228/data/2012physicianspecialtydatabook.pdf>



Case Studies

We conducted in-depth, semi-structured, open-ended interviews with four PHPC health center program grantees within a 2-month data collection window (September to November 2014). PHPCs were chosen based on how well they responded to the staff recruitment and retention questions included in the 2014 PHPC needs assessment conducted in January and February 2014 by North American Management and Community Health Partners for Sustainability. Once we determined those PHPC grantees with the highest staff recruitment and retention scores, we established contact with four PHPC health center programs' Chief Executive Officers (CEOs) via email. Follow up calls were done to set up an interview date and time. Two CEOs were unable to participate so they referred us to alternate staff members who could represent the health center.

We conducted our interviews with a guide created specifically for this case study (Workforce Recruitment and Retention Guide is attached as appendix 2). The interviews were done over the telephone and lasted an average of 60 minutes. Each interview was audio recorded with participant consent. The interviewer took detailed notes during the interview and then immediately summarized and made copies of each interview. We later listened to the audio-recorded interviews to review notes and summaries. We attached labels to lines of text in the responses to identify common themes: workforce challenges, strengths, and strategies used by PHPCs to recruit premedical students and public housing residents. (Common themes are summarized and presented as strategies to recruit public housing residents and medical students in the Summary and Recommendations section).

Case Study Participating PHPCs:

Charles Drew Health Center, NE



La Maestra Health Center, CA



Montefiore Health Center, NY



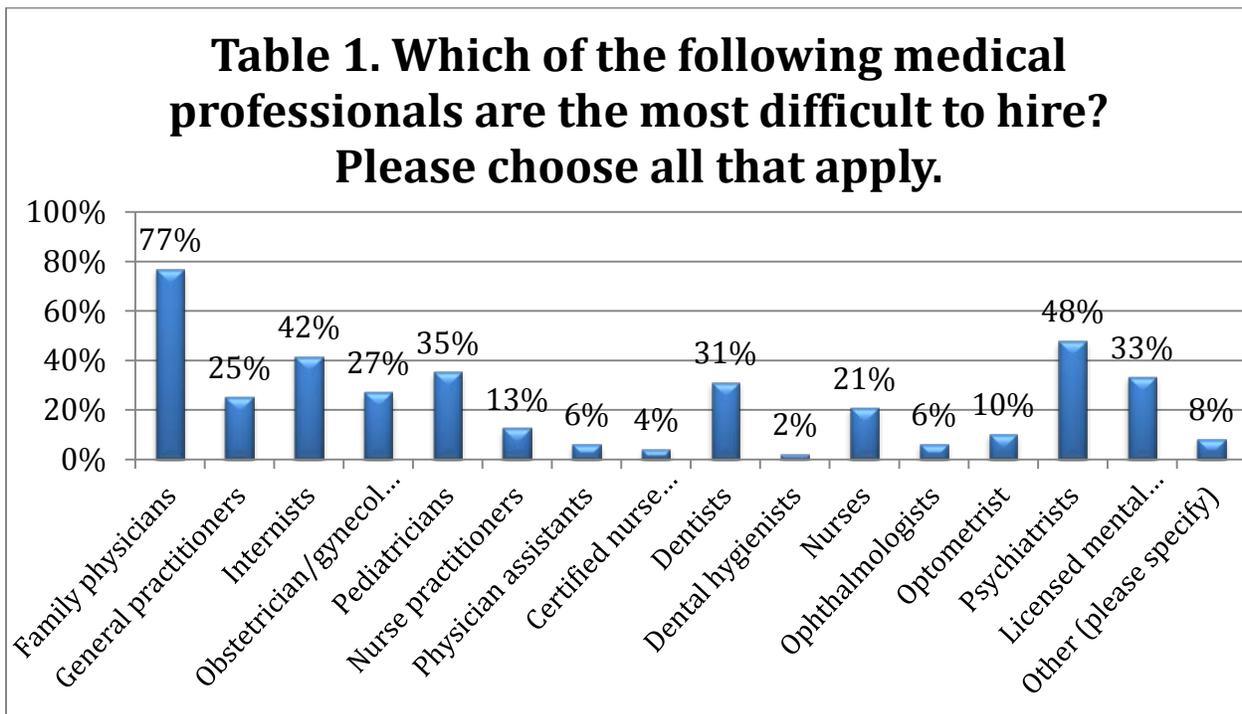
Med Centro Health Center, PR



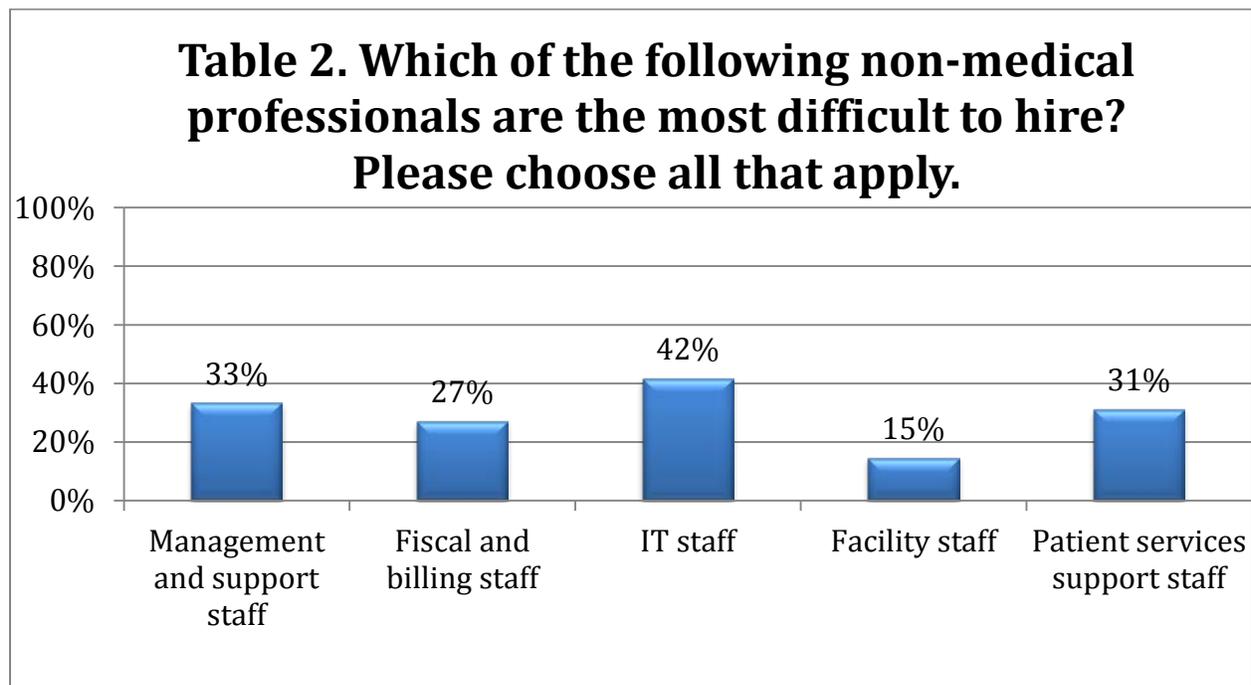
Needs Assessment:

In 2015, the **National Center for Health in Public Housing** performed a comprehensive needs assessment of all PHPC health centers in order to tailor primary care training, and technical assistance activities. This was an online survey distributed to eighty five (85) PHPC health centers who were asked to fill out a survey regarding HRSA 19-program requirements, patient populations, community outreach, services offered, and administrative processes. One hundred and five (105) PHPC grantees received an invitation via email to complete the survey. Follow-up emails were sent two weeks and four weeks after the first email invitation. In addition, a link to the survey was posted to the National Center for Health in Public Housing website on December 5, 2013. Two weeks before closing the survey, PHPC health centers that had not filled out the questionnaire were contacted over the phone and invited to complete the online survey. Fifty four (54) PHPCs responded to the survey, which represented a 63.5% response rate.

1. Staff Recruitment – Needs Assessment Results

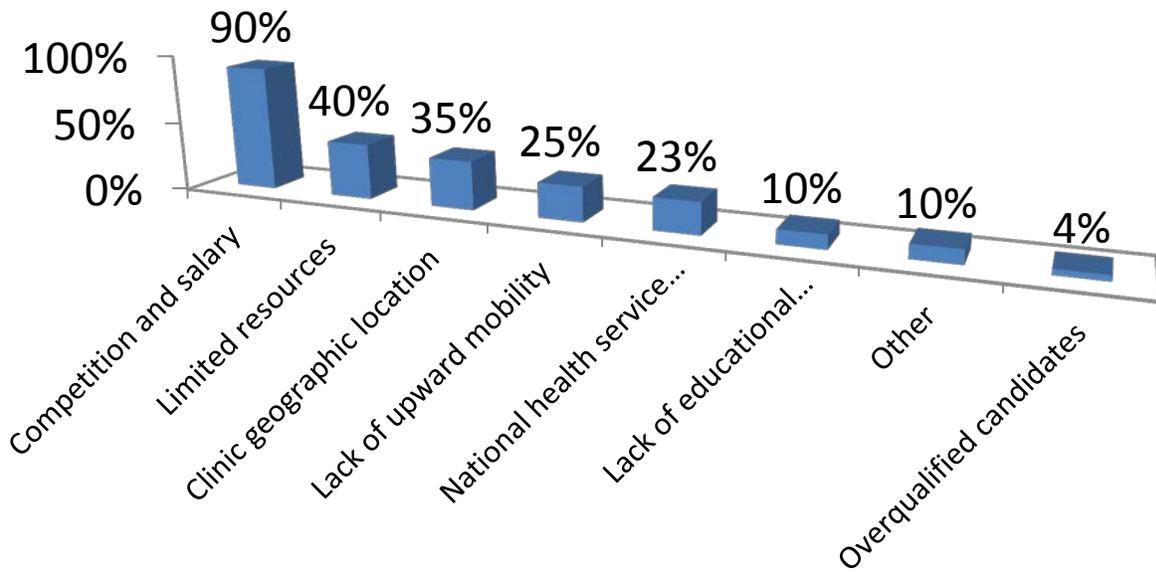


Results of the needs assessment yielded rather interesting findings. For example, when asked “which of the following medical professionals are the most difficult to hire (table 1), of the forty eight grantees who responded, seventy seven percent (77%) selected “Family Physicians” as a response; forty eight percent (48%) responded “Psychiatrists”; followed by “Internists” (42%), and “Pediatricians” (35%).



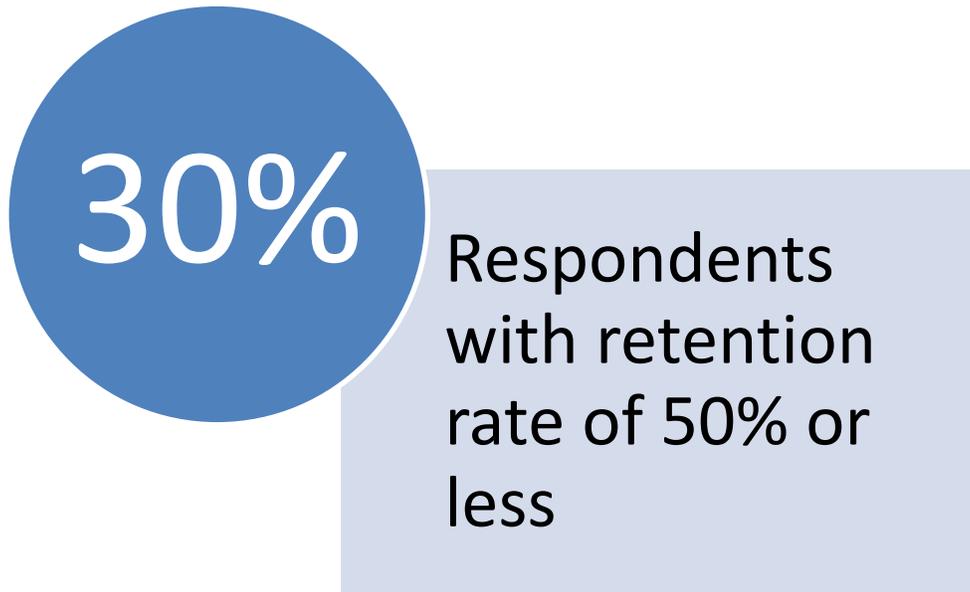
The National Center for Health in Public Housing was also interested in obtaining information on non-medical staff recruitment. When survey participants were asked about non-medical professionals who are the most difficult to hire in PHPC settings (table 2), of the Forty eight (48) participants who responded to this question, forty two percent (42%) selected IT Staff as a response, followed by Management and Support Staff (33%) and Patient Services Support Staff (31%).

Table 3. What are the greatest challenges for staff recruitment at your health center? Please choose all that apply.



In regards to staff recruitment challenges faced by PHPCs (table 3), ninety percent (90%) of the needs assessment participants responded that the greatest challenge for staff recruitment is competition and salary requirements followed by limited resources/funding (40%) and the geographic location of the clinics (35%).

2. Staff Retention – Needs Assessment Results



Hiring employees is just a start to creating a strong work force. Next, you have to keep them. Studies show that high employee turnover costs health centers in time and productivity. For instance, the 2015 PHPC needs assessment results show that 30% of PHPCs have retention rates of 50% or less (figure 1) and (table 4).

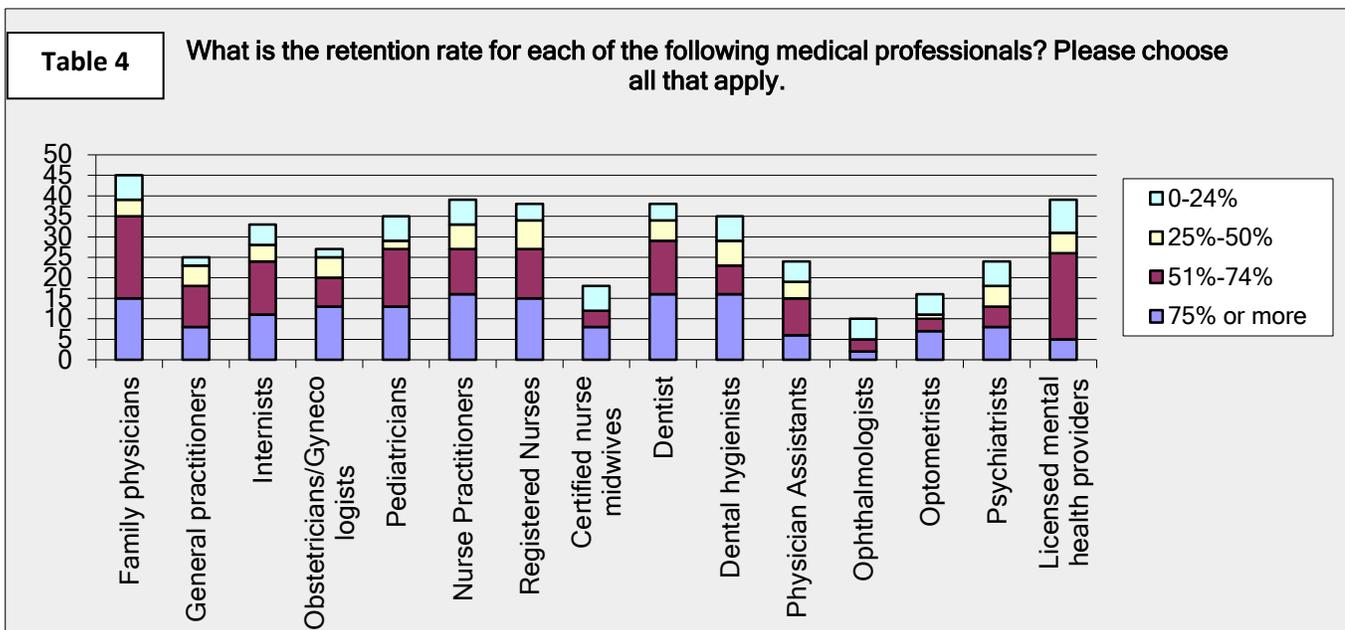
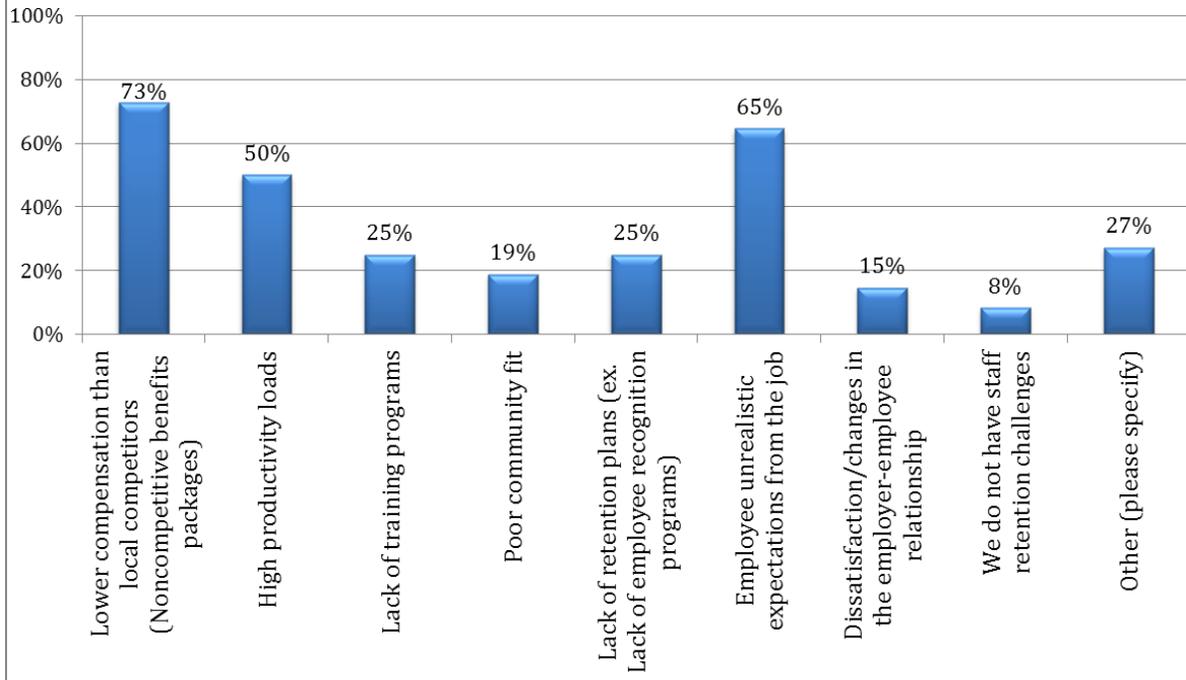
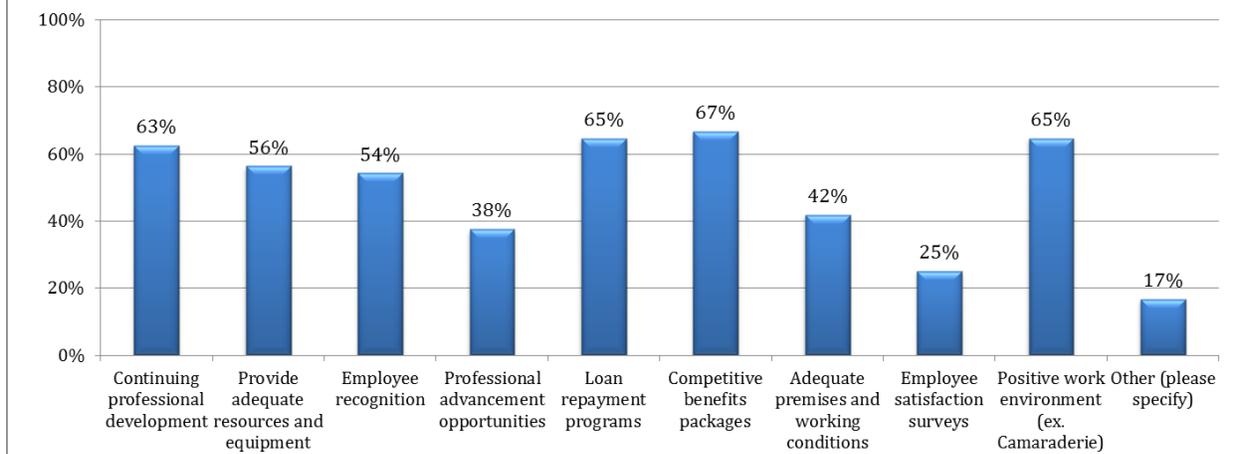


Table 5**What are the three greatest challenges for staff retention at your health center?**

According to the 2015 Needs Assessment, Table 5 reveals that the three greatest challenges for staff retention at health centers were “lower compensation than local competitors (noncompetitive benefits packages)” (73%), “employee unrealistic expectations from the job” (65%), and “high productivity load” (50%).

Table 6

What strategies have you found to be successful in improving recruitment and retention? Please choose all that apply.



There were a wide variety of strategies that respondents found to be successful in improving recruitment and retention. Out of the 48 respondents, most of them (67%) found competitive benefits packages to be successful. Loan repayment programs and positive work environments were also revealed as successful strategies by 65% of respondents.

Recommendations:

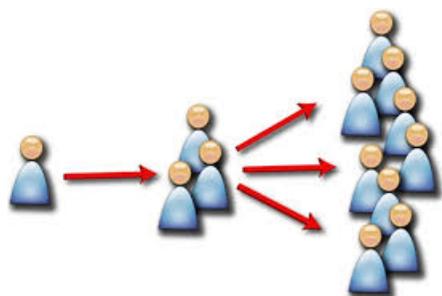
PHPC health centers are not only healthcare facilities that serve a special population with limited access to care, but PHPC health centers are also an integral part of the community they serve and vital entities of the local and statewide health care system.

Public housing must have certain qualities and skills to properly serve PHPC patients. Identifying the qualities and skills needed to be a community health center worker is perhaps the most important aspect of the recruitment and hiring process. Public housing residents working in PHPC settings must have a commitment to serving the community, be respected by their peers, desire to

grow, change, and learn. In addition, they need to have good communication skills, be friendly, respectful, outgoing, sociable, culturally competent, open-minded, nonjudgmental, and constructive in interpersonal relationships. As a result, identifying public housing residents who can work in a healthcare facility can take several months. Time invested in recruitment ensures a good match among public housing residents, the community, and job roles and responsibilities. Spending extra time on recruitment can help prevent staff turnover.

As volunteers, undergraduate medical students make significant contributions to health centers serving underserved populations. PHPCs clinical sites train pre medical students in delivering primary care services while simultaneously improving access to care in underserved communities. In return, undergraduate medical students who staff the PHPC clinics can receive course credits. Many volunteers in PHPCs health centers are planning for careers in health care and volunteering provides an early opportunity for hands-on training that would otherwise not be available to them. For medical students, volunteering at these clinics keeps them grounded as to why they decided to pursue careers in medicine in the first place, and medical students who serve community clinics generally choose primary care specialties when entering residency training.

Strategies to Recruit Public Housing Residents



A. Using Word of mouth. It is the oldest form of advertising, public relations, and spreading information and, according to the Business Week magazine, the best way to land a job is still word of mouth¹¹. All community health centers that participated in this case study mentioned that word of mouth is one of the most important strategies they use to hire public housing residents. These PHPC health centers prefer to hire a candidate who is recommended by someone they know and trust. Word of mouth recruiting comes with some disadvantages because it limits the number of applicants for consideration and discriminates against those candidates who do not have a personal connection to the community health center. However, consulting previously trained and retired community health center workers help PHPCs identify potential community health workers and personnel for administrative positions.

B. Interviewing other community members to identify candidates. PHPCs have developed relationships with the communities they serve. Community health centers serving public housing residents can turn community members into their “emissaries”, who can identify other



¹¹ The Best Way to Land a Job? It's Still Word of Mouth

<http://www.businessweek.com/articles/2012-05-31/the-best-way-to-land-a-job-its-still-word-of-mouth>

members with the desired qualifications, skills, and aptitudes for open positions and, more importantly, they can recognize those with a commitment to serving the community.

C. Obtaining ideas from well-established and well-connected community-based organizations to help identify applicants. Identifying and enlisting the support of community-based organizations is crucial for health center programs. One place to start looking for candidates for open positions at PHPCs is by surveying educational, cultural, faith-based, and social organizations in the community. Partnering with community-based organizations helps to increase diversity in hiring. These organizations are the best liaisons to the community.



D. Contacting employment offices, local job agencies, or social services offices to identify candidates. PHPCs who participated in this study mentioned that they have contacted employment offices and local job banks to look for potential candidates for administrative positions in community health centers. However, due to slim budgets, these resources are seldom used.



E. Planning community meetings (informal interviews) for all interested or recommended persons.

PHPCs can interact with potential candidates in a group setting, which is an excellent way to see their character, level of interest, working knowledge, and

communication skills. It also lets PHPCs see if candidates are a good fit with the health center culture. Interactive interviews can be conducted in different ways, but the fundamental feature is inviting selected candidates for a group session where PHPCs and current employees can engage with applicants in informal meetings. Potential candidates are given the opportunity to meet members of staff informally prior to a more formal interview, and such informal meetings should be designed to allow candidates to obtain general information about the post and its context (both physical and organizational).



F. Use of media to recruit new employees. Even though the use of social media for hiring purposes is at an all-time high, some of the community health centers interviewed did not mention the use of platforms such as Twitter, Facebook, and LinkedIn, as tools to recruit premedical students and residents of public housing. Although they are commonly thought of as effective strategies, advertising and use of media are not suggested ways to recruit premedical students and public housing residents because community health centers look for candidates that represent the community they serve and are familiar with the needs of underserved populations. However, social media is an option that should be considered in the future by PHPCs because every year more people have access to social media regardless of their



economic status. As stated by a Pew Research Internet Project “74% of online adults used social networking site in 2014.”¹²

Strategies to Recruit Medical Students:

A. Determine the Need for Undergraduate Medical Students in PHPCs.

Human resources staff must determine the role that undergraduate medical students can play in their facilities. In order to do this, PHPC leadership must identify what their staffing needs are. For instance, students can assist with patients, administrative duties, or research. Staff also needs to determine the number of students that are needed to fill available positions



B. Develop Relationships with University Programs.

Building relationships with university programs increases the likelihood that undergraduate medical students, at some point in their career, consider working for PHPC health center program grantees. Medical students will consider employment opportunities that might include working on a full-time basis, during a sabbatical year, or during some breaks. It takes a significant period of time to



build close relationships with university programs; however, once universities know about PHPC health centers and their best practices, they are more likely to use them as an example during class lectures. This can have a profound impact on the branding of PHPCs’ employment program.

¹² Social Networking Fact Sheet <http://www.pewinternet.org/fact-sheets/social-networking-fact-sheet/>



C. **Mentoring Undergraduate Medical Students.**

For medical students, having a mentor may be one of the most valuable resources on the path to becoming a health care professional. Mentoring ignites, cultivates, and prepares students to become health care professionals. Hiring prospective medical students allows the students to interact with established expert health care professionals in community health settings. Mentor sees benefit as well through greater productivity, career satisfaction, and personal gratification.

D. **Offer Opportunities to Volunteer.** Volunteer opportunities allow medical students to not only provide beneficial aid and services to underserved communities but also gain new insight into the needs of underserved populations. The work assigned to a volunteer typically includes: outreach, case management, research, and related tasks. This opportunity allows volunteers to better understand their career options and gain valuable work experience directly related to their academic field of study.



E. **Develop Research Partnerships.** Some universities and college students are interested in doing research in community health settings. As interest in community-based participatory research (CBPR) grows, there is a growing need and demand for educational resources



that help medical students build the knowledge and skills needed to develop and sustain effective CBPR. Successful CBPR partnerships among PHPCs, housing authorities, and universities demonstrate tangible benefits to all of the partners involved. All partners enhance their capacity and learn from their involvement.

F. Participate in University Job Fairs. This strategy offers PHPC health centers a recruiting tool that helps them target medical students and increases visibility of their recruiting initiatives across one or more college sites. Job fairs offer students the opportunity to speak with PHPC health centers and learn about internships and career paths. University job fairs offer PHPCs the opportunity to interact with potential candidates in a group setting, which is an excellent way to see their character, level of interest, working knowledge, and communication skills. It also lets PHPC health centers see if students are a good fit with their corporate culture.



Conclusion

The PHPC workforce has increasingly been recognized as playing a major role in addressing cultural/linguistic competence, quality of patient care, and health disparities). Recent reports indicate that health professionals from racial and ethnic minority groups are more likely to serve vulnerable and underserved populations, such as low-income patients, the uninsured, and those in geographically underserved areas. PHPCs should not just recruit and retain students from racially/ethnically diverse groups, but attract such

students to health professions. The undergraduate level is an excellent time to nurture future interest in pursuing a career in the primary healthcare, yet few training programs focus on the beginning of the pathway/pipeline, the undergraduate student.

There are unique challenges that come with working in PHPC health centers. The workload may be more diverse in terms of the number of patients, patients' age, medical conditions, and needs, and may require developing competencies in areas such as outreach and enrollment, IT, and enabling services. PHPCs face great recruitment and retention challenges – keeping up with competitive salaries, high productivity requirements, paperwork, insufficient resources to respond to diversity, etc. Public housing residents offer a new candidate pool to PHPCs. They also help to alleviate the burden of staff turnover. PHPCs can enhance their recruitment and retention strategies by participating in community professional activities, developing a relationship with the community, and mentoring public housing residents. In addition, PHPCs need to offer continuing professional development, resources and equipment, and provide advancement opportunities to promote retention through recognition. No matter how well-managed and happy a staff is at any PHPC health center, vacancies will open and new staff members need to be recruited. PHPC management needs to plan how to reach a broad pool of candidates. This strategy of recruiting undergraduate medical students and public housing residents who may be interested in working in community health care settings is noteworthy and worth incorporating into a sound recruitment and retention plan.

List of Appendices

Appendix 1: Workforce Recruitment and Retention Interview Guide

Recruiting and retaining an adequate workforce continue to be a challenge for many community health centers (CHCs). High turnover has been reported by health centers and continues to be a problem. CHCs require a stable, highly trained and fully engaged staff to provide effective levels of patient care. Competitive disadvantages not only result in significant vacancies, but also results in a growing number of health facilities that deny or delay services, which may worsen health care disparities in medically underserved communities. As the nation grows more diverse, the disparity between the racial and ethnic composition of the health care workforce and that of the U.S. population widens as well. The purpose of this survey is to identify workforce recruitment and retention of health center staff with HRSA/BPHC grantee organizations. Specifically, [The National Center for Health in Public Housing](#) is looking for PHPC grantees that have successfully recruited and retained medical students and residents of public housing for administrative positions. The findings of this survey will be used to develop workforce recruitment and retention resources for PHPC grantees.

This survey will take about 10-15 minutes to complete. If you have any questions about this investigation, please contact Dr. Jose Leon, Clinical Quality Manager for the National Center for Health in Public Housing, directly by phone (703) 812-8822 ext. 250 or by email: jose.leon@namgt.com

Remember our training and technical assistance is FREE! Please visit our website: www.nchph.org or call us at (703) 812-8822. We will be happy to assist you.

1. Please fill out the following information about you and your center.

Name: [Click here to enter text.](#)

Organization: [Click here to enter text.](#)

Address 1: [Click here to enter text.](#)

Address 2: [Click here to enter text.](#)

City/ Town: [Click here to enter text.](#)

State/ Province: [Click here to enter text.](#)

Zip/ Postal Code: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

2. What populations do you serve? Please choose all that apply.

Homeless

- Migrant/agricultural worker
- Public Housing Residents
- Lesbian, Gay, Bisexual, and Transgender
- HIV/AIDS
- Senior
- Children
- Veterans
- Other. Please explain: [Click here to enter text.](#)

3. How many clinical sites do you operate? [Click here to enter text.](#)

4. Are the health center(s) located in urban or rural areas?

- Urban
- Rural
- Both

5. Is your health center located on public housing property?

- Yes
- No

I. **Premed Students: (nurses, physicians, counselors, medical assistants, audiologist, etc.)**

6. How many people does your community health center employ?

7. Based on your workforce and the number of patients you serve, have you ever implemented strategies to identify and recruit medical students, so they can volunteer in your community health center(s)?

- Yes
- No

8. Have you ever contacted medical programs and inform them of your organization and professional opportunities?

- Yes
- No

9. Does your community health center have any partnerships with universities/colleges so medical students can volunteer at your clinic(s)?

- Yes
- No

10. If yes, what universities/colleges do you have partnerships with?

Please list: [Click here to enter text.](#)

11. In general, what resources do you use to search for and generate a pool of candidates?

- Clinical schools
- State medical/dental/associations
- Local/county Medical/Dental Associations
- Advertising
- Recruitment firms
- Health and medical internet sites (ex. APHA, AMA, etc.)

12. Do you offer these job positions as regular part-time activities, summer-time opportunities, or both?

Please explain: [Click here to enter text.](#)

13. What educational requirements/qualifications are needed?

Please explain: [Click here to enter text.](#)

14. Do you offer on-site training? (ex. Culturally and linguistically appropriate standards, electronic health records, ICD 9/10, etc.)

- Yes
- No

Please explain: [Click here to enter text.](#)

15. Is prior experience required?

- Yes
- No

Please explain: [Click here to enter text.](#)

16. Do you offer any incentives?

- Yes
- No

If yes, please explain types of incentives. [Click here to enter text.](#)

17. Please list the activities that undergraduate medical students can do at your site

- Interpreter
- Patient Advocate
- Receptionist
- Health Educator

- Laboratory Worker
- Community Health Outreach
- Case Management
- Other. Please specify: [Click here to enter text.](#)

18. Please briefly describe any benefits or challenges when hiring premed students:
[Click here to enter text.](#)

19. What is your overall opinion in recruiting premedical students:

- Completely satisfied
 - Very satisfied
 - Satisfied
 - Somewhat satisfied
 - Not at all satisfied
-

II. PH Residents:

20. Do you recruit public housing residents for administrative positions?

- Yes
- No

21. If yes, what type of activities do they perform?

- Interpreter
- Patient advocate
- Receptionist
- Health educator
- Community health outreach
- Other. Please specify: [Click here to enter text.](#)

22. Is prior experience required?

- Yes
- No

20. What minimum education level or qualifications are needed?

[Click here to enter text.](#)

23. Do you offer on-site training?

- Yes
- No

Please explain: [Click here to enter text.](#)

24. What resources do you use to search for and generate a pool of candidates?

- Advertising (journals or other media, such as the Internet)
- Recruitment firms
- Person-to-person recruitment, such as resident programs, job fairs
- Direct marketing (mailing lists, postage)
- Printing materials (display ads, brochures, flyers)
- Job search websites

25. How do you do your candidate screening?

- Phone interview
- Credential checks
- Reference checks

26. Please briefly describe any benefits/challenges when recruiting public housing residents

[Click here to enter text.](#)

27. What is your overall opinion in recruiting residents of public housing:

- Completely satisfied
 - Very satisfied
 - Satisfied
 - Somewhat satisfied
 - Not at all satisfied
-

Appendix 2 – Needs Assessment/ Staff Recruitment and Retention

Staffing

1. What percentage of the health center employees are veterans?

- 0-4%
 5-9%
 10% or more

2. Which of the following medical professionals are the most difficult to hire? Please choose all that apply.

<input type="checkbox"/> Family physicians	<input type="checkbox"/> General practitioners	<input type="checkbox"/> Internists	<input type="checkbox"/> Obstetrician/gynecologists	<input type="checkbox"/> Pediatricians
<input type="checkbox"/> Nurse practitioners	<input type="checkbox"/> Physician assistants	<input type="checkbox"/> Certified nurse midwives	<input type="checkbox"/> Dentists	<input type="checkbox"/> Dental hygienists
<input type="checkbox"/> nurses	<input type="checkbox"/> ophthalmologists	<input type="checkbox"/> Optometrist	<input type="checkbox"/> Psychiatrists	<input type="checkbox"/> Licensed mental health providers

3. What is the retention rate for each of the following medical professionals? Please choose all that apply.

	0-24%	24%-50%	50%-74%	75% or More
Family physicians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General practitioners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
internists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obstetricians/Gynecologists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pediatricians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nurse Practitioners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registered Nurses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Certified nurse midwives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental hygienists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physician assistants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ophthalmologists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
optometrists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatrists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Licensed mental health providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Which of the following non-medical professionals are the most difficult to hire? Please choose all that apply

- Management and support staff
- Fiscal and billing staff
- IT staff
- Facility staff
- Patient services support staff

5. What are the greatest challenges for staff recruitment at your health center?

- Competition and salary requirements
- Limited resources
- National Health Service Score Designation
- Geographic location of your clinical sites
- Lack of educational opportunities
- Lack of upward mobility
- Overqualified candidates
- Other

If other, please explain

[Click here to enter text.](#)

Retention

6. What are the three greatest challenges for staff retention at your health center? Please choose all that apply.

- Lower compensation than local competitors (Uncompetitive benefits packages)
- High productivity loads
- Lack of training programs
- Poor community fit
- Lack of retention plans (ex. Lack of employee recognition programs)
- Employee unrealistic expectations from the job
- Dissatisfaction/changes in the employer-employee relationship
- Other
- We do not have staff retention challenges

If other, please explain

[Click here to enter text.](#)

7. What strategies have you found to be successful in improving recruitment and retention? Please choose all that apply.

- Continuing professional development
- Provide adequate resources and equipment
- Employee recognition
- Professional advancement opportunities
- Loan repayment programs
- Competitive benefits packages
- Adequate premises and working conditions
- Employee satisfaction surveys
- Positive work environment (ex. Camaraderie)
- Other

If other, please explain

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