

All in a Day's Work: Staff Retention and Turnover Working with Persons with Dementia

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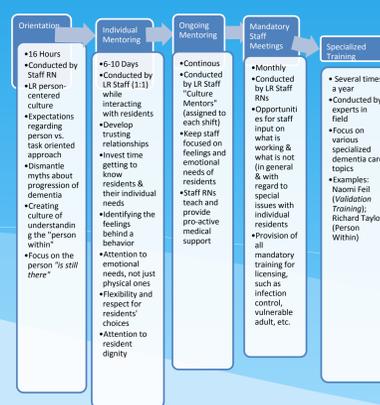
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Abstract

Staff turnover rates in nursing homes are notoriously high, with some rates topping 70- 100 percent (Castle & Engberg, 2006; Riggs & Rantz, 2001). Turnover is particularly challenging in dementia care with the added stress of managing behavioral and psychological symptoms of dementia (BPSD) (Brodaty et al., 2003). Specialized training has been shown to reduce staff turnover while simultaneously improving quality of care (Chrzescijanski, et al., 2007; Coogle et al., 2007). Type of training, however, makes a difference (Hughes et al., 2008; Kemeny et al., 2006). The current study examines the impact a holistic model of staff training and support has on staff turnover and retention decisions. The training model includes extensive orientation, individual mentoring of new staff, and on-going education in person-centered care. Additionally, the model limits the full-time work week to 32-hours and teaches staff to monitor their stress levels. Ten-year staff turnover rates for the model were 48.01%. In the current study, agency staff (n=42) were surveyed about their satisfaction with various aspects of their jobs, including orientation, training, their level of confidence in performing specific job-related tasks, and factors affecting their job-related stress levels. These findings are currently serving as the basis for a larger regional study examining dementia care staff perceptions regarding training, support, and factors of employment.

The Lakeview Ranch (LR) model focuses on the provision of specialized dementia care for persons with significant behavioral issues. The goal of the LR model is to address the specific individual needs of persons with dementia who exhibit behaviors that other care facilities are often unable to address or which are addressed via behavior-related medication use, psychiatric hospitalization, or discharge (“de-admittance”) to another facility. Key elements of the LR care model are a high staff to resident ratio (1:3), extensive medication reviews, individualized registered nurse coverage, and a nature-based setting which includes animal therapy and a strong focus on residents’ emotional and spiritual needs. Additional attention is placed on support and training of staff, with the goal of decreasing the financial and emotional costs of staff turnover.

Model of Staff Orientation and Training

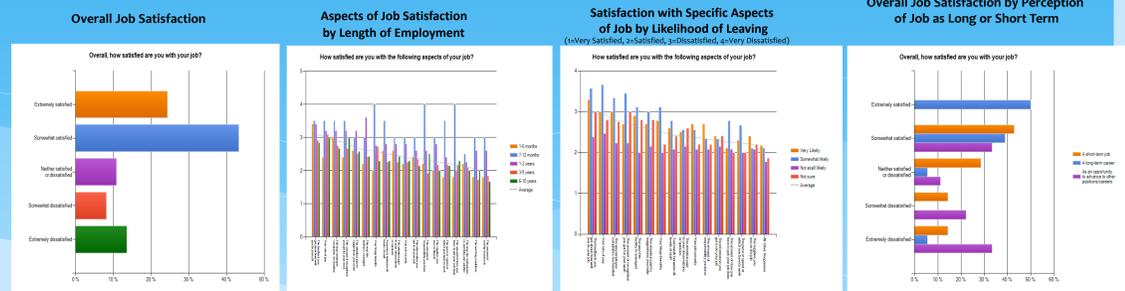


Staff Job Satisfaction

Most respondents indicated that they were at least somewhat satisfied with their job overall.

Those respondents who considered their job to be a long term career reported higher levels of satisfaction than those who saw this job as an opportunity to advance to other positions and careers.

Those that were “somewhat likely” to leave their job reported higher levels of dissatisfaction with specific aspects of their job than either those who were “extremely likely” or “not at all likely”.



Introduction

• Many factors contribute to the cost of care for persons with dementia.

• Staffing – and in particular – high staff turnover rates – represent a particular cost challenge to care providers.

• High turnover rates are problematic not only for the costs associated with recruitment, hiring, and training, but also with regard to care quality in terms of reduced staffing ratios, less well trained staff, and lack of continuity in care.

• Workload and stress from managing behavioral and psychological symptoms of dementia (BPSD) have been cited as factors contributing to job strain and dissatisfaction.

• It has been suggested that attention to staff training can reduce staff turnover while simultaneously improving quality of care, although type of training seems to be an important factor with some approaches more successful than others.

• The current model of specialized dementia care employs on-going staff support and training as one approach to improving quality of care while reducing staff turnover.

• Understanding which types of training best facilitate such outcomes can lead to improved care across the dementia care spectrum.

Procedures

An invitation to participate in an electronic survey was e-mailed to staff, along with the link to the survey. To preserve anonymity, agency representatives sent out the e-mail invitation to staff, while raw data was collected by the researcher on a secure Survey Monkey account. Thus, the researcher did not have the names of the respondents and the agency does not have access to potentially individually identifiable responses. The survey included both close and open-ended questions. Data were analyzed using descriptive statistics, cross tabulations, and grounded theory methods of identifying common themes among open-ended responses.

Findings & Discussion

Likelihood of Leaving Job

Several variables seemed to be related to respondents estimate of how likely they were to leave their job within the next year, including a lower satisfaction with orientation and training, a desire for more training in the area of managing symptoms of sundowning, lower levels of overall satisfaction, and lower levels of confidence in doing specific caregiving tasks.

Not surprisingly, those who indicated they were more likely to leave their job within the year were more likely to be at the lower pay scales.

Those who were more likely to leave also reported higher levels of specific stressors, with the exception of stressors related to co-workers which were high for respondents who indicated they were less likely to leave their job.

Sample

LVR Staff members (n=42) were asked to respond to an electronic survey regarding their experiences working with persons with dementia. All respondents were female, all but one respondent was white, and their ages ranged from 18-70, with the majority falling in the 46 to 55 age group.



Job Stressors

Respondents rated issues and concerns with co-workers (e.g., co-workers’ attitudes (73.7%, n=28); co-workers not doing their share (57.9%, n=22); employee gossip (50%; n=19); and co-workers not respecting their work(36.8%, n=14) to be greater sources of job stress than factors related to residents (e.g., resident aggression (15.8%, n=6); residents’ behavior (18.4%, n=7); and residents’ deaths(15.8% n=6).

Not surprisingly, “not enough pay” was indicated as a stressor for a majority of the respondents (60.5%; n=23).

Respondents who had been employed longer at the facility reported fewer stressors than those who were newer to the staff.

The findings were mixed with regard to stressors and respondents’ expectation about their job being long term, short term, or an opportunity to advance to other positions and careers, although those wishing to advance tended to be more likely to report individual factors as a stressor.



Open-Ended Perceptions Regarding Job

Residents: All respondents, regardless of their likelihood of leaving or not, indicated that the residents were of primary importance to them. No respondent indicated that resident behaviors or that working with persons with dementia impacted their work experience negatively.

Wages: Pay was a concern for respondents in all groups, although it was listed as a primary dislike for persons who thought it extremely likely or somewhat likely to be leaving their job within the year. Those who planned to stay mentioned the desire for raises in their suggestions for what should be changed about their job.

Staff Relations: Staff getting along with each other (or not) was a concern mentioned by all regardless of their likelihood to leave status.

Staff Appreciation: Another common theme among all groups was the desire to be appreciated more for the work that they are doing.

Conclusion

In addition to the impact of training, the preliminary findings from this study suggest that there are many variables to consider with regard to staff retention and burnout, including if staff perceive their job as long term, short term, or as an opportunity for career advancement. Surprisingly, staff interactions and attitudes about each other seem to play a greater role in job stress and satisfaction than the experience of working with persons with dementia-related behavioral issues. In fact, residents’ behavioral issues ranked well below concerns regarding staff appreciation, negative staff interactions, and the desire for increased pay.

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