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The challenges and solutions of human resource management of foreign employees in Finnish social and health system

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ABSTRACT

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Purpose
The research aims to investigate challenges and experiences faced by managers in the past while managing foreign employees. Its primary goal is to offer management insights for new and inexperienced managers, enhancing management efficiency, work performance, and satisfaction among foreign employees. The research seeks to mitigate conflicts, foster understanding and communication, and prevent talent loss in the process.

Method
This study adopts qualitative research method.
The qualitative research conducted a preliminary understanding of the research object through document collection and analysis and interviews with 10 relevant professionals. Through semi-structured interviews, we gain an in-depth understanding of the human resources management situation of foreign employees and form conclusions.

Result
According to the survey results, problems existing in the human resources management of foreign health professional staff include:
1. Although domestic recruitment is low-cost, labor resources are limited.
2. In terms of domestic recruitment, there is no effective and systematic training integration system with training schools. Many foreign health students cannot find a suitable department for their internship.
3. Cross-border recruitment investment is risky, and uncontrollable talent flow may lead to low corporate investment returns.
4. There is no systematic process for induction training.
5. Companies rarely provide employees with training courses on multicultural cooperation.
6. There is no systematic follow-up and communication management plan for newly hired foreign employees.
7. No language training is provided for employees who have difficulty communicating in Finnish
8. Managers have not received systematic communication management training regarding cultural differences and conflicts.
Solutions to these problems include:
1. Enterprises can cooperate with the employment department of training schools to provide employment training for foreign health major students (such as which websites can learn recruitment information, write resumes, prepare interview questions, etc.)

2. Enterprises can cooperate with the teaching departments of training schools to actively provide suitable internship departments for foreign health major students and open the right for foreign health major students taught in English to apply for internships through the system.

3. Cross-border recruitment investment is risky, and the flow of talent is uncontrollable. When the labour gap is large, cross-border recruitment can still be considered and bidding methods can be used to improve the cost-effectiveness of services. Employers can cooperate with local governments to integrate localized services for foreign talents (such as immigration services, partner employment services, children's schooling services, medical, tax, legal, religious, real estate, entertainment, and other information support services) to reduce brain drain.

4. Onboarding training is an important part of human resource management for foreign health professional personnel. Department managers need to establish a programmed training system to facilitate the recruitment of more qualified foreign health professional staff. (For example, break down the induction training into several units according to priority, give each unit a certain amount of learning time, and conduct regular interviews to collect feedback. Of course, the induction training manual can be set to be bilingual, Finnish and English, to facilitate reading by foreign health professional staff and understanding)

5. It is recommended that employers cooperate with language training institutions to provide language training or translation equipment for employees who have difficulty communicating in Finnish.

6. It is recommended that managers organize multicultural team-building activities within the department to deepen cultural exchanges among employees.

7. It is recommended that employers organize multicultural cooperation training for all employees and provide multicultural communication and management training courses for management.

CONTENTS

1 INTRODUCTION

1.1 Background

As the population ages, the demand for health professional staff in each country will be huge in the future. According to section 21 c of the Finnish Social Care Act, the implemented staffing must be at least 0.7 staff per elderly client.(28.10.2022/876, n.d.) Due to the current severe shortage of nursing staff in Finland, the government has re-evaluated the timetable for the implementation of the reform of at least 0.7 staff per elderly client to ensure that the 0.7 target is not affected. But the entry into force is staggered, with a target of 0.65 on April 1, 2023, and a target of 0.7 on December 1, 2023. The 128 million funds for the reform will continue to be effective.(Ville, 2022) According to calculations by the Finnish Institute for Health and Welfare (THL), the growth in demand for services in the Pilkanma Welfare District is expected to increase by 1.81% in 2022. 2023. 2022 Pirkanmaa starts recruiting nursing staff from abroad. The local government has authorized the City of Tampere to tender for the procurement of foreign nursing staff on behalf of the Pilkanma Welfare District to address the growing demand for services and the shortage of nursing staff caused by the aging population. A total of 80 foreign nursing staff were recruited this time.(*Pirkanmaalle ryhdytään hankkimaan hoitajia ulkomailta – huomiota monikulttuuristen työyhteisöjen johtamiseen*, n.d.)

Around 150 000 social and health workers will retire in the next 15 years, according to Honkatukia et al. (*Kadonneiden hoitajien arvoitus*, 2020) This figure includes all people working in the sector, not just those with social and healthcare training. By 2040, healthcare talent demand is expected to increase by about one-third. That means the industry needs about 50,000 workers in addition to retirees. (*Kadonneiden hoitajien arvoitus*, 2020; *VTT Technology 327: Uutta, vanhaa ja sinivalkoista – Suomi 2040*, n.d.)

In the future, we will live in an era of scarce labor resources. While we are now discussing how to improve service provision for older people, we must acknowledge that without adequate staff to take on this social and health care task, the goal of improving service delivery for seniors will be difficult to achieve. As competition for the health professional workforce intensifies, to ensure the

normal operation of society and health services, the health industry needs to develop effective management models. Recruiting foreign workers is one solution to the labor shortage. In 2020, the number of active health professional personnel in Finland was 75,290, of which 3.7% were foreign employees. The number of foreign employees continues to increase. (*Tilastoja sairaanhoitajista*, n.d.)

1.2 Objectives and purpose of the research

The purpose of the research is to study the challenges and experience encountered by managers in the management of foreign employees in the past, such as language and cultural barriers, legal and compliance issues, interpersonal and social barriers, training and development, and cultural differences. To provide management reference for the new generation of managers and managers who have no experience in managing foreign employees, improve management efficiency, and improve the work performance of foreign employees and employee satisfaction, reduce conflicts, promote understanding and communication, and prevent talent loss. Knowledge sharing is vital for future leaders. Programs that transfer knowledge from experienced to younger leaders are crucial for intellectual capital retention.(Lee et al., 2018)

1.3 Research questions

- What challenges do managers face when managing foreign employees?

- What are the corresponding solutions, and how to follow up and evaluate?

1.4 Importance and justification for the research

Studying the human resource management of health professional foreign employees has implications not only for businesses, but for society and the

economy. This study can help companies pay attention to the cultural differences and language barriers of foreign employees and formulate corresponding training and exchange plans to promote cultural diversity and integration within the company. This research can also provide a reference for business managers to create an equal and harmonious working environment, help foreign employees integrate into the company and local society, and build a sense of belonging and pride. In addition, the research can also help managers determine strategies to deal with these challenges. Contribute to increased employee satisfaction and retention and improved organizational performance. Through this study, companies can better understand the international health professional talent market and provide reference for expanding business scope and influence. Studying the human resource management of foreign health professional personnel can not only assist enterprises to maximize the use of health professional skills and talents, promote enterprise innovation and development, reduce the management cost of managing foreign employees, flexibly use human resources, reduce labor costs, and improve enterprise efficiency. It can also provide reference for enterprises to implement internationalization strategies, expand overseas markets, and improve enterprises' international competitiveness.

2   LITERATURE REVIEW

2.1   Comparison of previous literature

In many economies, there is a growing demand for health professional technicians due to demographic changes, aging populations, declining fertility rates, labor shortages, and growing international migration(Al Ariss & Syed, 2011; Beechler & Woodward, 2009). According to the United Nations "2020 World Population Migration Report", as of 2020, the total number of global migrants is about 280 million. (IOM, 2019) Most immigrants work in skilled jobs, and they form a significant part of the global talent pool (Guo & Al Ariss, 2015).

The research on the management of foreign employees can be traced back to the 1980s and 1990s. With the increase of globalization and international immigration, some scholars and institutions began to study and pay attention to the management of foreign employees. For example, Chun Guoa and Akram Al Ariss published the article " Human resource management of international migrants: current theories and future research " in 2015, which discussed the issue of foreign employees' management. (Guo & Al Ariss, 2015)

From a macro perspective, we can see that the driving factors behind this phenomenon are political factors, population aging and lack of economic opportunities in developing countries. From the micro level, it is not difficult to see that skilled immigrants among international immigrants can help countries and organizations enhance their international competitive advantages, enhance their position in the global talent competition, and alleviate the shortage of talents and shrinking population structure.(Beechler & Woodward, 2009; Carr et al., 2005; Cerdin et al., 2014; Sidani & Al Ariss, 2014).

But in several studies, foreign workers were found to be at higher accident risk than national workers(Ahonen & Benavides, 2006; Jönson & Giertz, 2013; McKay, 2006; Pransky et al., 2002; Richardson, 2005). In their 2013 study, Jönson et al. found that employees born outside the Nordic countries were at increased risk of having a high workload and being unappreciated by their colleagues. In a 2006 study, McKay et al, according to the analysis, the reason

why foreign workers are more prone to accidents is that foreigners are usually in multiple risk groups at the same time, such as age, work experience, working hours, job type and industry, awareness of rights, and it is difficult to communicate or understand health issues and safety information, changes in work organization and lack of protection for employees, etc.(McKay, 2006)

Existing research results show that international skilled migration is of great significance to countries and organizations, and human resource management (HRM) research on skilled migration is still in its infancy, while research on human resource management for health professional skilled migration is very limited and needs further research (Al Ariss et al., 2014).

This literature review describes the current knowledge on foreign employee HRM challenges and solutions in Finnish social and health system. The literature review identified five main themes. The five main themes are recruitment and selection, training and development, performance management, compensation and benefits and employee relations.

2.2   Key concepts

Human resource management (HRM) is a strategic approach to managing an organization's workforce. Human resource management places greater emphasis on the role of human capital without reducing the importance of economic and physical capital.(Heller, 2004)

Foreign employees in the health system include foreign doctors (foreigners who have a health professional degree and work in health institutions. It can be health professional experts, researchers, interns, etc. from other countries), foreign nurses (have a degree in nursing and work in health institutions Foreigners who work in nursing. They can be nursing experts, researchers, interns, etc. from other countries), foreign health professional technicians (including health imaging technicians, laboratory technicians, pharmacists, etc.) and logistics personnel (medical equipment maintenance staff, food servers, cleaning staff, security staff).

Inclusion criteria: Articles from the EBSCOhost, and Web of Science were searched. Combinations of 'human resources management', 'Foreign
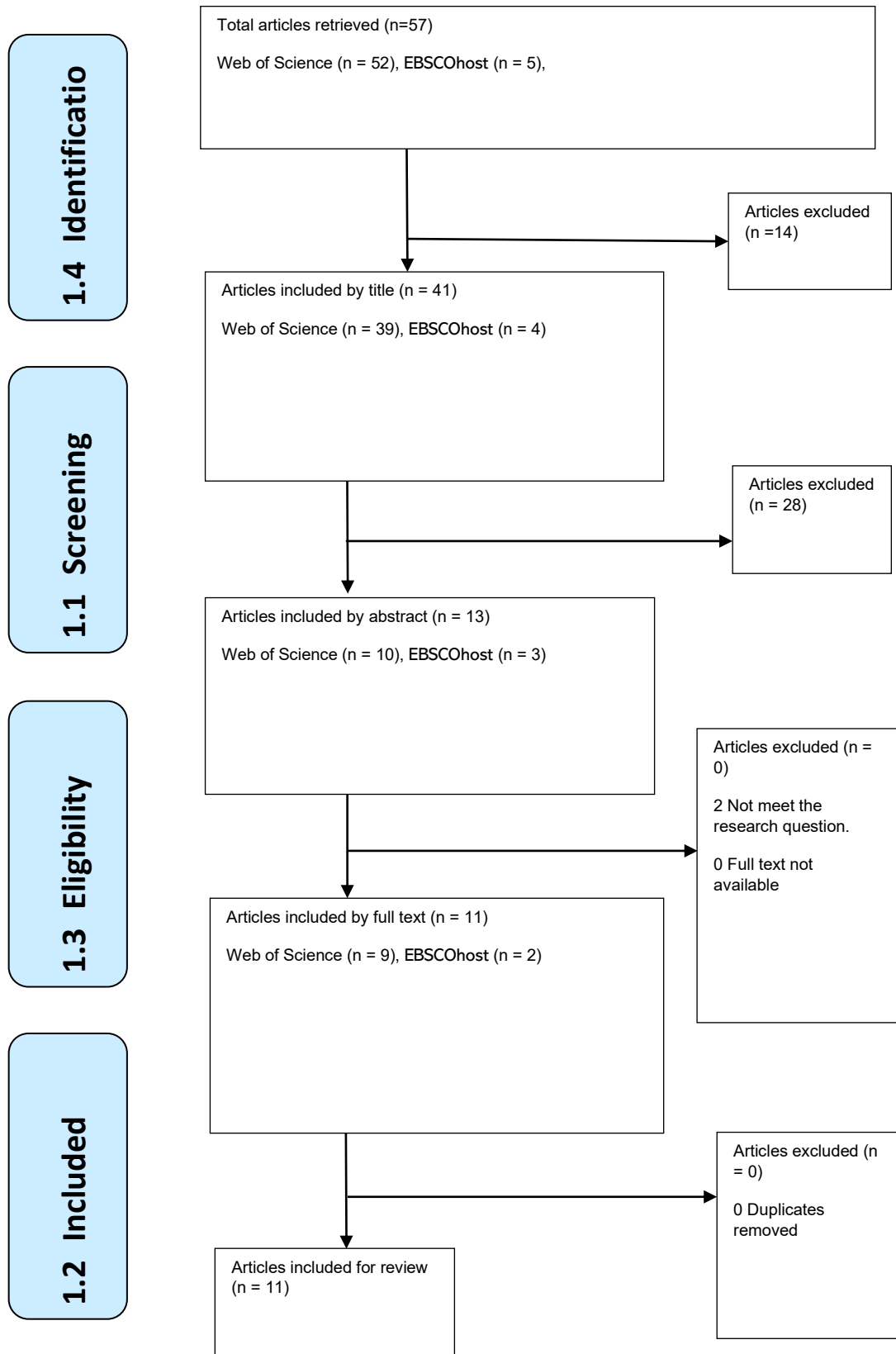
employees or foreign workers or migrant workers' and 'health or health system or health services or healthcare' were used in the searches. These were limited to the research articles published in English. Academic journal articles on HRM are inclusion criteria. Exclusion criteria: Articles which did not deal with foreign employees HRM were excluded and non-English texts. (Table 1).

Table 1. Search strategy: database and search terms

Database	Search terms
Web of Science	Search: human resource management (Topic) AND foreign employees or foreign workers or migrant workers (all fields) AND health (all fields)
EBSCOhost	Search: (human resource management) AND (foreign employees) AND (health system or health services or healthcare)

A total of 57 articles were retrieved. Forty-one articles were selected based on title. The criteria for the search by title were the terms in Table 2. Thirteen articles were selected based on abstracts. 13 full-text papers were screened, and 13 papers were included in the final review. (Figure 1).

Figure 1. PRISMA search and retrieval yields

1.4 Identificatio

Total articles retrieved (n=57)

Web of Science (n = 52), EBSCOhost (n = 5),

Articles excluded (n =14)

1.1 Screening

Articles included by title (n = 41)

Web of Science (n = 39), EBSCOhost (n = 4)

Articles excluded (n = 28)

Articles included by abstract (n = 13)

Web of Science (n = 10), EBSCOhost (n = 3)

Articles excluded (n = 0)

2 Not meet the research question.

0 Full text not available

1.3 Eligibility

Articles included by full text (n = 11)

Web of Science (n = 9), EBSCOhost (n = 2)

Articles excluded (n = 0)

0 Duplicates removed

1.2 Included

Articles included for review (n = 11)

2.2.1 Recruitment and selection:

Recruitment consists of two parts. The first part is to attract potential employees through advertising or publicity, and the second part is to identify and screen qualified potential employees through resumes and interviews.(Torrington, 2011)

When employers choose recruitment advertisements or promotional channels, they should be specific to the group of applicants they need to attract. For example, for fresh graduates who have no interview experience, companies can choose to set up recruitment booths in schools. For young and accurate candidates, companies should consider social media that young candidates often visit such as Linkedin, Instagram and Facebook. Recruitment advertising channels can not only save recruitment costs for companies, but also accurately find high-quality candidates. The second is the editing of recruitment advertisement information. Whether the employer's recruitment advertisement information has highlights and whether it can stand out among the many recruitment advertisements depends on whether the employer understands the potential candidates' job search needs. How can we attract high-quality potential candidates more accurately? Recruitment advertisement information needs to include the following points: such as a description of the company's values and culture, a specific description of the position, requirements for the applicant's academic qualifications and work experience, post-employment salary and benefits, and a description of sustainable career development. The timing of recruitment advertisements is also very important. A precise time can increase the number of applicants. For example, if a job advertisement is placed during the graduation season, more resumes will be received than usual.(Torrington, 2011)

In Beitkovsky's research, he emphasized the importance of human resources marketing methods. Human resources marketing methods can help companies better manage and retain existing human resources, and it can also attract new employees to join the company. The study identified various tools for external human resources marketing, including social media platforms, recruitment video ads, related recruitment PR activities and corporate promotional activities.(Bejtkovsky, 2020)

Pito and Klara discussed various factors that influence the immigration decision of health professionals, such as the economic opportunities of the country of immigration, the recognition of this profession by the country of immigration and the social identity of this profession, the development prospects of related industries, and whether wages are higher and more affordable. Attractiveness, workload, working environment, working conditions, social benefits, and career development, such as access to advanced health technology opportunities. The document highlights the differences in wages and working conditions between countries, which lead health professionals to seek health professional skills migration in search of a better life and opportunities for further study. But at the same time, the inevitable migration of highly skilled health professionals in some developing countries may lead to "brain drain" and "skills drain" in their countries of origin.(Pito, 2015) Migration of experienced health personnel from developing countries has a negative impact on the public health sectors of these developing countries. Factors that lead to the immigration of doctors and nurses from developing countries include low social welfare benefits, lower wages, limited career development opportunities, heavy workloads and limited working conditions.(Sherr et al., 2012) Oklome's research also pointed out that health professional skilled immigrants from developing countries are solving the labor shortage problem in developed countries. This labor force plays a vital role in basic health services in developed countries. The study also pointed out some factors that drive migration, such as push and pull concepts, including economic differences between developed and developing countries, lack of employment opportunities, political instability, and limited professional development. These factors continue to influence health care professionals' immigration decisions.(Oikelome et al., 2021)

Ngocha-Chaderopa's research highlights that labor shortages in some developed countries are driving cross-border health technology talent recruitment in these countries.(Ngocha-Chaderopa & Boon, 2016)

Kanchanachitra's research shows that countries in Southeast Asia (Thailand, Philippines, Vietnam, etc.) are facing the challenge of shortage of health workers due to the large number of health technicians immigrating to developed countries. This phenomenon hinders equitable access to health services in

Southeast Asian countries, especially in remote areas with underdeveloped economies. In some Southeast Asian countries, policies such as mandatory rural internships, economic incentives, and career development plans are implemented. These policies are used to motivate health technology workers to serve in economically underdeveloped remote areas. The immigration of health technical workers affects the production and distribution of health professional stuff in Southeast Asian countries, which seriously affects and promotes the inequality of national health services in Southeast Asian countries.(Kanchanachitra et al., 2011) Immigration of health care workers may lead to a "health professional brain drain" in developing countries and exacerbate health care shortages in these talent-sending countries, affecting the ability to export and provide health services to local residents.(Oikelome et al., 2021)

Through the analysis of the literature, we can basically make it clear that in the process of cross-border recruitment, the national conditions, culture, labor market, salary, social welfare, and working environment, workload, and vocational training and career development of the talent-sending country must be considered in the early stage. It requires some investigation and understanding. These factors play a key role in the success of talent introduction.

Many countries face aging populations, an aging nursing workforce and the need to redesign services, which creates challenges for workforce planning and education. How to lead healthcare companies to balance innovation and respond to future challenges is critical for every country.(Rosser, 2015) In some Middle Eastern countries such as Saudi Arabia, the Saudi healthcare system hopes to increase the participation of Saudi nationals in the healthcare workforce, which they believe is a key focus in addressing unemployment and improving healthcare services. Therefore, Saudi Arabia has been working hard to establish a positive view of health care careers among Saudi young people and enhance the talent attraction of health care careers.(Al-Hanawi et al., 2019)

The development of recruitment and diversity policies is discussed in Willis' study. Health organizations should develop clear diversity and inclusion policies, which can attract more high-quality foreign employees to join and also help foreign employees in the company better adapt to the work environment.(Willis et al., 2018)

2.2.2 Training and Development:

Nursing intellectual capital theory (NIC theory) is a concept that focuses on the value of intellectual capital within nursing organizations. It emphasizes concepts that include nursing knowledge, skills, and expertise as a critical asset that contributes to the overall success and performance of a healthcare organization. Nursing intellectual capital theory states that health institutions can improve patient outcomes, improve care quality, and improve organizational efficiency within health institutions by investing and managing nurses' nursing intellectual capital. NIC theory also states that indicators of nurse human capital, such as the nurse's level of educational preparation and professional certification, can directly impact patient care outcomes. This theory proposes that nurses with higher levels of education and professional training contribute significantly to the knowledge and performance of nursing units. Therefore, healthcare organizations developing nursing staff with advanced certifications and degrees can have a positive impact on patient care and overall organizational success. This theory emphasizes nursing knowledge and expertise as a valuable strategic management form of human intellectual capital for healthcare organizations. The theory encourages health institutions to recognize and invest in the nursing intellectual capital of the nursing staff to improve the quality of patient care, which can help health institutions achieve sustainable competitive advantages.(Lee et al., 2018)

Employee induction and career development are part of human resource management. Onboarding training refers to helping new employees become familiar with the new work environment, system, and work tasks and scope. Career development refers to assisting employees to learn and acquire new skills, knowledge and expand personal abilities so that employees can achieve

success in their current or future jobs. Training can assist and enhance an employee's performance and job potential.(Dachner et al., 2021)

The training and development of health professionals (including doctors, nurses, and allied health professionals) in human resource management is a powerful measure for health institutions to meet the growing demand for quality health services in society. Society should actively encourage cooperation between the public and private sectors, especially in areas such as education, training, and resource sharing. Collaboration between schools and health institutions is important in developing a qualified national and foreign health care workforce.(Al-Hanawi et al., 2019)

Rosser's study cited the strong link between the education level of qualified nurses and the quality of patient care across European countries, as well as the idea that highly educated nurses help improve patient outcomes. As more and more foreign nurses enter developed countries, the number of foreign nursing staff is gradually increasing. This phenomenon poses challenges to how to manage cultural differences and onboard training for foreign employees in health institutions in developed countries.(Rosser, 2015)

Migrant health care workers often face employment difficulties because their qualifications and skills are not certified by the health authorities of the countries they immigrate to, so to some extent they are likely to be underutilized. This situation can lead to frustration and dissatisfaction among these foreign professionals because their qualifications are not recognized. To solve this problem, the government can adopt some policies and measures related to qualification certification, such as systematizing the certification procedures for foreign certificates and providing targeted training programs for foreign health professional talents. The study also pointed out that establishing supportive networks and mentoring opportunities for foreign health professional talents in employment and life can help them adapt to the new work environment more quickly and cope with the challenges brought about by immigration.(Lee et al., 2018; Oikelome et al., 2021)

Additionally, Ngocha-Chaderopa's research points out that foreign health professionals can adversely affect the quality of patient care due to factors such

as communication barriers and poor language skills. To ensure quality care in the sector and address the language challenges faced by immigrant caregivers, research shows managers need to increase language training and education on health system culture for foreign health professionals. The study also mentioned the role of advanced language learning support technology in language learning. Health institutions can use tools such as comprehensive websites to effectively achieve knowledge sharing and continuous learning in foreign employee training. (Ngocha-Chaderopa & Boon, 2016)

Regarding onboarding, Willis's research highlights the need for healthcare organizations to strengthen training programs on cultural diversity and effective communication for all healthcare professionals. These training courses include language proficiency, understanding of Australian nursing practice and the art of building nurse-patient relationships with residents. Research shows that health institutions provide language support to foreign professionals, including providing interpreters and translated materials.(Willis et al., 2018)

2.2.3 Performance management

Employee performance management refers to setting work goals, tasks in the organization, and evaluating employee performance through observation and feedback.(Osmani & Maliqi, 2012) Studies have pointed out that limited data collection on the health workforce, especially in the private sector, hinders effective monitoring and decision-making in the health system.(Kanchanachitra et al., 2011)

2.2.4 Compensation and benefits

Compensation and benefits refer to the systems and policies agreed in the employment contract to reward employees for their contributions to the organization, such as wages, bonuses, and welfare benefits. Compensation affects the attitude and behavior of every employee. (Gupta & Shaw, 2014) In human resource management, compensation is one of the important means to attract job applicants. At the same time indirect compensation or benefits play an important role in attracting and retaining employees. Benefits such as good

health insurance and pension plans help employers stay competitive in the labor market.(Dulebohn et al., 2009)

2.2.5 Employee relations and Integration

Employee relations and integration involves the management of the relationship between employees and the organization, including issues related to communication, motivation, integration, job satisfaction and employee dignity.(Kuzu & Özilhan, 2014) Strategic management of human resources is crucial to achieving employees' sense of recognition for their self-fulfilling work, which is critical to job satisfaction and personal outcomes. The need for healthcare organizations to embrace diversity and promote inclusive practices within the healthcare workforce is critical to effectively utilizing the skills and contributions of immigrant professionals.(Oikelome et al., 2021)

Healthcare worker migration impacts health systems, including access to health care, quality of care, and patient outcomes. Pito's research highlights the need to implement management strategies for foreign health professionals, including how to implement better support for immigrants in the health profession, provide incentives and create a multicultural working environment.(Pito, 2015)

Lee's research emphasized the concept of employees as valuable assets within successful organizations. (Lee et al., 2018) Additionally, Ngocha-Chaderopa's study addressed issues of racial discrimination. Managers should promote a diverse work culture to reduce racial discrimination conflicts.(Ngocha-Chaderopa & Boon, 2016)

In Vainieri's study, high wages did play a role in shaping job satisfaction, but it wasn't the only factor. There are other factors besides salary such as acceptance by the organization and employment relationship.(Vainieri et al., 2019)

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3   RESEARCH DESIGN

3.1   Research design

This study adopts the method of qualitative research.

Qualitative research conducts a preliminary understanding of the research object through the collection and analysis of literature and interviews with 10 relevant professionals. Through the semi-structured interview method, the human resource management of foreign employees is deeply understood, and conclusions are formed.

Qualitative research is a descriptive research method. We use qualitative research methods when studying exploratory or difficult-to-quantify topics, such as people's views on a topic, behavioral habits, and personal experiences. When the individual experiences and feelings of the research subjects are more important, qualitative research can help researchers better understand the inner psychology and behavioral motivations of the research subjects.(Swanson & Holton, 1997; Townsend et al., 2016)

Since this paper mainly studies the challenges and solutions encountered by managers of the health system when managing foreign employees, and how to improve the job satisfaction of foreign employees and prevent brain drain. Qualitative research methods are relatively suitable for the complexity and difficulty of quantification of the subject of this research.

Qualitative research focuses on developing a deep understanding of a research question, topic, or phenomenon. Therefore, the choice of sample size should consider the depth rather than the breadth of the research in order to obtain rich data and meticulous analysis.(Hennink et al., 2017; Patton, 2015) I will contact the department managers of the different service lines of the Pirkanmaan Welfare Area (Pirkanmaan hyvinvointialue). The department manager who supervises the foreign employees will be invited to participate in the interview.

When conducting interview research, I consider the constant review and evaluation of sample size during the research process. After the 10 initial interviews, I conduct a data analysis to assess the quality and depth of the data and determine if more respondents need to be recruited. In addition, I also determine the sample size based on the data saturation point, where enough

information is obtained during the interviews to support the answer to the research question.(Patton, 2015)

Semi-structured interviews are a type of interview between fully structured interviews and completely unstructured interviews. In semi-structured interviews, the researcher uses a prepared interview guide or outline.

Semi-structured interviews offer high flexibility. This method allows the researcher to flexibly adjust questions during the interview process, allowing the researcher to gain a deeper understanding of the interviewee's perspectives and experiences. In semi-structured interviews, the researcher can organize and compare the data obtained according to the guidelines or outline of the research design. Such a method can led to relatively reliable conclusions. Since the interview is semi-structured, questions that may not have occurred to the interviewee can be discussed during the interview, allowing the researcher to gain a more comprehensive understanding of the research object. Of course, it has limitations. For example, semi-structured interviews require processing and analyzing large amounts of unstructured data, which takes a lot of time. At the same time, since the question-and-answer process of semi-structured interviews has a certain degree of subjectivity, the credibility of the data may be affected by the researcher's subjective factors.(Townsend et al., 2016)

The impact of subjectivity of questions and answers and data credibility in semi-structured interviews is inevitable, but we can reduce the impact through the design of interview guidelines, control of the interview process, multi-source, and multi-data collection.

Because the design of the interview guide will affect the data quality of semi-structured interviews. Therefore, researchers need to design corresponding questions based on the research questions. My research will use the questionnaire used in Finland in 2013 on the difficulties and opportunities of foreign doctors and nurses. Questions in the interview guide should be targeted and open-ended. During interviews, I am aware of my own subjectivity and try to control my influence. For example, I won't hint at my opinions in questions. I won't be overly affectionate or standoffish. I also don't create tension or discomfort. In addition to semi-structured interviews, I can also use other data sources, such as documentary analysis, to verify and support the interview

results, thus increasing the credibility of the data. In order to verify the credibility of the data and reduce the impact of subjectivity, for example, I can use methods to collect and analyze the same research object multiple times, and compare the results at different time points to verify the stability and reliability of the data.(Townsend et al., 2016) There are no additional costs for dissertation research. I will be responsible for these costs if needed.

3.2 Data collection

This study employed a variety of data collection methods, including literature research and semi-structured interviews. The literature research mainly analyzes the existing literature and data to obtain the basic situation and existing problems of human resource management of foreign employees. I contacted the research department at the Pirkanmaan Welfare Area in May and submitted my research application in June. After getting research permission, I contacted 10 senior managers of different service lines. These 10 managers received invitations for interviews. This interview is mainly to conduct in-depth exchanges with the heads of foreign employees to understand the implementation of human resource management of foreign employees, existing problems, solutions. The interview is mainly based on the Teams. The recording tool uses Teams for recording. The interviews were mainly conducted in Finnish, supplemented by English.

Relevant documents required for research application:

- Thesis Plan

- Thesis Permit Application

- TAMK Thesis Agreement

- Privacy Statement

- Thesis Announcement

- Participant Consent for Interview in the Thesis

- List for Thesis Interviews

- Interview Framework

Interview Framework:

<mark>Unit Situation</mark>

How many employees with an immigrant background are working in your department?

How long have they been employed?

In what types of employment are they, and are there any differences compared to Finnish employees?

Is there turnover among employees with a foreign background?

<mark>Recruitment</mark>

How is recruitment carried out in practice: Are the practices and channels the same as those for Finnish-background employees? Are there any differences?

Do a lot/few employees with an immigrant background apply for positions in your unit? Would you be interested in hiring more employees with an immigrant background or would you like to reduce their numbers?

How is an employee's qualification for the job ensured? What is the employer's responsibility in this regard?

How is it ensured that an employee has sufficient oral and written language skills (is language training provided in the unit)?

Are employees with an immigrant background working in positions corresponding to their education?

<mark>Orientation</mark>

How do you onboard new employees to their work?

Do the orientations for Finnish-background and immigrant-background employees differ (in terms of content, duration)? How so?

How do employees with an immigrant background perceive the orientation process?

What practices have been effective or successful in the orientation process? Why? Have there been any issues or "cautionary examples" that do not work based on experience?

Do you seek feedback from employees with an immigrant background in your unit regarding their orientation/adaptation to the department (such as in development discussions, as part of the orientation process, etc.)?

<mark>Integration into the Work Community</mark>

What kind of experiences do you have with employees of immigrant backgrounds (compared to Finnish employees)?

Is it evident in the work community that there are employees from different countries? How does this manifest?

How has integration been attempted and how has it been realized? (For example, do employees participate in workplace events/common social gatherings, etc.)? Have successful practices in integration been identified, and what are they? Are these practices that could be applied more broadly in other departments?

Have there been any potential issues related to integration? How have these been addressed?

How have Finnish employees received and how do they perceive employees with immigrant backgrounds?

Is it possible to consider cultural specificities in the work if employees have preferences related to this (such as task allocation, number of patients treated, shift planning, obtaining time off/vacation (certain holidays may be more important in different cultures compared to Finnish culture))?

Have employees brought any aspects from their own culture into work, and how has this been perceived?

Are there differences in how patients or their families perceive employees with immigrant backgrounds compared to Finnish employees?

<mark>Managerial Perspective</mark>

How long have you been working as the head of your department, and how long have you been in managerial positions in general?

From a managerial perspective, what is the collaboration like with employees of immigrant backgrounds

What is your own background and experience in working with individuals of immigrant backgrounds?

Is there training available in your unit/hospital related to multiculturalism?

Do you perceive a general or unit-specific need to develop aspects/practices/attitudes related to the orientation/integration of employees with immigrant backgrounds?

Has your unit prepared in any way for a potential increase in the number of foreign employees in the coming years?

3.3 Data analysis

Data analysis methods for semi-structured interviews typically include transcription, reading and preliminary classification, coding, data analysis and data display. (Townsend et al., 2016)

1. First I will convert the interview recording or transcript into text form.

2. In the second part, I will read the text and classify it. I will base it on the characteristics and content of the data I learned. I will conduct a preliminary classification and summary of the data.

3. In the third step, I need to code and further analyze the data according to the research questions and objectives.

4. I need to display the data analysis results in text form.

5. The data is stored in an encrypted computer and deleted after completion of the paper.

4   PRACTICAL AND ETHICAL ISSUES

Thesis will follow National Advisory Board on Research Ethics' guidelines.(National Advisory Board on Research Ethics' guidelines, 2012) I will independently working on the thesis and I will act as the data controller. I will comply with data protection laws (*Data Protection Act (1050/2018)*, n.d.)and the University's policy and regulations governing data protection and information security. I will ask the Pirkanmaan Welfare Area for the research permission. I also will draw up a privacy notice, a participant information sheet and consent form before starting to collect personal data.

4.1   Literature review practical and ethical issues

Practical issues: This study obtained documents from the EBSCOhost, and Web of Science databases through the database channel of the TAMK library. Since this research direction is a branch of human resources research, there is no facility timetable limit, but English is set as the document language, and the most important documents are reviewed first by reading the titles and abstracts of the documents. At the same time, this paper will objectively evaluate the quality of the literature included in the literature review.

Ethical Issues: When conducting a literature review, I will avoid plagiarism and cite all sources correctly. When confidential or sensitive information is involved, I will ensure the confidentiality of the information. I will also ensure that appropriate informed consent is obtained from study participants before including the study in the literature review.(National Advisory Board on Research Ethics' guidelines, 2012)

4.2   Qualitative research practical and ethical issues

Practical question: Participants for this study were screened by me. All study participants had work experience managing foreign employees. When collecting qualitative data, I will consider the most appropriate data collection method, such as semi-structured interviews. I will ensure that data collection techniques are ethical, respectful, and culturally sensitive. I will use a rigorous and systematic approach to data analysis to ensure the credibility and reliability of the results of this study.(Creswell, 2013)

Table 2. Qualitative data credibility and reliability

Diversity in data collection	I will use a variety of different data collection methods, such as interviews, observations, text analysis, etc., and ensure that these methods corroborate each other.
Transparency of participant selection	I will keep records of the participant selection, screening, and recruitment process for future review.
Traceability of data analysis	I will record all data and present the analysis process and results in a paper for future examination.
Reflective and critical practice	I will always engage in reflective and critical thinking when analyzing data and writing papers. Through this approach, I hope to ensure the reliability and validity of the data for this study.

I took into account ethical issues such as informed consent, confidentiality, privacy protection, impartiality, data integrity, use and storage of respondents when collecting and analyzing data.(*Finnish Constitution (1999/731, Sections 6–23)*, 1999)

First, the purpose of the research is clear and ethical and ensures that my research does not harm or adversely affect the respondents. Before collecting data, I will explain the purpose and content of the research to the respondents in detail and obtain their informed consent. Respondents need to know how

their responses will be used and how long the data will be kept. And knowing that they can stop participating in the study at any time. Information provided by respondents will be kept strictly confidential and will only be disclosed when necessary. I will try my best not to discriminate against or treat my interviewees unfairly. I will use objectivity and impartiality in my research. Respondents have the right to refuse to answer certain questions, or to withdraw their participation, without giving reasons. I will respect the choices and decisions of the interviewees. (*Finnish Constitution (1999/731, Sections 6–23)*, 1999; National Advisory Board on Research Ethics' guidelines, 2012)

The data for this study will be stored on my computer with a password to prevent illegal access or loss of the data. I back up saved data to prevent data loss or corruption. The language of the interview will be Finnish, but English will be used if necessary. I will save the interview recording on a computer that only I have access to and keep a backup. When transcribing text, I use the Basic level transcription method to ensure that the data has not been tampered with or modified. I will ensure that the data saved is used only for the purpose of this research and no other purposes. I will strictly abide by relevant laws, regulations, and ethical principles to prevent the misuse of this research data. When analyzing the data, I will use anonymity to protect the privacy of the interviewees.(Finnish Social Science Data Archive (FSD), n.d.)

5 FINDINGS

5.1 Analysis of findings

The themes of the data analysis for this study were based on the research questions determined before the interviews, and the thematic data analysis content reports the results of this study.

5.1.1 The challenges do managers face when managing foreign employees.

Initially, interviewees were asked about the challenges managers face when managing foreign employees, from four different dimensions to form a closed loop from recruitment to leadership.

5.1.1.1 The challenges do managers face when managing foreign employees in recruitment.

Therefore, the first question all interviewees were asked about recruitment was "How does the foreign employee recruitment process work in practice?" The interviewees mentioned the following points about the concept:

For example:

"The recruitment process of foreign employees is generally divided into domestic recruitment and cross-border recruitment."

Domestic recruitment, although low cost, has limited labour resources.

There are 5 ways to recruit domestically:

1. Internship arranged by the school

2. Kuntarekry, website recruitment announcement.

3. TE-Services (work trial)

4. Teacher recommendation

5. Contact the department manager directly.

"Since most of the teaching settings for international health professional students are taught in English, this situation has resulted in students' poor communication skills in Finnish. When arranging internships, some highly specialized departments often refuse to recruit international health professional students because they are worried that students cannot understand and meet the internship requirements, saying that their Finnish language is not up to standard."

"Foreign nursing students taught in English cannot apply for internship departments through the JOBIILI system, resulting in students being unable to find or missing some internship opportunities."

"Foreign health professional students can only find internship opportunities by contacting their teaching doctors. Due to the Finnish language barrier, some health professional teachers are unwilling to train foreign health professional students."

"Kuntarekry, the website job posting is a public job search website. Applicants need to submit resume and degree certificate. Only those who pass the interview can sign the employment contract. International health professional graduates are not very familiar with this website, and most of the resume submitters are from applicants from their own countries."

"Applicants who pass TE-Services (work trial) are usually unemployed. This group of applicants with foreign backgrounds generally has limited Finnish language skills and their foreign academic qualifications cannot be certified by Finland."

"There are relatively few candidates recommended by teachers. Some candidates are very good, and after being recommended by teachers, the employing unit is very willing to try to accept such candidates."

"Some applicants directly contact the department manager. Usually, the department manager likes this type of applicant very much because the applicant has demonstrated her or his courage and ability to try."

There are two ways to recruit internationally:

1. Cooperate with multinational headhunting companies for recruitment.

2. Outsource cross-border recruitment to multinational headhunting companies.

Whether you are cooperating with a multinational headhunting company or outsourcing multinational recruitment, you will encounter the following challenges.

1. Investment in early market investigation and development. (Culture, comparison of education in two countries for the same major)

2. Agency fees for headhunting companies

3. Labor investment costs (recruitment interviews, visa processing, settlement assistance)

4. Training costs for introducing talents

5. Construction and investment in social integration support after talent introduction.

"In the early stage, it is very meaningful to inspect the talent market and culture of the talent-sending country, as well as the education of the two countries in the same major. For example, a health professional manager shared his experience in cross-border recruitment. About Latin-speaking countries such as Spain and Portugal, from the Lewis model(Richard, 2013), we can see that the personalities of talents in these two countries are more outgoing, multi-active and enthusiastic. In response to pressure, they are more accustomed to seeking outside help. In their lives, they have close ties with family, relatives, and friends. Supporting each other is especially important. Therefore, immigrants from these two countries generally appear in groups. However, some Asian countries, such as China and Vietnam, appear in the lower left corner of the Lewis model. The personalities of talents in these two countries are reactive, restrained, and peaceful, with strong pressure tolerance and a spirit of sacrifice and dedication. Therefore, immigrants from these two countries generally appear in the form of individuals and small families."

Figure 2. The Levis Model
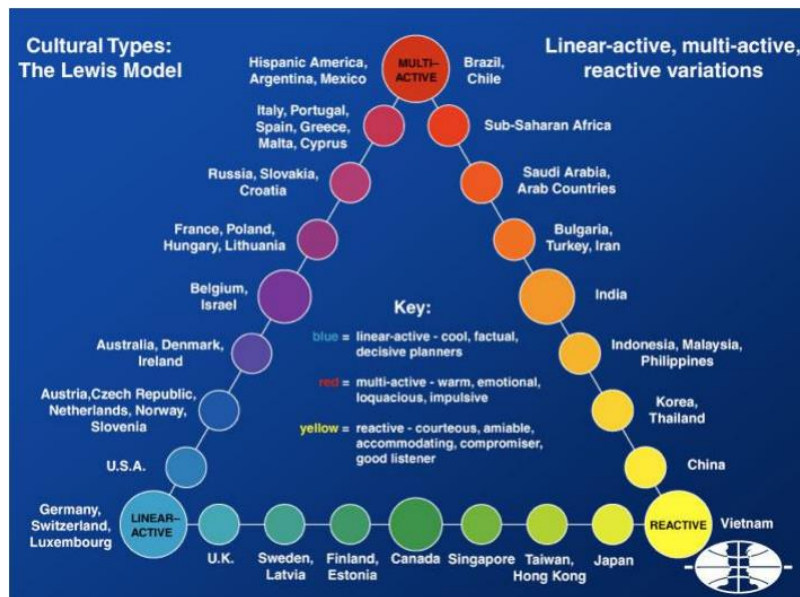
"The agency fees of headhunting companies generally range from 10,000-30,000/person. Valvira Social and Health Licensing and Control Agency stipulates that talents outside the EU cannot directly engage in work in this profession because their academic qualifications are not EU certified. They need to submit applications for academic qualification certification, language assessment and technical internship. The license can only be granted after all certifications are passed. In this way, employers need to invest in training expenditures to introduce talents. At the same time, the system for localizing foreign talents is not yet complete in many remote areas of Finland. Many health institutions are considering factors such as return on investment and risk of brain drain, which makes them maintain a wait-and-see attitude towards cross-border recruitment."

5.1.1.2 The challenges do managers face when managing foreign employees in orientation.

All interviewees were asked about orientation was "How are new employees oriented to their work (is there a designated mentor)?" The interviewees mentioned the following points about the concept:

For example:

"When training new employees, we utilize a training manual, a week mentorship program. For a long-term contract worker, we have an orientation program that goes on for about 3 months, and some aspects go up to a year, so at the one-year mark, we assess how things have been going, of course continuously, but specific aspects are reviewed at the one-year point."

"When training new employees, we utilize a training manual, a 3–5day mentorship program, and team leaders from different job roles also provide regular orientation and guidance sessions for newly hired staff."

The content of Pirkanmaan welfare area induction training includes three aspects:

1. Training Manual, Orientation guide (Appendices 1)

2. Master-apprenticeship training week

3. Professional course training

"In the process of explaining the induction training manual to foreign employees, the manager found that because the foreign employees had poor Finnish language skills and did not understand the Finnish work system and the culture of the health system, more time and time were spent on the induction training for foreign employees. energy."

"There is a lack of systematic training system for foreign doctor employees, and some doctor managers lack experience in employee training. This results in novice doctors being under excessive work pressure, unable to integrate into the group and leaving."

All interviewees were asked about orientation was "Have Finnish employees been oriented to issues related to working with employees with immigrant backgrounds (e.g., cultural aspects)? Would this be necessary?" The interviewees mentioned the following points about the concept:

For example:

"The hospital did not provide Finnish employees with relevant multicultural cooperation training on working with employees with immigrant backgrounds, but as a manager, I think this is necessary."

All interviewees were asked about orientation was "Do you collect feedback from employees with immigrant backgrounds about their orientation/adaptation to the department (e.g., during development discussions, as part of the orientation process, etc.)?" The interviewees mentioned the following points about the concept:

For example:

"I regularly ask new employees directly about training progress. In addition, I collect information indirectly from trainers about how new employees are adapting. I will also use development discussions to get feedback from employees. However, most of this feedback are subjective and lack objectivity."

5.1.1.3 The challenges do managers face when managing foreign employees in integration.

All interviewees were asked about integration was "How has integration been attempted and how has it worked out (e.g., do employees participate in workplace events or social gatherings)? Have there been successful integration practices that could be applied in other units?" The interviewees mentioned the following points about the concept:

For example:

"Not really. We haven't actively tried to implement it because, in the cases of these individuals we've had, it has happened somewhat naturally. I don't know exactly what it has been, but it has occurred organically. Or in a way that, of course, if there were challenges or issues with someone's integration, then we would probably start thinking about what our support measures would be in that regard."

"Based on my observation, we have two foreign employees in our department who are not very inclined to participate in departmental group activities and coffee room conversations; they prefer solitude."

All interviewees were asked about integration was "Have any potential problems related to integration been observed? (Examples: in working competence, healthcare profession-patient interaction, interdisciplinary collaboration, practical work, trust in the employer, equality, employment contracts)? How

have these issues been resolved?" The interviewees mentioned the following points about the concept:

For example:

"From my observation, most of the foreign employees encounter occasional difficulties when communicating with patients, such as an inability to express themselves accurately during diagnoses due to a limited vocabulary."

"Well, of course, anyone can have issues, but as I mentioned earlier, a certain way of speaking or articulating may create certain friction or misunderstandings when it comes to trust in the employer. In some countries, people wish to have more things documented in writing to ensure that agreed-upon vacations are carried out. In Finnish society, agreements are often based on trust, but when a person comes from a different background, if they seek written confirmation, these written confirmations are provided as well. Trust is gradually built over time."

During job interviews, some foreign employees leave the interviewer with the impression of exaggerating their work abilities. Healthcare professionals may encounter barriers in interacting with patients due to limited proficiency in Finnish. Some foreign employees complain that they are not treated equally when assigned work.

All interviewees were asked about integration was "How have Finnish employees received employees of foreign background and how do they perceive them?" The interviewees mentioned the following points about the concept:

For example:

"We do not tolerate any form of discrimination or racism; that is very clear. If someone behaves poorly towards a person of foreign background just because of their ethnicity, immediate sanctions will be imposed, and it will be addressed. However, I have never encountered such a situation. Of course, the language skills of foreign employees are often a concern for Finnish employees, who are unsure whether what they express is truly understood, or whether the other

person is just pretending to understand out of politeness, when in fact they may not understand the situation."

All interviewees were asked about integration was "Are there differences in the attitudes of patients or their relatives towards employees of foreign background compared to Finnish employees?" The interviewees mentioned the following points about the concept:

For example:

"In my work experience, I have encountered situations where some patients harbour biases against our foreign employees. I have dealt with such incidents before. In such cases, as a manager, I believe we should patiently explain to our clients (patients) and protect our foreign employees."

"Sometimes, patients are unable to accept foreign employees with a darker skin tone serving them. Usually, I explain and coordinate with the patients. At times, foreign patients particularly rely on our foreign employees due to language proficiency, diligence, patience, and empathy."

"Not really. Differential treatment of health professional workers by patients and family members also occurs among Finnish nationals. I think the occurrence of such incidents depends more on the differences in customer service awareness and employees' personal personalities."

5.1.1.4 The challenges do managers face when managing foreign employees in perspective of leadership.

All interviewees were asked about perspective of leadership was "What is the collaboration like with employees of foreign background from a managerial perspective (is there a difference compared to Finnish employees, do employees of foreign background employ more or less, what is the influence of cultural differences, etc.)?" The interviewees mentioned the following points about the concept:

For example:

"I believe I do not make any distinctions in managing Finnish and foreign employees. However, I have noticed that I spend more time in communication with foreign employees, perhaps because I need to repeatedly ensure that they truly understand the content of our conversations."

All interviewees were asked about perspective of leadership was "Is there training available in your unit/hospital related to multiculturalism? (If so, who is it aimed at, foreigners, Finns, patients?)" The interviewees mentioned the following points about the concept:
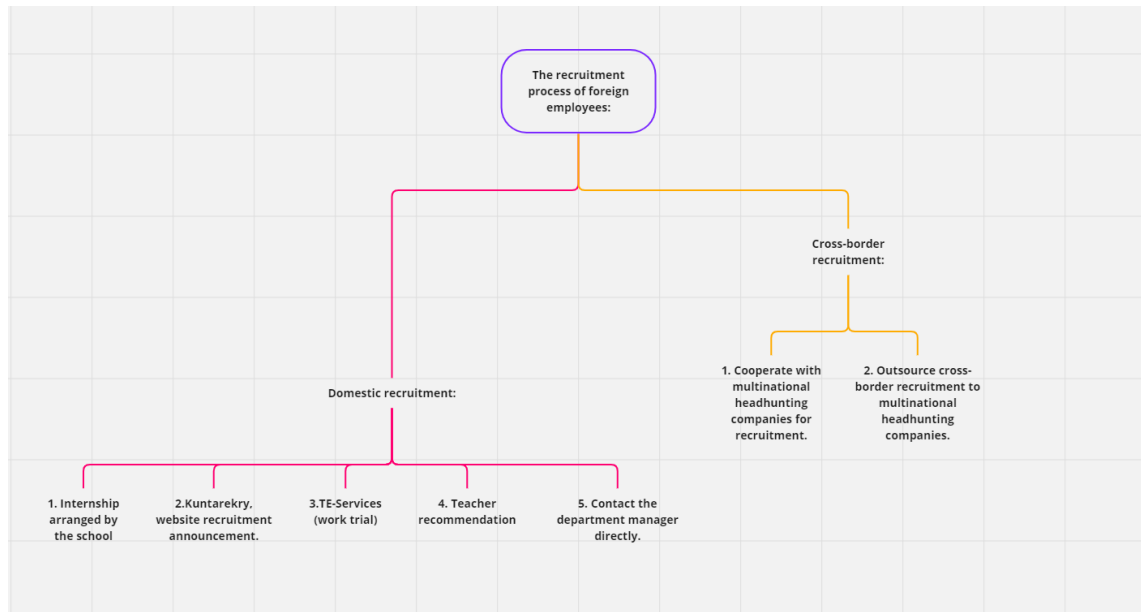
For example:

"Not so sure. In the past, the hospital may have organized such training courses for employees. Regarding cultural differences and conflicts, managers have not received systematic communication management training. I believe that multicultural management training is highly necessary."

5.1.2   The corresponding solutions, and how to follow up and evaluate.

5.1.2.1The corresponding solutions, and how to follow up and evaluate in recruitment.

The recruitment process for foreign employees in the Finnish healthcare system is generally divided into domestic recruitment and cross-border recruitment.

Figure 3. The recruitment process for foreign employees in the Finnish healthcare system

The question all interviewees were asked during recruitment was "How to solve the problem of difficulty in internship for foreign health professional students?" The interviewees mentioned the following points:

For example:

"Companies can cooperate with the teaching departments of training schools to actively provide suitable internship departments for foreign health professional students and open the right for foreign health professional students taught in English to apply for internships through the JOBIILI system.

All interviewees were asked about recruitment was "How is the foreign employee's competence for the job ensured? What is the foreign employer's responsibility in this regard?" The interviewees mentioned the following points about the concept:

For example:

"Companies can cooperate with the employment departments of training schools to provide employment training for foreign health professional students (such as which websites can learn recruitment information, write resumes, prepare interview questions, etc.)"

"During the interview, applicants are required to present their educational certificates, Valvira professional qualification certificate, medication qualification certificate, and relevant work experience documentation. We will also verify

professional qualifications on the JulkiTerhikki - Valvira official website. If it's a student who hasn't obtained their licensure yet seeking for a summer job, then there need to be certain completed credit points on the diploma, and this applies to everyone."

The question all interviewees were asked during recruitment was "How do you view cross-border recruitment?" The interviewees mentioned the following points:

For example:

"Cross-border recruitment investment is risky and talent flow is uncontrollable. When the labor gap is large, cross-border recruitment can still be considered, and bidding can be adopted to improve the cost-effectiveness of services. Employers can work with local governments to consolidate localized services for foreign talents (such as immigration services, partner employment services, children's schooling services, medical, tax, legal, religious, real estate and entertainment and other information support services) to reduce the loss of foreign talents."

All interviewees were asked about recruitment was "How is it ensured that the employee possesses sufficient oral and written language skills (is language training provided in the unit)?" The interviewees mentioned the following points about the concept:

For example:

"Regarding the Finnish language proficiency of the applicants, their writing skills can be assessed from the resume. During the interview, we can evaluate the applicants' oral communication skills. Finnish language proficiency in both spoken and written forms may also be tested during the probationary period. The probationary period for permanent employment typically lasts for 6 months, the probationary period for short-term employees is typically half the duration of the contract. However, due to labour shortages, hospitals may need to use temporary agency staff (vuokratyövoima), and language proficiency can be challenging to ensure for some foreign workers among the temporary agency staff."

5.1.2.2 The corresponding solutions, and how to follow up and evaluate in orientation.

Questions that all interviewees were asked include "How to streamline the training of new foreign employees?" The interviewees mentioned the following points:

For example:

"Onboarding training is a crucial part of human resource management for foreign health professional employees. Department managers need to establish a procedural training system to facilitate the recruitment of more qualified foreign health professional employees. (For example, break down the induction training into several units according to priority, give each unit a certain amount of learning time, and conduct regular interviews to collect feedback. Of course, the induction training manual can be set to be bilingual, Finnish and English, to facilitate foreign health professional employees to read and understand)"

"Since foreign employees have poor Finnish language skills and do not understand the Finnish work system and the culture of the health system, when the manager explains the induction training manual to the foreign employees, he can first translate the Finnish induction training manual into English. Secondly, the training goals can be divided into several small goals to extend the training time. The most important thing is to set up tracking access fading."

5.1.2.3 The corresponding solutions, and how to follow up and evaluate in integration.

All interviewees were asked about integration was "What are your experiences with employees with immigrant backgrounds (compared to Finnish employees)?" The interviewees mentioned the following points about the concept:

For example:

"Very good. Often, people are highly motivated and eager to work a lot, and they are quite flexible with their shifts, perhaps sometimes a bit too much. They wouldn't always need to be so flexible, but their strong desire to work is quite high, and their morale. It just occurred to me that what can be considered good

things are the diverse backgrounds, as they mean that people belonging to different religions don't always celebrate holidays like Christmas at the same time. This can assist the manager in planning shifts. for example. When it's Christmas for the native Finnish population, it's a time when they want to have as much time off as possible, so others who don't celebrate Christmas can work. On the other hand, there are some who wish to take holiday during their holiday season, such as Ramadan."

"These both individuals we have, they have integrated into the work community excellently. I believe it's connected to both the onboarding, which is in good shape, and their attitude. Both have had a good attitude towards joining the work community, unlike some. Bravery and initiative are among their traits."

Some foreign employees pretend to understand out of politeness, but in fact they may not really understand. This happens not only to foreign employees, but also to some Finnish employees who are afraid of being looked down upon.

"Some foreign employees pretend to understand out of politeness, but in fact they may not really understand. This happens not only to foreign employees, but also to some Finnish employees who are afraid of being looked down upon. Managers can give employees clearly communicated expectations and rules of conduct in the workplace. By establishing an open feedback mechanism, managers can encourage employees to ask questions or express confusion. This helps eliminate insecurities and makes them more willing to ask for help rather than pretending to understand. Managers can arrange team-building activities to enhance trust and cooperation among employees. This helps break down cultural barriers and promotes a good team atmosphere. Employees of different cultures can learn from each other and reduce cultural conflicts. For some foreign employees who have Finnish language barriers, employers can provide language support, such as translation services or language training, so that employees can better understand and express themselves."

"It is recommended that employers cooperate with language training institutions to provide language training or translation equipment for employees with Finnish communication difficulties."

"It is recommended that managers organize multi-cultural team-building activities within the department to deepen cultural exchanges among employees."

5.1.2.4 The corresponding solutions, and how to follow up and evaluate in perspective of leadership.

All interviewees were asked about perspective of leadership was "Is there training available in your unit/hospital related to multiculturalism? (If so, who is it aimed at, foreigners, Finns, patients?)" The interviewees mentioned the following points about the concept:

For example:

"I believe that multicultural management training is highly necessary. In the past, the hospital may have organized such training courses for employees."

All interviewees were asked about perspective of leadership was "Do you see a need to develop orientation/integration-related matters/practices/attitudes for employees of foreign background generally or in your unit?" The interviewees mentioned the following points about the concept:

For example:

"I believe that our department needs to develop and enhance the orientation and training for foreign employees regarding the Finnish healthcare system and culture. And how to better integrate foreign employees into our workplace community."

"It is recommended that employers organize multicultural cooperation training for all employees and also provide management with training courses on multicultural communication and management."

6 DISCUSSION

6.1 Validity and reliability

This study is a qualitative study, using semi-structured interviews for data collection. Although the quality of qualitative research on naturally occurring events and the use of subjective methods has its advantages, it is inevitable that it sometimes undermines the objective nature of the research(Cypress, 2017). Research typically uses assessment methods such as validity and reliability to ensure the accuracy of qualitative research results(Cypress, 2017).

The researcher compared and matched the results of this study with the data collected by the study to ensure its accuracy.

The extent to which the findings of qualitative research should reflect the data originally collected(Cypress, 2017).In this study, the data for the study were collected from managers who had "experience in managing foreign employees" to avoid differences and minimize bias to complete this study in a reliable manner.

6.2 The practical limitations, significance, and scientific value of the research

The research of this article deepens the content of human resources management of foreign employees in the health industry in Pirkanmaan, Finland, and has certain inspiration and influence on young managers and managers who have no experience in managing foreign employees. Although the need for research has been identified, there is little research in this area internationally. The research results are based on the problems and challenges encountered in human resource management of foreign employees in the health industry in Pirkanmaan, Finland. It summarizes the experiences of many senior managers and how to deal with human resource management of foreign employees. At the same time, this study indirectly provides new ideas for systematic training of foreign health professional staff in Pirkanmaan area. As this study only focuses on one organization within the Finnish healthcare industry (Pirkanmaan hyvinvointialue), the scope of this study is limited, and it is difficult to generalize the results to the Finnish healthcare industry. Another study could be conducted in the future with reference to welfare area in different regions of Finland.

7   CONCLUSION

According to the survey results, the problems in human resource management of foreign health professional employees include:

1. Domestic recruitment, although low cost, has limited labour resources.

2. In domestic recruitment, there is no effective systematic training integration system with training schools. Many foreign health professional students cannot find a suitable internship department. (Since foreign health professional students taught in English cannot apply for internship departments through the JOBIILI system, this has caused inequality and poor information, causing students to miss some internship opportunities.)

3. Cross-border recruitment investment is risky, and uncontrollable talent flow may result in a low return on investment for the company.

4. There is no systematic process for induction training.

5. Companies rarely provide training courses on multicultural cooperation for employees

6. There is no systematic follow-up and communication management plan for newly hired foreign employees.

7. No language training is provided for employees with Finnish communication difficulties

8. Managers have not received systematic communication management training regarding cultural differences and conflicts.

Solutions to these problems include:

1. Companies can cooperate with the employment department of training schools to provide employment training for foreign health professional students (such as which websites can learn recruitment information, write resumes, prepare interview questions, etc.)

2. Enterprises can cooperate with the teaching departments of training schools to actively provide suitable internship departments for foreign health

professional students and open the right for foreign health professional students taught in English to apply for internships through the JOBIILI system.

3. Cross-border recruitment investment is risky and talent flow is uncontrollable. When the labour gap is large, cross-border recruitment can still be considered, and bidding can be adopted to improve the cost-effectiveness of services. Employers can work with local governments to consolidate localized services for foreign talents (such as immigration services, partner employment services, children's schooling services, medical, tax, legal, religious, real estate and entertainment and other information support services) to reduce the loss of foreign talents.

4. Onboarding training is a crucial part of human resource management for foreign health professional employees. Department managers need to establish a procedural training system to facilitate the recruitment of more qualified foreign health professional employees. (For example, break down the induction training into several units according to priority, give each unit a certain amount of learning time, and conduct regular interviews to collect feedback. Of course, the induction training manual can be set to be bilingual, Finnish and English, to facilitate foreign health professional employees to read and understand)

5. It is recommended that employers cooperate with language training institutions to provide language training or translation equipment for employees with Finnish communication difficulties.

6. It is recommended that managers organize multi-cultural team-building activities within the department to deepen cultural exchanges among employees.

7. It is recommended that employers organize multicultural cooperation training for all employees and provide management with training courses on multicultural communication and management.

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APPENDICES

Appendices 1. Training Manual, Orientation guide

The orientation guide is mainly divided into:

1. Presentation of the organization

1.1 Administration and organization, ownership relationships

1.2 Operational concept, strategy and values

1.3 Cooperation area

1.4 Services and offices

2. Operating methods

2.1 What things are important? What is expected of the staff?

• Appearance, behavior, work attire

• Customer service

• Duty of confidentiality (company matters and customer matters)

• Use of the telephone and information technology (work matters, private matters, information security)

3. The premises and environment of the unit

3.1 Passage facilities, emergency exits

3.2 Access control

3.3 Staff parking lot

3.4 Location of different departments and facilities, tour of different departments

3.5 Necessary keys

3.6 Social spaces

3.7 Smoke-free workplace

4. Matters related to the service relationship

4.1 Collective agreement to be followed, employment contract

4.2 Entering into an employment contract

4.3 Probationary period and its meaning

4.4 Termination

4.5 Remuneration

• Determination of salary (basic salary, experience bonuses, special allowances, sick pay, holiday pay,

• Salary payment dates, online bank

• Bank contact information

• Payroll accountant's contact information

• Tax card

4.6 Working time

• Working hours and shifts

• Overtime

• Food and coffee breaks

• Absence policies

• sickness absences

• temporary care leave

• Unpaid and paid working holidays

4.7 Work shift planning

• Autonomous shift planning

• Rules of the game for shift planning

• Marking work shift implementations

• Shifts

4.8 Holidays and their determination

• Presenting holiday wishes

• Confirmation of holidays

4.9 Travel bills and daily allowances

• Requesting and determining compensation, filling out the form.

4.10 Certificate of Employment

5.Certificates/commitments/permits/identifications/training plan

5.1 Degree certificate

5.2 Love online training + exams + screenings

5.3 Online schools

• E-prescription

• Patient information archive

• Safe processing of data

5.4 Everyday data protection training

5.5 Data security principles and policy

5.6 Learning portal: Infection control
5.7 Confidentiality Commitment
5.8 Pirhan Domains / e-mail
5.9 Pegasos Tokens
5.10 ePotku
5.11 Tampere Area Taxi

6. HR services

6.1 Occupational health care services
6.2 Continuing education
6.3 Development Discussions
6.4 Staff meals
6.5 Sign day rule
6.6 Epassi

7. Occupational health and safety

7.1 Cooperation and occupational health and safety organization
• Occupational health and safety manager
• Health and safety representative
• Security liaisons
• YT group
7.2 Occupational health and safety action program
• Vaccinations
• Occupational health inspections
• Blood accident guidelines
7.3 Safety walk twice/year
7.4 Initial extinguishing 1 time/year and emergency first aid training 1 time/3 years
7.5 Outage instructions (network+pegasos)
7.6 Contingency plan
7.7 Security service, internal alarm system
7.8 Early Support Model
7.9 Substance abuse program
7.10 Operating model for managing customer violence
• a situation of violence, threats or robbery
• operating instructions for reporting violent situations
• instructions for preventing workplace violence
7.11 Procedures and forms related to inappropriate treatment
7.12 Accident at work
• Immediate action (referral to a doctor)
• Insurance Pohjanstähti
7.13 Risk assessment
7.14 Ergonomics instruction
7.15 Self-monitoring plan

8. Other policies

8.1 Post and transport services
• Internal mail
• External mail

8.2 Information management services
• Ticket request

8.3 Communication
• General communication practices
• Intranet
• Use of e-mail
• Use of the work phone
• Patient message system (pegasis, Omni360)
• Notice boards
• Monthly meetings
• Team meeting, departmental meeting

9. Teamwork
• Team rules
• Guidelines for good work behavior

10. Introduction to the operation of the department

10.1 The daily program of the department

10.1.1 Responsible party
10.1.2 Morning/evening activities
10.1.3 Night shifts
10.1.4 distribution and inspection of medicines
10.1.5 Medication administration times and other medication-related guidance
10.1.6 Renewing prescriptions and monitoring their validity
10.1.7 Waste management, waste and medical waste
10.1.8 Meal and coffee times for patients
10.1.9 Bathing/saunas
10.1.10 Monitoring the activity of the stomach
10.1.11 Activities: outdoor recreation, events
10.1.12 Ordering care supplies
10.1.13 Clothes and laundry service
10.1.14 Food orders
10.1.15 Hygiene instructions

10.2 Pegasis, Omni360

10.2.1 Registration
10.2.2 Treatment report
10.2.3 Medication
10.2.4 Recipes
10.2.5 Fever curve
10.2.6 GER, GENERAL
10.2.7 Antiko form
10.2.8 Slide form
10.2.9 Consents/Prohibitions
10.2.10 Lab. habits and results
10.2.11 Cardiax ECG
10.2.12 x-ray
10.2.13 Rolling test studies
10.2.14 Nursing summary
10.2.15 Checkout
10.2.16 Physiotherapy view
10.2.17 Disclosure of information

10.3 Machines, equipment

10.3.1 Oxygen saturation meter
10.3.2 Thermometer
10.3.3 VS meters
10.3.4 RR meters
10.3.5 CRP speedometer
10.3.6 INR Speedometer
10.3.7 Suction devices
10.3.8 Breathalyzer
10.3.9 CPAP (if used)
10.3.10 Hudson (if used)
10.3.11 deco
10.3.12 Washing machine and dryer
10.3.13 Dishwasher
10.3.14 Thermal cart
10.3.15 Resident crane
10.3.16 Balance chair
10.3.17 Air heat pump
10.3.18 Sauna heater
10.3.19 Television

11. Patient safety

11.1 HaiPro hazard event reporting system
11.2 Patient insurance

12. Customers

12.1 SAS
12.2 Use of care chains
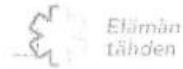12.3 Cooperation entities (social work, volunteers, etc.)
12.4 Repatriation Process

Appendices 2. Research permit

Elämän tähden

HAKEMUS / LUPA (opinnäytetyölle / tieteelliselle tutkimukselle / kehittämistyölle)   1 (2)

Opiskelijan / opiskelijoiden nimet / tutkijan / tutkijoiden nimet	Katuosoite, postinumero ja -toimipaikka	Sähköposti	Puhelin
Zhuqing Ren	Siirtolapuutarhankatu 18 B35	zhuqing.ren@tuni.fi	0452014988

Ammattikorkeakoulu / yliopisto	Koulutusohjelma / yksikkö
Tampereen ammattikorkeakoulu	Liiketoiminta

Opinnäytetyön / tutkimuksen / kehittämistyön nimi

The challenges and solutions of human resource management of foreign employees in Finnish social and health system

Vastuualue / yksikkö, jossa opinnäytetyö / tutkimus / kehittämistyö toteutetaan

Pirkanmaan hyvinvointialue eri palvelulinjat

Opinnäytetyön / tutkimuksen / kehittämistyön tarkoitus ja kuvaus toteutuksesta

The purpose of this research is to study the challenges and solutions of managers in managing foreign employees in social and health service. Summarize experience and analyze how to improve the management.
The objectives of this research is to support the new generation of managers and managers who have no experience in managing foreign employees in the social and health service.
1.   To provide foreign employees HRM reference and to improve management efficiency.
2.   To reduce conflicts, promote understanding and communication, and prevent talent loss.
Qualitative research method, N= 10, semi-structured interview will be used in the research.
The interview is mainly based on Teams. The recording tool uses Teams to record. The interviews were conducted in English and Finnish.
The list of interviews will be found in the attachment

Opinnäytetyön tekijällä on opinnäytetyöhönsä tekijänoikeus. Pirkanmaan sairaanhoitopiiri (PSHP) saa opinnäytetyöhön käyttöoikeuden omassa toiminnassaan. Käyttöoikeudesta ei suoriteta palkkiota. Ennen ammattikorkeakoulun (AMK) opinnäytetyön julkistamista edellytetään työelämä-lausunto Pirkanmaan sairaanhoitopiiristä.

Kustannuksista vastaa   (pvm ja nimi)

[X] opiskelija / tutkija   [ ] PSHP:n vastuuyksikkö, josta sovittu   Kanssa

Opinnäytetyön / tutkimuksen / kehittämistyön raportti toimitetaan yhloitajalle ja

[X] tulokset esitellään työelämäyhteistyötaholle

[ ] jokin muu tapa, mikä

Työryhmä

AMK/ yliopisto	Ohjaajan allekirjoitus ja nimenselvennys	Puhelin
	lu Karl Sven Rasl	0407078505
Vastuualue/ osasto	Ohjaajan allekirjoitus ja nimenselvennys	Puhelin

Pvm ja allekirjoitus (hakijan tai ryhmästä yhden henkilön)

17.5.2023 Zhuqing Rren   *zhuqing ren*

Elämän
tähden

PÄÄTÖS

Lupa opinnäytetyöhön / tutkimukseen / kehittämistyöhön myönnetään
  ☒ hakemuksen mukaisesti
  ☐ päätöksessä nro _____ mainituin edellytyksin

☐ Hakemus palautetaan korjattavaksi seuraavin muutoksin

☐ Hakemus hylätään, perustelut: _____

Pvm ja allekirjoitus (opetusylihoitaja /hallintoylihoitaja)

11.6.23 *[allekirjoitus]*

Pvm ja allekirjoitus (toimivastuualuejohtaja, mikäli aineistonkeruu kohdentuu muuhun kuin hoitohenkilöstöön)

Täys nro JF 1660 06.15

Appendices 3. Information about the study

TIEDOTE TUTKIMUKSESTA

Tutkimuksen nimi:

Ulkomaalaisten työntekijöiden henkilöstöjohtamisen haasteet ja ratkaisut Suomen sosiaali- ja terveydenhuollossa

(The challenges and solutions of human resource management of foreign employees in Finnish social and health system)

Pyyntö osallistua tutkimukseen

Pyydämme teitä osallistumaan tähän tutkimukseen, jossa tutkitaan esimiesten haasteita ja ratkaisuja ulkomaalaisten sosiaali- ja terveysalan työntekijöiden johtamisessa. Tee yhteenveto kokemuksista ja analysoi, miten johtamista voidaan kehitaa. (The purpose of this research is to study the challenges and solutions of managers in managing foreign employees in social and health service. Summarize experience and analyze how to improve the management.) Tämä tiedote kuvaa tutkimusta ja Teidän mahdollista osuuttanne siinä. Lukekaa rauhassa tämä tiedote. Jos Teillä on kysyttävää, voitte olla yhteydessä tutkimushenkilökuntaan (yhteystiedot löytyvät asiakirjan lopusta). Jos päätätte osallistua tutkimukseen, Teitä pyydetään allekirjoittamaan viimeisellä sivulla oleva suostumus.

Osallistumisen vapaaehtoisuus

Tähän tutkimukseen osallistuminen on vapaaehtoista.

Voitte kieltäytyä tutkimuksesta tai peruuttaa jo antamanne suostumuksen syytä ilmoittamatta, milloin tahansa tutkimuksen aikana. Jos päätätte peruuttaa suostumuksenne, tai osallistumisenne tutkimukseen keskeytyy muusta syystä, siihen mennessä kerättyjä henkilötietojanne voidaan edelleen käyttää tutkimusaineistona tässä tutkimuksessa, mikäli tutkimuksen toteuttaminen vaatii sitä ja lainsäädäntö sallii sen. Jos haluatte peruuttaa tutkimukseen antamanne suostumuksen, ilmoittakaa siitä tutkimushenkilökunnalle.

Tutkimuksen toteuttaja

Tämän tutkimuksen toteuttavat: Tutkimuksessa käytetään laadullista tutkimusmenetelmää, 10 vastaajaa kutsutaan tutkimukseen ja tutkimukseen käytetään puolistrukturoituja haastatteluja. Haastattelut tehdään Teamsissä. Tallennustyökalu käyttää tallentamiseen Teamsia. Haastattelukielet olivat suomi ja englanti. (The research uses qualitative research method, 10 respondents are invited, and semi-structured interviews will be used for the research. Interviews will be conducted on Teams. The recording tool uses Teams for recording. Interviews were mainly conducted in Finnish and English.) Tutkimuksen rekisterinpitäjä on Zhuqing Ren (+358452014988, zhuqing.ren@tuni.fi), joka vastaa tutkimuksen yhteydessä tapahtuvan henkilötietojen käsittelyn lainmukaisuudesta. Rekisterinpitäjä vastaa henkilötietojen käsittelyä koskeviin kysymyksiin

Tutkimuksen tarkoitus

Tämän tutkimuksen tarkoituksena on tutkitaan esimiesten haasteita ja ratkaisuja ulkomaalaisten sosiaali- ja terveysalan työntekijöiden johtamisessa. Tee yhteenveto kokemuksista ja analysoi, miten johtamista voidaan kehitaa. Tutkimukseen pyydetään mukaan henkilöitä, jotka ovat esimiestä

Malli 17.6.2022

Tutkimusmenetelmät ja tutkimuksen toimenpiteet

Tutkimukseen osallistuminen kestää noin puoli tuntia.

Henkilötietojen käsittely ja tietojen luottamuksellisuus

Henkilötietojanne käsitellään tässä tiedotteessa kuvattua tieteellistä tutkimusta varten. Henkilötietojen käsittelyn perusteena on lääketieteellisestä tutkimuksesta annetun lain 21 a §:n ja tietosuoja-asetuksen mukaisesti

- yleinen etu ja kansanterveyden suojaamistarkoitukseen liittyvä yleinen etu (henkilötiedot artikla 6.1.e, arkaluonteiset henkilötiedot artikla 9.2.i)
- lakisääteinen velvoite liittyen turvallisuusraportointiin ja viranomaisilmoituksiin (henkilötiedot artiklat 6.1.c, arkaluonteiset henkilötiedot artikla 9.2.i)
- yleisen edun mukainen tieteellinen tutkimus (henkilötiedot artikla 6.1.e, arkaluonteiset henkilötiedot artikla 9.2.j)

Tutkimuksessa kerätään ja käsitellään vain tutkimuksen toteuttamiseksi tarvittavia henkilötietojanne. Teistä kerättyjä henkilötietoja ja tutkimustuloksia käsitellään luottamuksellisesti henkilötietojen käsittelyä koskevan lainsäädännön edellyttämällä tavalla. Teidän henkilöllisyytenne on ainoastaan tutkimusta suorittavien tutkijoiden tiedossa, ja he kaikki ovat salassapitovelvollisia. Kaikkia tutkimuksessa teistä kerättäviä tietoja ja otettuja näytteitä käsitellään koodattuina. Kaikki henkilötiedot, joista teidät on mahdollista suoraan tunnistaa (nimi) poistetaan ja korvataan koodinumerolla ja niitä säilytetään erillään koodatuista tiedoista, eikä niitä anneta tutkimuksen ulkopuolisille henkilöille. Tutkimuksen tulokset raportoidaan pääasiallisesti ryhmätasolla. Yksittäisen tutkittavan tunnistaminen ei ole mahdollista tutkimustulosten julkaisuista tai selvityksistä.

Henkilötietojen käsittelyyn liittyvät oikeudet

Teillä on oikeus nähdä teistä tutkimuksen yhteydessä kerätyt henkilötiedot, sekä saada tietoa, mihin henkilötietojanne on käytetty, kenelle niitä on luovutettu ja mitä tarkoitusta varten. Teillä on myös oikeus pyytää tietojenne oikaisemista tai täydentämistä, jos havaitsette niissä virheitä tai puutteita. Lisäksi teillä on oikeus pyytää tietojenne käsittelyn rajoittamista.

Teillä on oikeus tehdä valitus valvontaviranomaiselle, jos katsotte, että henkilötietojenne käsittelyssä rikotaan EU:n yleistä tietosuoja-asetusta (EU) 2016/679 tai muuta sovellettavaa tietosuojalainsäädäntöä. Suomessa valvontaviranomainen on tietosuojavaltuutettu.

Tietosuojavaltuutetun toimisto
Lintulahdenkuja 4, 00530 Helsinki, PL 800, 00531 Helsinki
Puhelinvaihde: 029 566 6700
Sähköposti: tietosuoja@om.fi

Lisätiedot ja tutkijoiden yhteystiedot

Mahdollisia kysymyksiä tutkimuksesta pyydämme teitä esittämään:

Zhuqing Ren (+358452014988, zhuqing.ren@tuni.fi)

Appendices 4. Interview framework

Interview framework for managers

<mark>Unit Situation</mark>

How many employees with immigrant backgrounds work in your department?
How long have they been working here (has there been any change in numbers over the years)? Which countries are they from?
Which countries are they from?
What type of employment contracts do they have (temporary/permanent)? Are there differences compared to Finnish employees?
Is there a turnover among employees with immigrant backgrounds (do they stay/commit to the department)?

<mark>Recruitment</mark>

How does the recruitment process work in practice: are the practices and channels the same as for Finnish employees? Are there any differences?
Do many/few emplorees with immigrant backgrounds apply for positions in your unit? Would you be interested in hiring more employees with immigrant backgrounds or reducing their numbers?
How is the employee's competence for the job ensured? What is the employer's responsibility in this regard?
How is it ensured that the employee possesses sufficient oral and written language skills (is language training provided in the unit)?
Do employees with immigrant backgrounds work in positions corresponding to their qualifications, do they work in assistant roles?

<mark>Orientation</mark>

How are new employees oriented to their work (is there a designated mentor)?
Has there been any difference in the orientation of Finnish and employees with immigrant backgrounds (in terms of content and duration)? How?
Have Finnish employees been oriented to issues related to working with employees with immigrant backgrounds (e.g., cultural aspects)? Would this be
How do employees with immigrant backgrounds feel about the orientation (its duration, content, adequacy) compared to Finnish employees?
What practices have been successful in orientation? Why? Have there been any problems or "warning examples" that did not work well?
Do you collect feedback from employees with immigrant backgrounds about their orientation/adaptation to the department (e.g., during development discussions, as part of the orientation process, etc.)?

<mark>Integration into the Work Community</mark>

What are your experiences with employees with immigrant backgrounds (compared to Finnish employees)?

Is it visible in the workplace that there are employees from different countries?

How has integration been attempted and how has it worked out (e.g., do employees participate in workplace events or social gatherings)? Have there been successful integration practices that could be applied in other units?

Have any potential problems related to integration been observed? (Examples: in working competence, healthcare profession-patient interaction, interdisciplinary collaboration, practical work, trust in the employer, equality, employment contracts)? How have these issues been resolved?

How have Finnish employees received employees of foreign background and how do they perceive them?

Is it possible to accommodate cultural specificities in the work if a employee has specific requests (e.g., in task allocation, the number of patients cared for, shift scheduling, getting time off / vacations (some holidays may be more important in different cultures than in Finnish culture))?

Have employees brought anything from their own culture into working, and how has it been perceived?

Are there differences in the attitudes of patients or their relatives towards employees of foreign background compared to Finnish employees?

Perspective of Leadership

How long have you worked as the head of your department, and how long in managerial positions in general?

What is the collaboration like with employees of foreign background from a managerial perspective (is there a difference compared to Finnish employees, do employees of foreign background employ more or less, what is the influence of cultural differences, etc.)?

What is your own background and experience in working with individuals of foreign backgrounds? Have you received additional training in multiculturalism? Do you feel that such training would be necessary for you?

Is there training available in your unit/hospital related to multiculturalism? (If so, who is it aimed at, foreigners, Finns, patients?)

Do you see a need to develop orientation/integration-related matters/practices/attitudes for employees of foreign background generally or in your unit?

Has your unit prepared for a possible increase in the number of foreign emplyees in the coming years in any way?