

Background

The challenges of recruiting and retaining Allied Health Professionals (AHPs) in rural and coastal areas remain a significant barrier to ensuring equitable healthcare provision. NHS England (NHSE) has commissioned this study to examine international and domestic workforce solutions aimed at maintaining, building, and training the rural and coastal AHP workforce at both pre-registration and post-registration levels.

Developing a sustainable workforce pipeline is crucial for addressing recruitment and retention issues in rural and coastal healthcare settings. Research has consistently demonstrated that individuals from rural backgrounds are more likely to work in similar settings post-qualification, reinforcing the need for targeted outreach and education initiatives (Fisher & Fraser, 2010; Russell et al., 2021). Exposure to rural practice during pre-registration education through structured placement opportunities has demonstrated positive impacts on career decisions (Smith et al., 2018; Pullon et al., 2021; Brown et al., 2017). However, challenges such as limited placement capacity, supervision burden on rural teams, and financial constraints necessitate structured support programs like the Whole of Community Facilitator (WOFCF) initiative (Coe et al., 2021; Cosgrave, 2021).

The primary aim of this study is to examine existing strategies that support the recruitment, retention, and training of AHPs in rural and coastal communities.

Methods

Participants were recruited through an advert on social media and professional networks and professional bodies. There are 15 allied health professions. The sample size was based on purposeful sampling of at least one representative from each AHP profession in the key rural and coastal geographical areas identified by the NHSE. Semi-structured interviews were chosen as the data collection method.

Thematic analytical principles that combined both deductive and inductive approaches were employed for data analysis. Given the substantial volume of data and the tight timeframe for analysis, generative AI was also incorporated into the data analysis process.

Following the recruitment campaign 132 interviews were conducted with representation across all 14 AHP roles.

Chief AHPs

The role of Chief AHPs is essential for driving workforce transformation, advocating for AHPs, and ensuring sustainable healthcare services in rural and coastal areas. However, their presence is inconsistent across organisations, leading to gaps in workforce planning, professional development, and service innovation.

We could do better for our collective AHP vision. If we had a Chief AHP role, workforce planning and service development would be much more coordinated. (Diagnostic Radiographer)

Where Chief AHPs exist, organisations report stronger strategic oversight, better advocacy for AHPs, and improved access to career development initiatives. (Physiotherapist)

Workforce Pipelines

Building a sustainable AHP workforce in rural and coastal areas requires early engagement, structured placement opportunities, and clear career pathways. Individuals from rural backgrounds are more likely to return post-qualification, highlighting the need for targeted outreach and financial support.

We really want to grow our own because we need people that live in the area. Otherwise, they just leave. (Occupational Therapist)

One of the challenges we're facing is that students have a driving licence but can't afford insurance or a car, which automatically closes off learning opportunities in rural areas. (Occupational Therapist)

Conclusion and Recommendations

The research findings support international literature that rural and coastal AHP workforce requires a multifaceted approach between NHSE, educational institutions, professional bodies, and local healthcare providers. Further research is required to evaluate the long-term effectiveness of these interventions.

1. Strengthening the leadership capacity of Chief AHPs
2. Expanding rural and coastal placement opportunities
3. Enhancing recruitment efforts by targeting rural-origin students and promoting the benefits of rural practice.
4. Implementing retention strategies, including career development pathways, professional support systems, and lifestyle incentives.

References

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Coe S, Madaw A, Mather C. Whole of Community Facilitators: An Exemplar for Supporting Rural Health Workforce Recruitment through Students' Professional Experience Placements. *International Journal of Environmental Research and Public Health* 2021 Jul; 19(14):7675. Cosgrave C. Implementing Strategies for Strengthening Australia's Rural Allied Health Workforce. *Internet Journal of Allied Health Sciences and Practice* 2021; 10(01):19(4). Fisher KA, Fraser JD. Rural health career pathways: research themes in recruitment and retention. *Aust Health Rev* 2010; 34(3):292-296.

Findings

The findings were focused into four key areas: the role of Chief AHPs, strengthening workforce pipelines, enhancing recruitment strategies, and improving retention measures as demonstrated in the diagram below.

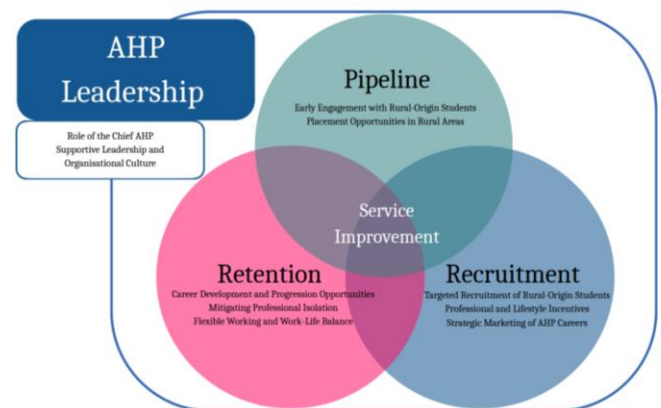


Diagram 1: Diagrammatic representation of the thematic analysis

Recruitment Strategies

Attracting AHPs to rural and coastal areas requires a multi-faceted approach that highlights both professional and lifestyle benefits.

There have been multiple times we've put out job ads and had no one apply—people aren't interested in coming to [region] or don't see the career potential. (Prosthetist and Orthotist)

The attractiveness of working in these places is huge—the quality of life, access to nature, and a strong sense of community. (Music Therapist)

Retention Measures

Retention strategies must address professional isolation, career progression, and work-life balance to sustain the rural AHP workforce.

Retention is tricky—pay, lack of CPD opportunities, and limited career progression push staff to private practice or urban areas. (Physiotherapist)

We've started 'stay conversations' and action plans by profession—it's helped people feel more valued and heard. (Occupational Therapist)

More senior clinical posts would make a real difference—patients would get expert care, and staff would have mentorship and career progression. (Physiotherapist)

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Smith T, Sutton K, Pitt S, Muiyambi K, Terry D, Farthing A, et al. Health professional students' rural placement satisfaction and rural practice intentions: A national cross-sectional survey. *Aust J Rural Health* 2018 Oct; 26(1):26-32.