How Recruitment and Staffing in the Healthcare Industry has been Impacted by the COVID-19 Pandemic

Jake O'Neil

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How Recruitment and Staffing in the Healthcare Industry has been Impacted by the COVID-19 Pandemic

Jake O’Neil

Submitted in Partial Completion of the Requirements for Departmental Honors in Management

Bridgewater State University

May 8, 2023

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Date: May 8, 2023

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How Recruitment and Staffing in the Healthcare Industry has been Impacted by the Covid-19 Pandemic
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Executive Summary
Healthcare is an essential industry within America and the world at large and in my home state of Massachusetts. When COVID-19 arrived in America we saw that the entire country come to a halt. During all of this, the healthcare industry kept its door open, and personnel continued to treat patients. During the pandemic, the healthcare industry was a constant area of concern and attention. Given the trauma and reverberating impacts of the COVID-19 pandemic; it must be asked what effect this had on the healthcare industry. More specifically, it must be examined how this has affected the healthcare workforce both in the areas of staff recruitment and retainment. Examinations of the impacts on the healthcare workforce were conducted utilizing literary review and interviews. I conducted two separate interviews with two different human resources professionals in the healthcare industry. Through these methods, the major impacts on the healthcare industry in the areas of staff recruitment and retainment were discovered. This included burnout, longer hiring times, and the age of the population. Solutions were also discovered which included employee flexibility, compensation, and both short and long terms staffing alternatives.
Introduction
The COVID-19 pandemic has forever changed the world as we know it has undoubtedly led to noticeable changes within the healthcare industry. As previously stated, the healthcare industry was right on the frontline and personnel were among the groups of essential workers exposing themselves to the virus. Given the historic nature of this event, it must be seen what effect COVID-19 had on recruiting new individuals to the field of healthcare. Recruitment is defined as, “the process through which the organization seeks applicants for potential employment” (Noe et al.). Recruitment plays a vital role for any organization. Recruitment is the process by how individuals both internal and external come to have new roles in an organization. Multiple studies have shown a close link between the performance of an organization and that organization’s recruitment and selection process (Alola and Alafeshat 2019).

Also, it must be seen what effect COVID-19 had on retaining members of the healthcare industry who had been working prior to the onset of the pandemic. According to dictionary.com, the definition of retainment is, “to keep possession of” (Dictionary.com). In the context of this study, this would be keeping hold of staff or that staff would continue to stay with an organization. A 2022 article from the International Journal of Management and Information Technology, highlighted the importance of staff retention or retainment. Firstly, it stated that, “Employee retention is critical to an organization’s long-term stability, development, and profitability.” (Krishna and Garg 2022). Furthermore, it mentioned the high costs associated with hiring or recruiting new members to your organization’s staff. To quote the article, “the cost of recruiting a new employee to a company ranges from half to 200 percent of the previous employee’s compensation (Krishna and Garg 2022). Multiple factors and impacts have been discovered from sources both academic and non-academic sources relating to issues in healthcare
and COVID-19. Proper attention should also be drawn to other factors that have caused issues in the healthcare industry which are not strictly related to COVID-19. Outside of COVID-19, concerns include the aging population. The aging population is a double-edged sword as it is simultaneously taking people out of the workforce and then requiring these people to need care. Direct care workers are and continue to be essential to treating this ageing population. However, although these jobs are essential, individuals in these positions see a tough work environment and poor compensation (Espinoza). A similar issue to this is that we are seeing less individuals studying in post-secondary education to be able to work in healthcare (Redford 2019). The decline in births has resulted in there being a drop in college enrollment numbers (Redford 2019). The application process for the healthcare industry is complex and it often takes a long time for staff to be hired. Applicants must go through multiple screening procedures and often wait in the queue a long time for a decision. According to a 2022 Viventium article, the average time to hire a candidate is 49 days. Burnout has been seen among staff in the healthcare industry. According to WHO, “Burnout is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed” (WHO). Furthermore, according to WHO, there are three factors of burnout which are, “feelings of energy depletion and exhaustion, increased mental distance from one’s job, or feelings of negativism or cynicism related to one’s job; and reduced personal efficacy” (WHO). While not a medical condition, burnout has been included in WHO’s 11th Revision of the International Classification of Diseases. A 2021 article from Fortune stated that “the well-being of employees is central to the bottom line.” (Abril). “In 2022, 1.7 million healthcare professionals quit the profession. (Forbes). Furthermore, a survey of 1,000 healthcare professionals revealed that 28% cited burnout as a reason for leaving the profession (Forbes). The COVID-19 pandemic was a stressful and traumatic time for everyone, but
especially for those who were facing the threat face to face. Fundamentally, through this research, I am seeking what impacts that the COVID-19 pandemic and other relevant aggravating factors have had on the healthcare industry in the areas of staff recruitment and retention. Furthermore, I will look to examine what steps companies within the healthcare industry have taken to respond to these issues if applicable.

Methods
Research and review of this thesis consisted of a literature review. According to Bloomsburg University, a literature review is defined as a “a comprehensive summary of previous research on a topic. The literature review surveys scholarly articles, books, and other sources relevant to a particular area of research” (Bloomsburg University). The University of Derby listed several advantages and disadvantages to a literature review. Some advantages include gaining a “deeper understanding of your chosen topic, … and answering key questions about current research” (University of Derby). Some disadvantages include out of date information and “not providing new information on the subject” (University of Derby). Examples of resources in my literature review included peer-reviewed journal studies as well as other scholarly pieces of literature. Other sources included articles and information from healthcare companies. While these sources were not ultimately peer reviewed, I believed that they were good to cite as pieces of information. I would make the argument that many more of these common sources are what healthcare HR professionals are seeing today and being asked to review.

Another source of information for this thesis was through two semi-structured interviews of HR healthcare professionals. According to research-methodology.net, a semi-structured interview is where the interviewer, “prepares a set of same questions to be answered by all interviewees. At the same time, additional questions might be asked during interviews to clarify and/or further
expand certain issues.” Like the literature review method, there are both advantages and
disadvantages to the interview method. Advantages of the interview method are the “direct
control over the flow of the process …” (research-methodology.net) and the “chance to clarify
certain issues during the process if needed”(research-methodology.net). Some disadvantages
include the additional steps associated with creating questions and scheduling interviews
(research-methodology.net). As of the time of writing this, I am currently employed at a
Massachusetts continuing care retirement community (CCRC) that is part of a larger national
group of CCRCs. The corporation of my CCRC has several communities and is located in
several US states. Continuing care retirement communities are those that provide living
accommodations for seniors not only for independent living, but also for higher needs of care
such as skilled nursing or long-term care. At my job, I had seen the issues facing the healthcare
industry head-on especially in the area of recruiting and retaining clinical or medical staff. I
thought it would be interesting to be able to get information directly from my colleagues about
what they have witnessed. I reached out to three HR professionals at my worksite and ended up
setting up interviews with two of them. The third individual was unable to participate due to
international travel that conflicted with the time of the interviews.

My first interviewee was with R., who at the time of our interview was the senior recruiter for
the CCRC. R oversaw two other recruiters. As part of her duties, R oversaw a recruiter who was
solely responsible for recruitment in our continuing care facility. Due to staff vacancies, R was
essentially filling in as a recruiter for our continuing care facility for a short period of time. For
both interviews, I wanted to get a sense of each of them as professionals. Both interviews
included questions about length of time with the CCRC, education, name and official job title,
and how long they have worked in the healthcare industry. Specifically, for R, I asked her about
what specific healthcare positions she recruited for and out of these positions which ones were the most difficult to recruit for. I asked about the current state of recruitment and asked her to do an introspective look and see if recruitment was in a better place currently than it was six months ago. Furthermore, I asked R if the issues in recruitment is due to labor competition or a lack of qualified professionals and if there was a consensus in the healthcare industry about what was causing these issues. I ended the interview by asking R if she believed that there would be anything else useful for me to know given my research topic and status as a student. My interview with R lasted approximately an hour and was conducted in her office at the CCRC.

My second interview was with T who at the time of our interview was recently promoted to director of Human Resources for the CCRC. Prior to accepting the promotion for HR director, T was the senior HR manager for the CCRC and served as the representative for our continuing care facility. I started off by asking similar questions to T like I did with R. This included her length of time with the CCRC, name and official job title, education, and experience within the healthcare industry. At the end of your interview, I did open it up to her to provide any additional information for me as both a researcher and student. I asked T to shed light on what she believes are the biggest challenges facing healthcare staffing and retainment since the COVID-19 pandemic. Also, I asked her if there were more issues in either the area of recruitment or retainment and what she thinks one improvement could be. Also, I asked her what retainment issues that she was currently seeing for staff retainment in continuing care and what issues were seen prior to the COVID-19 pandemic. One of the final questions that I asked her if since the start of the COVID-19 pandemic has this been the hardest time for retainment in healthcare. My interview with T was conducted in her office at the CCRC and was approximately 45 minutes in length.
Results
Through the previously mentioned research methods, I was able to discover that impacts can be seen in the healthcare industry within the areas of both staff recruitment and staff retainment. Impacts that were found through research included those directly related to COVID-19 as well as other issues that had been present prior to COVID-19. Through literary reviews and interviews, you were able to see both similarities and differences. Results will be discussed later in this report, but a very important difference was noted between literary review and my interview with T.

Burnout

The COVID-19 pandemic was a majorly traumatic and impactful event. Everyone felt and reacted differently to the pandemic. However, it was those in healthcare who remained right on the frontlines and had to treat those who were actively sick. The issue of burnout was something that was already an issue in healthcare prior to the COVID-19 pandemic (careerstaff.com). A study conducted in March 2021 found that the COVID-19 pandemic increased staff’s levels of burnout and compassion fatigue (careerstaff.com). The higher amount of burnout and compassion fatigue would lead to more absences among employees (careerstaff.com). Careerstaff.com specifically cited a study related to this burnout and compassion fatigue among nurses. Another article from careerstaff.com talked about the many stressors facing nurses during the COVID-19 pandemic. According to the article, it may also be remembered that there already was a level of burnout among staff even before COVID-19 became an issue. During the pandemic, nurses faced working longer shifts and at times lack of access for proper personal protective equipment that was meant to protect against COVID-19 (careerstaff.com). This not to only mention stresses from the virus itself as well as the fear of infecting loved ones with
COVID-19 as a result of their line of work. Unrelated to COVID-19, many nurses leave the profession after 3 years due to emotional distress and an unfriendly workplace among other factors (Shaffer et al 2020).

In what I believe relates to this, T said in our interview that healthcare staff are seeking a “work-life balance” especially in positions that are providing direct care to individuals such as certified nursing assistants (CNAs). R touched on this well as in our interview. T emphasized the importance of flexibility in shifts and schedules for new hires and employees.

Age of the population

Given current demographic trends in the USA, we as a population will be having a significantly larger proportion of the population that will be older. In 2018, there were 52 million individuals who were over the age of 65 (PRB.org). This number is only expected to continue to grow, and this has several implications. First off, it has kind of a two-pronged effect. The population being made up of predominantly older people impacts healthcare staff and people needing care.

According to a survey of the workforce, “more than half of RNs were over the age of 50” (Shaffer et al 2020). Also, “by 2030, all baby boomers will be age 65 years or older” (Shaffer et al 2020). Furthermore, as the population continues to get older, “the need for geriatric care will increase drastically, leading to a greater demand for nurses” (Shaffer et al 2020). Among older members of the population, you are seeing a higher obesity rate and increases in individuals diagnosed with Alzheimer’s disease (prb.org). The condition of obesity leads to several other health issues and all of these conditions can require additional medical and clinical care (cdc.gov). Alzheimer’s disease at a certain point within the illness can require 24-hour care (alz.org). Both of these factors put additional strain on the healthcare staffing system. In essence you have a concurrent crisis with this situation. Staff who are caring for the elderly population
are they themselves simultaneously ageing. At this same time, you have more individuals also needing care. One additional point to this is that younger people are not necessarily eager to work in healthcare. According to a study concerning younger government public health workers, “one third report an intent to leave in the next year, which is 50% greater than the remainder of the workforce” (Sellers et al 2020). While multiple factors existed in this study, it is something that should be taken note of and something that organizations must work to understand and develop solutions for.

R. touched on this point perfectly during our interview. At our mutual CCRC site and at the time of the interview, there was an announced plan to construct several new assisted living units within our community. In reference to this, R. mentioned that “what is keeping senior living in business, is also hurting our staffing. (R.). Furthermore, R did mention that she had noticed more retirements of staff recently.

Hiring Timeline in healthcare

Through research, another issue that arose is the hiring timeline for positions in healthcare. Multiple factors contribute to the longer hiring time in healthcare. An aps payroll article did a great job explaining these issues. Multiple individual positions in healthcare remain hard to fill both due to an increased demand and a lack of available skilled individuals (apspayroll.com). Healthcare organizations tend to take longer to fill positions as previously noted within this report. On top of this, you also have that healthcare organizations must make decisions between candidates while weighing education vs. experience (apspayroll.com). Furthermore, hiring in healthcare is often done by individual departments and this lengthens the process as candidates must be screened through several processes or people (apspayroll.com). Candidates for healthcare positions must go through several screening processes and other checks which again
causes an increase in hiring time (apspayroll.com). Examples of some of these screenings are, “verifications and credential screenings, Fraud and Abuse Control Information System (FACIS) Checks,” and “controlled substance screenings” (apspayroll.com). While necessary, all of these screenings contribute to an increase in the longer hiring time for healthcare.

The issue of longer hiring in healthcare is not something that solely has been made worse by COVID-19. Rather, this was an issue prior to the onset of the COVID-19 pandemic (apploi.com). Part of the reason for this longer hiring time, is that simply not enough talented or qualified individuals are applying for open healthcare positions (apploi.com). Furthermore, it appears that those in charge of hiring in healthcare are not making the reduction of the hiring time a priority (apploi.com). According to apploi.com, only “23% of recruiters” were focused, “on reducing their average time-to-hire.”

The issue of hiring was also touched upon in my interviews with R. and T. at the CCRC. R. did touch on this and mentioned that the CCRC as whole has worked to make certain changes to hiring procedures. This has included updating hiring requirements for positions as well as eliminating certain processes for certain positions. From our discussion, the hiring policy changes did not appear to be made to direct care health care positions. Rather changes were made to other non-direct care positions, but that are still essential to operate a CCRC or any healthcare organization.

As HR director, T. was able to provide more of an overview of the CCRC’s corporate processes. Based on our discussion, it appears that the issue of hiring time is something that the company as a whole is working to tackle. T. shared with me that since May 2022, the CCRC corporation generates a weekly staffing report. This staffing report focuses on vacancy rates, but also the
average timeline an applicant is in the system at a respective CCRC community. Similar to R., T. did also mention the need to accelerate the hiring process.

*Proposed Solutions to Factors Causing Healthcare Staffing Issues*

In the previous subsections, we discussed some of the issues that have been hurting the healthcare industry in the areas of staff recruitment and retainment. However, while researching the issues facing healthcare, solutions came up as well and I believed they were useful to share in this report.

In regard to the US aging healthcare workforce, one solution that does exist for the aging nurses is the hiring of foreign-educated nurses (Shaffer et al 2020). While an available solution, there are somewhat issues related to the usage of it. Prior to discussing this it should be noted that, “it is estimated that between 8% and 15% of the U.S. nursing workforce is foreign educated” (Shaffer et al 2020). The issues that are put of this solution affect the whole system, but also can impact the individual applicant. The hiring of foreign educated nurses was strong until around the year 2000 when attention changed in the USA to focus on making a stronger domestic workforce (Shaffer et al 2020). Furthermore, visa issuances and the “2007-2009 economic recession” caused further harm to the foreign educated nurses recruitment industry (Shaffer et al 2020). Foreign-educated nurses utilizing recruiters can be subject to victimization (Shaffer et al 2020).

The use of foreign-educated nurses does have certain ethical implications that must be noted and considered. An article from the International Journal of Nursing discussed these implications and concerns. Foreign-educated nurses coming to the USA or just working outside of their home countries has real impacts. The article discusses this by saying, “Nurses migrating from developing countries are often leaving behind an already disadvantaged system. Migration of
these nurses from poorer countries creates a vicious cycle in their healthcare system.” (Li et al).
The healthcare system breaking down or being a more challenging environment only causes more nurses and healthcare professionals to seek employment in other countries (Li et al). This only serves to make the system worse in their own country. I believe that the simplest way to describe this is that you see a domino effect in the countries losing nurses to foreign countries. Another negative impact is that “developing nations often publicly fund or subsidize nursing education.” (Li et al). Basically, this means that developing countries are fronting the bill for nurses’ medical educations and then the leave to work in another country. The only positive impact is that if nurses do return from working abroad, they are able to bring new skills and education to their home country (Li et al).

Another solution that has been proposed by multiple sources is the use of nurse staffing agencies. The use of nurse staffing agencies can allow for staff outside the organization to provide immediate coverage to a healthcare organization. The Journal of Radiology Nursing in June 2022, spoke on the use of outside staffing agencies, “is not sustainable” and was classified as a “short-term solution.” A Modern Healthcare article from January 2023, spoke also on staffing agencies as being things that could help a healthcare organization in a time of staffing crisis. While being hailed as a viable solution, T. had strong issues with the usage of healthcare staffing agencies. Our CCRC has created an extensive values system that is an essential part of all departments and interactions as employees. T. stated that they had seen several issues with staff from staffing agencies not being attached to and really embracing these values. Staff of the CCRC fully embraced these values and followed them, but at times this was not seen with agency staff.
A valid question that can be asked is why nursing staffing agencies are able to provide coverage to healthcare facilities when these facilities are so short-staffed. Commonly, people working at nurse staffing agencies are called travel nurses. Chron.com, provided an article that listed several reasons for why someone would want to become a travel nurse instead of working at a traditional healthcare facility. Among Chron.com and other sources, you see that the attraction to being a travel nurse is the large number of benefits afforded to the individual nurse. Travel nurses will often travel across the USA or in specified regions to provide staffing coverage to healthcare facilities (Chron.com). Benefits for travel nurses typically include their costs of housing or traveling to be covered (Chron.com). Travel nurses also receive better compensation and the availability to travel to several different places (Chron.com). Travel nurses are able to receive better benefits in these temporary positions versus a permanent position (Chron.com). Nurse.org provided a similar article related to the additional benefits and opportunities that travel nurses compared to those working in a traditional healthcare facility. The many additional benefits afforded to travel nurses serves as a basis of reasoning as to why nursing staffing agencies are not seeing the same challenges that healthcare facilities are.

One final area to cover is the several solutions related to retainment that were suggested through my literature review and in my interviews. In the American Journal of Preventive Medicine, “pay was identified as the most frequently reported primary reason for a young employee’s intent to leave” (Sellers et al 2020). Other factors within this study were also, “lack of opportunities for advancement, job satisfaction, and workplace environment” (Sellers et al 2020). The Journal of Radiology Nursing also touched upon retainment issues. As part of their “long term solutions” (Knapp 2022), specifically, they talked about more flexible scheduling practices (Knapp 2022). Careerstaff.com also talked about several factors as part addressing burnout which I would argue
can help with retention. Solutions included serious focusing on self-care, scheduling considerations, providing a wellness space, and “actively promote education, counseling, and resources” (careerstaff.com).

In my interviews with T. and R. they also talked about this area related to staff retention. T. discussed the importance of “meeting the employees where they are at” (T.). T. also discussed the importance of checking in with new employees, expressing appreciation for employees, and engaging with the employees. T. also talked about creating “a vibrant workplace experience” (T.), and as part of this experience it includes, “financial stability and health and wellbeing” (T.). R. did not touch as much on this given her primary job duties as a recruiter. However, R. did talk about the importance of flexibility when it comes to employee scheduling as well as with job postings.

Discussion

The aim of this thesis was to inform the reader about the issues related to staffing recruitment and retention issues related to COVID-19 in the healthcare industry. This was both a broad and impressive mandate.

Review of Thesis Goal and Discovered Results

The research included and not included in this thesis focused on the essential industry of healthcare. The industry of healthcare is one that is important to any society and treats members of the population at their greatest time of need. The industry of healthcare is seeing difficulties and there are both short- and long-term solutions to these difficulties as previously mentioned.

The issues that have arisen in this thesis are factors that should be closely monitored by all relevant stakeholders within the healthcare industry. COVID-19 must be viewed as an ever-
present factor in our life. Also, it must be considered how we are still dealing with impacts related to COVID-19 measures initially undertaken in March 2020. Research on a plethora of areas related to governmental responses to the COVID-19 pandemic is still forthcoming. Research on these topics will only continue to guide this thesis’ overall goal and mandate. This thesis provided a view of one small corner of the healthcare industry with the focus of a Massachusetts based CCRC. This smaller and more focused view allows for a deeper understanding and does both support and not support certain trends seen in the larger research. Issues that were impacting staff themselves were thoroughly examined with the main focus being burnout. The multiple factors related to burnout were discussed. Population concerns were also examined and how current ages in the population are having a major impact on healthcare. This is one of the issues that will not just simply be solved with a new program or policy. Rather, this is a much larger and societal issue. HR recruitment practices were another area that was examined. The HR recruitment practices and hiring timeline was another example of an issue that was present in healthcare long before the onset of the COVID-19 pandemic. As part of this thesis, proposed solutions were provided to the aforementioned problems in healthcare. The list of solutions was not meant to be all inclusive, but rather serves as a basis for possible solutions to problems facing the industry.

*Flaws in Both Research and Utilized Research Methodologies*

As with any research project, it was impossible for myself as the researcher to follow or provide proper information for all areas of research on this topic. My topic is a “live” topic. What I mean by this is that we are still in the midst of the COVID-19 pandemic and the issues mentioned are continuing to impact healthcare. Given these facts, it is hard to come to a conclusion when the issue is actively occurring.
Also, the research methodologies that I used within this project had their own inherent flaws. These inherent flaws were disclosed in the beginning of this project in the “Methods” section. As mentioned with the literature review, there is always the risk of there being issues with the selected sources. In this report, I relied on sources that were both from academic and non-academic places. The non-academic sources may not have gone through as many checks as an academically or peer-reviewed literature piece would have gone through. However, given the topic of this report, I believe that it was a calculated risk and would be more beneficial for the desired audience. Academic sources were added to provide further legitimacy and validation to claims found in the non-academic sources. The interviews are another area that has some flaws. The flaws in my interviews are through no fault of my interviewees. Rather, the issue with my interviews is that it only examined two data sources from the very large field of healthcare. The interviews only provided on recruitment and retention issues from one CCRC in the state of Massachusetts. The interviews also only relied on the data from my respective interviewees. In their interviews, they brought forth both their educational and professional experiences. Any interviewee would bring these same experiences and backgrounds to the table. However, the issue that must be pointed out is that no individual ever has the exact same experiences or experiences as another individual. The interviews were a great data source, but it must be taken into consideration how it was only two interviews, and they could not reasonably be applied to the entirety of healthcare.

Suggested Topics for Further Research

This report presented a lot of areas that need to be further explored and given proper attention. The main areas of this report showcased the issues of burnout, recruitment time in healthcare, and the age of the population. This report also focused on both short- and long-term solutions.
All of these topics could be an entire research project in themselves. Also, COVID-19 is still a virus that is actively with us in the population as of the time of this report. I believe that the active presence of COVID-19 and that it is still a pandemic will impact research. I believe that research prior to the official end of the COVID-19 pandemic and after will be very different. I believe that this is a factor that must be kept in mind when conducting any research on this topic.

All the areas of burnout and a longer hiring timeline are very important issues. However, I believe that further focus must be given to the shifting population demographics. The shifting population demographics present many challenges not only related to healthcare, but society at large. Attention must be given to how healthcare is going to tackle a society where there are significantly more older people than younger people. Research must be done in regard to how a society would respond to this. This population issue will only further contribute to healthcare’s problems and researchers must examine this topic. On a larger scale, issues in the healthcare industry and impacts of the COVID-19 pandemic are topics that will provide for plentiful research endeavors for decades to come.

Suggested Human Resource Policies

The issues mentioned throughout this thesis ultimately affect and impact the employee. Staff recruitment and retainment all revolve around and are influenced by the employee. Human resource departments within healthcare or any industry must impact how their policies are impacting the areas of staff recruitment and retainment. Within these areas, there are countless policies and procedures that HR could implement to improve their staff recruitment and retainment. One area that I would like to showcase is that of appreciation. I feel that it is very important for an employee to feel valued and appreciated by their respective organization. As an employee, you spend a considerable amount of time and energy focusing on your respective
organization. I believe that it makes a big impact when an employee is devoting a lot of time to their organization and they are thus rewarded with appreciation. A 2023 article from the Harvard Business Review entitled “The Obstacles to Creating Good Jobs” described the steps that organizations can take to make their respective environments better for employees. I will outline these steps below and believe they serve as the best closing to this thesis.

**2023 Harvard Business Review Article Suggestions**

1. Offer above market pay and compensation (Zeynep 2023)
2. Increased investment in training and development (Zeynep 2023)
3. Giving people more predictable and consistent schedules (Zeynep 2023)
4. Increasing quality of managers and mentoring that employees receive (Zeynep 2023)
5. Give employees more opportunities for advance and clearer pathways (Zeynep 2023)
6. Increase employee empowerment and autonomy (Zeynep 2023)

**References**


file:///C:/Users/jakeo/OneDrive/Desktop/Thesis/TO%20CITE/The%20Impact%20of%20COVID-19%20on%20Direct%20Care%20Workers.pdf


file:///C:/Users/jakeo/OneDrive/Desktop/Thesis/TO%20CITE/Employee%20Retention%20An%20Important%20Factor%20for%20Strategies%20Development.pdf


November 7, 2022

Dr. Todd C. Harris
Associate Professor, Management and Marketing
Harrington Hall, Room 101A

Re: Approved IRB Application – Case #2023029

Dear Dr. Harris,

The BSU Institutional Review Board has reviewed and approved your recent IRB application for your proposal entitled: “How recruitment and staffing in the healthcare industry has been impacted by the COVID-19 pandemic” #2023029. The approval for your study is active for a period of one (1) year, expiring November 7, 2023. Please share this approval letter with your co-

Thank you, and we wish you success with your research project.

Sincerely,

Frances Jeffries, Ph.D.
IRB Compliance Officer
Bridgewater State University
Bridgewater, Massachusetts 02325
Email: irb@bridgew.edu
Mobile/Text/WhatsApp: 508.241.6643
Conflict of Interest Disclosure

As part of your participation in this study, I want to maintain an open and transparent communication with all the participants. As you know, all of us currently work at Linden Ponds. Given this project and our personal connection as colleagues, I wanted to disclose to you that I have a conflict of interest as you are not just simply a random participant. Rather, you are a colleague of mine and regardless of the outcome of this research, you and I will continue to be colleagues. I wanted to disclose to you that I will not allow outcomes of this research to affect my relationship with you. I view this interaction as separate from you and I as colleagues. Participation in this research involves myself as a student and you as a professional being interviewed for my thesis researching the healthcare industry. When I am communicating with you about this research, I am not nor ever will be conducting any business in relation to my professional capacity. This research has not bearing nor is involved at all with my professional duties. I am asking you to please sign below as an acknowledgement that you have read this form and understand my disclosure of the conflict of interest. Please do not hesitate to contact myself or Dr. Todd Harris if you have any questions or concerns.

Sincerely,

Dr. Todd Harris, Principal Investigator
T3harris@bridgew.edu
(508)-531-2467

Jake O’Neil, Co-Investigator
Jtoneil@student.bridgew.edu
(781)-964-0508

Signature: [Signature]  Date: 11/28/2022
Conflict of Interest Disclosure

As part of your participation in this study, I want to maintain an open and transparent communication with all the participants. As you know, all of us currently work at Linden Ponds. Given this project and our personal connection as colleagues, I wanted to disclose to you that I have a conflict of interest as you are not just simply a random participant. Rather, you are a colleague of mine and regardless of the outcome of this research you and I will continue to be colleagues. I wanted to disclose to you that I will not allow outcomes of this research to affect my relationship with you. I view this interaction as separate from you and I as colleagues.

Participation in this research involves myself as a student and you as a professional being interviewed for my thesis researching the healthcare industry. When I am communicating with you about this research, I am not nor ever will be conducting any business in relation to my professional capacity. This research has not bearing nor is involved at all with my professional duties. I am asking you to please sign below as an acknowledgement that you have read this form and understand my disclosure of the conflict of interest. Please do not hesitate to contact myself or Dr. Todd Harris if you have any questions or concerns.

Sincerely,

Dr. Todd Harris, Principal Investigator
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(781)-964-0508

Signature: ___________________________ Date: ________________
How staffing and recruitment in the healthcare industry has been impacted by the COVID-19 pandemic

Dr. Todd Harris (Primary Investigator) Jake O’Neill (Co-investigator)

Dear Rebecca Monahan,

You are being asked by a Bridgewater State University researcher to participate in a study. For you to be able to make an informed decision about whether you want to participate in this project, you should understand what the research is about, as well as the possible risks and benefits. This process is known as informed consent. This document describes the purpose, procedures, possible benefits, and risks of the research project. It also explains how your personal information will be used and protected. Once you have read this form and your questions about the study are answered, you will be asked to sign it. This will allow your participation in this study. You should receive a copy of this document to take with you.

Your participation is voluntary. You may decide not to participate in this study. If you do participate, you may withdraw from the study at any time. Your decision not to take part or to withdraw will involve no penalty or loss of benefits to which you are otherwise entitled.

Summary of Study:

With any research study, there are inherent and unavoidable risks to any participants involved. The purpose of my research study is to examine how the COVID-19 impact has impacted staffing and recruitment in the healthcare industry. As part of the study, I am planning to interview you with a series of questions in which I am hoping to draw upon your experience and tenure as the senior recruiter at Linden Ponds in Hingham Massachusetts. The interview should last no more than an hour, but most likely will be below an hour in length. Certain aspects of your privacy will be lost as a result of participation in this study. I have included in the initial submission documents for my thesis that I will be interviewing an HR recruiter for a retirement community in Hingham MA. On a personal level, I believe that this study will have no benefit to you. However, on a societal level, I believe that this study will have benefits to the larger healthcare community. This study could hopefully serve as a guide to organizations in healthcare looking to recruit and retain staff in our world post COVID.

Explanation of Study

This research study is intended to examine impacts on staffing and recruitment on the healthcare industry as a result of the COVID-19 pandemic. You will be asked to participate in an interview that will last around one hour in length. The questions will focus on recruitment and
staffing prior to COVID and recruitment and staffing in our current situation. The interview will also focus on the trends that you have seen throughout the pandemic. Also, I would ask as part of the interview what recommendations you have for the healthcare industry and even what explanations you would have for the current recruitment and staffing situation. Additionally, I would open the floor to you to include any other information that you think would be useful for myself as a researcher to know. Ideally, I would like to conduct an interview with you in mid to late summer or in early fall. I was planning to conduct the interview in your office or in some other location at Linden Ponds in Hingham, Massachusetts.

This studying is being done to determine the impacts if any exist on recruitment and staffing in healthcare as a result of the COVID-19 pandemic. If you agree to participate, you will be asked to participate in an interview that should last no more than one hour in length.

Risks and Discomforts

With any research project, there are inherent and unavoidable risks that any willing participant could potentially fall victim to. Psychologically, you as a participant, could feel stressed or anxious by interview questions that I could ask you. As we will be discussing the pandemic, this could cause you stress based upon your individual experiences during the height of the pandemic. Interview questions could cause you to have reaction to stresses related to your job when it comes to the area of recruitment and staff retention. Socially, you could feel pressure from other colleagues based upon your answers. There is also possibility with risk when it comes to the data that I collect. I plan to interview and type responses on my laptop. This information will be stored in electronic and paper copies. The paper copies will remain with me, and the electronic copies will be stored on my Bridgewater State University OneDrive account. With electronic copies, there is a risk of a data breach occurring which could result in someone outside of the research time getting access to my interview notes. With paper copies, I would leave them in my bag and there is the incredibly rare chance that someone could look through my bag and take or look at our interview notes.

Can I stop being in the study?

You have the option to terminate participation in this research study at any time. Termination of your involvement will have no negative impacts on you as an individual professionally or in the eyes of the study. Please inform anyone involved in the study if you are considering withdrawing from the study.

If you make the decision to withdraw from the study, I will discard any of the information obtained through the interview or any other communication methods from the final report. Additionally, I will destroy any electronic or paper files that were obtained from your participation in the research study.
Benefits

This study is important to our society because it will allow myself and other viewers of this research to get a better understanding of the impact of the COVID-19 pandemic. Specifically, myself and other viewers of this research will get a better comprehension of how staffing and recruitment has been impacted.

While you as individual may not receive any benefits from the study; your contributions will be very helpful to society. As stated above, this study and the benefits from it could provide a better understanding of COVID-19’s impact in the healthcare industry. Through your participation and knowledge, myself and those involved with my research will be able to produce a working final product that can educate society. The value of this information for the healthcare industry is truly incredible. Through participation, you would be able to provide this wealth of information for a life-saving industry.

Confidentiality: How will information about me be protected?

Levels of confidentiality will be completely decided by the participant. I could utilize your full name (i.e., in my interview with Rebecca Monahan Senior recruiter at Linden Ponds), I could just utilize your title, or I could complete your whole identity completely confidential. This is a decision that would be made when I reach out to you with this consent form.

If you do not decide to have any level of confidentiality than no steps would be taken to protect your identity based upon your lack of consent for confidentiality.

If you decide to protect your identity in terms of name, then all documents for presentation and records would have your name stricken. There are exceptions to this which will be outlined shortly.

If you want full confidentiality, then myself and Todd Harris would give it our best effort to protect your identity. Information with your name would only be accessible to a few select people. Part of the people who must have access to this documentation with your identity are required per university and federal government policies. Bridgewater State University has databases for research and computer systems. Information that would include identifiable information could potentially be stored on these systems, but only those with specific authorized access for this research would be able to view this information. This information will not be released except for exceptions listed in this document and under any requirements by law.

*Exception for disclosure of information in relation to confidentiality: *

- Federal agencies, for example the Office of Human Research Protection, whose responsibility is to protect human subjects in research.
- Representatives of Bridgewater State University, including the Institutional Review Board, a committee that oversees the research at Bridgewater State University.
- Any relevant authorities that would have to reported instances of self or harm to others because of Bridgewater State University faculty and staff's obligation as mandated reporters.
Compensation

As compensation for your time and effort, you as well as other participants will receive a non-monetary award as a way to show thanks and appreciation for your efforts in this project. Participants will be provided with a small amount of baked goods and/or candy. If you do not wish to receive this compensation, please inform a member of the research team.

Future Use Statement

Identifiers might be removed from data/samples collected, and after such removal, the data/samples may be used for future research studies or distributed to another investigator for future research studies without additional informed consent from you or your legally authorized representative.

Contact Information

If you have any questions regarding this study, please contact the investigator Dr. Todd Harris who can be reached by email at t3harris@bridgew.edu or by phone at (508)-531-2467.

If you have any questions regarding your rights as a research participant, please contact the Bridgewater State University Institutional Review Board. The Bridgewater State University Institutional Review Board is located in the Maxwell Library in Room 200. The street address is 10 Shaw Road, Bridgewater, MA, 02325 and the phone number is (508)-531-1242.

Contact the number above to ask general questions, to obtain information or offer input, and to express concerns or complaints about research. You may also call this number if you cannot reach the research team or if you wish to talk to someone else. General information about participation in research studies can also be found at: https://studentbridgew.sharepoint.com/sites/IRB

Do not sign this consent form unless you have had a chance to ask questions and have received satisfactory answers to all of your questions.

By signing below, you are agreeing that:

- You have read this consent form (or it has been read to you) and have been given the opportunity to ask questions and have them answered;
- You have been informed of potential risks and they have been explained to your satisfaction;
- You understand that Bridgewater State University has not funds set aside for any injuries you might receive as a result of participating in this study;
- You are 18 years of age or older.
• Your participation in this research is completely voluntary;
• You may leave the study at any time; if you decide to stop participating in the study, there will be no penalty to you, and you will not lose any benefits to which you are otherwise entitled.

Signature: [Signature]
Date: 1/24/22
Printed Name: Rebecca Monahan

Version Date: [06/08/22]
Bridgewater State University Adult Consent Document

How Staffing and Recruitment in the Healthcare Industry has been impacted by the COVID-19 Pandemic

Dr. Todd Harris (Primary Investigator) Jake O’Neill (Co-Investigator)

Dear Tina Zagarri,

You are being asked by a Bridgewater State University researcher to participate in a study. For you to be able to make an informed decision about whether you want to participate in this project, you should understand what the research is about, as well as the possible risks and benefits. This process is known as informed consent. This document describes the purpose, procedures, possible benefits, and risks of the research project. It also explains how your personal information will be used and protected. Once you have read this form and your questions about the study are answered, you will be asked to sign it. This will allow your participation in this study. You should receive a copy of this document to take with you.

Your participation is voluntary. You may decide not to participate in this study. If you do participate, you may withdraw from the study at any time. Your decision not to take part or to withdraw will involve no penalty or loss of benefits to which you are otherwise entitled.

Summary of Study:

With any research study, there are inherent and unavoidable risks to any participants involved. The purpose of my research study is to examine how the COVID-19 impact has impacted staffing and recruitment in the healthcare industry. As part of the study, I am planning to interview you with a series of questions in which I am hoping to draw upon your experience and tenure as an HR manager for the continuing care section at Linden Ponds in Hingham, Massachusetts. The interview should last no more than an hour, but most likely will be below an hour in length. Certain aspects of your privacy will be lost as a result of participation in this study. I have included in my initial submission documents for my thesis that I will be interviewing an HR manager for a retirement community in Hingham MA. On a personal level, I believe that this study will have no benefit to you. However, on a societal level, I believe that this study will have benefits to the larger healthcare community. This study could hopefully serve as a guide to organizations in healthcare looking to recruit and retain staff in our world post COVID.

Explanation of Study

This research study is intended to examine impacts on staffing and recruitment on the healthcare industry as a result of the COVID-19 pandemic. You will be asked to participate in an
interview that will last around one hour in length. The questions will focus on recruitment and staffing prior to COVID and recruitment and staffing currently. The interview will also focus on the trends that you have seen throughout the pandemic. Also, I would ask as part of the interview what recommendations you have for the healthcare industry. Additionally, I would ask what explanations you would have for the current recruitment and staffing situation. Furthermore, I would open the floor to you to include any other information that you think would be useful for myself or the research team to know. Ideally, I would like to conduct an interview with you in mid to late summer or in early fall. I was planning to conduct the interview in your office or in some other location at Linden Ponds in Hingham, Massachusetts.

This study is being done to determine the impacts if any exist on recruitment and staffing in healthcare as a result of the COVID-19 pandemic. If you agree to participate, you will be asked to participate in an interview that should last no more than one hour in length.

Risks and Discomforts

With any research project, there are inherent and unavoidable risks that any willing participant could potentially fall victim to. Psychologically, you as a participant, could feel stressed or anxious by interview questions that I could ask you. As we will be discussing the pandemic, this could cause you stress based upon your individual experience throughout the pandemic. Interview questions could cause you to have a reaction to stresses related to your job when it comes to the area of recruitment and staff retention. Socially, you could feel pressure from other colleagues based upon your answers. There is also possibility with risk when it comes to the data that I collect. I plan to interview and type responses on my laptop. This information will be stored in electronic and paper copies. The paper copies will remain with me, and the electronic copies will be stored on my Bridgewater State University OneDrive account. With electronic copies, there is a risk of a data breach occurring which could result in someone outside of the research time getting access to my interview notes. With paper copies, I would leave them in my bag and there is the incredibly rare chance that someone could look through my bag and take or look at our interview notes.

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Benefits

This study is important to our society because it will allow myself and other viewers of this research to get a better understanding of the impact of the COVID-19 pandemic. Specifically, myself and other viewers of this research will get a better comprehension of how staffing and recruitment has been impacted.

While you as an individual may not receive any benefits from the study; your contributions will be very helpful to society. As stated above, this study and the benefits from it could provide a better understanding of COVID-19's impact on the healthcare industry. Through your participation and knowledge, myself and those involved with my research will be able to produce a working final product that can educate society. The value of this information for the healthcare industry is truly invaluable. Through participation, you would be able to provide this wealth of information for a life-saving industry.

Confidentiality: How will information about me be protected?

Levels of confidentiality will be completely decided by the participant. I could utilize your full name (i.e., in my interview with Tina Zagarri Senior HR manager at Linden Ponds). I could just utilize your title, or I could complete your whole identity completely confidential. This is a decision that would be made when I reach out to you with this consent form.

If you do not decide to have any level of confidentiality, then no steps would be taken to protect your identity based upon your lack of consent for confidentiality.

If you decide to protect your identity in terms of name, then all documents for presentation and records would have your name stricken. There are exceptions to this which will be outlined shortly.

If you want full confidentiality, then myself and Todd Harris would give our best effort to protect your identity. Information with your name would only be accessible to a few select people. Part of the people who must have access to this documentation with your identity are required per university and federal government policies. Bridgewater State University has databases for research and computer systems. Information that would include identifiable information could potentially be stored on these systems, but only those with specific authorized access for this research would be able to view this information. This information will not be released except for exceptions listed in this document and under any requirements by law.

*Exception for disclosure of information in relation to confidentiality: *

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- Representatives of Bridgewater State University, including the Institutional Review Board, a committee that oversees the research at Bridgewater State University.
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Compensation

As compensation for your time and effort, you as well as other participants will receive a non-
monetary award as a way to show thanks and appreciation for your efforts in this project.
Participants will be provided with a small amount of baked goods and/or candy. If you do not
wish to receive this compensation, please inform a member of the research team.

Future Use Statement

Identifiers might be removed from data/samples collected, and after such removal, the
data/samples may be used for future research studies or distributed to another investigator for
future research studies without additional informed consent from you or your legally
authorized representative.

Contact Information

If you have any questions regarding this study, please contact the investigator Dr Todd Harris
who can be reached by e-mail at tharris@bridgew.edu or by phone at (508)-531-2457.

If you have any questions regarding your rights as a research participant, please contact the
Bridgewater State University Institutional Review Board. The Bridgewater State University
Institutional Review Board is located in the Maxwell Library in Room 200. The street address is
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reach the research team or if you wish to talk to someone else. General information about
participation in research studies can also be found at:
https://studentbridgew.sharepoint.com/sites/IRB

Do not sign this consent form unless you have had a chance to ask questions and have received
satisfactory answers to all of your questions

By signing below, you are agreeing that:

- You have read this consent form (or it has been read to you) and have been given the
  opportunity to ask questions and have them answered;
- You have been informed of potential risks and they have been explained to your
  satisfaction;
- You understand that Bridgewater State University has no funds set aside for any injuries
  you might receive as a result of participating in this study;
- You are 18 years of age or older;
Your participation in this research is completely voluntary.

You may leave the study at any time, if you decide to stop participating in the study, there will be no penalty to you, and you will not lose any benefits to which you are otherwise entitled.

Signature: Tina Zagarai

Date: 11/25/2022

Printed Name: Tina Zagarai

Version Date: [06/08/22]
Bridgewater State University

INSTITUTIONAL REVIEW BOARD (IRB)

APPLICATION FOR THE CONDUCT OF RESEARCH INVOLVING HUMAN SUBJECTS

The IRB reviews all requests to conduct research involving human subjects.

It is the Primary Investigator's responsibility to give complete information regarding procedures and the informed consent process. A complete explanation of the requirements can be found in the Bridgewater State University Policy on the Use of Human Subjects in Research. Please visit and familiarize yourself with our IRB website which contains very helpful information: https://studentbridgew.sharepoint.com/sites/IRB.

After completing the application, please submit your application and accompanying material via email to IRB@bridgew.edu. Typed names serve as written signatures when the completed application and all supporting materials are sent from an official BSU e-mail address.

Please anticipate a 2-week turn-around time for a decision. The IRB will notify each applicant of the IRB's decision. If you have questions about the application process, please send your inquiries via email to: IRB@bridgew.edu.

Project Title: How recruitment and staffing in the healthcare industry has been impacted by the COVID-19 pandemic

1a. Primary Investigator Name/Address:

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Todd</td>
<td>Harris</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Department</th>
<th>Management and Marketing</th>
</tr>
</thead>
</table>

<p>| Address   | Harrington Hall, Room 101A (If off-campus, include city, state and zip code) |</p>
<table>
<thead>
<tr>
<th>Email Address: <a href="mailto:tharris@bridgew.edu">tharris@bridgew.edu</a></th>
<th>Phone Number: (508)-531-2467</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1b. Co-investigator(s) Name/Address:</strong></td>
<td>O'Neil</td>
</tr>
<tr>
<td>Management and Marketing</td>
<td>51 Wildwood Avenue, Braintree MA, 02184</td>
</tr>
<tr>
<td>Email Address: <a href="mailto:joneil@student.bridgew.edu">joneil@student.bridgew.edu</a></td>
<td>Phone Number: (781)-964-0508</td>
</tr>
<tr>
<td>Is this a continuation of an approved IRB project?</td>
<td>Yes</td>
</tr>
<tr>
<td>If yes, provide previous IRB case number:</td>
<td></td>
</tr>
<tr>
<td>Is this a class project?</td>
<td>Yes</td>
</tr>
<tr>
<td>Is this a thesis?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**2. Study Timeline**

a. Anticipated starting date: Study, including recruitment, **cannot** begin prior to IRB approval. **Two Weeks after Approval from IRB**

b. Duration of Study in months: (maximum approval period is 12 months) Periodic Review/Renewal required after approved period. **I plan to conduct my study over two semesters or for a total period of eight months.**

**3. Funding Status**

<table>
<thead>
<tr>
<th>Is the researcher receiving support or applying for funding?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

If YES, you must submit one complete copy of the proposal with this application.

List Source: **Non-Applicable**

Describe any consulting or other relationships with this sponsor: **Non-Applicable**

Funding will be used for: **Non-Applicable**

☐ Paying Participants (Provide further details in compensation section) ☐ Researcher Expenses (Postage, Equipment, Travel, etc.) ☐ Other:
4. Recruitment/Selection of Subjects

The maximum number of participants to be enrolled is three.

If screening will occur, report number that will be screened.

b. Characteristics of subjects (check as many boxes as appropriate)

<table>
<thead>
<tr>
<th>Minors</th>
<th>Disabled (Physically or Mentally)</th>
<th>Elementary School Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults</td>
<td>Legally incompetent</td>
<td>Middle School Students</td>
</tr>
<tr>
<td>Prisoners</td>
<td>Cognitively Impaired</td>
<td>High School Student</td>
</tr>
<tr>
<td>Pregnant</td>
<td>Non-English Speaking</td>
<td>BSU Students</td>
</tr>
</tbody>
</table>

c. Briefly describe the criteria for selection of subjects (inclusion/exclusion). Include such information as age range, health status, etc. Attach copies of all recruitment tools (advertisements, posters, etc.).

d. Please describe how you will identify and recruit prospective participants.

e. Records

Are you accessing private records? [ ] Yes [ ] No
(i.e. medical, educational, employment)

If YES, describe process for obtaining approval for the use of the records or for securing consent from the subjects. Attach a letter of support from the holder or custodian of the records i.e. primary physician, therapist, public school official. -Non-Applicable

f. Please describe your relationship to the potential participants (i.e. instructor of class, co-worker, etc.). If no relationship, state no relationship. – The three individuals that I am planning to have participate in my study are colleagues of mine at my job. I occasionally collaborate with them as part of my role in our communications department. I have mentioned that I am working on a thesis on this topic, and they are supportive and happy to participate. I have not shared any specific questions or anything of that nature.

5. Performance Sites/Location of Research

[ ] Bridgewater State University Facility
[ ] Other-Linden Ponds, Hingham, MA, 02043

Public Location

Please describe and provide letters of cooperation and/or support -N/A as per Dr. Harris on (7/20/22)

6. Project Abstract

Provide a brief summary of the project, using non-technical terms that would be understood by a non-scientific reader. Please limit this description to no more than one page, and provide details in the method section.
This project seeks to research and discover in the COVID-19 pandemic how it has led to recruitment and retention issues in the healthcare industry. This will be accomplished by interviewing professionals in the industry. Additionally, current data and previous data surrounding recruitment and retention to establish a link or pattern if any exists.

Describe the scientific objectives (aims) of this research, including (brief) discussion of previous relevant research.

The aims of this research is to see if the COVID-19 pandemic has negatively impacted staffing retention and recruitment in healthcare. If so, this research aims to establish the relations or the causal links of these negative effects. Several other research projects have been undertaken in this area. Research has shown established recruitment and retention issues in the healthcare industry. Further issues mentioned in this research included burnout and high turnover.

Method: Provide a sequential description of all procedures, researcher participant interaction, and intervention. Include the measures you plan to use, the time period(s) involved, and any deception that may be used.

I will follow-up on my previous sent email to my colleagues in the HR department at my place of employment. I will already have questions developed. I will work to schedule an interview with my selected interviewees at a mutually agreed upon time. The interview will proceed like a Q&A format. Pending approval, I plan to allow for time at the end of the interview to allow my interviewee to add any information that they think I should know given the aims of this research and their professional experience. I plan to conduct interviews as soon as this is application is reviewed and approved. I do not plan to use any deception. I am leaving the option open for follow-up contact with my interviewees in case I have additional questions or need confirmation on something.
Personnel: Identify all personnel who will participate in the conduct of this research and outline their qualifications.

The only two personnel that will be involved with this research is Dr. Todd Harris as primary investigator and myself, Jake O’Neill as Co-Investigator. Doctor Harris has numerous experiences with the honors program and is a current tenured faculty member in the management department at Bridgewater State University. As Co-investigator, I am currently a senior at Bridgewater State University majoring in management with a concentration in general management and a minor in health resource management. Also, I have been working at a senior living community which includes a continuing care facility for over a year.

Describe any potential risks or discomforts of participation and the steps that will be taken to minimize them.

Participants could feel uncomfortable talking about the COVID-19 pandemic. This was and continues to be a world and societal altering event that could stress and trigger unpleasant and stressful memories. Furthermore, I will be talking with HR professionals about recruitment and retention and; they could feel uncomfortable and nervous about their job performance. As the essential goal of this research is to examine recruitment and retention issues in the healthcare industry as a result of the COVID-19 pandemic. I will warn the interviewees ahead of time through consent through the consent form about these risks and as stated in the consent form, they can withdraw at any time. I will verbally repeat this to the interviewees prior to the interview and will allow participants to take a break during the interview if needed.

Describe the anticipated benefits to the individual participants. If none, state that. (Note that compensation is not a benefit, but should be listed in the compensation section [Section 8].)

I do not believe that there will be any benefits to the individual participants. The only benefit could be that if they disclose their name they would be included in my final research report. This could possibly be beneficial to them in terms of name recognition and for future career opportunities. Provided that this research ends up being viewed by many people in the healthcare and HR fields.

Describe the anticipated benefits to society and/or the scientific community in lay language. There must be some benefit to justify the use of human subjects.
This research will hopefully be able to identify issues with staffing and retention in the healthcare industry as a result of the COVID-19 pandemic. This research could be a useful tool for organizations and the general public to understand the challenges that the healthcare industry is currently facing. In order to properly learn about this, I will conduct online research. In addition to this online research, I will interview HR professionals who work in the healthcare industry and experienced these challenges firsthand. Basically, all the participants that I plan to interview deal with the issue of staffing and retention in healthcare on a daily basis. Their knowledge and experience are not something that I couldn’t just simply learn through some online research. Provided their participation, they can provide real world knowledge and experience that is extremely valuable to any research project.

7. Data Collection and Management (Check all that apply)
   □ a. Nature of data makes it potentially identifiable (e.g. video or audio recordings, photographs, IP address, material with DNA, etc.)
   □ b. Data will be recorded with identifying information (e.g. name, SSN, Banner ID, etc.)

   *Consent form is giving option for participants to opt-in or out for the purposes of being identified. If I needed, I would take the necessary steps to de-identify and take necessary privacy measures.*

   Will data be de-identified?  [Yes]  [No]

   If yes, please provide a timeframe and details (for example describe the destruction of identifying information or the process of assigning a code to replace identifiers)

   Will there be a master list connecting the code?  [Yes]  [No]

   If you checked a or b, please provide details of how data will be stored securely (i.e. locked cabinet, password protected, etc.).

   If master code list is used, please provide detail, such as how/where code list is securely stored, when it will be destroyed, etc.

   □ c. Data will be recorded without possibility of identification (Check this box only if any identifying information will be destroyed or eliminated and cannot be restored)
   □ d. Data is collected anonymously (Check this box only if it is not possible to connect respondents to data. Do not check this box if data will be collected electronically.)

   Data sharing
Will identifiable data be shared with anyone outside the immediate research team? (Check yes only if the respondents will be identified or identifiable in reports, presentations, etc.)

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
<td>Yes (Depending upon participants answer they will be appropriately de-identified or not.)</td>
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</table>

f. Recording (Note that recordings and photographs are identifiable, so data is not anonymous.)

<table>
<thead>
<tr>
<th>Will participants be audio recorded?</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Will participants be video recorded?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Will participants be photographed?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

If YES, please describe how/where recordings will be stored, who will have access to them, and an estimate of the date (month/year) that they will be destroyed. N/A

Additional Details (if needed).

*The privacy measures that I may or may not take will largely depend upon if participants want to opt-in or opt-out to being identified. I will take all the appropriate steps for de-identification and privacy protection if called to do so.*

8. Compensation

a. Will participants receive a gift or token of appreciation?

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
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b. Will participants receive services, treatment or supplies that have a monetary value?

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

c. Will participants receive course credit?

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
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</table>

If YES, please describe non-research alternatives to earn the credit, the number of points awarded and what percentage of total points for the course it represents.
d. Will participants receive monetary compensation (including gift cards)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

If YES, please detail the amount per session and total compensation possible. Additionally, describe what compensation amount is paid to participants who discontinue participation prior to completion. *

* If University funds are used to compensate participants, the name and address of participants will need to be provided to the Finance Office. If participants will be paid $100 or more in a calendar year, participant social security numbers must be provided to Finance. The consent form must reflect this.

** If you plan to use university funds to compensate participants, IRB approval may not be sufficient. In all cases, University Trust Fund Guidelines apply, please contact Accounting Office with questions. In some cases BSU may require further paperwork or documentation from you and/or your participants.

9. Consent Process (Select One of the Following Options)

- [ ] I am obtaining signed consent for this study. Attach copies of all consent/assent documents, using the BSU templates as a guide to ensure all required elements are present.
- [ ] I am requesting a waiver or alteration of informed Consent.

Provide details below and attach information that will be provided to participants regarding the study (email, opening page of online study, cover/consent letter, other consent text, etc.).

b. How and where will the consent process occur? Will participants have an opportunity to ask questions and have them answered? What will be done to avoid coercion or undue influence?

I will email a PDF of the consent forms to the participants using my Bridgewater State University student email. I will explicitly state in the email that the participants do not have to participate in the interview process. In the email, I will offer them the ability to ask questions and I will include my phone number and Dr. Harris' contact information. I will reiterate that there is no pressure to participate, and I fully respect their decision and reasoning if they choose not to participate.

c. Will the investigator(s) be obtaining all of the informed consents?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
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</table>

If NO, identify by name and training who will be describing the research to subjects/representatives and inviting their participation?
d. Will any participants be minors

Yes   No

and for the assent from the minor.

10a. Do you or any other persons involved in conducting this research have any potential conflicts of interest, (e.g., funding source, personal investments in a company that may profit from the research, source of product being tested) that may affect the rights and welfare of human subjects or may be perceived as affecting them?

☐ No Known Conflict Of Interest (continue to Section 11)

☐ Potential Conflict or Appearance of Conflict of Interest that does not need to be disclosed to participants (complete 10b through 10c)

☐ Potential Conflict or Appearance of Conflict of Interest that should be disclosed to participants (complete 10b through 10d)

10b. In the box below, describe potential conflict or appearance of conflict of interest

I am an employee if the same company that these HR professionals work at. The HR colleagues that I am planning to interview may have felt more pressure to respond to my inquiry about an interview as we are already colleagues.

10c. In the box below, describe how you intend to manage potential conflict or appearance of conflict of interest

I have stated in the consent form that there is no pressure to participate, and they can stop participating at any time. Also, I have listed potential risks to my interviewees in the consent form. I will again reiterate when sending my initial email for participation that there is no pressure to participate. Additionally, I will use my school email address for communicating with the interviewees.

10d. In the box below, describe how participants will be informed of potential conflict or appearance of conflict of interest

In a brief, but separate document, I will describe how as an employee of the same company there is a potential conflict of interest. I will reiterate that the interviewees have no obligation to participate and that I view this interaction and experience as separate than our professional relationship. I will state that this experience and its outcome will have no impact on my working relationship with them. On a personal note, I will not allow this to interfere in my professional relationship with them.

11. Primary Investigator Certifications

I understand that I have ultimate responsibility for thoroughly and accurately completing this application, the protection of the rights and welfare of human subjects, the conduct of the study and the ethical performance of the project.

☐ I have included all instruments (questionnaires, surveys, tests recruitment tools, interview questions, etc.)

☐ I have included recruitment materials (advertisements, postings, etc.), debriefing materials

☐ I have included informed consent, parental consent/permission, and/or minor assent materials

☐ I have included letters of assent or approval from any cooperating institutions

☐ I have included all required [signatures] approvals
I certify that I am familiar with the ethical guidelines and regulations regarding the protection of human participants from research risks and the ethical principles of my profession and will adhere to the policies and procedures of the College of Bridgewater State University Institutional Review Board.

☐ I have completed the BSU IRB approved training within the last 3 years and the Certificate of Completion is attached.

I will ensure that all research staff working on the proposed project who will have direct and substantive involvement in proposing, performing, reviewing, or reporting this research (including students fulfilling these roles) complete IRB approved training.

☐ I will send this form via an official workplace email address (e.g., @bridgew.edu, or @maritime.edu).

☐ All investigators who have [signed] below have completed and approved this form.
INVESTIGATOR ASSURANCE:

The Primary Investigator may not initiate any research involving human subjects until written notification of IRB approval or compliance with any and all contingencies made in connection with said approval has been received. Failure to provide all required information will result in return of your IRB application for correction prior to IRB review.

I understand that as Primary Investigator, I have ultimate responsibility for the protection of the rights and welfare of human subjects, conduct of the study and the ethical performance of the project.

I agree to comply with the letter and spirit of the Bridgewater State University policies on research and investigation involving human subjects, as well as with all applicable federal, state and local laws regarding the protection of human subjects in research, including, but not limited to the following:

- No changes will be made in the protocol or consent form until approved by the BSU IRB.
- Legally effective informed consent will be obtained from human subjects if applicable, and documentation of informed consent will be retained in a secure environment, for three years after termination of the project.
- Adverse/unexpected events will be reported to the BSU IRB promptly.
- All protocols are approved for a maximum period of one year. Research must stop at the end of that approval period unless the protocol is re-approved for another term.

SIGNATURES: I certify to the best of my knowledge the information presented is an accurate reflection of the proposed research project and that I intend to comply with the letter and spirit of the Bridgewater State University Policy on the Protection of Human Subjects in Research.

Full Name of Primary Investigator: Dr. Todd Harris
Signature of Primary Investigator: Dr. Todd Harris
Date: 10/10/22

Full Name of Co-Investigator: Jake O’Neill
Signature of Co-Investigator: Jake O’Neill
Date: 10/10/22
Acknowledgements
I would like to take this opportunity to thank the people who took the time to help me with this incredibly important and rewarding project. First off, I would like to thank my parents and my sister for not only supporting me in this project, but also throughout my entire academic career thus far. Also, I would like to thank R. and T. for taking the time out of their very busy schedules to be interviewed for this project and just their general support overall. Additionally, I would like to thank my thesis mentor Dr. Todd Harris for all his help and support with this project. Lastly, this project would not have been possible without research materials. I would like to thank all the Bridgewater State University Maxwell Library staff who diligently assisted me in gathering all my many research materials.