

# Retention of Health Human Resources in COVID-19 pandemic Condition



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## Abstract

**Introduction:** Health is a multifaceted issue and providing and promoting all its dimensions is an interdisciplinary task. Examination of crisis conditions shows that the retention of health human resources is very important due to the high volume of work in these conditions. Due to the severity of the prevalence of COVID-19, the health system must have an acceptable plan for dealing with this disease. Therefore, the purpose of this study is to investigate the factors affecting the retention and stability of human resources in crises.

**Methods:** We used a critical review method using specific keywords (“human resources retention”, “COVID-19”, and some other related keywords) in, Pubmed, Scopus, Google Scholar, and SID databases until September 2022 without time limitation. Reviewers screened founded studies separately and finally, we summarized the main results of 12 eligible articles.

**Results:** Four main strategies (Organizational management and leadership, risk reduction, improving the mental health of health workers, and financial and welfare support) are possible solutions to reduce healthcare workers' burnout and increase their resilience to this hard situation.

**Conclusion:** It seems that planning, appropriate policy-making to implement the solutions found, division of tasks, and compilation of a national document on human resource protection in crises with the cooperation of people and officials can be very helpful.

**Keywords:** Retention; Human Resources, COVID-19, pandemic, management.

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## Introduction

COVID-19 is a historic health pandemic that has rattled the whole globe, producing a great deal of fear and concern since its emergence. The pandemic has had a substantial impact on economies, communities, businesses, and institutions, particularly healthcare organizations<sup>1</sup>. This circumstance started in December 2019 in Wuhan, China, when severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) arose for the first time. On 11 March 2020, the WHO declared a worldwide pandemic due to its quick spread and the severity of its morbidity and mortality of it<sup>2</sup>.

Due to the quick rate of transmission of the COVID-19 infection, a lot of nations have developed non-pharmaceutical defenses, such as social isolation, to

prevent its spread. People will be quarantined as a result of these measures, as will schools and colleges, including healthcare education institutions and related organizations, and restrictions such as travel restrictions, aircraft cancellations, and limits on big public and social gatherings<sup>3</sup>.

In turn, these effects impacted the smooth operation of healthcare facilities and their grant functioning in terms of human resource management (HRM) staffing, training, performance, health, and safety management, as well as the managing of employee relations; organizational culture; and inventive performance<sup>4</sup>.

Healthcare workers (HCWs) are at the core of the direct response to COVID-19, as they are at a greater risk of contracting the illness and exposing others. Thereupon,

HCWs endure a huge strain from COVID-19, with hospital non-emergency hospital ward workers and nurses seeming to be the most frequently infected personnel<sup>5</sup>. A significant proportion of low-risk persons with mild COVID-19 reported a variety of long-term symptoms that impacted professional, social, and home life, according to the findings of a study<sup>6</sup>. In this situation, retention of the health human resources becomes a serious priority. This study aims to gather the different experiences and solutions in pandemics with a critical approach to summarize and suggest them hoping that it will be useful and will increase the quality of morale of the treatment staff and consequently improve the service to the patients of Covid-19 and pass this pandemic.

### Methodology

We searched international (Scopus, Google Scholar, and PubMed) and national (SID) databases to identify relevant studies in September 2022, with no time limitations. Relevant keywords and following the critical review method by Carnwell and Daly approach<sup>7</sup> To ensure the adequacy of samples, keywords related to the concept of "human resources retention" were used, including "human resource", "job satisfaction", and "job turnover". Other keywords were "COVID-19", and "health worker". Also, reference lists of the selected articles were screened. After that, two independent reviewers screened the titles and abstracts of the founded articles. Secondly, two independent reviewers screened the identified articles. In case of a disagreement, a consensus was reached through discussion or if necessary, a third reviewer was consulted. A total of 4624 articles were evaluated, of which 12 were found eligible. Conceptually rich articles (referring to human resources retention during crises and other related concepts) were included. Studies related to other fields than healthcare were removed. Eligible studies were reviewed by four independent reviewers and using the critical review method, the main concepts were extracted. Then, the extracted concepts were discussed by all researchers to understand the concept of human resources retention in crisis and to develop strategies to strengthen the retention of human resources during crises.

### Results

Different studies presented various strategies to strengthen the retention of health human resources during crises. These strategies can be categorized into four groups: organizational management and leadership, risk reduction, improving the mental health of staff, and financial and welfare support (Figure 1). In contrast to other crises (e.g. trauma), biological crises such as the COVID-19 pandemic because of high rates of

involvement (being infected with COVID-19) among health staff and their inevitable job absence; hence, our scenario was developed based on a biological crisis, such as the COVID-19 pandemic. Here we are going to explain these strategies in more detail:

#### Organizational management and leadership

One of the main strategies is organizational management and leadership. Studies mainly recommend continuous communication between medical staff and their leaders<sup>8</sup>. Therefore, managers have an important role, as coordinators, in promoting communication, creating synergy, group cohesion, and empathy among medical staff, overcoming fear and challenges, and providing emotional and administrative support during a crisis<sup>9-11</sup>. Managers should reduce job stress<sup>9,10</sup>. Strengthening managerial support, including acknowledging health staff for their dedication and emphasizing the need for teamwork for successful control of the pandemic, were among the important factors<sup>9</sup> because encouragement by managers can promote staff morale<sup>8,11</sup>. Staff engagement in addressing organizational problems and making decisions is necessary<sup>9,10,12-14</sup>.

Provincial managers and regional institutions should have the necessary authority to make decisions regarding human resources affairs<sup>9,15</sup>. Empowering medical staff using problem-solving strategies is necessary to achieve organizational learning<sup>10,16</sup>. For instance, training on how to use personal protective equipment (PPE), infection control, cleaning methods, disinfection, and intensive care unit<sup>2,10</sup>. Creating a central and up-to-date health information system to develop protocols and to share challenges, achievements, and expectations of the system can help employees to better achieve the specified goals<sup>9</sup>.

- **Risk reduction**

Another strategy is to reduce the risk of infection. Prioritizing health staff to access Personal Protective Equipment (PPEs) and having a safe work environment are important motivators of health staff<sup>13</sup>. Practical measures are needed to ensure health staff protection against COVID-19 infection (e.g. using PPE, pharmaceutical interventions, and vaccination)<sup>8-10,13,14,17</sup>. Also, health staff should be trained on how to use PPEs (donning and doffing) to reduce the risk of infection<sup>13</sup>. In this regard, receiving international donations is of crucial importance<sup>9,13</sup>. Increasing in-time access to diagnostic tests and effective assessments for monitoring the health of medical staff and providing necessary equipment to reduce the risk of infection among health staff or the community is also effective<sup>8,14</sup>.



**Figure 1:** Retention Strategies of Human Resources

As the workload of health staff and their infection risk have increased substantially, work schedules should be adjusted <sup>8,9,12,13</sup>, particularly for those who are at increased risk of infection. Using creative methods such as protecting colleagues from COVID-19, following an eagle-eye observer approach<sup>13</sup> and addressing the identified factors, promoting mobile health and telemedicine to prevent unnecessary referrals and concerns regarding transmitting the infection to the family members<sup>8-10</sup>, and sharing experiences from previous epidemics and new experiences regarding the current pandemic<sup>10</sup>, are important for COVID-19 management.

### Improving the mental health of staff

Another important strategy is improving the mental health of health staff. According to the literature, burnout plays an important role in promoting mental health <sup>8-10,12,13,17</sup>. The workload can be reduced by work division or job rotation, which also strengthens the sense of unity and cohesion<sup>8</sup>. In addition, unnecessary administrative activities should be reduced<sup>10</sup>. Protective measures and rapid screening tests should be considered to address the concerns regarding transmitting the disease to the family members. Also, this concern can be addressed by providing accommodations<sup>13,14,17</sup>. Society should not consider health staff as carriers of the disease, which is a stigma, as it may reduce their self-esteem and sleep quality and causes increased anxiety<sup>13</sup>. Counselors or social professionals, with experiences from previous crises, can be invited to consult health staff concerning their mental problems or family-work interference <sup>9,12,13</sup>. Moreover, the potential of social media can be used to communicate psychological messages and share news

about recovered patients to improve the morale of health staff. In addition, telecommunication platforms can be used to hold training workshops about how to deal with stress<sup>10,13,14,17</sup>. Medical staff should be considered important players and their engagement in decision-making processes are useful. Playing sedative music in hospitals can be effective in reducing anxiety. When one of their colleagues is deceased, health staff should have the opportunity to mourn and hold religious ceremonies<sup>10</sup>. In addition, national and organizational leaders should visit clinical facilities, at the forefront of the COVID-19 pandemic, to ensure health staff that their concerns are understood <sup>9,15</sup>.

- **Financial and welfare support**

The last important solution in this review is financial and welfare support. During the COVID-19 pandemic, HCWs are at the forefront of the fight against disease, and, similar to the war conditions, financial support has crucial importance. First of all the most basic needs must be addressed, including meals at work <sup>9,13,14,17</sup>, adequacy of medicines <sup>9,15</sup>, and appropriate accommodation, particularly for those with changing work schedules and those who live far from the hospital<sup>14</sup>, break-work plan (having a short rest after some hours of working), and allocating a particular place for rest <sup>9,10</sup>, reducing work hours per each shift by increasing the number of shifts, etc. Then, the institutionalization of the sense of importance by granting them some privileges, which in turn results in motivation. Access to appropriate care and quarantine arrangements for either personnel or their family members in the case of infection as well as considering financial compensation to the families of those who lose their lives<sup>8,14</sup>. Moreover, they should be prioritized for COVID-19 testing, using ICU beds, medicines, vaccines, and receiving treatment<sup>13</sup>. Other important issues include paying extra payments to those working at COVID-19 wards and providing child care <sup>13,14</sup>.

Managers of medical universities and hospitals can facilitate achieving these goals by redirecting the available resources. Employees' welfare activities can be provided if sufficient funds are allocated. In addition, to compensate for the effect of high inflation rates, extra payments can also be defined.

### Discussion

In the present study, we discussed four main strategies (organizational management and leadership; risk reduction; improving the mental health of staff; and financial and welfare support). Since covid-19 pandemic is still considered a novel problem with a global conflict,

our study limitation was to find some articles with a comprehensive human resource approach to this newly emerged pandemic<sup>8</sup>. Mentioned job motivators and measures to reduce doubts as the most important factors. They mentioned preventing infection by using PPEs and antiviral drugs, and vaccination as effective supportive interventions. Also, the community and employers should mobilize available resources to prevent infection among family members of medical teams, in addition to themselves, and there should be compensation to families of those who lost their lives. The positive intervention of the government and hospitals is the strongest incentive for medical staff to work hard and reduce their absenteeism during a crisis. These findings are in line with previous studies<sup>8-10,15</sup>. However, it seems that it is necessary to develop a national and strategic document on how to retain health staff during a crisis, mainly to determine the responsibilities of various sectors and institutions by considering the national priorities and national expediencies by obtaining expert opinions. In addition, scientific, decisive, and binding preventive mechanisms should be established with effective monitoring to prevent the spread of the disease and reduce its burden. Also, early diagnosis using increasing the rate of PCR tests per population and identifying, tracking, and follow-up of potential cases are necessary. Special support should be provided to medical centers and hospitals (both public and private) and increasing access to PPEs in various departments, particularly the ICU. Providing PPEs for medical staff, increasing the number of staff, and allocating more financial resources, are necessary measures.

Some studies mentioned the important impact of mental health and prevention of burnout in improving the morale of employees and, eventually, their retention in the health system during crises and provided solutions such as job rotation, work division, reducing the administrative burden of clinical staff, prioritizing medical teams and their families in receiving healthcare services, improving the community perspective to health staff, and effective use of social media, which are consistent with the findings of the present study. Considering the high impact of internal motivations on productivity, efficiency, and retention of human resources and the close association between this issue and the morale of personnel, the mental health of medical teams should be prioritized<sup>8-10,12-15,17</sup>. Medical and paramedical students volunteering during the COVID-19 pandemic should not be ignored, and in this line, we recommend paying more attention to the use of the services of volunteers. . it is recommended to observe strategies proposed to reduce the risk of COVID-19 transmission such as general vaccination, staying at home,

social distancing, reducing the working hours in public and private sectors, closure of schools and recreational places, avoiding unnecessary trips, penalizing those who do not wear a mask in public settings and, most importantly, increasing the level of knowledge and information of the public through mass media<sup>8-10,13</sup>. Authorities should do their best to perform these strategies. Also, by strengthening information communication technology to increase the availability of electronic government services, including telemedicine, unnecessary travel and gatherings can be prevented. Such services are also useful to expand electronic health services, including telemedicine. Furthermore, financial and welfare support should also be considered. d. Despite the previously conducted measures, COVID-19 is spreading fast still, which, if not controlled, will continue its rise. Consequently, high-level cooperation between people and authorities is necessary to cope with the COVID-19 pandemic, with special emphasis on public health protocols. In addition, appropriate planning and policy-making for applying the proposed solutions and dividing responsibilities among institutions involved in crisis management, especially during the COVID-19 pandemic, and finally compiling a national document on the retention of human resources during crises would be useful in this line.

#### **Conclusion:**

Since the COVID-19 pandemic has not yet ended and still consecutive peaks occur, the need to increase human resources resilience is much more felt today. Hence, governments should focus on their health workers and reduce their burnout causes and improve their motivation to deal with this situation. Organizational management and leadership, risk reduction, improving the mental health of staff, and financial and welfare support are four recommended solutions by different studies to achieve this important goal.

#### **Authors' Contributions**

A.B: conception and design of the study, data collection, writing the manuscript

M.Gh: conception and design of the study, data collection, writing the manuscript

M.P.Kh: data collection, writing the manuscript

M.M.Z: data collection, writing the manuscript

T.N: conception and design of the study, editing the manuscript

A.S: conception and design of the study, data collection, writing the manuscript

All authors have read and accepted the final version of the manuscript.



### Conflict of Interest Disclosures

The authors declare that they have no conflict of interest.

### Ethical Approval

As the present paper is a review study, ethical approval is not indicated.

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#### Review highlights

##### What Is Already Known?

Health is a multifaceted issue and providing and promoting all its dimensions is an interdisciplinary task. Due to the severity of the prevalence of COVID-19, the health system must have an acceptable plan for dealing with this disease.

##### What Does This Study Add?

According to the literature, four main strategies: a) Organizational management and leadership, b) risk reduction, c) improving the mental health of health workers, and d) financial and welfare support are possible solutions to reduce healthcare workers' burnout and increase their resilience to this hard situation.

It seems that planning, appropriate policy-making to implement the solutions found, division of tasks, and compilation of a national document on human resource protection in crises with the cooperation of people and officials can be very helpful.

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