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It Takes a Village to Retain Quality Nursing Staff

By Linda Hollinger-Smith, PhD

Developing and retaining quality nurses and certified nurse assistants (CNAs) is crucial to the future of long-term care (LTC). Recruitment alone will not keep pace with the aging workforce, the rising acuity of nursing home residents, and the growing competition for the same pool of workers. A “care gap” is anticipated with a smaller proportion of younger adults available to function as formal and informal caregivers to the growing number of older adults.

Unfortunately, this is not a “futurist” prediction. The Paraprofessional Healthcare Institute (2002) reported that one million new CNAs will be needed by the end of the current decade to fill LTC vacancies and new positions. According to the Bureau of Labor Statistics (2001), nearly 400,000 women will enter the U.S. workforce by 2010. If all these women agreed to forego other careers to seek CNA positions, we are still short 600,000 persons! There are similar projections for LTC nurses over the next 20 years.

Tackling the looming LTC workforce crisis requires commitment and joint efforts of administrators, managers, and frontline nursing staff – “it takes a village” to promote retention. Providing quality care on a daily basis to LTC residents is physically, mentally, and emotionally challenging. Thus, LTC organizations need to focus on empowering frontline workers through educational opportunities, recognition, and resources to better balance work responsibilities.

Lessons Learned from Business and Industry

In extensive studies across a wide array of businesses, the Gallup Organization asked successful employees why they remained in their organizations and what motivated them to give their best efforts (Buckingham and Coffman, 1999). Consistently, these employees reported that

positive relationships with their direct manager was the key determinant to their retention and work productivity. Specifically, employees stated that their managers:

- Cared about them as persons
- Consistently gave feedback on work performance
- Provided encouragement at appropriate times, and
- Included them in decision-making

How different are the factors that support retention and productivity of LTC staff from those influencing employees across other businesses? According to the Paraprofessional Healthcare Institute (2000), there are many similarities. In the Institute's study of CNA retention in LTC settings, frontline workers who stayed in their positions reported that they:

- Worked with fair-minded supervisor who showed interest in their lives
- Had education and career development opportunities
- Worked with nurses who valued their input
- Were made to feel part of the care team, and
- Had adequate resources to provide quality care

It is interesting to note that, while clearly an important issue to all employees, CNAs in this study did not identify salary as a key retention factor.

The Three "R's" of Retention

Most seeking careers in LTC do so for the right reasons – they enjoy working with older adults; the continuity of care allows them to “get to know” residents like family members; and they see their work as an important service to their community. Once they enter the field, many are inadequately prepared to deal with management issues (i.e., delegation, giving constructive feedback, mentoring new employees, and team building) as well as with clinical issues (i.e.,

cognitive and physical changes in residents, communicating with family members, and coping with death and dying). Psychological and emotional demands quickly take their toll on staff – job stress and burnout, growing health problems, chronic absenteeism which lead to turnover. The toll continues on remaining staff who must cover short staffing, work with outside agency nurses, and deal with residents who sadly ask, “Isn’t Jeannie going to take care of me today?”

In order to build a quality LTC workforce who provides compassionate, skilled nursing care, we need to step back and look at the fundamentals – the three “R’s” of retention – *relationships, respect, and recognition*. These are simple principles that we all want in our daily lives. It is no different in the lives of direct care workers, managers, residents, and families. It takes a village to promote a culture of caring and growth.

Residents have told us what is important to them – they want the care staff to know them; they want to have relationships with staff; and they want to be treated as individuals. Nurses have told us what they need – better communication; supportive managers that back their decisions; appreciation for jobs well done; and respect from co-workers. Additionally, CNAs have expressed their needs – being able to do what they do best in their jobs – providing affection, support, and care to their residents; working as team members; and having their knowledge and skills valued by nurses. The foundation for retention – the *three R’s* – is clearly there. It is time for LTC administration to now build on that foundation through developing and empowering their LTC staff.

LEAP – A Comprehensive LTC Workforce Initiative

Mather Institute on Aging of Mather LifeWays, Evanston, Illinois and Life Services Network, the Illinois affiliate of American Association of Homes and Services for the Aged

collaborated to develop, implement, and evaluate LEAP, a comprehensive LTC Workforce Initiative that aims to educate, empower, and retain staff through these unique components:

- A resident-centered approach to develop effective nursing leaders and frontline staff
- Interactive teaching methods based on adult learning concepts
- Assessment of the LTC organization's learning capacity
- Evaluation of the LEAP program's impact
- A "Train-the-Trainer" course preparing staff to effect change in their own settings.

LEAP is an acronym corresponding to the following objectives: (1) *Learn* to use tools and resources for quality LTC; (2) *Empower* caring and competence in self and others; (3) *Achieve* commitment to work teams and the organization; (4) *Produce* opportunities for growth and development. LEAP trains and equips LTC frontline staff with skills that help them feel valued and effective, develop positive relationships with residents and families, sharpen assessment skills, build capable work teams, and release hidden talents.

The LEAP program consists of two modules. Each module engages participants in a variety of interactive experiences based on concepts from adult learning theory, including experiential learning, use of audio-visual materials, "hands on" demonstrations, and role playing. Lessons begin with introducing new knowledge ("Learn") that staff employs in work settings ("Empower"). Lessons continue with individual and group activities in which participants develop action plans ("Achieve") that they are expected to implement ("Produce").

Module 1 is *The Essential Roles of the Nurse in Long-Term Care Nursing*. This module trains nursing managers and charge nurses to develop their roles as leader, gerontological clinical expert, role model and team builder and focuses on the relationship between nurses and CNAs.

Module 2 is *Growing the Heart of Care: Career Development for CNAs*. This module includes skill development, a mentorship program for new CNAs, and a career ladder.

Since October, 2002, 16 LTC organizations from Illinois, Wisconsin, California, and Georgia have sent 45 staff development and human resource personnel and directors of nursing to “Train-the-Trainer” workshops to become “LEAP Specialists”. Nearly half are at various stages of LEAP implementation in their own settings. Feedback from the organizations has been very positive. Staff finds the sessions on person-centered care, communication, leadership, and teamwork particularly applicable to their daily work. Managers have told us about CNAs in their organization who have developed into effective mentors to new staff and are taking initiatives to improve quality in a cost-effective manner.

In the end, retention is about developing and maintaining *relationships, respecting* one another, and *recognizing* quality work. LEAP endeavors to support growth and development of nursing staff, while nurturing their relationships with residents, families, and each other. While staffing ratios and other measures will continue to be a benchmark for quality, it is far more likely that the *three R's* will have the long lasting impact on improving quality of LTC.

Key Resources for Information on Staff Development and Retention

Practice Profile Database (www.directcareclearinghouse.org/practices). Supported by the U.S. Department of Health and Human Services, this site is a joint effort of the Paraprofessional Healthcare Institute and Institute for the Future of Aging Services to provide a searchable profile of programs and organizations committed to improving the worklife of direct care workers.

Office of Inspector General Report on Nurse Aid Training (<http://oig.hhs.gov/oei/reports/oei-05-01-00030.pdf>) report found that training has not kept pace with nursing home needs and current forms of training may not be meeting federal requirements. The report recommends CNA education in specific content areas relevant to complex resident care needs.

LEAP for a 21st Century Long-Term Care Workforce (www.matherlifeways.com/leap). Link to information about the LEAP Train-the-Trainer program. LTC organizations may also take a complementary organizational learning readiness survey downloadable from the site.

Buckingham, M. and Coffman, C. (1999). *First, Break all the Rules: What the World's Greatest Managers Do Differently*. New York: Simon & Schuster.

Paraprofessional Healthcare Institute (2002). *Results of the 2002 National Survey of State Initiatives on the Long-Term Care Direct Care Workforce.*

Paraprofessional Healthcare Institute. *Recruiting Quality Health Care Paraprofessionals.* Bronx, NY: Paraprofessional Healthcare Institute, August 2000.

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