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MOTIVATORS FOR DOCTORS TO WORK THROUGH RECRUITMENT AGENCIES

Case: Mediradix



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Recruitment holds a crucial role for all kind of different organisations, it is the process of finding a suitable employee for either a permanent or a temporary job. Normally this is done by attracting candidates and then selecting the most suitable one. The world of recruitment agencies is tough and there is a lot of competition, especially when focusing on healthcare professionals, such as doctors in this case.

There is a huge need for doctors all around Finland, and this generates the reason why both public and private sector need recruitment agencies to help them find enough suitable candidates. For this reason, there are a lot different companies who focus on healthcare professionals. Normally there is such a grave need that working with a recruitment agency will mean better salary for the doctors.

Companies who focus on healthcare professionals work either on specific areas in Finland or they employ candidates all around Finland, Mediradix regardless of being a smaller company focuses in recruiting doctors all around Finland.

The thesis is designed to answer the following questions: 1. How do recruitment agencies work in the field of healthcare in Finland? 2. What are the main reasons for doctors to choose a specific recruitment agency? 3. Have the doctors had any problems when working through recruitment agencies? If so, what? 4. What are the main demotivators for doctors when they work through recruitment agencies? 5. Does the Herzberg factors apply to doctors who work through recruitment agencies? (Hygiene factors and intrinsic motivators)

Methodology used for the questionnaire was quantitative, it was a closed question questionnaire.

This thesis focuses on finding what reasons healthcare professionals such as doctors have when choosing which recruitment agency they will work with. In order to understand what are the criteria's for this, a questionnaire will be conducted for the doctors.

KEYWORDS:

Motivation
Recruitment
Recruitment agency
Herzberg
Knowledge workers

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Rekrytoinnilla on tärkeä rooli kaikissa eri organisaatioissa. Rekrytointi on prosessi, jossa etsitään sopiva työntekijä, joko täysipäiväiseen tai osa-aikaiseen työhön. Normaalisti tämä tehdään ensin houkuttelemalla hakijoita, jonka jälkeen päädytään sopivimpaan hakijaan. Rekrytointi ala on kilpailua täynnä, varsinkin terveydenhuollon ammattilaisten henkilöstöpalveluyritysten puolella, kuten esimerkiksi lääkäreiden tässä tilanteessa.

Suomessa on tällä hetkellä kova tarve lääkäreistä ja tämä taas tuottaa paljon tarvetta niin julkisella kuin yksityiselläkin puolella hankkia lisää lääkäreitä henkilöstöpalveluyritysten kautta. Tästä syystä Suomessa on paljon eri henkilöstöpalveluyrityksiä, jotka ovat erikoistuneet terveydenhuollon ammattilaisiin. Lääkäreiden tarve on itseasiassa niin suuri, että lääkärit saavat yleensä parempaa palkkaa työskennellessään henkilöstöpalveluyritysten kautta.

Yritykset jotka keskittyvät terveydenhuollon ammattilaisiin ovat joko erikoistuneet tiettyyn alueeseen Suomessa, tai palkkaavat työntekijöitä ympäri Suomea, huolimatta siitä että Mediradix on pienempi yritys, niin he palkkaavat työntekijöitä ympäri Suomea.

Opinnäytetyön tarkoituksena on vastata seuraaviin kysymyksiin: 1. Miten rekrytointitoimistot työskentelevät terveydenhuollon alalla Suomessa? 2. Mitkä ovat pääasialliset syyt lääkäreille valittaessa rekrytointitoimistoa? 3. Onko lääkäreillä ollut ongelmia rekrytointitoimistojen kanssa? Jos on, niin mitä? 4. Mitkä ovat lääkäriet suurimmat syyt motivaation puuttumiseen, kun he työskentelevät rekrytointitoimistojen kautta? 5. Onko Herzbergin teoria myös käännettävissä rekrytointitoimistojen kautta työskentelevien lääkäreiden motivaatiota tutkiessa?

Kyselyyn käytetty menetelmä oli kvantitatiivinen.

Tämä opinnäytetyö keskittyy löytämään syyt miksi terveydenhuollon ammatilaiset, kuten lääkärit päätyvät tiettyyn henkilöstöpalveluyritykseen. Jotta pystytään ymmärtämään mitkä ovat kriteerit tähän, lääkäreille tehdään kysely.

ASIASANAT:

Motivaatio
Rekrytointi
Rekryfirma
Herzberg
Tietotyöläiset

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LIST OF ABBREVIATIONS (OR) SYMBOLS

HPL	Henkilöstöpalveluyritysten Liitto (The Private Employment Agencies' Association)
Man-year	A man-year is a measure of how much work one person (full-time) does in a calendar year

1 INTRODUCTION

The thesis was done in co-operation with Mediradix, the healthcare recruitment agency employing the author, Jon Nestén, at the time. The aim of the thesis is to understand what motivates doctors to use recruitment agencies, what can be done to increase motivation and to make improvement suggestions to Mediradix. Although, Mediradix is part of an international corporation the geographical focus of the thesis is Finland.

The thesis concentrates on the motivators for healthcare professionals, more specifically those of doctors, to work through recruitment agencies. Therefore, it has to be noted that the findings should only be linked to doctors who work through recruitment agencies. Doctors who do not work through recruitment agencies might have completely different motivators in their job.

The increase in open positions for doctors in Finland, creates more business opportunities for recruitment agencies. Cities are in a vast need of doctors and work with recruitment agencies to employ the doctors needed to run their services. By understanding the motivators for doctors, this knowledge can be used to understand the main reasons doctors have when choosing a specific recruitment agency.

The main practical takeaway from the thesis came out of the interest to know what can be improved and which are the important areas to focus on when hiring doctors. Knowing the main motivators doctors have when working via recruitment agencies is valuable knowledge. This can be used to increase enlistings and improve services, which in turn will help increase enlistings.

1.1 Author's motivation

The author's interest in the topic came from working for a company, Mediradix, that recruits healthcare professionals. There was a curiosity to understand the reasons behind the choices doctors made when choosing a specific recruitment agency. This thesis can be used by the company to better understand what are the motivators of the doctors when they work through a recruitment agency. This way the company can improve the areas needed and create a more competitive outcome for the future.

During his employment at Mediradix the author gained direct knowledge of what doctors' occupations entail and what doctors are looking for. What is sought from the thesis is to know, how the recruitment co-ordinators can improve their modus operandi to entice a doctor to choose their particular recruitment agency. This even though another agency would offer the same position at the same place, which is quite common in these circles.

As the author is a business student, whose interests are in sales and recruiting, the thesis offers a great opportunity to learn more about the world of recruiting and the motivators for choosing to work through a recruitment agency. At the same time the knowledge acquired through work experience in the field can be utilised. There was no previous research done on this topic inside Mediradix, and therefore there was a practical need for this kind of thesis.

1.2 The objective of the thesis and research questions

The objective of the thesis is to find out what motivates healthcare professionals to work through a recruitment agency using theory and previous studies on motivation.

In addition, the empirical data gathered through a questionnaire is used to make suggestions to Mediradix to improve their competitiveness. The target group consist of doctors that have worked for Mediradix and other recruitment agencies.

The thesis is designed to answer the following questions:

1. How do recruitment agencies work in the field of healthcare in Finland?
2. What are the main reasons for doctors to choose a specific recruitment agency?
3. Have the doctors had any problems when working through recruitment agencies?
If so, what?
4. What are the main demotivators for doctors when they work through recruitment agencies?
5. Does the Herzberg factors apply to doctors who work through recruitment agencies? (Hygiene factors and intrinsic motivators)

1.3 The structure of the thesis

The thesis is divided into three main parts. The first part covers theoretical insights on the topic of recruitment agencies and motivation, based on literature and theory. This part explains what is understood by recruitment and goes more in-depth in recruitment of healthcare professional. As well as how recruitment agencies work and what they have to take into consideration when working in the field of healthcare.

Additionally, The second part concentrates on motivators and using theories from the literature to explain how these factors affect the employees. The thesis focuses on Herzberg's motivator-hygiene theory, also known as the two-factor theory of job satisfaction. This will be later on used as a comparison to see if Herzberg's factors apply to doctors who work through recruitment agencies.

The third second part introduces the questionnaire made and explains the methodology used., gives an analysis of the findings and the final conclusions of the author. The methodology includes the reasons behind choosing this particular target group and the questions asked.

The third part focuses on the results of the questionnaire and gives an analyses of the data. will be shown and analysed in the following chapter. This chapter cConcentrateges on the questionnaire sent to the doctors, explaining in-depth what was found and what improvements and changes can be done to increase the motivation of the doctors and how to apply this information to gain competitive advantage. Lastly, the conclusions of the study will be given.

1.4 Mediradix

Mediradix Oy was founded in 2003, it is a nationally operating recruitment agency in the field of healthcare. It is a relatively small company in this field of business, employing 13 recruiters. The strenght of the company is that it is a small, agile and flexible company and can easily adjust with the needs of the doctors. The aim of the company is to support clients with organising services to healthcare sectors and offer healthcare professionals interesting jobs. Mediradix Oy offers all kinds of employments such as full-time, part-time, weekends and everything that is needed. Their client base includes both the public and private sectors in which they operate as partners in health centers, hospitals and

occupational healthcare centres. Mediradix focuses particularly on long partnerships, genuine understanding of customer needs, high-quality and flexible customer service, as well as vocational training and support for workers. (Mediradix Oy)

Mediradix is part of British Empresaria Group, which is an international specialist staffing group and follows a multi-branded approach operating in 19 countries. Part of Mediradix's management and board of directors are British and that brings a tighter grip, for instance with objectives, budget and reporting responsibilities. (Pietilä, 2015, 27)

The doctors that work through Mediradix have been more than satisfied with the services and the clients (health centres, hospitals, etc.) have been really happy with the doctors who have been recruited for them. Mediradix did a client satisfaction survey (for the employers) in September 2014 and from a scale of 1-5, they got 4,39, which shows how well the company has done. The employee satisfaction survey (for the doctors) was done in February 2014 and from a scale of 1-5, they got 4,0, which is higher than the average employee satisfaction in Finnish companies.

2 THEORETICAL REVIEW

2.1 Recruitment

Recruitment holds a crucial role for all kind of different organisations. It is the process of finding a suitable employee for either a permanent or a temporary job. Normally this is done by attracting candidates and then selecting the most suitable one. Recruiting itself is the process where the employee offers labour force to a company for a compensation. (Viitala, 2016, 12)

Using temporary labour force is a common procedure nowadays, but it was not like this twenty years ago. In Finland the use of rental labour force in the 1990's was relatively small, but by the 2000's the use of rental labour force had increased significantly and still continues to grow. Rental labour force is used in many different sectors, varying from hotel and restaurant business to even healthcare services, this vast variety of businesses who use rental labour force is the main explanation for the growth of the business. Turnover of the recruitment business of labour force has grown from 181 million in 1999, to an outstanding amount of almost 650 million in 2005, in Finland alone. (Palukka, Tiilikka, 2007, 1)

The increase can also be partially linked to companies seeing the benefits from using rental labour force. Such as making employee expenses more flexible and on the other hand quickly relieving organisations' work pressure. (Viitala, 2016, 2-3)

Based on the report (Palukka, Tiilikka, 2007, 1-8) the industry has grown rapidly and is an important part of the Finnish economy. Predictions for the future of the industry are positive. Seeing development in accordance to the changing labour culture attitudes e.g. acceptance of freelance work and spreading to new areas. Already the industry employs 100 000 workers, which corresponds with about 30 000 man-years. (HPL, 2015) This shows that the industry is promising and expanding the market is something that every company, including Mediradix are doing. This can be seen in the efforts in marketing and bettering their service.

As it is with any topic people have their own opinions about it, which can be very negative as well. When it comes to rental labour force the common stereotypes are that rental labour workers are not treated as well as direct hires. They are also seen to be less

motivated as direct hires and that they are unable to find something more permanent. A survey by the Private Employment Agencies' Association (HPL) shows that rental labour force workers were more satisfied compared to previous years. From figure 1, it can be seen that compared to the year 2014, every single factor improved. For example from the first line you can see that the overall grade improved 0,12, and the right side of the figure shows that how many 1,2,3,4,5 has it got from the voting, 5 being the highest. The survey also concluded that 87% of the workers would recommend working as a rental labour to their friends. (Henkilöstöpalveluyritysten Liitto, 2016)

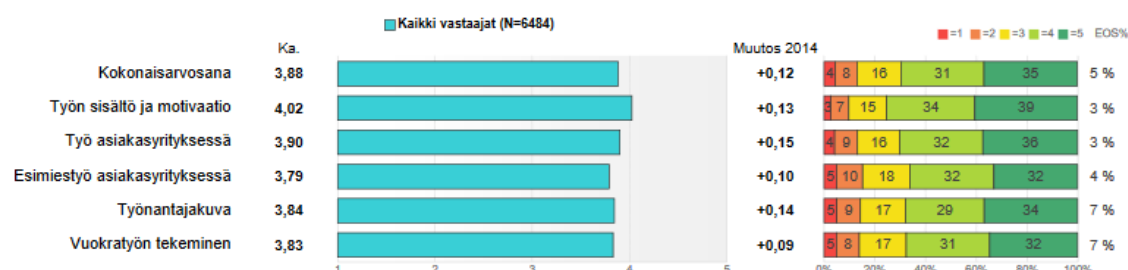


Figure 1. The results from the satisfaction questionnaire made for the rental labour workers (Henkilöstöpalveluyritysten Liitto, 2016)

Viitala's study indicates that working as a rental labour force is seen as a better alternative than being unemployed, normally it is thought as a phase before finding a permanent job. (Viitala, 2016, 41) On the contrary, when concentrating on the recruitment in the field of healthcare professionals, it is rarely seen as the only option. Normally doctors choose this option for the better salary and for the fact that it offers more flexible and personalised form of work. (Palukka, Tiilikka, 2007, 8)

2.1.1 Recruitment in the field of healthcare professionals

According to a research done in co-operation between the National Institute for Welfare and Health and the Finnish Medical Association (Suomen Lääkäriliitto), the use of rental labour force in Finnish healthcare started to be more common in the start of 2000's. (Suomen Lääkärilehti, 2013, 2847)

When considering recruitment in the field of healthcare professionals it has to be taken into consideration that there are many differences between recruiting labour force to

other fields of businesses compared to the field of healthcare professionals. Palukka's and Tiilikka's report show that one of the biggest reasons for the considerable growth in using rental labour force in the field of healthcare is the lack of staff. Especially in Sweden and in the UK, recruitment agencies who employ healthcare professionals have been able to exploit the dissatisfaction towards the salary, working hours and working environment of the workers, when recruiting staff of this field. The same reasons affect the doctors in Finland when choosing to work as a rental labour force. (Palukka, Tiilikka, 2007, 2-4) Their report shows that unlike other fields, doctors have a lot of options to choose from and normally get even better salary when working through a recruitment agency. Doctors have the ability to choose, unlike normal rental labour force, which we saw earlier that for them working as a rental labour force was normally the only option, if they did not want to be unemployed. The same report showed that healthcare professionals brought up that the reason they chose to work as a rental labour force was that it offered a good level of earning, and it also offered an individual and flexible form of working. Working as a rental labour force also enabled the freedom to choose when and where they would work. (Palukka, Tiilikka, 2007, 8) This is an important factor when talking about recruiting in the field of healthcare professionals. Since doctors usually work long weeks, they see family and spare time as the most important factors that support well-being at work. Being able to control their schedule is therefore very important for them. (Suomen Lääkärilehti, 2013, 2848)

Working part-time or full-time as rental labour force is a choice for doctors. Yet there are some negative sides that doctors have informed about, which should be taken into consideration by recruitment agencies. By improving these aspects recruiting agencies can become more competitive. The negative sides of working in a recruitment agency for doctors would be the constant change of working environments and encountering patients with multiple problems. Also the weak ability to influence the overall treatment of patients, which stems partially from not being in one location long. In addition, younger doctors said that they do not get a proper induction into their work. (Lääkärilehti, 2007)

According to study by the Finnish Medical Association (Suomen Lääkäriliitto) there are more than 20 000 doctors that are in their working age. The amount of doctors is almost tenfold from what it was 50 years ago, although population has only grown 1,2 times. (Suomen Lääkäriliitto, 2014, 7) Even though there is more doctors than there has ever been, there is still a grave need for doctors all around Finland. The main reasons for this are that there are more elderly people than before and that the population of Finland has

grown as well. As mentioned before doctors have a flexibility that other recruited labour force do not have, reason for this is that the employment rate for doctors is almost 90%. Also when looking at the reasons for non-employment the most common ones are maternity, paternity and child-care leave. (Suomen Lääkäriliitto, 2014, 24) For these reasons doctors can choose more freely where they want to work and how much. Recruitment agencies give this possibility to the doctors, and in the year 2014, 8% of healthcentre doctors were employed by recruitment agencies. (Suomen Lääkäriliitto, 2014, 28)

At first, when recruiting doctors started, doctors were just hired to fill in the gaps when it was needed. It was mostly as part-time job and this situation has changed a lot. Nowadays recruitment agencies also offer a lot of full-time jobs. Reasons for this can be found from the same study by the Finnish Medical Association (Suomen Lääkäriliitto), since as mentioned before there is a severe need for doctors. In health centres the doctor shortage was 5% in the end of 2014, in the end of 2013 hospitals had 7,7% doctor shortage and specialist healthcare, had a doctor shortage of 8%. (Suomen Lääkäriliitto, 2014, 34-35) This lack of staff has created an opportunity for businesses like Mediradix, and these recruitment agencies offer an important service, since we can not ignore the doctor shortage.

2.2 Recruitment agencies

There are many recruitment agencies in Finland, some of them are more specialised in a specific field and some hire in all kinds of fields. There are more than 1 000 recruitment agencies in Finland, but it has been estimated that around 500-600 are established companies. (HPL, 2015)

Recruitment agencies offer many different kind of services, which can explain the vast amount of recruitment agencies. The Private Employment Agencies' Association (HPL) website has a list of different services their member companies provide:

- Hiring out personnel (agency work)
- Recruitment
- Outsourcing and sub-contracting
- Headhunting
- Personal and suitability assessments

- Training and coaching
- Outplacement services (HPL, 2015)

The key function of the Private Employment Agencies' Association (HPL) is to improve the business prerequisites for their sector and their member companies. They are responsible for drafting the code of conduct and general terms and conditions for the sector, as well as negotiating collective agreements. (HPL, 2009) Mediradix is a member of the Private Employment Agencies' Association, which has more than 300 member companies at the moment.

When considering the recruiting process from the recruitment agency's perspective there is an extra step to the "normal" one. The agency is the instance to whom the employee offers their services and another company, the user company, hires the employee's services through the agency. (Viitala, 2016, 12)

How this process manifests itself depends on the situation and a recruitment agency's different offerings and compensations reflect this complexity. A recruitment agency might be hired to find employees for the user company to employ directly and thus compensation is usually an one time fee that is agreed upon beforehand. Here the employee becomes part of the user company and has their contract, salary and other benefits through the user company. The recruitment agencies might do some follow-up to ensure "their hires" are doing well in the user company, but there are no contractual obligations for the agency anymore.

The more complex situations are when the recruitment agency employs the employee that works for another, user company. In these cases compensation is also more complex as the user company pays the recruitment agency either a monthly salary or an hourly wage, from which the agency then compensates the employee. Here the employee has a contract with the recruitment agency and is on their payroll. They are part of the recruitment agency's labour force and will get the benefits included in the contract, such as occupational health services, although actual work related issues will be handled by the user company. (Viitala, 2016, 13)

The relationship between the recruitment agency, rental employee and the employer who needs the manpower is showed in the triangual relationship below.

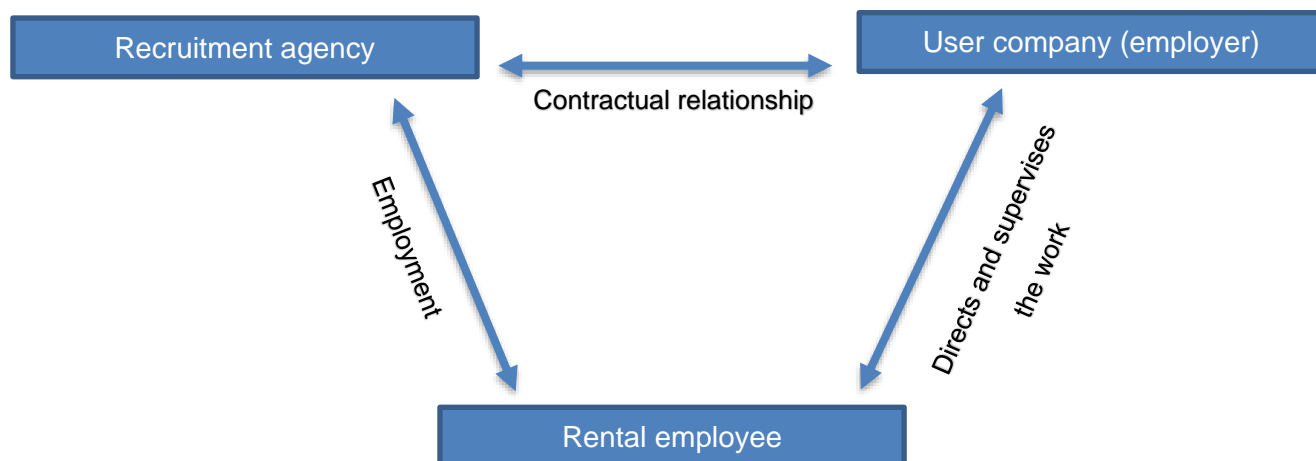


Figure 2. Triangular relationship (Ministry of Employment and the Economy, 2013, 5)

In rental work, the recruitment agency is the employer for the rental labour force, but the work is done for the user company, due to this the user company manages and supervises the work of the rental employee. Rental employee is required to comply with the regulations that the user company has for the work. (Ministry of Employment and the Economy, 2013, 15)

As we found out in chapter 2.1. that recruiting is relatively new phenomenon or at least one that has grown vastly in the last 20 years. Reasons for this is that recruiting agencies have increased marketing and offering throughout Finland, e.g. agencies concentrating in healthcare sector start to market their services already to medical school students in the beginning of their studies to create awareness. Thus, like in any business when demand increases so does the supply. This again would explain the amount of recruiting agencies in Finland at the moment, which is just getting on the same level compared to the old level of EU-countries. The Private Employment Agencies' Association says that it is still on a modest level compared to other European countries, but it expects the industry to grow continuously. (Viitala, 2006, 26-27)

Vaahio explained that it is a bit preposterous that big companies are the ones that use external expertise in recruiting, even though they have a lot of experience and their own HR-departments. Still small and medium sized companies use less help from recruitment agencies, even though their knowledge on this sector might not be as good. Price of these services might be one of the reasons that small and medium sized companies do not use as much recruitment agencies as consultants. (Vaahio, 2007, 115) However,

even though small and medium sized companies might not use as much consultant services, they still use recruitment agencies to find employees, since this way they might not have to have as large HR-department, when they can do these hirings through a recruitment company.

There are certain preconceptions when it comes to recruitment agencies and recruiting labour force in general, mostly these are because people do not really know the whole process. Vaahtio says that the rental labour force is always paid salary according to the collective labour agreement and often the rental work changes to a full-time placement in that company. Through good experiences the preconceptions of recruitment agencies will change through time. (Vaahtio, 2007, 120) Using rental labour force offers the employer a good chance to see and test if the employee is suitable for their company and then make the decision.

One good option that is also used is recruiting candidates from abroad, and some recruitment agencies have contacts abroad, so that they will have candidates from there as well. A lot of people want to work in Finland, because how well everything is handled here. Vaahtio reminds that it has to be remembered that it does not matter where the employees come from they will have the same collective labour agreement, so the salary and other factors are the same. (Vaahtio, 2007, 121) This is one big factor why people from abroad come to work in Finland as well, the salary is normally better than in their country, good example of this are workers from Estonia, where the salary level is lower. This is also an important point for the workers that come from abroad in the field of healthcare, such as doctors.

2.3 Theories of motivation

Motivation has been studied for years, but it is still hard to define, there are many different theories on what motivates people. Robbins and Judge (2012, 203) define motivation as the processes that account for an individual's intensity, direction and persistence of effort toward attaining a goal. Simply put the reason, which drives a person to try to achieve a certain goal. It is important to understand what motivates workers to create an optimal working environment where the workers are motivated and satisfied with their job. Everyone has the ability to be motivated, important part is to be able to understand the difference of people, while someone can be hard working and motivated by the same job, others might be unsatisfied and unmotivated.

The study of motivation is concerned, basically, with why people behave in a certain way. The basic underlying question is "why do people do what they do". (Mullins and Christy, 2013, 245) This is why it is a hard topic to define, reason being that there is no one size fits all model, since all of us are different and we have different goals and needs. Hobbies can be taken as a good example, there are a lot of people who are really motivated to e.g. learn to play the guitar. But what is the reason, after a hard day's work, for spending hours trying to learn to play the guitar. This is where motivation steps in, and this is what companies need to be able to do to motivate employees. Since most of us are motivated by the intrinsic rewards; interesting, challenging work and opportunity to achieve and grow into greater responsibility. (Herzberg, 2002) Obviously it is important to offer extrinsic incentives as well, such as a good salary, security, possibilities for promotion and a good work environment. Both intrinsic and extrinsic incentives are important and needed to keep the employee motivated and satisfied with the job. Intrinsic motivation is related to "psychological" rewards, and extrinsic motivations on the other hand is related to "tangible" rewards. (Mullins and Christy, 2013, 247)

Motivation is the creation of stimuli, incentives and working environments that enable people to perform to the best of their ability. The aim for the employers is to be able to motivate people on the factors that motivates that particular individual. In return, managers can expect more from people, in the form of productivity, quality and service. (Mullins and Christy, 2013, 246)

There are many competing theories that attempt to explain motivation and more specifically motivation at work. There are content theories, such as Maslow and Herzberg and process theories, such as expectancy-based models and equity theory. By understanding the different theories of motivation, companies will be able to use these to better motivate their employees. For this thesis, Maslow's and Herzberg's theories are explained and used for understanding motivation. Reason for choosing these two theories was that they emphasise on what motivates individuals and this is the aim of the thesis, to find out what motivates doctors.

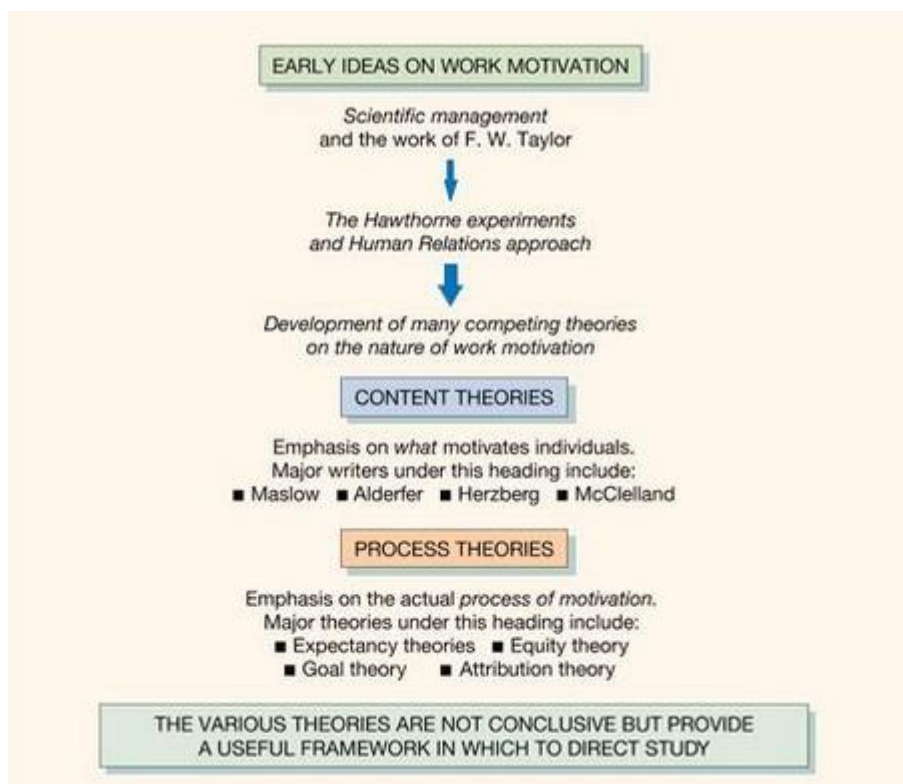


Figure 3. Work motivation (Mullins and Christy, 2013, 252)

As can be seen from the figure 3. F. W. Taylor popularised the usage of financial incentives, i.e. financial rewards paid to workers, whose production exceed some predetermined standard. (Dessler, 2013, 418) What this theory stated was that people were motivated by pay, which now we might only see as a small factor for employee motivation. Being one of the earliest motivational theories, it is still widely popular. Yet the problem is that it is ineffective. Afterwards several theories about motivation started to develop and showed salary alone is not enough.

It has to be remembered that every individual is just that, an individual and theories of motivation cannot realistically apply to each single employee, however they are useful for identifying the main ways people are motivated. (Training & Development Solutions, 2001) This is a good reminder before going more in-depth with the different theories of motivation, since these theories can be applied, but are mostly only a framework.

2.3.1 Content theories

Content theories attempt to explain those specific things that actually motivate the individual at work. These theories are concerned with identifying people's needs and their relative strengths, and the goals they pursue in order to satisfy these needs. Content theories place emphasis on the nature of needs and what motivates. (Mullins and Christy, 2013, 252) Most important content theories are Maslow's hierarchy of needs, Herzberg's two-factor theory, Alderfer's modified need hierarchy model and McClelland's achievement motivation theory. From these theories Maslow's and Herzberg's are explained and used for this thesis.

Maslow's hierarchy of needs

Maslow's hierarchy of needs is one widely quoted observation on what motivates people, although lacking much scientific support. (Dessler, 2013, 419) The theory suggests that people always want more and what they want depends on what they already have. (Mullins and Christy, 2013, 252)

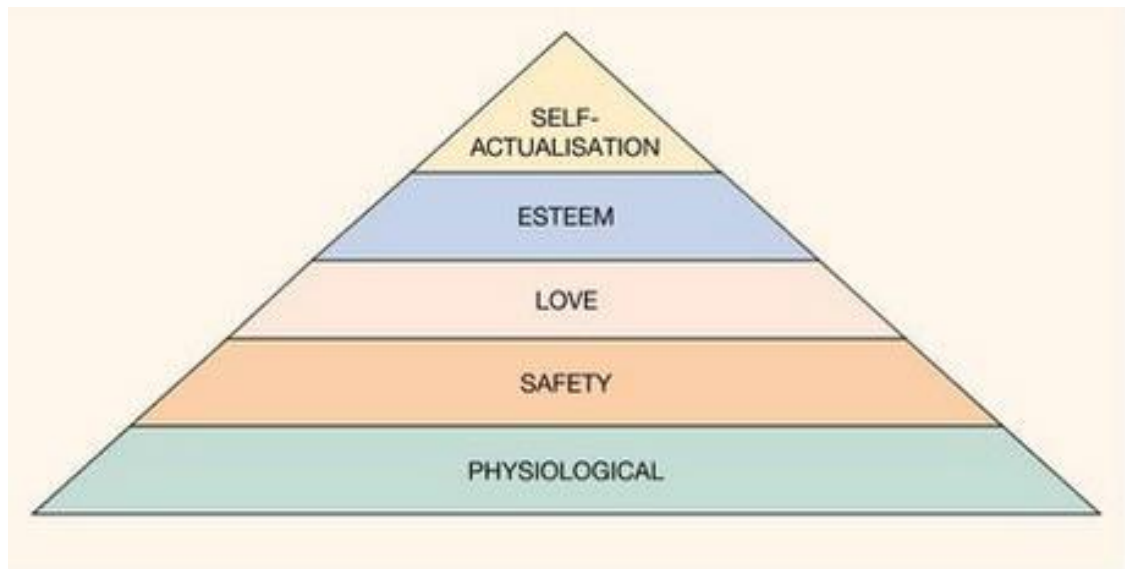


Figure 4. Maslow's hierarchy of needs (Mullins and Christy, 2013, 253)

As we can see from figure 4. Maslow's hierarchy of needs is normally shown as a pyramid where physiological needs are on the bottom and self-actualisation on the top.

As mentioned before that what people want, depends on what they already have, and from this pyramid model we can see that Maslow's theory suggests that people first want to achieve their physiological needs and move up from there.

Physiological needs are such as water, food, shelter or sleep, and when applied to how these affect motivation at work, we can understand that everyone needs money to be able to provide these for themselves or their families. This makes it easy to understand why someone working a minimum wage job may not be motivated to do the best job they can, but may instead only do enough to keep from losing the job and worsening their situation. (MTD Training & Ventus Publishing ApS, 2010, 19)

When the person has fulfilled the physiological needs, they will then focus on safety needs, which are not just physical safety needs but also mean general health and well-being, safety from financial ruin, injustice, or having to deal with the stress of the unfamiliar. (MTD Training & Ventus Publishing ApS, 2010, 21) This means that the employee feels safe at the work and does not have to worry about losing his / her job.

Love needs, also known as social needs, are the needs that a person has for social interactions and belonging. Group of friends, family or even sport teams fulfill this need for the person. This is an important factor for work environment as well, since employees spend a lot of time with their colleagues and by creating a good atmosphere at work, will help motivate people even more, when they feel good.

Esteem needs, sometimes referred as ego needs, include both self-respect and the esteem of others. Self-respect involves the desire for confidence, strength, independence and freedom and achievement. Esteem of others involves reputation or prestige, status, recognition, attention and appreciation. (Mullins and Christy, 2013, 253) These factors are important in the work environment, to be able to motivate workers. The ones that get recognition from their achievements are more likely to be motivated and work harder. It is important to understand that the methods used to reward and recognise employees' achievements can have an impact on their self-esteem, which of course in turn will affect their motivation. (MTD Training & Ventus Publishing ApS, 2010, 24)

Last level of need in Maslow's hierarchy of needs is self-actualisation, Maslow himself described this level of human need as the desire to become more and more oneself, and to become more and more of what we are capable of becoming. This level of need is related to meeting one's full potential, whatever that might be. (MTD Training & Ventus Publishing ApS, 2010, 24) This will not be achieved in every job that an employee does,

there are tasks that the employee does not prefer and due to that it will not be achieved. But when the aspects of the job employees like or that they excel at are identified, they should be assigned those topics or tasks. Result will be employees appreciating the opportunity to do what they enjoy and being highly motivated to finish the task to their best abilities. (MTD Training & Ventus Publishing ApS, 2010, 25)

Herzberg's two factor theory

Herzberg's two factor theory, also known as Herzberg's motivation-hygiene theory, reason being that he considered the factors that satisfied employees to be motivators and those factors that were dissatisfying to be hygiene factors. (MTD Training & Ventus Publishing ApS, 2010, 12) Meaning that the factors that dissatisfied employees did not necessarily satisfy employees when filled, but rather caused no dissatisfaction.

Herzberg's two factor theory, contrary to F. W. Taylor theory, says that relying on money as a motivator, is only good for a certain level. Afterwards, there are different factors that motivate the employee. Herzberg argued that the best way to motivate workers is through job enrichment. (Dessler, 2013, 135) Meaning that the company should use the full potential of the employee, by giving the employee more challenging tasks. And ensuring the feeling of achievement by allowing them to experience the feeling of responsibility and recognition.

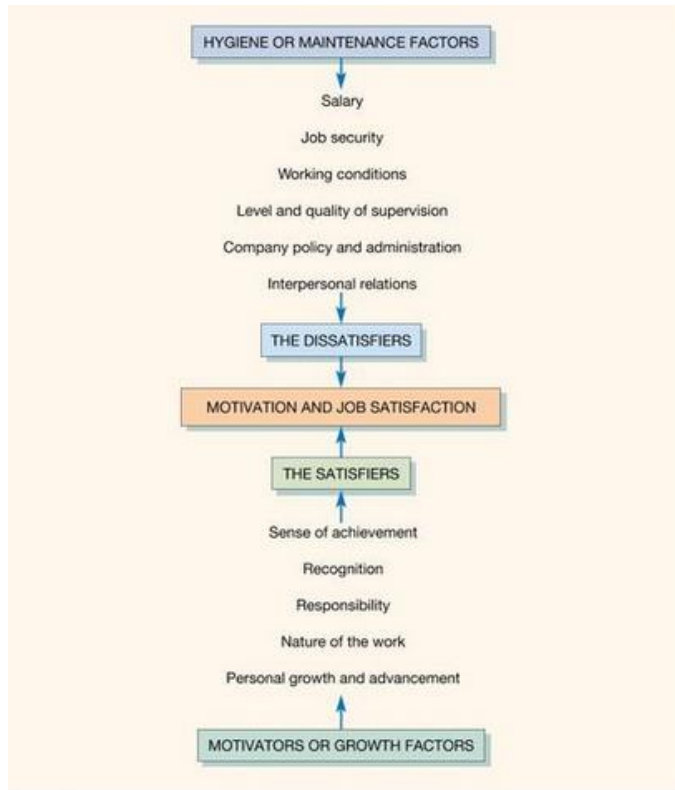


Figure 5. Representation of Herzberg's two-factor theory (Mullins and Christy, 2013, 256)

Herzberg's theory as mentioned divided the motivation and job satisfaction into two different factors, motivators and hygiene factors, which can be seen from the figure 5. From this figure it can be seen that contrary to normal beliefs, salary is only a hygiene factor, which means that if salary is not adequate, then it will work as a dissatisfier, but with money you can only motivate employees so far, thus this is the reason it does not work as a motivator. Therefore, once the hygiene factors have been satisfied, providing more of them will not create further motivation, but not satisfying them may cause demotivation, unlike the motivation factors where management may not fulfill all of them but the workers may still feel motivated. (Training & Development Solutions, 2001)

2.4 Motivating knowledge workers

Tampoe suggests that at the core of the new industrial trend are the "knowledge workers", those employees who apply their theoretical and practical understanding of a specific area of knowledge to produce outcomes of a commercial, social or personal

value. (Mullins and Christy, 2013, 272) Why this is important to understand for the thesis, is the fact that doctors are perceived as knowledge workers and by understanding the motivation behind knowledge workers we can obtain crucial information.



Figure 6. Motivating knowledge workers (Mullins and Christy, 2013, 273)

As we can see from the figure 6. Tampoe suggests that the personal motivation of knowledge workers is based on the value they place on the rewards they expect to earn at work. In addition, to the individual's own motivation the performance of knowledge workers is dependent upon four key characteristics:

- Task competence
- Peer and management support
- Task and role clarity
- Corporate awareness (Mullins and Christy, 2013, 273)

Task competence in the case of doctors mean how capable they are of treating the patient, if they have the needed knowledge and skills and adequate equipment to do so. Peer and management support, would be understood as help from their co-workers, if they need a second opinion on something or for younger doctors who still need guidance when working. These two factors affect the personal effectiveness, which is crucial for the doctor to be able to treat the patients. Corporate awareness and task / role clarity are important to attain work goals, so that doctors know how in this particular health centre these tasks are done.

2.5 Motivation in the field of healthcare

As many countries currently experience a shortage of qualified healthcare workers, the loss of any healthcare worker, especially doctors and nurses has a serious consequences for the health of people in that country. (HRH Global Resource Center) As mentioned before, there is a grave need for doctors all around Finland, this creates the need to understand what motivates them and makes them stay in their jobs.

To support good performance, healthcare workers need clear job expectations, up-to-date knowledge and skills, adequate equipment and supplies, constructive feedback and a caring supervisor. (Luoma and IntraHealth International, 2007, 1) As it says in the article, it is important to understand that doctors want to be supported well, so that they can concentrate on their job. Knowledge workers, such as doctors feel that it is important that they are kept up-to-date with different kind of seminars and that they have the option to progress in their career.

Motivation is influenced by a complex set of social, professional and economic factors. Generally, a healthcare worker will be motivated and express job satisfaction if they feel that they are effective at their job and performing well. (HRH Global Resource Center) There are many different factors that affect the motivation / job satisfaction, such as:

- Strong career development
- Adequate compensation
- Good working / living conditions
- Positive relationship with co-workers (HRH Global Resource Center)

Unmotivated healthcare workers greatly impact rural areas, due to the fact that they want to move somewhere else to work. Often it is these healthcare workers who work longer hours, whose workplace have fewer resources than urban health centres and where they can feel most isolated. (HRH Global Resource Center) Even though the article published on HRH Global Resource Center website concentrates on the study of South African doctors, we can still see the same happening all around the world, for example in a country like Finland. Villages, might only have one doctor working there, or these health centres might have even been shut down and the health services have been transferred to the closest city.

It says in the article published by HRH Global Resource Center that unmotivated healthcare workers are known to leave their jobs, either leaving rural and remote areas for work in larger cities, or even move abroad. (HRH Global Resource Center) As mentioned, this is what happens in Finland, but we can also take Estonia as an example for this, since a lot of Estonian doctors move to Finland to work, because of the better salary. And for the fact that in Estonia in some areas there is a severe problem with lack of staff, which means that per one doctor there are too many patients and this way the working environment is not tolerable. Estonian doctors normally work through recruitment agencies quite often, since they are normally interested in the place with the highest salary.

One interesting factor that will be studied in this thesis is the statement that points out that especially high flyers (knowledge workers) rank challenging and interesting work and freedom higher on their motivational list than money and performance-related pay. (Mullins and Christy, 2013, 273) This thesis will study if doctors rank these same factors as high, when they are working through recruitment agencies.

3 QUESTIONNAIRE

The focus of the thesis is on the different factors that motivate doctors to work through recruitment agencies. Main aim of the questionnaire was to better understand the specific factors that motivate doctors to work through recruitment agencies.

Using a quantitative research method, like a questionnaire with closed-ended questions, was deemed the best option for this research topic. This was due to the fact that it was quick and had the possibility of a higher answer rate, owing to the low time consume for the doctors. Therefore, the questionnaire was designed to be easy and quick to answer, but still have the capability to provide the needed amount of data to analyse and draw conclusions from.

The questionnaire was sent to the responsible teacher and the CEO of the company to be approved. The questionnaire was originally written in English, but because the study was done for Finnish doctors, the questionnaire was translated into Finnish.

The questionnaire was designed to answer the following questions:

1. How do recruitment agencies work in the field of healthcare in Finland?
2. What are the main reasons for doctors when choosing a specific recruitment agency?
3. What problems do the doctors have when working through recruitment agencies?
4. What are the main demotivators for doctors when they work through recruitment agencies?
5. Does the Herzberg factors apply to doctors who work through recruitment agencies? (Hygiene factors and intrinsic motivators)

To gain the needed data to answer the research questions, the questionnaire was constructed in two parts. First five questions were to give a general overview of the respondents and allow for grouping of answers if deem necessary. The last five were to gauge the reasons for using a recruitment agency and the factors that motivate and demotivate them to work through an agency.

3.1 Execution of the questionnaire

The plan was to send the questionnaire to several doctors via email as a link to a survey page. Goal being that by sending the questionnaire via email, this would allow the doctors to answer anonymously, and have the time to answer when it suited them. The questionnaire was tested by a test group of fellow students to see that everything worked as it should. Unfortunately, execution of the questionnaire did not go as planned, reason being that the doctors did not answer the original email asking for permission to send the questionnaire, from 500 recipients only 2 answered that the questionnaire could be sent to them. Most likely the reasons for the basically non-responsiveness was that the doctors did not see what they would gain from answering a questionnaire from a business school student. Perhaps, if Mediradix would have indicated more clearly that the results from the questionnaire would be taken directly into consideration when looking into how to improve services to the doctors, this might have helped. However, even this most likely would not have been of any help. Doctors are busy professionals and allocating time to anything non-medical or scientific is highly unlikely, unless there is a strong incentive to do this.

After this failed attempt to carry out the questionnaire, the decision was made to print out 130 questionnaires and have these at the stand that Mediradix Oy had at Helsingin Lääkäripäivät, 11 January 2017-13 January 2017, which translates to Doctor days in Helsinki. Due to work obligations the author could not attend the exhibition himself, but Mediradix distributed and asked doctors to fill the questionnaire at their stand.

130 filled questionnaires was seen as a reasonable goal for responses as generally the attendance rate for the exhibition side of the event is over 1 500 doctors. The active response rate was calculated by reducing ineligible and unreachable individuals from the total number of sample and then dividing the total number of responses with the difference. (Saunders, et al., 2012, p. 268) Most of the questionnaires unfortunately were not filled completely, therefore a 0 was substituted for the questions that the responder had not filled in, to keep the data accurate. From the sample size of 130 questionnaires, the final outcome was 31 filled questionnaires. Thus

Active response rate = Total number of responses / total number in sample = 31/130= 23,8%

This active response rate of 23,8% does not make the questionnaire adequate to be used as an academic research result. However, some analyses and conclusions can be drawn from the data gathered on how the doctors who answered feel about recruitment agencies. It is also possible to compare if the results are similar to the theory part, which is based on books and earlier studies on the topic.

3.2 Reliability, validity and generalisation

The questionnaire was filled anonymously, which allowed the responders to answer honestly and this allowed for increased reliability of the answers. Equally, as all questions were closed-ended this allows for easy replicability of the questionnaire. However, as people's individual opinions at that specific time were asked if administered again results would most surely differ, but this does not mean that the reliability of the answers is compromised, only that opinions change. As none of the responders knew the author bias was non-existent.

In order to increase the validity and reliability of the questionnaire the questions were carefully chosen to answer the research questions. (Saunders, et al., 2012, p. 429) Mediradix Oy's CEO and the responsible teacher from Turku University of Applied Sciences approved the questionnaire as mentioned before.

The respondents represented different age groups, genders, work experience and the level of their doctorate, some of them were fully licenced doctors and some of them were on different year courses. This range of different attributes in the respondents enforces generalisation of the results.

However, due to the low response rate, the validity and generalisation of the questionnaire is not strong. Thus, as already mentioned earlier, the analyses and conclusion drawn from the questionnaire are not fully on an academic level. Regardless, some conclusions and suggestions of improvement can be given based on the questionnaire, presented theory and the knowledge of the author.

4 ANALYSIS OF THE DATA

The sample size of 130, the amount of questionnaires at the exhibition, from a population size of around 1 500, resulted in 31 responses. 74% of the responders had less than 2 years of experience. Most of the responders were still studying to become a doctor, but what we can take out the questionnaire is how the younger population and the future doctors feel about recruitment agencies. This then can be used to prepare and be able to market recruitment agencies in a correct way for the future doctors.

Out of all the respondents 58% had never worked through a recruitment agency, which means they do not have practical experience. However, this gives us a fair indication on how doctors feel about recruitment agencies, regardless if they have worked through an agency or not. Which in turn helps identify what needs to be done to attract more doctors. Is it just fine-tuning services or is there still an image problem.

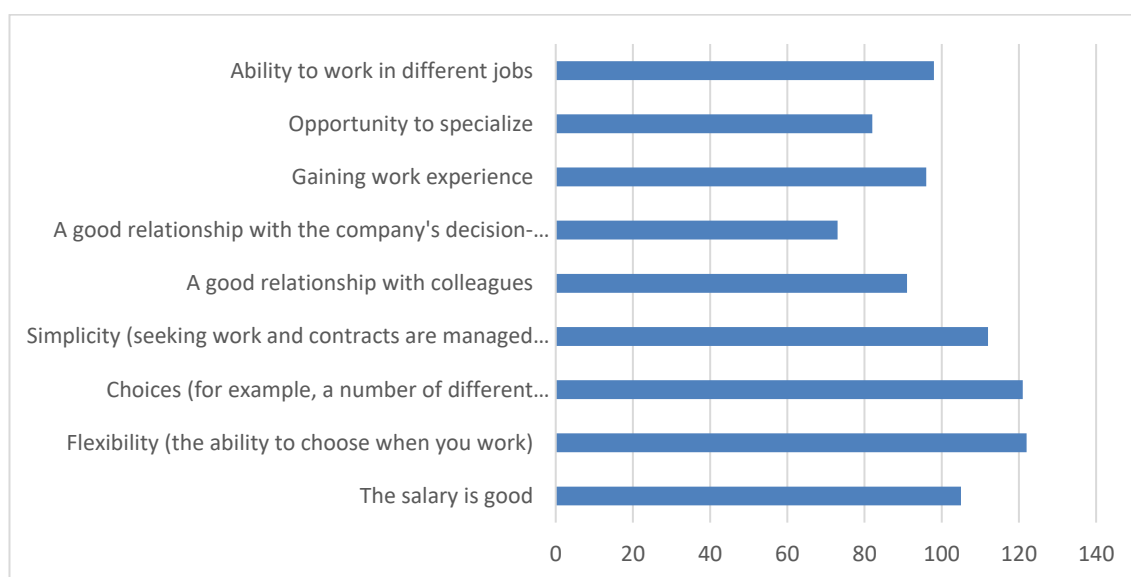


Figure 7. Reason why doctors appreciate working through recruitment agencies (Nestén, 2017).

Figure 7 shows that the most attractive part for working through recruitment agency is not necessarily salary, but the flexibility and ability to choose different opportunities. As indicated in earlier chapters and especially in Palukka and Tiilikka's studies salary is an important factor for doctors. Results of the questionnaire back-up that salary is a key factor, which increases the validity of the questionnaire as the results mimic conclusions

of more detailed academic researches on the subject. However, these results slightly contradict Maslow's and Herzberg's theories of motivators. Both theories see salary as a necessity more than an actual motivator. Something that if not correct can demotivate, but after a certain level has no motivational power. In comparison, in the questionnaire's results, salary was deemed the fourth most important factor to work via recruitment agencies. Lower emphasis was put on esteem and responsibility factors, which again were high motivators for Maslow and Herzberg.

Figure 7. reflects that younger doctors are looking for more flexibility and choices. This can be a reflection of the younger generation's view point on work and life balance and the fact that freelance and part-time work is more common and accepted. Thus working through recruitment agencies, where there are fewer long-term binding contracts, and you earn more for a shorter period of time and can then enjoy life, is appealing. The results indicate that even knowledge-workers are ranking money a bit higher on the motivational list. Mullins and Christy made a statement that high flyers (knowledge workers) rank challenging and interesting work and freedom higher on their motivational list than money and performance-related pay. (Mullins and Christy, 2013, 273). This is obviously still true, but changes a bit when the doctor is in the beginning of their career.

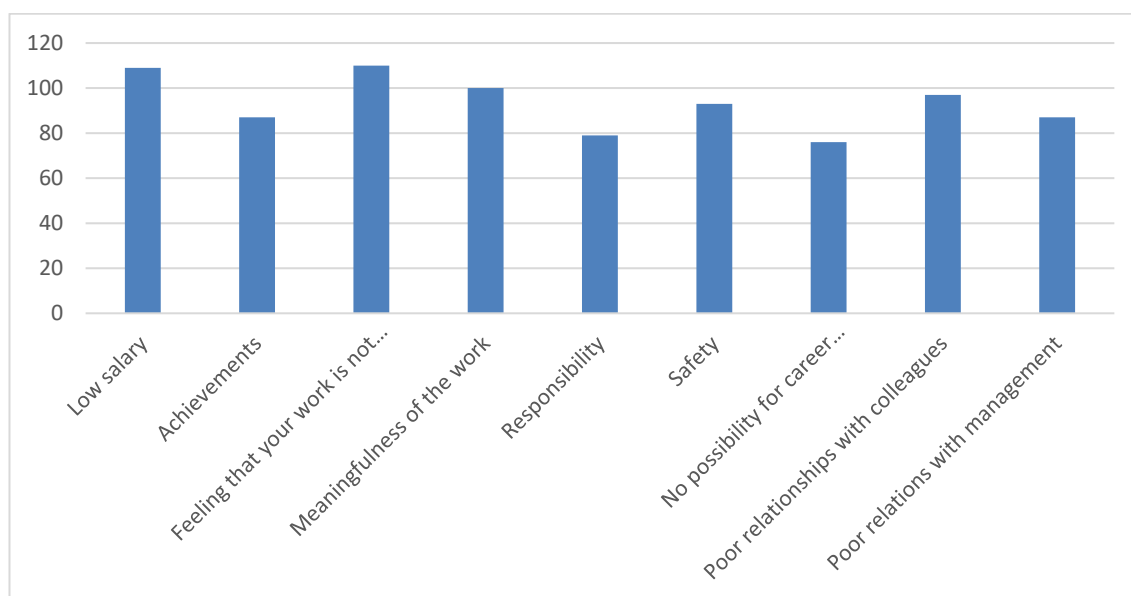


Figure 8. How much does the factor create dissatisfaction / demotivation, if not met within expectations

Figure 8. shows how much different factors create demotivation for the doctors to work through recruitment agencies if the factor has not met the satisfactory level. Low salary and feeling unappreciated of what you have done are the two most demotivating factors. These results are on par with what Maslow and Herzberg indicated in their theories. Keeping this in mind, it is important that when doctors work through recruitment agencies that the work environment does not isolate doctors who work through them. This is a difficult problem for agencies to tackle as the majority of the control here is with the user company and the other employees there. But in instances where the agency as a long-standing relationship with the user company some intergration procedures or attitude training for user company could be added to the general contract. Equally, agencies have to ensure that the salary they negotiate to their doctors is competitive in comparison to other doctors at the user company, which is the case mostly.

Generally, speaking in the past these so called "recruitment doctors" have been put to work harder than others and they might not feel like part of the work community. Lot of changes has happened on this side though and nowadays the work environment is better. This is something that recruitment agencies could possibly work on, to be able to take the side of the doctors in these circumstances. Once again this is difficult, but within long-term relationships some contractual additions might be possible e.g. working hours should not be excessively longer than other doctors' in the same position, who are direct hires.

Partial reason why doctors who work through recruitment agencies might feel a bit isolated is, because they might get paid more for the same roles as other young doctors who live in that city and work directly at the hospital, without agencies. This isolation hinders a feeling of recognition and esteem, which both Maslow and Herzberg indicated are key factors in motivating people. What agencies can do in these situations is once again quite limited as the motivational factors are affected by what is happening at the user company. In some cases, when there are more than one "recruitment doctor" in the user company, the agency could connect these people, helping to lessen the feeling of isolation.

The feeling of isolation happens mostly in areas that are not heavily populated, such as Lapland. Reason being that they have an urgent need for doctors and those who work through recruitment agencies decide to go work in these rural areas for 3-12 months for a better salary. Here salary motivates to take on a temporary position, but is not enough to keep a doctor in the rural area. Thus, looking at Herzbergs hygiene factors; salary

does not demotivate, but the working conditions do and the balance between these flips to demotivation after a certain time period. In these type of situations agencies cannot really do anything to motivate the doctor to stay. Then again if the motivation from the start was to stay for a short time period and earn a good salary, better than could have been got at a city, there is not anything the agency needs to change. As long as they can offer temporary contracts that fulfil the needs of the doctor at that time, motivation to use the agency again is there.

5 CONCLUSION

5.1 Research findings

The objective of this thesis was to research doctors motivations to work through a recruitment agency. This research was done with the help of Mediradix Oy, with them conducting the questionnaire at a doctors event in Helsinki. By studying the previous researches, theories and conducting a quantitative questionnaire for the doctors the following conclusions were made and based on the research findings, suggestions will be made for improvements that recruitment agencies can do to better their competitiveness with other agencies.

This research was designed to answer the following questions:

1. How do recruitment agencies work in the field of healthcare in Finland?
2. What are the main reasons for doctors when choosing a specific recruitment agency?
3. What problems do the doctors have when working through recruitment agencies?
4. What are the main demotivators for doctors when they work through recruitment agencies?
5. Does the Herzberg factors apply to doctors who work through recruitment agencies? (Hygiene factors and intrinsic motivators)

The first research question examined how recruitment agencies work in the field of healthcare. Recruitment agencies hire doctors and other healthcare professionals to different roles that they receive from public hospitals, private clinics, etc. As stated before using recruit labour force in the field of healthcare is a relatively new phenomenon. (Palukka, Tiilikka, 2007, 2) According to a research that was done in co-operation by National Institute for Welfare and Health and the Finnish Medical Association (Suomen Lääkäriliitto), the use of labour force in Finnish healthcare started to be more common in the start of 2000's. (Suomen Lääkärilehti, 2013, 2847)

The second question focuses on what specific factors doctors value over others when choosing a recruitment agency. As we can see from the questionnaire and the earlier studied theories, salary is rated quite high on the scale, but on top of that doctors value the choices and flexibility of working through recruitment agencies. Although, most of the

respondents to the questionnaire were young doctors and over half did not have practical knowledge of working through a recruitment agency, the results indicate what the future clients expect from their agencies. This is an important selling point for recruitment agencies, considering that they can compete with other agencies and public hospitals, not only by offering better salary for the candidates, but by being able to offer the whole package through getting to know the candidate better and seeing what they need. Good example would be a young woman who graduated years ago and has a child now, the studies show that she would value part-time job close to her with a good salary, allowing her to concentrate on both work / life equally. On the other hand a young woman who wants to earn a lot and can work long hours and would not mind travelling / relocating for work, could e.g. work in more rural areas, which offer better salary. Therefore, for recruitment agencies it is important to build relationships with the doctors and be able to understand their needs / wants and through this they can create a better service. I would argue that by creating a better service and knowing what the candidates want, if there is two competitors with the same job offer, the candidate would choose the one who offers better service, even if the salary would be a bit lower.

Third question focuses on what problems doctors have when working through recruitment agencies. As we can see from the questionnaire, the most brought up point was the fact that the role that the doctors were told about and hired to, did not meet the expectations, this is the basic oversell phenomena. It is important to be honest with the candidates and offer good service. This can be improved by better questions for the client as well. Asking what the doctor would be doing and getting into more details about the role, so that when the recruiter tells about the role for the candidate, he will be able to give a better answer. This sounds obvious, but especially for positions that are hard to fill the user company easily oversells so that they can fill the position. Here creating a good relationship with the user companies is paramount as it is advantageous for both sides that the information the agency has is correct and as detailed as possible. By representing the position correctly user companies receive doctors that stay and are motivated instead of “revolving door” doctors.

The fourth question focuses on what are the main demotivators when a doctor works through a recruitment agency. As we can see from the research, low salary and not being appreciated by the hard work they do, demotivates the doctors willingness to work through a recruitment agency. From my point of view it would be important for the agencies to check-up on the doctors that work through them and make sure that everything works

as it should. This way by tackling any issues before they come up, recruitment agencies can offer better service and help doctors stay motivated. This will also enforce the bond between the agency and the doctor. As the doctors know that the recruitment agency has their wellbeing in their interest.

Last research question tackles Herzberg's two factor theory and how applicable it is for doctors working through recruitment agencies. The theory divides factors to those (hygiene) that need to be met within expectations or they demotivate, yet over-delivery will not motivate. The other factors (motivators) when met motivate, but when not met do not demotivate. The problem here is that recruitment agencies, as indicated before, do not have control over all aspects of the recruited doctors work environment. E.g. there are limitations in how much the agency can influence working conditions, administration and supervision. Here being able to be up-front and tell all to the doctor ensures a good relationship. Agencies can affect some issues through contractual points, but in the end the work happens in the user company so they are in control. Same is with most of the motivators, recognition, advancement etc. are mainly in the hands of the user company. By following-up with the doctor and knowing how they have done in the user company, the agency might be able to show some recognition and help with training (contractual addition). But in the end these motivational factors have to come from the user company.

However, even though agencies do not have full power over most of these motivational factors at the work place and thus are unable to motivate a doctor at their position, they are able to motivate them to use the agency. This comes from the fact that agencies are able to negotiate better salaries, include contractual points that ensure job security, working conditions, responsibilities and training to name a few, with the user company than the doctor alone could not have done. Thus, the relationship between the agency and the doctor is not the only one needed, they need to have good relationships with their user companies too.

Herzberg's theory falls therefore short when talking about recruitment agencies motivating doctors at their position or to use the agency as it was create to a simple employee-employer scenario. When the recruitment process has three players the interactions between these three are complicated and the expectations on each side are not necessarily the basic ones, let alone what motivates each. Thus the rather simplistic view in Herzberg's theory to motivation is not enough here.

5.2 Suggestions for further research

Considering the limitations of the bachelor's thesis' length, this research only provides a small part on the topic. Due to this I would say that there are various subjects that can be further researched.

One suggestion would be to study more in-depth the differences between the different recruitment agencies and what makes one recruitment agency more attractive than others. It could be done by interviewing different candidates that have worked with multiple recruitment agencies and doctors that only work with certain agencies. This way companies can see what the doctors value the most about the agencies and they could be able to be more competitive.

Another suggestion would be to study the difference between the doctor who works through a recruitment agency and a doctor who works directly at the hospital. With this I mean that the research would be done to find out more exhaustively the difference between the same role in the same hospital, when working through a recruitment agency or being a direct hire at the hospital. This allows for more knowledge about the differences and if there is something that would need to be fixed for future, such as work environment, how colleagues treat the doctors and especially how the hospital treats the different doctors.

6 BIBLIOGRAPHY

Back, J. (2004) Yrittäjyys perusterveydenhuollossa. Available at: <https://julkaisut.valtioneuvosto.fi/bitstream/handle/10024/70697/Selv200409.pdf?sequence=1> (Accessed: 2 August 2016).

McKEVITT, C., MORGAN, M. and HUDSON, M. (1999) British Journal of General Practice, 1999, 'Locum doctors in general practice: motivation and experiences'

Dessler, G. (2013) Human Resource Management: Global Edition. Pearson Education M.U.A.

Herzberg (2002) 'One More Time, How Do You Motivate Employees?'

Henkilöstöpalveluyritysten Liitto (2016) Hpl vuokratyöntekijätutkimus 2016 netti. Available at: http://www.hpl.fi/media/liitetiedostot/tutkimukset/hpl-vuokratyöntekijätutkimus-2016_netti.pdf (Accessed: 14 July 2016).

HPL (2009) Available at: <http://www.hpl.fi/hpl/in-english.html> (Accessed: 17 July 2016).

HPL (2015) Yleistä henkilöstöpalvelualasta. Available at: <http://www.hpl.fi/merkittavayollistaja/yleista-henkilostopalvelualasta.html> (Accessed: 14 July 2016).

HRH Global Resource Center (no date) Why is motivation important in health care? Available at: http://www.hrhresourcecenter.org/HRH_Info_Motivation (Accessed: 2 August 2016).

Lambrou, P., Kontodimopoulos, N. and Niakas, D. (2010) Human Resources for Health, 'Motivation and job satisfaction among medical and nursing staff in a Cyprus public general hospital'

Konttinen, J. (2012) HS Klassikko: Missä lääkäri luuraa? Available at: <http://www.hs.fi/ilta/06032015/a1305910656801> (Accessed: 2 August 2016).

Luoma, M. and IntraHealth International (2007) Increasing the Motivation of Health Care Workers. Available at: http://www.intrahealth.org/files/media/increasing-the-motivation-of-health-care-workers/techbrief_7.pdf (Accessed: 2 August 2016).

Lääkärilehti (2005) Kuva vuokralääkäreistä selkiintyy. Available at: <http://www.laakarilehti.fi/ajassa/paakirjoitukset/kuva-vuokralaakareista-selkiintyy/> (Accessed: 2 August 2016).

Lääkärilehti (2007) Lääkärit ja hoitajat arvostavat vuokratyön vapautta. Available at: <http://www.laakarilehti.fi/ajassa/ajankohtaista/laakarit-ja-hoitajat-arvostavat-vuokratyon-vapautta/> (Accessed: 17 July 2016).

Lääkärilehti (2013a) Vuokralääkäri kuuluu porukkaan. Available at: <http://www.laakarilehti.fi/ajassa/ajankohtaista/vuokralaakari-kuuluu-porukkaan/> (Accessed: 2 August 2016).

Lääkärilehti (2013b) Vuokralääkärien työolot ja hyvinvointi terveyskeskuksissa. Available at: <http://docplayer.fi/3373090-Vuokralaakarien-tyoolot-ja-hyvinvointi-terveyskeskuksissa.html> (Accessed: 2 August 2016).

Mathe, H., Pavie, X. and O’Keeffe, M. (2011) VALUING PEOPLE TO CREATE VALUE : AN INNOVATIVE APPROACH TO LEVERAGING MOTIVATION AT WORK. World Scientific Publishing Co.

Mediradix Oy (no date) Mediradix yrityksenä. Available at: <http://www.mediradix.fi/fi/ylanavi/mediradix-yrityksena> (Accessed: 17 July 2016).

MTD Training & Ventus Publishing ApS (2010) Motivation skills. Available at: <https://ebooksforexcellence.files.wordpress.com/2012/10/motivation-skills.pdf> (Accessed: 28 July 2016).

Mullins, L.J. and Christy, G. (2013) Management and Organisational Behaviour. Pearson Education M.U.A.

Palukka, H. and Tiilikka, T. (2007) Vuokratyöntekijänä hyvinvointipalvelurakenteen murroksessa Loppuraportti. Available at: <https://www.tsr.fi/tsarchive/files/TietokantaTutkittu/2005/105289Loppuraportti.pdf> (Accessed: 2 August 2016).

Pietilä, H. (2015) Mediradix Oy:n myynnin onnistumiseen vaikuttavat tekijät ja myynnin kehittäminen.

Robbins, S.P. and Judge, T.A. (2012) Organizational behavior. Available at: http://bba12.weebly.com/uploads/9/4/2/8/9428277/organizational_behavior_15e_-_stephen_p_robbins__timothy_a_judge_pdf_qwerty.pdf (Accessed: 28 July 2016).

Suomen Lääkäriliitto (Finnish Medical Association) (2015) Lääkärit Suomessa, Physicians in Finland. Available at: https://www.laakariliitto.fi/site/assets/files/1268/laakarit_suomessa_2014.pdf (Accessed: 2 August 2016).

TED (2009) Dan Pink: The puzzle of motivation. Available at: <https://www.youtube.com/watch?v=rrkrvAUbU9Y> (Accessed: 2 August 2016).

Training & Development Solutions (2001) Frederick Herzberg - theory of motivation. Available at: <http://www.trainanddevelop.co.uk/article/frederick-herzberg-theory-of-motivation-a78> (Accessed: 28 July 2016).

Työ- ja Elinkeinoministeriö (2013) Vuokratyöopas. Available at: http://www.vvl.fi/media/ajankohtaista/tem_vuokratyopas_netti.pdf (Accessed: 15 July 2016).

Viitala, R., Vettensaari, M. and Mäkipelkola, J. (2006) Näkökulmia vuokratyöhön TYÖPOLIITTINEN TUTKIMUS 2006. Available at: <http://sampac.nl/EUKN2015/www.eukn.org/tpt302fd8b.pdf?objectid=158472> (Accessed: 2 August 2016).

Saunders, M., Lewis, P. & Thornhill, A., (2012) Research Methods for Business Students. 6th ed. Essex: Pearson Education Limited.

7 APPENDIX

7.1 Appendix 1. Questionnaire

Opinnäytetyökysely

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Opinnäytetyössäni tutkin lääkäreiden motivaatiota työskennellä henkilöstöpalveluyritysten kautta ja mitkä ovat tärkeimmät syyt valittaessa yritystä.

Kysely myös selvittää, mitä lääkärit ajattelevat henkilöstöpalveluyrityksistä ja miten henkilöstöpalveluyritykset voisivat parantaa palveluitaan.

Kyselyyn vastaaminen vie noin 2-5min.

Arvostan aikaasi vastata kyselyyn ja näin ollen autat opinnäytetyöni valmistumista.

Kysely on luottamuksellinen ja vastauksissa en tarvitse henkilökohtaisia tietojasi.

Motivaatio kyselylomake

1. Olen

opiskelija

5. vuoden kandi

6. vuoden kandi

Lääkäri

2. Sukupuoli?

Mies

Nainen

3. Työkokemus?

Alle 2 vuotta

2-5 vuotta

5-10 vuotta

10-20 vuotta

yli 20 vuotta

4. Oletko työskennellyt henkilöstöpalveluyrityksen kautta?

Kyllä

En

5. Mikä kuvaa parhaiten työtilannettasi tällä hetkellä? (Voit valita useamman mikäli teet myös tunteja kokoaikaisen työn ohella)

___ Työskentelen kokoaikaisesti

___ Työskentelen kokoaikaisesti henkilöstöpalveluyrityksen kautta

___ Työskentelen osa-aikaisesti

___ Työskentelen osa-aikaisesti henkilöstöpalveluyrityksen kautta

6. Kuinka tärkeitä seuraavat seikat ovat työskenneltäessä henkilöstöpalveluyrityksen kautta? (1=Ei lainkaan tärkeä, 2=Ei kovin tärkeä, 3=En osaa sanoa, 4=Melko tärkeä, 5=Erittäin tärkeä,

___ Henkilöstöpalveluyrityksen maine

___ Henkilöstöpalveluyrityksen tunnettavuus

___ Helppous työskennellä firman kautta (Sopimukset, yms.)

___ Palkkaus

___ Työn sijainti

___ Työn kesto

___ Asiakaspalvelu (Kuinka hyvää palvelua sait prosessin aika ja pidettiinkö sinuun yhteyttä)

___ Koulutusmahdollisuudet

___ Konsulttilääkärin tuki

___ Ystävien/kollegoiden kokemukset yrityksestä

7. Kun olet työskennellyt henkilöstöpalveluyrityksen kautta, niin kuinka usein nämä ongelmatilanteet ovat osuneet kohdallesi? (1=Ei koskaan, 2=Hyvin harvoin, 3=Harvoin, 4=Usein 5=Erittäin usein)

- Ongelmat palkkaan liittyvissä tekijöissä
- Ongelmat työajoissa
- Työ ei vastannut lupauksia
- Työpaikan turvallisuus
- Koulutusmahdollisuuksien vähäisyys
- Yhteydenpito yrityksen kanssa on ollut vaikeaa

8. Arvostan työtä henkilöstöpalveluyrityksen kautta koska (1=Täysin eri mieltä, 2=Jokseenkin eri mieltä, 3=Ei samaa eikä eri mieltä, 4=Jokseenkin samaa mieltä, 5= Täysin samaa mieltä)

- Palkkaus on hyvä
- Työn joustavuus (kyky valita milloin työskentelet)
- Työvaihtoehdot (useita eri mahdollisuuksia esim. osa-aika, iltatyö, viikonloppu)
- Helppous (työn hakeminen ja sopimukset hoidetaan firman kautta)
- Hyvä suhde kollegoiden kanssa
- Hyvä suhde yrityksen päättäjien kanssa
- Työkokemuksen kerryttäminen
- Mahdollisuus erikoistua
- Mahdollisuus työskennellä eri työtehtävissä

9. Kuinka paljon kyseinen tekijä motivoi, kun työskentelet henkilöstöpalveluyrityksen kautta? (1=Ei lainkaan, 2=Ei kovin paljoa, 3=En osaa sanoa, 4=Paljon, 5=Erittäin paljon) Motivaatiolla tässä kysymyksessä tarkoitetaan sitä, että paljonko tämä tietty tekijä kasvattaa haluasi työskennellä ja tehdä parhaasi työssä.

- Hyvä palkkaus
- Tunne, että työtäsi arvostetaan
- Työn mielekkyys
- Vastuu
- Turvallisuuden tunne työpaikalla
- Mahdollisuudet edetä uralla
- Hyvät suhteet kollegoiden kanssa
- Hyvät suhteet johdon/yrityksen päättäjien kanssa

10. Edelliseen kysymykseen viitaten kuinka paljon sama tekijä luo tyytymättömyyttä/ ei motivoi mikäli tätä tekijää ei täytetä odotuksiesi mukaisesti? (1=Ei lainkaan, 2=Ei kovin paljoa, 3=En osaa sanoa, 4=Paljon, 5=Erittäin paljon)

- Huono palkkaus
- Saavutukset
- Tunne, että työtäsi ei arvosteta
- Työn mielekkyys
- Vastuu
- Turvallisuuden tunne työpaikalla
- Ei mahdollisuutta edetä uralla
- Huonot suhteet kollegoiden kanssa

__ Huonot suhteet johdon kanssa

Kiitos vastauksestasi!

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