Executive Summary
The main goal of this brief is understanding the resilience of the health workforce after the austerity period and pre COVID-19 pandemic.

This policy brief summarises:
• The association between individual factors (psychological, sociodemographic variables), work-related factors and job satisfaction of health staff.
• The most dissatisfied subgroups of health staff and the possible causes of their dissatisfaction.

Key messages
• 48% of all healthcare professionals have, or are currently, considering resigning from their job. However, the focus of health systems has been on increasing the availability of health workers and not in retaining their existing workforce.
• Nearly all literature has analysed job satisfaction from an organisational perspective without considering the impact that sociodemographic, psychological variables, in conjunction with work related factors, could have on the satisfaction of individuals or cohorts. (Figure 1)
• Replacing a highly specialized healthcare expert can cost up to 200% of the employee's annual compensation, so it's critical to identify the predictors of job satisfaction in the health sector or what motivates health employees to stay with their organization.

Context
What is job satisfaction? A positive orientation toward one's job. It acts also as a mediator between occupational stress and intention to leave, such that the higher the job satisfaction, the lower the occupational stress and intention to leave among the employees.

What did we do?
An analysis of the Irish Health Sector’s Staff Survey “Your Opinion Counts” (YOC) utilising the data collected in the last 2 waves (2016, 2018)

Fig. 1 Possible variables associated to Health Staff Satisfaction

Job Satisfaction in Ireland at country and organisational level
• Almost half of the survey’s respondents were neutral or dissatisfied with their organisation (47.9%)
• Communication within the organisation and the concerns about training and career progression were associated with the highest percentage of dissatisfaction among participants (39.2% and 30.8 respectively) (Figure 2)

Figure 2: Dissatisfaction of health staff with their organisation in Ireland by organisational components (HSE-YOC surveys)
Sociodemographic characteristics and psychological state variables of the general sample and the relationship with staff satisfaction

- At the individual level dissatisfied health staff were mainly female (73.9%, p<0.001), over 30 years old (91.9%, p<0.001) and were bullied (57.3 %, p<0.001) or discriminated against (42.1%, p<0.001).

- Staff working within the ambulance service were significantly more likely to report being dissatisfied and, to a lesser extent working as a doctor/dentist or as a nurse (p<0.001).

Nursing: Dissatisfied nurses were more likely working in the ambulance service (NAS) than in the acute hospitals. The division of health service they usually work was primary care instead of older people's services. These nurses are 1.65 times more likely working in relatively isolated/rural areas (CHO 1) than in urban areas (CHO 9) and they have contact with patients as part of their daily work.

However, each subgroup/stratified sample has its own particularities (Figure 3)

**Discussion points**

- The emigration of physicians and increasing workloads have been discussed as sources of employee dissatisfaction. In the case of Ireland, the historic underfunding, along with austerity-related cutbacks and understaffed workplaces caused an increase in the working hours, a fast-working pace and a poor work-life balance.

- Communication networks are strongly correlated with the job satisfaction and this positive association is also connected with greater organisational commitment which, in turn, is related to the prevention of staff turnover.

- The health workforce in Ireland has faced many challenges over the years in the area of career progression and currently the country has one of the lowest levels of medical specialists in the OECD despite having one of the highest levels of medical graduates.

**Recommendations**

- It’s crucial to increase the reliability of the instruments and frameworks that are utilised in the surveys for measuring staff satisfaction in the country. Including individual and work-related factors as part of these instruments can better determine the factual health staff satisfaction

- Health organisations should offer more information on the available services for coping with discrimination and bullying to their staff.

- It’s crucial to establish clear pathways for career progression within the health organisations.

- Enhancing the opportunities for training and improving the communication strategies are the best approaches for guaranteeing the retention of the health staff.

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