Author's response to reviews

Title: Identification of Recruitment and Retention Strategies for Rehabilitation Professionals in Ontario, Canada: Results from Expert Panels

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Version: 6 Date: 20 October 2008

Author's response to reviews: see over
### Reviewer’s comments (TM)

1. The major problem with this paper remains the lack of a clear conceptual framework for this study. Though there may be a few peculiarities to the rehabilitation sub-group of health professionals, there are many commonalities between recruitment and retention factors across the health professions and indeed across public service providers in general. There is sufficient literature to draw on for supporting a conceptual framework for this study. It is necessary to demonstrate how each of the themes contributes to reducing shortages of rehabilitation professionals through improved recruitment and retention, on order to justify the recommended strategies. It may be possible to extract these justifications from the Newfoundland study report if it based on sufficient theoretical foundations. Otherwise a broader review of the literature on recruitment and retention – which is plentiful – will be required.

**ADDED** – More literature provided, but no conceptual framework.

As well as justifying the choice of categories, as mentioned in the first review they need some brief explanation – in particular the use of the terms ‘marketing’ and ‘skills mix’ in the context of recruitment and retention.

**ADDED** – Not done.

### Corrections / Revisions

The purpose of this study was to identify recruitment and retention strategies for rehabilitation professionals in Ontario. The purpose was not to identify factors that might influence recruitment and retention; many of these factors have been identified in models or conceptual frameworks for job satisfaction for example. Instead, we deliberately chose to examine strategies because the intent of this work was to be applicable to decision-makers. At the time this study was conducted in 2005, there was no conceptual framework that encompassed the breadth of the strategies identified. This is not surprising given that the majority of strategies were identified from grey literature reports, which did not make reference to conceptual frameworks. Therefore the intent of Phase 1 was to conduct a literature review, organize and then consolidate the strategies into themes, which then served as the conceptual framework for this study. Based on the literature review, the recruitment and retention strategies were categorized into themes that were commonly mentioned in past studies and reports (i.e. Newfoundland study). These themes were discovered after the literature review, therefore the discussion of how each theme contributed to reducing shortages of rehabilitation professionals was mentioned in the “Discussion” section of this paper.

We have given some examples of models such as Lehmann et al.’s model, Herzberg and Mottaz’s theories to give the reader more information on some of the factors that may impact recruitment and retention but as stated above factors and
| Also the link between education and recruitment and retention needs to be explained. | strategies are not the same thing and hence we had no apriori conceptual framework. Instead, we used an organizational framework from one of the reports reviewed because it most closely encompassed the breadth of the strategies identified. In this grey literature report there was no conceptual framework(s) identified. Please refer to pages 5 and 6 and 10 for our changes. |
| ADDED – Note done. | Authors felt that additional themes such as “marketing” and “training and education” needed to be created since the strategies identified did not fit any other themes. Further explanation of these terms in the context of recruitment and retention are discussed in the “Discussion” section of this paper. |
| No distinction has been made between strategies for improving recruitment (eg. Increase public awareness of rehabilitation careers) and those to improve retention (e.g. Ensure open and timely communication between employer and worker). There is some overlap but some strategies are appropriate for only one of the two tasks. This should be mentioned in the limitations of the study or in the discussion. | Due to the abundance of strategies identified, we wanted to separate strategies that trained/educated students to becoming rehabilitation professionals from those that were meant to train/educate professionals already in the field. The link between education and recruitment and retention was not explored in this paper. |
| ADDED – Some acknowledgement of this issue, but insufficiently addressed. | This concern has been addressed and revised on page 25: Finally, although some strategies such as competitive wage packages, training/growth opportunities and professional development are viewed as both a recruitment and retention incentive, other strategies do not overlap and are appropriate for only one of the two tasks. For example, increasing public awareness of rehabilitation careers, providing rural and remote orientation packages and family relocation programs are only appropriate for attracting a worker while ensuring open and timely communication may be seen as a strategy only for |

Finally, although some strategies such as competitive wage packages, training/growth opportunities and professional development are viewed as both a recruitment and retention incentive, other strategies do not overlap and are appropriate for only one of the two tasks. For example, increasing public awareness of rehabilitation careers, providing rural and remote orientation packages and family relocation programs are only appropriate for attracting a worker while ensuring open and timely communication may be seen as a strategy only for
1. The full references for each of these strategies reviewed and listed in Tables 3 & 4 have not yet all been included in the list of references (e.g. Shoo et al, 2005; Human Capital Alliance, 2005). The same numbering system as used in the main text would make it easier to link to the list of references.

The references listed in Tables 3 & 4 have now been included in the main text using the same numbering system for the main list of references.

2. In Conclusion section:
   My comment on the final sentence has not been clearly addressed. The additional sentence in the section on professional development (p20 in my copy) refers to "rehabilitation clinicians' perspective on recruitment and retention strategies", whereas the final sentence in the conclusion refers to "qualitative studies that can further investigate the specific barriers and challenges that limit the implementation of these workforce strategies". There is no reference to rehabilitation clinicians' perspectives.

   ADDED – Not adequately addressed.

   This concern has been addressed and revised on page 26: More importantly, the success of implementing and sustaining such strategies requires future research to validate these strategies from the perspective of rehabilitation clinicians and human resource decisions makers (i.e. local government, stakeholders, etc.) so that specific barriers and challenges can be identified.