Part Two Participant and Small Group Contributions
Small Group Dialogue with Survey Responses and Participant Polling

Participants at the concurrent session had dialogues at their tables with one person at each table submitting the groups' responses to two questions on an online survey.

Group responses to the question: What actions are being taken by health organizations to engage, support, and retain the HHR workforce?

Retention Strategies

Working Groups/Committees/Meetings:
- Inclusion of frontline staff in HHR committees.
- Establishment of HHR forums and best practice councils.
- Creation of retention committees focusing on wellness.
- Inclusion of all staff in these initiatives.

Expanding Employment Benefits and Support:
- Facilities such as staff gyms, free parking, and recreational activities.
- Exploring new benefits like pet insurance.
- Revamping benefits for flexibility and discretionary funds.
- Considering housing supports for staff.

Surveys: Regular surveys of physicians and all staff conducted quarterly.

Flexible Working Hours and Arrangements: Implementing flexible working hours.

Inclusive Events: Organizing events that include both workforce and residents/patients.

Bonuses: Providing financial bonuses to staff to stay.

Community-Based Staff Empowerment: Focusing on empowering staff based in the community rather than institutions.

Equity, Diversity, and Inclusion: Actively recruiting for diversity and ensuring inclusive environments for sharing and being heard.

Innovation Funding: Allocating funds for projects related to retention.

Workload and Wellness Focus:

- Shifting conversation from compensation to workload, wellness, and working conditions.
- Reviewing travel conditions for nurses.

Engagement Ambassadors: Using ambassadors to foster engagement.

Stay Interviews: Conducting interviews to understand retention challenges.

Compensation Challenges: Addressing compensation issues, especially for leaders.

Training and Development

Psychological Safety Training: Investing in psychological safety training for leaders.

Leadership Training:
- Providing 'be kind' leadership training.
- Structured programs for frontline leadership development.

Coaching and Mentorship:
- Implementing new staff mentorship programs and individual coaching.
- Buddy programs for connecting staff.

Resiliency Programs: Voluntary RISE program for resiliency and well-being training, peer support, and advocacy.

Violence Prevention: Developing policies for a culture of safety for frontline staff.

Emerging Leaders Programs: Training for potential future leaders.

Simulation and Education: Investing in simulation experiences, preceptors, and ongoing staff education.

Succession Planning: Proactive planning for leadership succession.

Standardized Orientation: Implementing consistent orientation processes.

Leadership Development: Continuous investment in leadership skills development.

Recruitment

Financial Incentives: Offering signing bonuses for new recruits.

International Recruitment: Initiatives for recruiting internationally trained clinicians.

Strategic Committees: Forming committees for strategic nursing recruitment.

Provincial Grants: Utilizing grants for recruitment and retention.

Specific Actions by Health Leaders

Boards of Directors:
- Active participation in staff appreciation events.
- Prioritizing staff retention and recruitment.

Communication:

- Regular updates from CEOs and senior leaders.
- Monthly town hall meetings and walkabouts.
- Direct communication and feedback mechanisms.

Leadership Rounds: Regular executive rounds and walkabouts by leadership.

Leadership Behaviour:

- Demonstrating trust, transparency, and fairness.
- Focusing on current issues rather than past experiences.
- Commitment follow-through.

Shared Management Philosophy: Collaborative management approaches focused on reducing overtime and enhancing staff and patient-centered decision making.

Safety Improvement: Ongoing efforts to enhance safety measures.

Provincial Strategies:

- Translating provincial strategies into regional actionable items.
- Engaging remote staff through email and other remote communication methods.

Frontline Manager Support: Empowering frontline managers and reviewing their span of control.

Accreditation Feedback: Leveraging feedback from Accreditation Canada.

Recognition Events

Campaigns and Programs: Hospital Heroes campaign, staff appreciation events, and recognition programs.

HHR Wellness Initiatives

Safety and Harm Reduction: Province-wide partnerships to improve staff safety and reduce harm.

Joy Fund: Supporting staff-driven joy initiatives, such as revamping break rooms and therapy animal visits.

Wellness Programs:

- Programs focused on holistic wellness, including education on relevant topics like menopause in the workplace.
- Incorporating wellness into organizational accountability.

Therapy Support: Staff therapy dogs, quiet spaces for peer support, and wellness communities.

These comprehensive actions reflect a multi-faceted approach to addressing workforce engagement, support, and retention in healthcare organizations.

What roles to health leaders play in supporting their organizations actions?

Group Responses

Lead Self	Engage Others
Visibility and physical presences	Engage in meaningful conversations for wellness ideas. Encourage ongoing brainstorming of ideas
Lead by example	Active listening with actions resulting
Transparency	Speak up
Care	Ask people what matters to them
Double down on efforts	Unleash shackles on front line management
	Hear from grassroots - what are the real problems?
	Empowering staff to be leaders
Achieve Results	
Responding to, and engaging in, plans that are in place	Distill meaningful drivers of appreciation and motivation
Ensure staff are aware and engaged in achieving key goals/targets	Recognize generational preferences
Act on feedback that staff provide	Technology AI efficiency gains
Closing the loop on conversations	Measure
Incentivize retention and succession planning	Funding innovative good ideas and staff led projects
Ensuring as leaders that HHR is a priority	Advocate for resources/support
Invest in drivers of staff satisfaction (wellness, mental health, recognition)	
Develop Coalitions	**Systems Transformation**
Community engagement	Working within the scope of your accountability - not just someone else's problem, be a part of the solution
Support academic partnerships	

What roles do health leaders play in engaging, supporting, and retaining the HHR workforce?

Individuals Responses (by online poll):

How leaders should be	# of responses
Be present	8
Be visible and physically present	5
Be caring	4
Be supportive	3
Be authentic (authentic leadership)	3
Be curious. Ask the right questions, ask the right people	2
Be empathetic	2
Be accessible	
Be brave, do the tough things	
Be humble	
What leaders should do	**# of responses**
Actively listen to understand and identify different ways for staff to give feedback	13
Act, help, engage, influence, have an impact	6
Communicate, tell the truth, raise the conversation	6
Embrace the suck/slump	5
Lead by example, walk the walk, role model	3
Lead change	2
Give feedback continuously	2
Support professional development	2
Invest early in front line leadership, in career planning, and in innovative programming for leader retention	2
Innovate constantly, let ideas live even if not fully developed	2
Close the loop, follow through	2
Empower teams, advocate for team members	2
Keep safety for all top of mind	

Recognize and celebrate	
Monitor for improvements	
Enjoy what you do	
Build a common purpose	
Understand that work isn't the only priority for people	
Strategic workforce planning, scheduling, and deployment	
Psychological safe space creation	
Share a clear vision	
Address systemic challenges including EDI initiatives	
Define HHR as the priority. Hold it as the priority in multi challenged list	
Manage workloads	
Provide flexibility for the workday	
Understand that it will never be like it was in the "old days"...	
Encourage wellness within their teams	