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Job-Related Factors Affecting Retention of Millennial RT During COVID-19

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Job-Related Factors Affecting Retention of Millennial RT During COVID-19

by

Valerie David

A doctoral project to the faculty of the Medical University of South Carolina

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Abstract

Background: The new generation of respiratory therapists (RTs) entering healthcare today pose a new challenge for leadership. Leaders are faced with the challenge of balancing the needs of the Generation-Y (millennial) workforce, along with the challenges of caring for an aging patient population (Piper, 2008). The safety and quality of services for the next generation of patients depends upon finding reasonable and viable solutions to retain the next generation workforce. Early experience during the coronavirus disease (COVID-19) pandemic and predictive modeling indicate that the need for RTs will exceed the current supply (Hester, Cartwright & Hawkins, 2020).

Objective: To identify job-related factors affecting retention of millennial RTs during COVID-19 crisis.

Methods: An exploratory pilot survey utilizing structured questions to identify respondent personal characteristics which have been linked to satisfaction and turnover in the literature. Open-ended narrative responses to elicit responses on poorly understood factors that are specific to Respiratory Therapy millennial job turnover are utilized. Univariate statistics are utilized to describe differences between categories of responses. Narrative responses were analyzed using qualitative assessments to identify themes. The study is classified as a Quality Improvement (QPI) study by the Medical University of South Carolina Investigative Review Board.

Results: A total of 56 surveys were mailed out utilizing REDCap data management survey platform. Of the 56 administered, 23 surveys were returned of which 3 surveys excluded that did not identify as a millennial RT.

Conclusions: It was shown that during the COVID-19 Pandemic, social media was the fastest and most convenient way to alert applicants about a job. RT workload increased during the COVID-19 Pandemic due to the increase in Respiratory Illnesses associated with the virus. Modifiable job-related factors such as an increase in pay, time off, and an organization's overall capacity to respond to the pandemic are major factors for overall job satisfaction and a RTs intent to remain with their organization. These responses may form a relevant foundation for the development and validation of a national RT job satisfaction survey for use during the COVID-19 pandemic.

Key Words: Millennials, Respiratory Therapist, COVID-19, retention

CHAPTER 1 INTRODUCTION

The current healthcare workforce will not meet the demands of the future healthcare system needs. According to the US Bureau of Statistics, (US Bureau of Labor Statistics, 2019) ten thousand Baby Boomers (workers born between 1946 and 1964) will turn 65 each day through 2030. Those that are retiring will take a large portion of the institutional knowledge they spent an entire career amassing. This ranges from intellectual capital, expertise in their given industry, and insights into key customer relationships to things as simple as policy, procedure, and documentation. Consumer demand for healthcare will increase at a rapid pace as an aging population will require more healthcare. According to a study in *Forum for Health Economics and Policy*, the rate of all major chronic conditions—high blood pressure, heart disease, diabetes, cancer, stroke, and lung disease—is expected to rise among the elderly, driven by higher rates of obesity and by greater life expectancy (Sofer, 2018). The need for expertise at the bedside will be required to ensure safety, quality, and improved health outcomes. How can leaders ensure staffing and clinical expertise to drive care for our patients? According to a recent study in *Health Affairs*, there is one bright spot: millennials. Unlike their predecessors—Generation Xers who turned away from nursing in favor of professions previously unwelcoming to women, such as law, business, and medicine—millennials, born between 1981 and 1996, have embraced the nursing profession as the baby boomers did in the late 1970s and '80s. Millennials have been doing so in even greater numbers: those born in the late '80s were 65% more likely to become a healthcare worker than those born in 1955 (Sofer, 2018). More than a third of the U.S. labor force are millennials, and as healthcare leaders; we want to ensure that there are strategies in place to understand the needs of the millennial workforce and how to ensure retention. The literature reveals the dynamics of a changing demographic in the workplace. Each generation

brings with them a unique perspective as well as a set of challenges that require leaders to adapt to a new generation of employees. The 20th century is bookended by the Millennial Generation, born between 1981 and 1986, so named because they would first enter the workforce at the dawn of the new millennium (Fry, 2015). The most educated generation to date (Patten, 2015). In an increasingly automated and technology driven society, Millennials face a rate of change unthinkable 60 years ago. Millennials are bombarded with lists, facts, and data. As a result, this generation strives to connect with the "why," popularizing numerous books, videos, and programs aimed at connecting individuals with the meaning that underlies choices and more deeply connects millennials with the work they do. In her doctoral research, Bourne stated that there are five generations in the current work environment and understanding how to communicate to each cohort can set an organization up for successful recruitment, hiring, and retention strategies (Bourne, 2009). Her groups and categories are shown in Table 1 below.

Table 1 Factors shaping generations

Generation and Characteristics	Loyalist 1925-1945	Baby boomers 1946-1964	Generation X 1965-1980	Millennials 1981-2000	Generation Z 2001-2020
Shaped By	The Great Depression, World War II, and movies	Vietnam War, Civil Rights Movement, Watergate	The AIDs epidemic, the fall of the Berlin Wall, the dot-com boom	Columbine, 9/11, the internet	Life after 9/11, the Great Recession, technology at a young age
Motivated By	Respect, recognition, and providing longevity in work	Company loyalty, teamwork, and duty	Diversity, work-life balance, their personal-professional interests rather than the company interest	Responsibility, the quality of their manager, unique work experiences	Diversity, personalization, individuality, and creativity
Communication Style	Personal touch, handwritten notes	Whatever is most efficient, including phone calls and face to face	Whatever is most efficient, including phone calls and face to face	IMs, texts, and email	IMs, text, social media
Work Expectation	Provide satisfying work and opportunities to contribute	Provide them with specific goals and deadlines; put them in mentor roles, offer coaching style feedback	Give them immediate feedback, provide flexible work assignments and work life balance, extend opportunities	Get to know them personally, manage by results, flexible schedule and work assignments, immediate feedback	Offer opportunities to work on multiple projects at the same time, provide work-life balance

COVID-19

According to an article published in the New England Journal of Medicine (Fauci, et.al, 2020) noted that the latest threat to global health is the ongoing outbreak of the respiratory disease that was recently given the name Coronavirus Disease 2019 (Covid-19). It was rapidly shown to be caused by a novel coronavirus that is structurally related to the virus that causes severe acute respiratory syndrome (SARS). As in two preceding instances of emergence of coronavirus disease in the past 18 years — SARS (2002 and 2003) and Middle East respiratory syndrome (MERS) (2012 to the present) — the Covid-19 outbreak has posed critical challenges for the public health, research, medical communities, and healthcare workers.

On March 11, 2020, the World Health Organization (WHO) declared the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) outbreak a pandemic due to the constantly increasing number of cases outside China (Who Director-General, 2020). Patients with SARS-CoV-2 infection can develop coronavirus disease 2019 (COVID-19), which has resulted in high rates of hospitalization and intensive care unit (ICU) admission (Grasselli, G. et. al, 2020).

Respiratory therapists around the world were pushed center stage in this global pandemic. Care and oversight for these patients requiring oxygen therapy, mechanical ventilation, and non-invasive ventilation therapy require the unique set of skills provided by the trained respiratory professional.

Background and Need

Numbering approximately 72 million and aged 28 and younger, millennials, or Generation Y, have a significant impact on the size and characteristics of the United States labor force (Toossi, 2009). Healthcare systems continue to struggle with recruitment, hiring, and retention of healthcare workers. This trend amongst COVID-19 will probably continue, and in many instances, increase due to the mental strain placed on healthcare workers. A research project done by a healthcare community in Zimbabwe stated that the need to retain health personnel is a policy challenge undermining health system reform of the 21st century (Tadera, B., Hendrick, S., & Pillay, Y. 2016). As we move into a new space in healthcare, healthcare leaders will need to identify innovative and creative strategies for recruitment and retention. Competition in some markets will remain competitive as organizations look for the best in talent. Respiratory therapy programs around the country have already identified a need for what the respiratory labor force will look like in the future. The American Association for Respiratory Care (AARC) was challenged by many key issues as it relates to the practice of respiratory care.

In an article by Kacmarek et al., key concerns for the profession were disease management, biomedical innovation, and human resource issues as the United States adjusts to population increase, the aging of America, and decreasing the cost of healthcare while maintaining or improving quality (Kacmarek, RM., et.al.,). Human resource issues can be one of an employer's biggest source of cost. As healthcare leaders we will need to manage our human resources wisely as payor mix and healthcare reimbursements diminish. A key aspect of that management is associated with recruitment and retention. In addition, the constant churn of recruiting and hiring have a profound impact on the morale of employees left to fill the vacant shifts. According to an article from *Healthcare Financial Management Association,* the current healthcare labor shortage has underscored the importance of attracting and retaining good employees (*Healthcare Financial Management Association*, 2002). Although recruitment efforts often focus on clinical professionals such as pharmacists and registered nurses, employees of all kinds are becoming increasingly difficult to find and keep. Replacing an employee can cost at least 150 percent of the employee's annual salary. That means it can cost an organization at least $75,000 to replace a $50,000-a-year employee. Replacement costs include hiring and recruiting costs, training costs, lost productivity during the first six months of employment, and use of temporary employees during transitions. Beyond the financial loss is the loss of knowledge and commitments associated with long-term employees (Izzo, J.B. & Withers, P, 2012).

Problem Statement

Millennials are our new workforce, and they are here to stay. Each generational cohort brings varying beliefs, work ethics, values, attitudes, and expectations to organizations (Niemiec, 2000). As hospitals continue to lose experienced healthcare workers, they need to understand which retention strategies will work to secure our millennial workforce. Similarly, a need to

differentiate which strategies work to fit the emerging professions' culture. Nursing reports that, "career restlessness is a new norm in the workplace, so strong internal career development and advancement will have to be part of the solution," states a related article on emerging registered nurse leader, adding that nurse leaders play a key role in retention (AACN, 2017). However, this may not hold for other professions.

While much of the literature on retention of the millennial healthcare worker is focused on nurses, RT retention will be the focus of this project. Respiratory therapists care for patients with disorders affecting the cardiopulmonary system such as cardiovascular disease, pneumonia, and chronic respiratory disease (e.g., asthma or emphysema). They also provide emergency care to patients suffering from trauma, heart attacks, drowning, or shock. Respiratory therapists conduct a variety of patient evaluation and education activities. Those working in home care settings teach patients and their families to use ventilators and other life-support systems. In a hospital setting they perform a myriad of duties such as managing ventilators and artificial airway devices, testing patients' breathing capacity, and providing breathing treatments (Health Workforce Projections: Respiratory Therapist, 2011).

Turnover in the healthcare environment will pose a significant risk to the overall quality of care that is delivered, in addition, the cost of recruitment, hiring, and training can be costly for the organization. Leadership concern is for a good reason: turnover negatively impacts quality of care and staff morale and places immense pressure on hospital budgets (Bae, SH. et. al, 2010). A good combination of experience and novel RT workers can play a big role in ensuring that there is knowledge, expertise, and experience. If millennials are not given an opportunity to adapt to their work environment, they will continue to leave or find work elsewhere. They are not the

generation before them and are more willing to leave the company if they perceive that they have no room for advancement, are not a part of something, or if the money is not satisfactory.

Loyalty in the millennial generation look vastly different than that of the workforce before them. They have opportunities and they like choices. According to a study done by Koppel et al., leaders should continue to focus on improving house-wide nurse engagement while pursuing targeted retention strategies to increase loyalty among the growing millennial segment of the nursing workforce (Koppel, et.al, 2017). This will benefit healthcare organizations by alleviating financial and nonfinancial costs of turnover and harness the energy, ambition, and fresh perspective of the newest generation of nurses. It will be necessary as newer generations enter the workforce to ensure retention strategies are in place. The main purpose of this research is to improve our understanding of the expectations of the millennial RT and the characteristics of their work environment as it relates to retention. Healthcare, unlike other professions require skill, talent, and experience to manage the complex patients and an aging population plagued with comorbidities that include respiratory illnesses.

The main purpose of this research is to improve our understanding of expectations of the millennial RT and the characteristics of their work environment as it relates to retention.

One: Perform a review of the literature on millennial turnover and retention in healthcare.

Two: Construct a survey instrument and pilot test this survey in a convenience sample of 56 RTs.

The final product of this project will be an instrument targeted for fielding by the American Association for Respiratory Care to target the millennial RT workforce to understand what they are seeking in an employer and within their work environment.

Research Questions

1. Are there personal demographic characteristics, such as age, sex, race, that are associated with work satisfaction of RTs?

2. Does current work experience (trauma hospital, community hospital, or long-term care facility) affect work satisfaction and retention of RTs?

3. Do recruitment approaches, hiring packages, pay level compared to market, pay incentive structures of fringe benefits affect work satisfaction and retention of RTs?

4. Which modifiable job-related factors (high workload, stress, organizational culture, supervisor conflict, shift schedules, other) do RTs identify as instrumental for high satisfaction and intent to remain with an organization.

With the aging population and increasing health issues that plague this group, healthcare will need to provide viable strategies for retaining the next generation of healthcare workers. Instability in the healthcare environment poses a risk to the quality of patient outcomes and cause increase stress on the staff that is left behind. Workforce planning is both a science (analysis) and an art (execution). It comprises a set of business processes for analyzing the supply and demand of talent in an organization and determining how that supply and demand might change over time. Turnover rates, retirement projections, and retention data are some of the tools commonly used in the workforce planning process. Because the increase in healthcare jobs is expected to outpace growth in all other fields and industries, recruitment and retention will be matters of special interest to all healthcare leaders during the next several years (Parsons, 2019). This project has the potential to lead and guide decision makers in recruitment, hiring, and retention strategies for the millennial Respiratory Therapy workforce. Altered retention strategies must be

developed quickly to diffuse any unnecessary retention disputes that may become perplexing (Harrington &Heidkamp, 2013).

Turnover, job dissatisfaction, and burnout are significant negative outcomes affecting the nursing workforce that require immediate attention and interventions by policymakers, managers, and clinicians (Bria et al. 2013). Respiratory therapy leaders, to combat increase cases of COVID-19 and increase respiratory illnesses, will need to identify strategies that focus on the recruitment and retention of their millennial workforce as boomers and traditionalist exit the market. As the United States continues to recover from economic recession, the transition of generational talent is taking place simultaneously, resulting not just in diverse skill sets, but also in different ways of thinking about and interpreting work and job expectations (Pike, 2014). The importance of recruitment strategies for millennial RT to include sign-on, retention bonuses, competitive salaries, and benefits, as well as promotion and advancement opportunities should be examined.

Population

Millennials have surpassed baby boomers regarding generation population, and they are flooding the labor market, with more than a million millennials entering the workforce annually (Petrucelli, 2017). It is observed that more than three-fourths of our recruitment efforts over the last there years have been millennials and they have a vastly different expectations than even a generation before them. Healthcare employers need to meet the expectations of the emerging workforce.

Five major shifts have occurred in workers' expectations. Employees today want to achieve balanced lives, partnership with their employers, experience personal and professional

growth, feel they are making a worthwhile contribution in their job, and enjoy a sense of

community at work (*Healthcare Financial Management*, 2002).

CHAPTER II LITERATURE REVIEW

Introduction

Millennials are quickly becoming the most prevalent generation of healthcare workers. These individuals have a unique outlook on education and have different preferences and expectations than their predecessors ((Desy, Reed and Wolanskyj, 2017).

The purpose of this study is to assess the relationship between demographic factors (age, gender, ethnicity, race, work status, and experience, the professional practice environment, incentives, and work satisfaction to increase understanding of factors that affect job turnover for millennial RTs (RTs). RT job satisfaction will be a critical factor in determining recruitment and retention of RTs. Determinants of RT job satisfaction measures have received little attention in the literature (Metcalf, Stroller, Habermann & Fry, 2015).

By 2050, there will be an expected 83.7 million people 65 years of age and older living in the Unites States (U.S.). With these demographic changes, more individuals with chronic health conditions and comorbidities will need health care. As the U. S. population increases, health care organizations may experience difficulties in meeting the needs of this vulnerable population (*Georgia Nurses Association*, 2017). Healthcare leaders will need to find strategies and ways to ensure that they are retaining this next generation healthcare worker to ensure quality and safety of care. High turnover rates can lead to burn-out and decrease skill sets that will be required to care for sick patients. According to the Institute of Medicine's 2010 report brief on *The Future of Nursing*, "high turnover rates among new nurses underscore the importance of transition-to-practice residency programs." The report goes on to highlight the need for these programs in

both acute care and community settings to help manage the often-challenging transition from school to the bedside while further developing their nursing skills to deliver safe, quality care.

Literature Findings to Address Practice-Focused Questions

Data research and collection was completed from PubMed, CINAHL, and EBSCOhost from June 2015 to 2020. PubMed data base search yielded 126 results and CINAHL and EBSCOhost both yielded 6 results. The articles are peer-reviewed articles published in the English language; however, some are written about healthcare workers around the globe. The combination of search terms and key words included healthcare, worker, millennial, RT, and retention. Authors historically have tried to illuminate this topic from the perspective of the next generation workforce and how leaders will be challenged to come up with recruitment and retention strategies.

Our healthcare system is changing rapidly and is facing some of its biggest challenges during a global health pandemic brought on by the novel coronavirus. In addition, an aging population will begin using our healthcare system as they are challenged with health conditions. According to the National Research Council, as the length of life and number and proportion of older persons increase in most industrialized and many developing nations, a central question is whether this population aging will be accompanied by sustained or improved health, an improving quality of life, and sufficient social and economic resources (National Research Council, 2001). The answer to this question lies partly in the ability of families and communities, as well as modern social, political, economic, and health service delivery systems, to provide optimal support to older persons.

Work Motivation

As the veterans and baby boomers exit the workforce, the millennial generation will become the largest generation to dominate the workspace. As such, today's healthcare managers and leaders will be challenged to understand the needs and desires for this new group of workers. Employees from different generations have different experiences, goals, and expectations, potentially causing difficulty as they work side by side (Kogan, 2001). With different experiences this create a challenge for what will be rewarding and motivating to retaining these new workers.

One of the major issues facing organizations today is motivation (Wiley, 1997), and organizational success is dependent on motivated employees who are satisfied with their jobs (Robbins, 2003). Motivation is a significant factor in job satisfaction, productivity, and performance as demonstrated by the theories surrounding motivation (Alderfer, 1969, Vroom, V.H. 1964). While progress has been made to identify individuals' sources of motivation and factors that affect motivation in the workplace, the application of this knowledge presents a challenge with a multigenerational workforce adapting yet again to another work style.

People are often motivated to work to provide for themselves financially. Since work occupies a great deal of people's time workers may desire a work environment that is productive, creative, and allow for career advancement. Motivation concerns that "psychological processes that cause the arousal, direction and persistence of behavior" (Ilgen and Klein, 1988). There are many frameworks and theories on employee motivation and enthusiasm. Once such theory is Herzberg two-factor model one of the more popular motivation theories. He felt that certain conditions, or "hygiene factors", had to be in place for employees to be satisfied, but these did not necessarily motivate the employees. For example, if an employee is working below the

minimum wage, it is not likely that he/she will be motivated until a perceived fair rate of pay is given. At the same time, if an employee is well paid, Herzberg believed that a pay raise would not have a lasting motivational effect. Absence of hygiene factors leads to dissatisfaction; presence does not lead to motivation; at the same time motivators work more powerful than hygiene factors (Campbell, J.P. & Pritchard, R.D., 1976). Table 2 below shows the two categories of factors.

Hygiene Factors	Motivators
Status	Being able to achieve
Security	Being recognized
Work conditions	Given responsibility
Work relationships	Growing and learning in the job
Pay	

Table 2 Factors associated with satisfaction and dissatisfaction

Older workers from the baby boomer's generation, born between 1943 and 1960, are retiring (Lancaster and Stillman, 2002)., but millennial employees who are in the early stages of their careers are still young and may not yet have made long-term commitments to their organizations, causing potential leadership voids within organizations must continue to change and adapt to the work values of a multigenerational workforce to recruit, motivate, and retain both todays and tomorrows leaders (Scandura and Williams, 2000).

The work environment will forever change as newer generations of worker enter the workforce. Mangers and healthcare leaders are faced with the challenges of hiring, recruiting, and retaining experienced healthcare workers to ensure a safe and high level of quality care.

Characteristics of Millennials and Work

The millennial generation—those born between 1981and 1996 (ages 23–39 at the time of this study)—is the largest generational segment of the US population, with 72 million members, outnumbering baby boomers; and as such they now outnumber older generations in the workforce (Weinbaum, Girven, and Oberholtzer 2016). Every generation brings unique and significant contributions to the overall workforce. The challenge for leaders and particularly healthcare leaders is to understand how to integrate and align these new generations into the work environment that will allow the most effective synergy within the work environment and create value and quality of care. As millennials move into the workforce, stories decrying the perceived neediness, disloyalty, sense of entitlement, and overall casualness in millennials' approach to work continue to surface in both the popular and academic press. Organizations have begun to pay attention as well, recognizing that managers are having trouble managing their "new generation of young people" (Thompson, C & Gregory, J.B., 2012).

A group of researchers from George Washington University and the Department of Defense analyzed more than 20 published studies examining generational differences and concluded that meaningful differences among generations probably do not exist in the workplace (Costanza et al. 2012). The minor differences that do appear are likely more attributable to factors such as stage of life than to generational membership. In a study commissioned by CNBC, Liesman's (2015) findings echo these results: looking at workers' assessment of the importance of six traits in a potential employer—ethics, environmental practices, work–life balance, profitability, diversity, and reputation for hiring the brightest—Liesman found that millennial preferences are about the same as the broader population on all six traits. Overall, we identified six categories of incentives that millennials consider when looking at a potential

employer: Salary and benefits, Professional development opportunities, Purposeful work, Flexible work arrangements, Organizational ethos. Broadly speaking, meaningful work still is a positive motivator for workers of every generation and/or time.

Respiratory Therapist

With a global respiratory pandemic and an increase in respiratory illnesses the expertise of a trained registered respiratory therapist (RRT) will be an invaluable asset to the healthcare team. RRTs are trained and highly skilled in managing patients with respiratory illnesses and complications. According to the Cleveland Clinic (RTs) are trained as "physician-extenders" and are an especially important part of a healthcare team. As the name implies, RTs treat patients with problems related to breathing, such as issues of people suffering from lung disease. They are patient care managers who not only determine the need for respiratory care services but administer that care directly to patients. The knowledge and skills in treating cardiopulmonary conditions puts them on the front line of care, from helping a premature baby in the neonatal intensive care unit breathe to saving the life of a patient suffering cardiac arrest. When COVID-19 arrived imperiling the sickest patients' ability to breathe the role of the RT took on a new urgency.

Because of the cost to the health-care system, the burden of respiratory diseases, hospitalizations, and ICU admissions also falls on society; it is paid for with tax dollars, higher health insurance rates, and lost productivity. Respiratory therapists are in a unique position to influence health-care delivery in several settings that include acutely ill hospitalized patients and those with chronic conditions in ambulatory settings. Clinical studies have demonstrated the value of RTs in specific areas, including the performance of medical procedures, the development and implementation of protocols aimed at weaning patients from mechanical

ventilation and providing lung-protective ventilation, optimal delivery of in-patient respiratory treatments, the application of disease management programs for COPD, and as part of rapid response teams (Kollef, M., 2017). With COVID-19 at an all-time high, the role of the skilled RT will continue to increase as it will ensure the highest quality of care for these complicated patients.

The respiratory therapy profession struggles to keep respiratory departments around the county full staffed with these skilled workers. This burden adds to the chronic understaffed departments that lead to an increase in turn-over and staff burn-out. Respiratory staffing and recruitment are reaching a tipping point. According to the Bureau of Labor Statistics (BLS), employment of RTs is growing much faster than the national average for all occupations. During the 10-year period between 2016 and 2026, BLS expects the need for RTs will increase by 23% (*Bureau of Labor*, June 2013).

Millennial Respiratory Therapy Turnover

The Affordable Care Act (ACA) has provided provision for more Americans to access and utilize healthcare. The largest generation entering the workforce, the millennial generation - those born after 1980 - is believed to lack commitment to their employers, frequently vacating their positions for the next best offer. Unintentional turnover is damaging to a company's bottom line and cause stress on employee's left behind. Cost of turnover—a non-value-adding element in the organizational budget—forces managers to focus on retention. The huge recurring expense created by turnover offers opportunities to improve employee satisfaction, reduce turnover, improve quality, and cut costs by diverting the current financial drain into programs and policies that encourage retention (Walden, J.D. et. al, 2004). The cost of turnover is more than just money, but employee morale, retention, and experience lost. The constant cost of marketing,

advertisement, recruiting, and sign on bonuses all impact the organization's bottom line. Health care organizations affected by high provider turnover also experience these costs according to Gray and colleagues (Gray, A.M., et. al, 1996) and a few studies involving other groups such as physicians, RT, pharmacist, and hospital executives (Wilson, C.N. & Stranahan, H., 2009).

Managers play a key role in employee retention and engagement. A leading engagement firm suggest that providing your team with the tools they need to succeed, cheering them on, and even giving them some accountability ensures that they always feel respected and valued and that your culture is where it should be. Not everyone is going to go home from work happy and excited every day; however, there should be more great days than bad ones (The Balanced Careers, 2019). We are facing a crisis in healthcare with the retention of our number one key resources-employee retention and motivation. To be effective, a health-care system must have the right number and mix of health-care workers and it must ensure that they possess the means and motivation to skillfully perform the functions they are assigned (McPake, Maeda, Arujo & Lemire, 2013). Today's healthcare leaders will be challenged to understand the needs and desires of this next work generation. Leaders that are willing to play a key role in the retention of this next generation workforce should be willing to assess, adapt, and understand the concerns of the millennial generation work force. Several benefits of retentions have been identified in the literature, such as patient safety, quality of care, patient satisfaction, nurse satisfaction, and safety (Jones, C., & Gates, M., 2007). Toward this end, several strategies have been suggested to improve nurse retention but can be generalizable to the cost for the turnover of millennial RTs. RTs like nurses and other health care workers are recruited and onboarded in the same manner and the turnover cost for nurses shown in table 3 may be expected to reflect the categories associated with turnover cost for RTs.

Table 3. Nurse Turnover Cost
- Advertising and recruitment   - Vacancy costs (e.g., paying for agency nurses, overtime, closed beds, hospital diversions, etc.)   - Hiring   - Orientation and training   - Decreased productivity   - Termination   - Potential patient errors, compromised quality of care   - Poor work environment and culture, dissatisfaction, distrust   - Loss of organizational knowledge   - Additional turnover

Quality care and a reduction in hospital acquired infections are on every leader's balanced score card. When leaders are faced with high turnover rates quality patient care may suffer. A study done by the AHRQ found strong and consistent evidence that higher registered nurse (RN) staff hours per patient were related to lower patient mortality rates, lower rates of failure to rescue, and lower rates of hospital-acquired pneumonia (AHRQ, Research Relevant to Understanding the Impact of Working Conditions on Patient Safety, 2007). There was evidence that higher, direct care RN hours per patient was related to shorter lengths of stay. Millennial RTs caring for patients in the critical care settings; in addition to, oversight for the rise in COVID-19 patients will require hours of experience that will come from retaining the most qualified staff.

Millennial Healthcare Workers and Patient Outcomes

We cannot underscore the impact of new employees on the overall quality and safety of patient care. Voluntary turnover can cause a major impact on the skill mix that is left due to the vacancies left behind. A new millennial generation of students, trainees, RT, and young practicing physicians has come of age. Technology has impacted education with an array of educational content-delivery techniques vastly different from the usual broadcast method of teaching. New curricula have expanded to encompass teamwork within of the entire team. Outcomes of educational efforts now include not only knowledge transfer but also performance improvement. Delivery of health care is also dramatically different. The sentinel driver of the quality and patient safety moment, *To Err Is Human*, was published more than 21 years ago, yet no fundamental changes in expectations and measurement for health-care quality and safety have occurred to alter the health-care landscape (Pingleton, 2012).

Healthcare, like many other industries, is facing a crisis of consciousness. The healthcare workforce has grown with the addition of a new group of physicians, nurses, allied health professionals, administrators, and support staff who belong to America's youngest generation now in the workforce—Generation Y, or the millennials. As baby boomers and Generational Xers depart the workforce the millennials take front stage. Along with this, will come the responsibility to ensure that a high level of patient care is delivered. With quality metrics and patient dashboards, today's healthcare leaders will need to be competent and skilled to deliver care at this next level. In addition to their sheer numbers, millennials bring their own unique attitudes on such factors as leadership, work environment, and organizational culture. Because the growth of millennial nurses coincides with unprecedented demand for and shortages of

nurses, workplace preferences and effective management of millennials take on a magnified

significance (Faller & Gogek, 2019).

Organizational Effectiveness and Turnover

Improving an organization's effectiveness requires a commitment of its workforce and

key personnel. With the global pandemic extending its reach, RT will continue to be key players

in caring for patients impacted by COVID-19. Employee commitment to an organization has

acquired increasing demand as it aids the organizations to retain more staff and thereby increase

in achievement, productivity, and effectiveness. No organization in the current ambitious world

can execute at peak levels unless each employee is committed to the organization's objectives

and performs as an effective team member (Shahid & Azhar, 2013). According to findings from

a survey conducted by Walden et al., members of the millennial generation ($N = 539$) in the

United States indicate that job engagement mediates the relationship between employee

communication and organizational commitment (Walden, Hwa Jung & Y.K Westerma, 2017). It

is concluded that when employees are engaged in their work, their commitment to the

organization is strengthened and the likelihood of them leaving the organization decreases.

Furthermore, an argument is made considering the study's findings that engagement and

commitment work in concert to strengthen Effectiveness of Retention (EOR) overall. To foster

engagement, organizations should remove obstacles to internal information flow and provide

ongoing feedback to employees about individual and organizational issues. Millennials, like

other generations before them, will no doubt bring a unique set of expectations to the workplace

that today's leader will have to embrace. Lancaster and Stillman (2002) suggest that

organizations can gain a competitive advantage by better understanding and adapting to

millennials' workplace motivation. By understanding the perceived motivational factors for

millennials, organizations will be able to increase workforce commitment, reduce turnover, and fill the quality void.

The common traits that define, or are associated, with Millennial workers are often regarded as barriers, yet provide healthcare leaders with a clear guide to understanding these employees and drawing out their best qualities and performance. For the organization to fulfill its social contract to provide high-quality, cost-effective, and safe healthcare, it must satisfy the needs and manage the expectations of those who directly deliver these services. This is especially important in today's environment, which is marked by the still-fluid stipulations of the Affordable Care Act (ACA), changed consumer expectations, and public demands for transparency and accountability (Piper, Llewellyn E., 2012). Organizational effectiveness consists of attracting, developing, and retaining talent. This has been the same from one generation to another generation. Organizations must view their employees as their success backbone, and thus evaluating the talents, preserving, and improving the process will pour into the organizational overall benefits of an effective culture.

Summary and Conclusions from Literature

The aging population will continue to require expert and quality healthcare. In addition, healthcare organizations are motivated to provide an award-winning patient experience for their patients and families. With longer living and increase morbidities as well as chronic diseases, inpatient hospital volume will grow and require a greater need for Respiratory Care Services. COVID-19 cases continue to grow in the United States and as such will place a significant burden on the need for qualified and trained RT. As the baby boomers retire in record numbers, the retention of millennial RTs will be necessary.

Health care customers should be provided with quality care from knowledgeable, skillful, and competent care providers. Therefore, improving retention in the millennial RT will significantly contribute to social change, quality patient care, and patient safety for all individuals living in the community (Hill, 2010). Millennial RTs will become much of the respiratory care workforce within the upcoming decade. There is an acute need for health care organizations to improve retention strategies for this demographic. Modified retention strategies must be developed quickly to diffuse any unnecessary retention disputes that may become perplexing (Harrington & Heidkamp, 2013).

CHAPTER III METHODS

Millennials are quickly becoming the fastest growing part of the RT labor force, and anecdotal evidence from RT department directors indicate high turnover rates, difficulty filling vacant positions, needs to supplement staff with temporary or "traveling" RTs and enormous job stress associated with increased patient loads and increased patient severity due to the COVID-19 pandemic. However, little is known about factors that are important for retaining RTs and how best to alleviate the stress imposed on these workers by the COVID-19 pandemic.

The study objective was to collect pilot data to help in the development of a survey instrument that could be validated and used at the national level to measure factors affecting retention of millennial RTs, with special attention to issues of relevance to RT work during the COVID-19 pandemic.

Survey Question Selection and Development

This study is a first step in the development of a survey instrument that can be fielded to RTs in the US to improve our understanding of expectations of the millennial RT and the characteristics of their work environment as it relates to retention. It used 1) selected examples of questions from other surveys of health professionals to collect demographic information; 2) lists of factors related to benefit packages suitable for ranking by preference. 3) a review of the literature to generate narrative questions, suitable for agree/disagree responses, about factors reported to be associated with job satisfaction for millennials.

The survey collected demographic and work site characteristics and questions focused on four work area characteristics (see Survey Instrument in appendix A):

➢ Work Hours and Benefits (choice categories and ranking by preference)

➢ Job Satisfaction and COVID-19 Related Work Changes (5-point Likert scales)

➢ Recruiting RTs to New Positions During COVID-19 (Narrative responses)

➢ What are Important Issues Affecting RTs During COVID-19 (Narrative Responses)

This open-ended survey approach was used to develop the job satisfaction, recruiting and importance questions because focus groups of RTs were deemed infeasible because of the heavy RT workloads during the COVID-19 pandemic, and key informant interviews were not suitable because they required in-person or telephone contacts. Thus, because of the approach used for question development, the results will be strictly exploratory, suitable used for the identification of a set of modifiable job-related factors that are perceived to affect current retention. These factors will be used to generate statements for a larger survey which will need further pilot testing.

Study Population

The population of interests are currently practicing RTs. The sampling frame for this study consisted of email addresses without personal information for 56 millennial RTs selected from public data source and professional contact lists of RTs who are members of the American Association for Respiratory Care (AARC). Participants born between 1981 and 1996 who are between the ages of 23 and 39 in 2020 were chosen, but in some cases the age data were not available or provided. All subjects were asked to complete an email survey sent electronically by REDCap link (n=56).

Inclusion and Exclusion Criteria

Inclusion criteria included millennial RTs.

Exclusion criteria included those younger or older RTs as well as any duplicate data.

Protection of Human Subjects

The survey received was reviewed by the IRB of the Medical University of South Carolina and designated as a Quality Process Improvement study. The survey was confidential, delivered through email, with no identifying information returned to the researcher.

Survey Procedure

The survey was sent electronically by using REDCap data collection system using confidential email to the millennial RTs on our list. The survey included an introduction and a thank you. In addition, the participants were offered the opportunity to receive a report on the results of the survey. The first wave was sent in January 2021, with a second and third email sent with a week interval. One week after the last email, all responses were downloaded by an "honest broker" not involved in the study. This assured confidentiality of responses.

Both the quantitative and qualitative data lends to a more realistic interpretation of job-related factors that influence retention.

Data Analysis

Respondent demographic, continuous, and categorical responses were analyzed using descriptive statistics using standard deviations or frequencies and percentages. This analysis was performed using SAS version 9.4 and Excel spread sheets. Tables and figures were used to show variations in responses.

Narrative responses were coded by identifying themes while key words were extracted from each theme. We grouped the themes using iterative content analysis until all responses were assigned to one or more themes. Qualitative responses were also analyzed utilizing word frequency analysis to extract key word indicating problems, benefits, or response types for each category of narrative response questions. The word analysis was performed using https://monkeylearn.com/word-cloud/, a free word analyzer, and displayed as word clouds to identify patterns of use. The results of the theme and word cloud analyses were used to draft a set of statements to be considered in the further development of an RT job satisfaction survey.

CHAPTER IV RESULTS

Introduction

The survey was an initial pilot test designed to gain an understanding of the millennial RT workforce to know what they are seeking in an employer and within their work environment during COVID-19. The findings are presented under the following topics: Personal Demographics, Current Rank, Recruitment Packages, and Modifiable Job-Related Factors. The goal of this research is to develop a new survey with Likert-Scale questions constructed and anchored by strongly disagree to strongly agree. The goal, based on themes and construct of this research is to construct 4 Likert scale questions and two rank order questions from (1= most important to 6= least important that will try to fill the void in the existing literature for millennial RTs. These questions will examine the topic more thoroughly and will cover topics such as:

1. Suggested Job Goals?

2. COVID-19 Impact?

3. RTs approach to coping during COVID-19?

4. Do I plan to stay in current job?

5. I would look for a new job if I worked for an organization:

6. I would tend to stay on the job if I worked for an organization:

Research Questions

The following research questions were answered by quantitative and qualitative analysis utilizing a research survey sent to millennial RTs:

1.   Are there personal demographic characteristics, such as age, sex, race, that are

        associated with work satisfaction of RTs?

2. Does current work experience (trauma hospital, community hospital, or long-term care) affect work satisfaction and retention of RTs?

3. Do recruitment approaches, hiring packages, pay level compared to market, pay incentive structures of fringe benefits affect work satisfaction and retention of RTs?

4. Which modifiable job-related factors (high workload, stress, organizational culture, supervisor conflict, shift schedules, other) do RTs identify as instrumental for high satisfaction and intent to remain with an organization.

Findings

Between January 2021 and March 2021, 56 surveys were sent to participants via email using the REDCap survey platform. Of the 56 participants, 23 responded to the survey, yielding a 41.1% response rate (Table 4). Three surveys were excluded: 1 incomplete, and 2 were identified as non-millennial.

Table 4: Survey Response Rate

	Redcap	Response Rate
Complete	23	41.07%
Total	56	

Table 5: Demographics

Variables	n	Mean +/- SD or percentage
Demographics		
Age	23	38.0 +/- 9.7%
Sex		
Male	6	26.1%
Female	16	69.6%
Other	1	4.4%
Race		
Asian	5	21.7%
Black/African American	8	34.8%
White	8	34.8%
Other	2	8.7%

Table 5 provides frequency distributions for the demographic variables. Out of the 23 completed responses, the age range was 30-39 years, with a standard deviation of 9.7. The mean age of participants was 38 years. Most participants were female (69.6%) and identified as Black or African American (34.8%) or White (34.8%).

Table 6: Years in the profession

Variables	n	Mean +/- SD
Years as an RT	23	15.2 +/- 10.8
Years in current position	20	8.5- +/- 8.2-

Experienced RTs play a vital role in the health industry by providing direct patient care while ensuring patient safety. Respiratory Therapist with more than 2 years of experience are

more likely to stay with an organization than those with less experience. Longevity and experience have value in providing judgement and knowledge needed to care for patients impacted by the COVID-19 Pandemic. Expertise is needed to care for these patients. Table 6 identifies survey responses with years as an RT and years in current position.

Table 7: Work Experience

Variable	n	Percentage%
Work hours		
8 hours	3	13.0
12 hours	20	87.0
Benefits Most Important to You		
Health	15	65.2
Retirement	14	60.8
Vacation	10	43.5
Childcare	1	4.4
Are You Compensated for your Work Based on Patient Acuity?		
Yes	2	8.7
No	6	26.1
Somewhat	15	65.2
What is your Work Setting?		
Teaching Hospital	10	43.5
Community Hospital	12	52.2
Long Term Care Facility	1	4.4

Work experience, work hours, and benefits are explored as they all relate to employee engagement and satisfaction which can be identified as a motivator for retention of healthcare workers (Petrucelli, T., 2017).

Most respondents work 12-hour shifts (87.0%). The most important benefit to millennial RTs is healthcare, retirement, vacation, and childcare, respectively. Almost two-thirds (65.2%) of respondents believe that they are compensated based on patient acuity. According to an article in The Journal of Nursing Administration, patient acuity is related to patient outcomes (The Journal of Nursing Administration, 2017). Most of the participants work at either a community hospital or a teaching hospital (43.5% and 52.2%, respectively). Patient acuity is generally higher in larger teaching hospitals, such as Mechanical Ventilated patients, Extra-Corporal Membrane Oxygenation (ECMO), and Open-heart procedures. Finally, job satisfaction related to COVID-19 is explored in our research and is discussed in the next segment with responses ranging from strongly agree to disagree and satisfied to dissatisfied (Figures 1-5). Most respondents believed that their work schedule was worse during COVID-19, n=17 respondents either strongly agree or agree (Figure 1). Figure 2 demonstrates that more than 87% of respondents reported that their workload increased during the COVID-19 Pandemic with 0% reporting the opposite (disagree).

Figure 1: Work Schedule was worse during COVID-19

Response	N	Percent
Strongly Agree	9	39.13
Agree	8	34.78
Neutral	5	21.74
Disagree	1	4.35

Figure 2: Increase Workload during COVID-19

Response	N	Percent
Strongly Agree	13	56.52
Agree	7	30.43
Neutral	3	13.04

Despite an increase in their workload, 61% of RTs believed that their work remains meaningful, while 39% do not believe that their work is meaningful (Figure 3). Meaningful work, however, is necessary for retaining and attracting people to the healthcare workforce just as much as anywhere else (Atkinson, 2018).

Figure 3: Work is Meaningful

Response	N	Percent
Strongly Agree	14	60.87
Agree	9	39.13

In Figure 4, 65.2% of respondents reported that they had an opportunity to provide input on their schedules as well as other factors related to their work, while 34.78% feel that they did not have an opportunity to provide input on their work schedule and other factors. Respondents that are planning or hoping to change their jobs (Figure 5) are 47.83 agree, 21.74 were neutral to change, and 30.44 did not have plans to change their jobs. Some of the factors that make RTs want to change jobs during COVID-19 are from the highest number of respondents to the lowest number of respondents are pay, stress of the work, recognition, management and/or leadership styles, and the availability of Personal Protective Equipment (PPE). Modifiable Job-Related factors that RTs identify with a high job satisfaction and an intent to stay include a decrease in workload, an organizational culture that can respond quickly to a pandemic, and schedules that allow for work-life balance.

Figure 4: I have an opportunity to provide input into my work.

Response	N	Percent
Strongly Agree	4	17.39
Agree	11	47.83
Neutral	5	21.74
Disagree	3	13.04

Figure 5: I am planning to change my job within the next 6 months

Response	N	Percent
Strongly Agree	5	21.74
Agree	6	26.09
Neutral	5	21.74
Disagree	6	26.09
Strongly Disagree	1	4.35

When describing the organizations' overall ability to adapt to change during the COVID-19 Pandemic, 11 respondents stated that organizations were slow or poor to adapt, while 12 respondents noted that organizations were good or very good to adapt (Table 8).

Table 8: Organizational Response

Slow to Adapt	Good or Very Good to Adapt
Inadequately prepared for the COVID pandemic	Changed quickly because of teaching hospital
It was difficult at the beginning of the pandemic due to staffing	Recruited outside agency to help staff as needed
I still find our infection control not good	Changes have been in the staff, not in the organization
The staff has done a great job of adaption despite lack of proper support	Hospital adapted well RT managers did not
Weak protocols and systems	Opened a COVID unit and supplemented with "travelers
Initially well however, since then retention is terrible due to morale and compensation	Became careful to protect staff
	Progressively better with implementation of protocols and procedures

Potential New Survey Instrument Questions Constructed from Narrative Responses

1. Suggested Job Goal Questions Derived from the Responses (using a 5-point Likert scale)

    a. A desirable RT job has clearly identified opportunities for advancement

    b. An organizational culture that supports teamwork is important to me

    c. Base pay is the most important factor when choosing a new job

    d. It is important for me that management recognize and rewards my hard work

2. COVID-19 Impact Questions Derived from the Responses (using a 5-point Likert scale)

    a. I do not get paid enough to continue to work in the COVID-19 units

    b. The stress of working during COVID-19 is making me think of leaving RT

    c. I stay in this job because my organization has adjusted our workload and compensation to reflect what we must do during COVID

    d. I am looking for a new job because we have a lack of PPE and inadequate safety procedures

    e. I am mentally exhausted from working under the current conditions

    f. I have great colleagues and supervisors who all really care about patients and each other

3. Questions about RTs Approaches to Coping During COVID-19 (using a 5-point Likert scale)

    a. I can leave work at work

    b. Time with my family is essential for being able to cope with work

    c. My religion is key to my ability to cope with work issues

    d. It is important for employers to offer counselling to RT during these stressful times

    e. Sports and exercise are essential for my mental health

    f. My manager encourages us to ask for help when we need it

4. Questions derived from RTs response to stay in Current Job (using a 5-point Likert scale)

    a. I am always looking for a better job

    b. I expect to stay in this job for at least a year

    c. My organization has a good plan for promotion, so I plan to stay here several years

    d. I get good raises, so I am not planning to move anytime soon

5. Please rank the following statements (1=most important and 6=least important)

    a. I would look for a new job if I worked for an organization:

__ with difficulties in keeping RT staff

__ that has inadequate infection control protocols

__ with constant problems getting PPE

__ where my supervisor does not support me

__ where staff morale is terrible

__ with a high proportion of "traveler" RTs

6. Please rank the following statements (1=most important and 6=least important)

    a. I would tend to stay on the job if I worked for an organization:

        __ which has shown that it responded well to COVID

        __ that brings in outside agency staff when we are "swamped"

        __ where my co-workers are willing to "pitch in" when we have problems

        __ where management act swiftly to solve challenges

        __ with good protocols and infection control procedures

        __ where supervisors and staff respect each other

The results presented are consistent with the literature review that millennials are an eclectic group that differs from other generations but remain difficult to generalize in terms of their motivational and work needs. The high score on planning to leave or change jobs in search of more satisfying work and increase pay validates what a new work environment might look like.

CHAPTER V DISCUSSION AND RECOMMENDATIONS

To achieve long-term success, today's organizations need to meet the challenge of managing a diverse workforce composed of multiple generations but increasingly populated by millennials. For this reason, it is essential to understand what motivates millennials and develop a work environment that addresses those needs. The results of this study suggest that to recruit and retain millennial workers, organizations should promote a collaborative, team-based work environment (belonging), along with challenging and meaningful work (ego-status) instead of predictable salary, insurance, retirement, or other benefits (safety).

Discussion of Results

Results of this study reinforce the notion that millennials are diverse in their motivators, thus, making it difficult for organizations to adopt a one-size-fits-all approach to recruiting and retention. Undoubtedly by finding ways to appeal to millennials' motivating factors such as pay, meaningful work, an opportunity to have input into their work, and having an organization that responds quickly and effectively to change such as a global pandemic. With dialogue and engagement, organizations will be able to tap into the potential of a new generation of RT clinician and leaders.

As a result of the COVID-19 epidemic, RTs were plunged into the forefront of a global pandemic with the increased use of aerosol-generating procedures and mechanical ventilation. AARC Executive Director (Tom Kallstrom, 2020) states that now more than ever before, the role of the respiratory therapist is vital to the health of our nation. During the COVID-19 pandemic, approximately 10%–20% of the total diagnosed cases require ICU admission, and around 3%–10% of them require airway management and mechanical ventilation (AARC, 2020).

Strengths

Evidenced based practices should be included with specific interventions in reducing the number of RTs leaving the hospital setting. The survey was a representative sample of RTs across the nation to include the acute care setting, community hospital, and long-term care setting. In addition, the qualitative questions were mostly open-ended which allowed for feelings, attitudes, and understanding of the respondents.

Limitations

There are several limitations to this study. Scope of discussion due to lack of experience of the researcher. The RTs were recruited for the survey from the AARC, a somewhat homogenous group. It might be reasonable to expect that AARC members who demonstrate a commitment to research may express views that are different than the general population of RTs. Sample size of the research was small, therefore, hard to find a significant statistical relationship within the data. A lack of ability to gain access to a larger group of millennial RTs, therefore, hard to assess randomization. Time constraints for data collection made it difficult to measure change over time. Finally, a background in people management; specifically, respiratory therapy management and a firsthand glimpse of the devastation of COVID-19.

Recommendations for Future Research

The deficiencies of research on millennial respiratory therapist require a need for future researcher on this largest cohort within healthcare. Conducting additional interviews and surveys would have improved confidence that saturation had been achieved so further interviews and surveys need to be conducted.

Several strategies utilized to retain RTs will be relevant and effective for millennial RTs. Recognition and opportunities to advance professional development can be used to support millennial RTs. Managers can address the significant needs of RTs such as flexible working options, improve financial compensation, feedback, and a transformative work environment to ensure retention.

The findings in this study provide an opportunity for RTs to reflect on their clinical experience during COVID-19 and identify ways to improve the overall work experience. Healthcare leaders can deploy several job-related factors that impact retention of millennial RTs. Survey participants appeared to place value on meaningful work as a part of job-related factors impacting retention of millennial RTs.

To achieve long-term success, today's organizations must meet the challenge of managing a diverse workforce composed of multiple generations that is increasingly filled by millennials. Consequently, it is essential to understand what motivates millennials and develop a work environment that addresses those needs. The results of this study suggest that to recruit and retain millennial workers, organizations should promote a pay practice that aligns with increase workloads, and provide environments where organizations adapt to changes quickly to allow for flexibility in work-life balance along with challenging and meaningful work Beyond that, results of this study reinforce the notion that millennials are diverse therefore making it difficult for organizations to adopt a one-size-fits-all approach to recruiting and retention. Certainly, by finding ways to appeal to millennials', organizations will be able to tap into the potential of a new generation of therapists.

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Appendix A: Survey Instrument

Job Satisfaction of Respiratory Therapists During COVID-19

Please complete the survey below.

Thank you!

Demographic Information:	
Age	_____
Years as an RT	_____
Years in current position	_____
Sex	○ Male ○ Female ○ Other
Race	○ Asian ○ Black/African American ○ White ○ Other

Work Hours and Benefits	
What are your work hours?	○ 8 hours ○ 10 hours ○ 12 hours ○ Weekends Only
What benefits are most important to you?	☐ Health ☐ Retirement ☐ Vacation ☐ Childcare
Are you compensated for your work based on patient acuity?	○ Yes ○ Somewhat ○ No
What is your work setting?	○ Teaching hospital ○ Community hospital ○ Clinic ○ Other
If other, please specify.	_____

Job Satisfaction and COVID-19 Related Work Changes

I am satisfied with my work	○ Very Satisfied ○ Satisfied ○ Neutral ○ Dissatisfied ○ Very Dissatisfied
My work schedule got worse during COVID-19	○ Strongly Agree ○ Agree ○ Neutral ○ Disagree ○ Strongly Disagree
My workload increased during COVID-19	○ Strongly Agree ○ Agree ○ Neutral ○ Disagree ○ Strongly Disagree
I consider my work to be meaningful	○ Strongly Agree ○ Agree ○ Neutral ○ Disagree ○ Strongly Disagree
I have an opportunity to provide input on scheduling or other factors related to my work	○ Strongly Agree ○ Agree ○ Neutral ○ Disagree ○ Strongly Disagree
I am planning/hoping to change my job within the next 6 months	○ Strongly Agree ○ Agree ○ Neutral ○ Disagree ○ Strongly Disagree

From Your Personal Experience, What Should Employers Consider When Recruiting RTs to New Positions During COVID-19?
(Narrative responses max 200 words)

What is the best way to have applicants learn about an open RT position?	_____
What do you think is the most important career goal/objective of RT applicants?	_____
How long do you think that RTs plan to stay with an employer during COVID-19?	_____

What are Important Issues Affecting RTs During COVID-19? **(Narrative max 200 words)**

How has COVID-19 impacted your overall work?

_____

How would you describe your overall organization's ability to adapt to change during the Pandemic?

_____

What are key points that makes you able to resolve work-home life conflict easily during the Pandemic?

_____

What are the most important factors that make RTs want to change jobs during COVID-19?

_____

Appendix B: Coded Construct of Research Questions

Coded Construct of Research Questions

Survey Questions	Themes or Trends	Aggregate
Open RT Position-What is the best way to have applicants learn about an open RT position? 1.Job sites 2.Website or word of mouth 3.Social media 4.Linkedin; Job Sites 5.Post the job on the company's website. 6.Post on job sites and on social media 7.Social media 8.Equipped at least basic knowledge as an RT. And everything will follow day by day. 9.Site visits 10.social media pos 11.word of mouth from peers 12.job search 13.websites like indeed.com; Online networking and posts 14. No response 15.Internet 16. word of mouth 17.When working in a government hospital, the Human Resource Department are the one responsible for job openings. However, we also inform our group chat on our 18. Local RT group. 19.Word of mouth. 20. recruiters. 21 Work ethics together with good knowledge and passion for the profession 22 Ads 23 Social media and job fairs	1. Job Sites x 3 2. Social Media x 9 3. Word of Mouth x 5 4. Recruiters x 2 5. Ads x 1	1. Social Media the preferred way to advertise open positions

Career Goals-What do you think is the most important career goal/objective of RT applicants? 1.Compensation 2. Input on Team building 3. Most important goal for an RT applicant is to be the best therapist he/she can be. 4. Be a team player and move up to management in the future. 5. Learn as much as you can about the field 6. To be flexible and willing to work wherever needed 7. To find a job that they enjoy, grow and advance. 8. I think the most important career goal is to get all rounded experience in all areas of the hospital and hopefully specialize in one unit/floor 9. Career advancement 10. RT has critical thinking 11. Autonomy and base pay 12. job security and opportunities for advancement 13. Good work ethic, hard worker , adaptable to change A RT must always be flexible and patient. In providing patient care, it is not enough that you are medically inclined but, your attitude towards work will always create a big impact as a professional 14. No response 15. Growing within a company. 16. compensation 17. Compensation 18. Job Satisfaction 19 To assess CoVid patients 20 Professional growth 21 To be able to serve others anytime, anywhere and anyhow without limitations regardless of the country of origin and	Compensation x 5 Input x 2 Career Advancement x 4 Autonomy x 3 Flexibility x 4 Take care of COVID Patients x 2	1. Compensation

country educational qualifications 22 To be able to save as many sick patients as possible. 23 Well rounded and experienced in intensive care areas which will translate to other areas		
RT Length-how long do you plan to stay as an rt 1.Depends on the money 2.6 months 3.For as long as needed especially in this pandemic 4.1 year 5.If crisis pay and traveling positions continue to stay steady I see many RTs entering that area of our field because of the way hospitals don't value RTs 6.I think RTs will stay as long as they are treated fairly and their needs are being met. 7.I think as long as they feel appreciated, valuable and well compensated for their hard work 8.1year 9.RT is an RT forever, with or without covid-19 pandemic 10.1 year 11.1 year 12.Less than 2 years 13.Couple years 14. No Response 15.In a 3rd world country, it is essential to have a stable job. So, despite the risks at work, we still carry on not just for the money but, our passion as RTs. 17. 5 years 18.Until Covid numbers decrease 19. 3 years 20. Most have already left to travel, most that can retire and	Less than 1 Year x 3 1 Year x 5 2 Years x 8 Planned to say as long as we need to x 3	1. Greater than 2 Years

did not necessarily want to are moving ahead with it 21. As long as they being treated well, taking cared of and protected both financially and total welfare 22. 6 months 23. 6 mo		
<mark>COVID Impact</mark>-How has COVID-19 impacted your overall work? 1.Increased amount of stress, heavier workloads, short staffed, 2.Always taking Covid patients 3.I'm already retired. However, if I'm still in practice, this Covid would have impacted emotionally. But on the other hand I would be able to focus on what's need to be done 4.Burn out 5.Lack of managerial support affected the stress of COVId. Not once did my manager Don in and see the work we were doing at bedside. I feel depression, PTSD will be big amongst us from what we've seen 6.The uncertainty of not knowing what will happen day to day. 7.my workload has increased to unsafe levels, stress levels are very high and quality of patient care has greatly deteriorated because it's impossible to do it all and do it well 8.Feel devalued in the sense of Hazard pay 9.I realised RT is one of the essential job in the medical team 10.Increased 11.Due to an increase work .oad 12.I had to become more efficient with time management	1. Stress x 6 2. Increase Workload x 8 3. Lack of leadership support x 2 4. Uncertainty x2 5. Understaff x5	1. Increase Workload

13.It has become unbelievably straining on mental well-being and expectations and staffing ratios are worse. 14. No response 15.No just adapt to change Demands at work increased not to mention the extra PPEs we need to wear and considering the temperature on a tropical area, our work becomes stressful and exhausting. 16.Very large workload 17.Under-staffing 18. It took 80%of the regular work plan 19. I pray before going to my work 20. Way too many patients with more therapies, having to put on full ppe takes time, no time to do true assessments and diagnostics. No time to attend rounds and be an effective RRT. 21. Daily fear of contracting the virus 22. Increased demand for RTs 23. Workload and compensation		
COVID Impact 2-How would you describe your overall organization's ability to adapt to change during the pandemic? 1.Very slow 2.Good 3.What I heard from my previous co workers, our hospital was able to handle the load of patients infected by this virus. 4.They were able to recruit outside agency to help staff as needed very well. 5.Our organization as a whole adapted well. Our RT managers did not.	1. Very Slow x 10 2. Good x 9 3. Very well x 3	1. Very Slow

6.It's challenging for them due to uncertainty as well. 7.I think my facility changes have been in the staff not in the organization. 8.The staff have done a great job adapting to the changes and needs of our changes inspite of lack of proper support 9.We adapted extremely well, they opened a covid only inpatient facility and increased staff with travelers 10.We became more cautious in how to protect the staff in dealing with covid patients 11.Good 12. It was difficult at the beginning of the pandemic due to staffing, has progressively became better with an implementation of protocols and procedures 13.Very poorly 14. No Response 15.Moderate, they had there ups and downs 16.Adapt to change is a human's nature. However, I still find our infection control not good. 17.Good. 18.Poor 19.My organization was inadequately prepared for the Covid pandemic 20. Patient care changes were adapted to fairly quickly due to the exact hospital and that it is a teaching hospital. 21. Weak protocols and system 22. 5/10 23. Initially well however, since then retention is terrible due to moral and compensation		

Covid Impact 3-What are key points that makes you able to resolve work-home life conflict easily during the pandemic? 1.Live and enjoy life after work 2.Time off 3.N/A. Retired 4.Counseling; Prayer; Exercise 5.Many things that used to be a big deal aren't. You appreciate more what you do have. You make rest a priority more and self care 6.It's not easy. I had to cut back my availability at work to accommodate my home life. 7.Staying grounded and remembering why we do what we do. 8. Being intentional in creating personal moments to decompress before interacting with family, prayer, meditation, finding joy in things i love 9.Leave work at work 10.Update new queries and interact 11.Being flexible asking for help 12.effective communication 13.Decompression time 14. No response 15.I still stay active and play tennis , and work 3 to 4 twelves every two weeks , don't pick any more than that . Take your PTO for your self . To keep your self sane 16.I work away from my family to keep them safe from me. However, when swab results are negative, I enjoy my free time unwinding to serene areas and spend it with family or friends. 17.Keep family first. 18.I often try to leave work conflicts at work. I also seek therapy. 19. Stay at home and clean the house 20. The only resolve was that you are taking care of very sick patients that are alone in the hospital. 21. Follow researchers, studies, protocols and advises from experts 22. Exercise, hiking,biking. 23. Communication with my manager	1. Being Active and taking time off x 8 2. Decompression x 6 3. Counseling x 3 4. Family Time x 6	1. Time Off Work

Covid Impact 4-What are the most important factors that make RTs want to change jobs during COVID-19? 1.Not enough pay 2.No rotation of staff with Covid patients 3.The lack of PPE., staff and the concern of infection 4,Pay. 5.Availability of travel assignments 6.Pay and where they feel valued 7.Right now it's being called off for low census. Before it was being on call during COVID. 8.Mismanaged departments, understaffed departments, poor compensation, lack of respect and appreciation from other healthcare members (doctors, PA's, nurses) 9.Compensation 10.For me, I will never change my Job as an RT. 11.Base pay rates and bonuses travel contract rates patient ratios 12.stress, not an adequate work-life balance, inadequate compensation 13.Lack of acknowledgement for expertise and compensation 14. No response 15.Money, work loads ,and stress 16.The outside environment. They think that this new normal is for them to act freely. Their selfishness towards frontliners sometimes are exhausting. 17.Pay 18.Finances/ workload 19.The Most Important factors to cooperate and unity of the RTs. 20. Overworked, physical and mental exhaustion. 21. Being ignored and unappreciated 22. Inadequate pay. RTs are EXTREMELY valuable in COVID-19 and play a crucial part in positive outcomes. RTs are an extension of Doctors and are there when the patient is crashing. 23. Being valued and compensation	1. Pay x 8 2. Management x 3 3. Working with too many COVID-19 patients x 5 4. Lack of Acknowledgement x 4 5. RTs left for travel assignments x3	1. Pay

Footnotes:

3 Surveys Excluded.
Red   Did not identify as influential
Green   No response