Supporting Nursing Home Staff Through Person-Centered Care Practices

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Purpose

To examine the relationship between nursing home (NH) direct care worker (DCW) perceptions of their person-centered care (PCC) practices and attitudes toward their jobs.

Methods

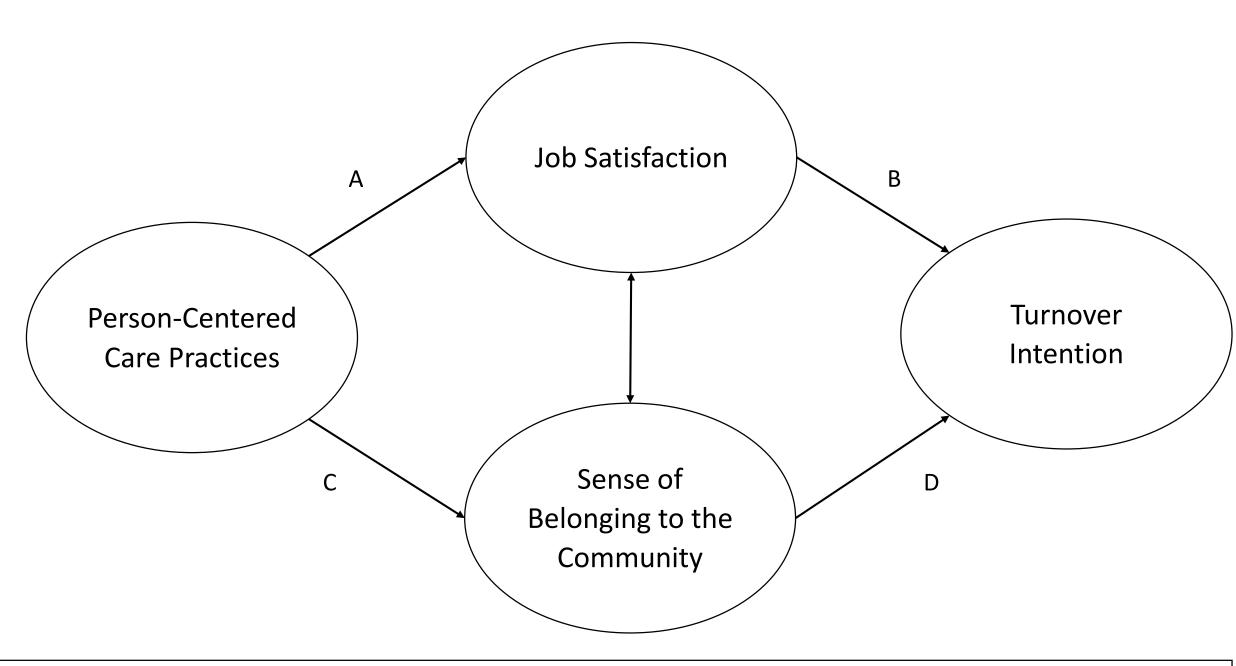
- Part of a larger measurement study with residents (White, Tunalilar, Hasworth, & Winfree, 2019).
- Convenience sample of staff from 33 Oregon NHs within 100 miles of Portland, OR
- NH administrators or their designee distributed surveys to staff at meetings, in break rooms, or at nurses' stations.
- Number of responding staff per NH ranged from 0 to 32 (median=13; mean=12.6).
- Total respondents = 415; DCWs = 266
- Multiple imputation of PCC, job satisfaction, and sense of belonging using predictive mean matching
- Regression analysis of DCW data (n=209 with complete data)

Measures

- Staff perceptions of person-directed care (White, Newton-Curtis, & Lyons, 2008)
- Job satisfaction (Ejaz, Molker, Menne, Bagaka, 2008)
- Affective commitment to the organization (items related to sense of belonging) Meyer, Allen, & Smith, 1993)
- Turnover intention (Hom, Griffeth, & Sellaro, 1984)

Conceptual Framework

- Path A suggests that PCC practices are consistent with aspects of the job associated with DCW satisfaction, including levels of responsibility, teamwork, ability to discuss resident care with colleagues, and control over one's work.
- Path B is also consistent with the literature. PCC practices emphasize the importance of DCWs as the staff who know residents best and can make the most informed suggestions about individualizing care and supporting residents.



Covariates/Controls
Staff characteristics: gender, age, race/ethnicity, tenure, hours of work, education, language
NH characteristics: rural/urban, quality, profit/nonprofit

Figure 1. Conceptual framework mapping the effect of person-centered care practices on intending to leave current job.



Person-centered care practices and supportive work environments go hand in hand.

> Learn more about the Person-Directed Care Instrument for Staff: bit.ly/2JXXqsh



Results

Preliminary Analysis

- Factor analysis confirmed the domains of PCC (data not shown).
- Bivariate analysis (see Figure 2) shows that PCC practices are negatively and significantly correlated with intent to turnover (p<.001), and positively and significantly correlated with job satisfaction and sense of belonging (p<.001)

Main Result

• The association between PCC practices and turnover intention disappears when job satisfaction and sense of belonging are included in the model (Model 2), suggesting PCC practices have an indirect effect on turnover intention through job satisfaction and sense of belonging (see Figure 1 for illustration).

Other Findings

- DCWs in urban settings reported higher turnover intention compared to DCWs in rural facilities (data not shown).
- DCWs who were male and those who were Hispanic also reported higher turnover intention compared their female and NH white counterparts; however, the size of these groups were much smaller compared to the reference groups (data not shown).

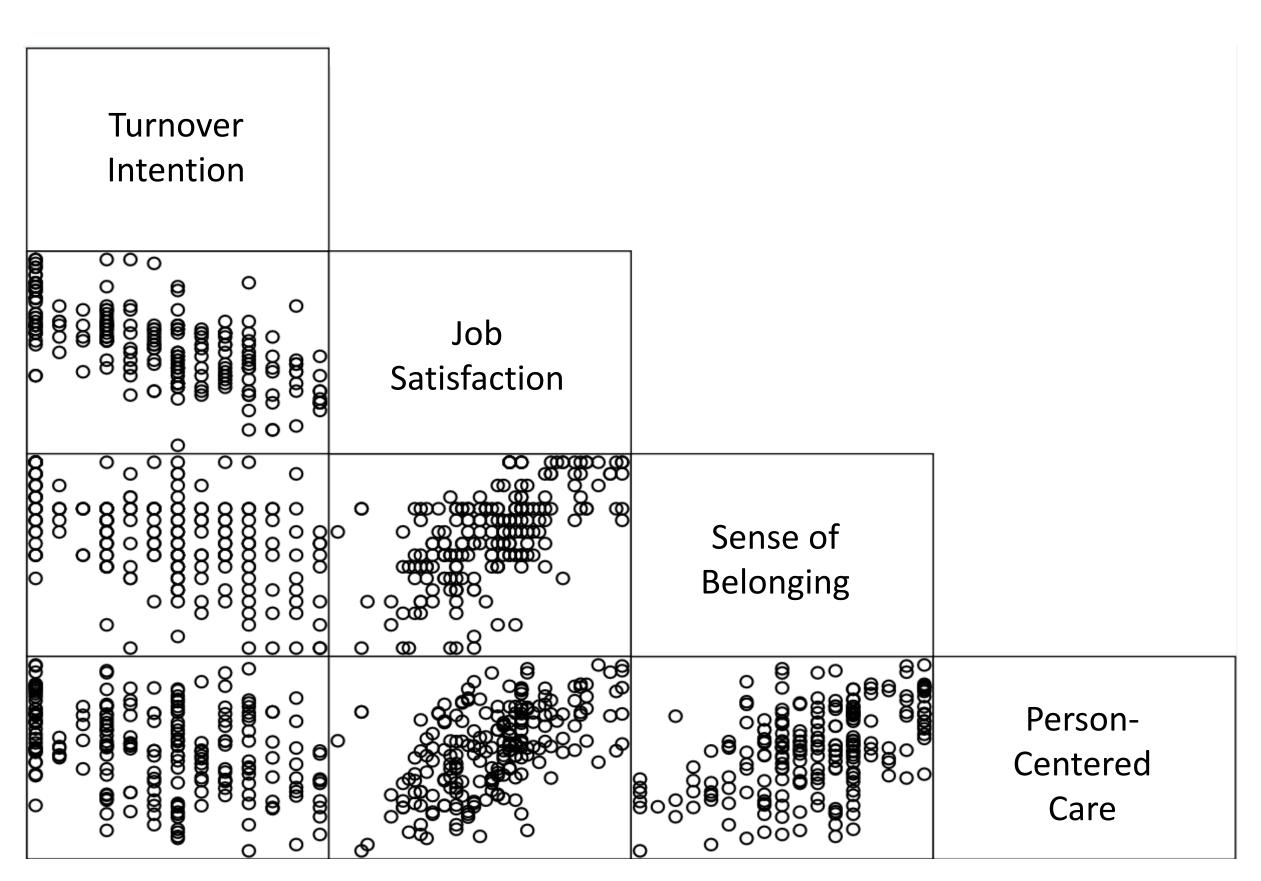


Figure 2. Scatterplot matrix showing bivariate relationships between person-centered care practices and measures of interest (n=209; based on single-imputed data)

	Model 1		Model 2		Model 3	
	β	95% Cl	β	95% CI	β	95% CI
Person-Centered Care	-0.56***	-0.77 – -0.36	0.07	-0.13 – 0.28	0.17	-0.05 – 0.38
Job Satisfaction			-1.14***	-1.43 – -0.84	-1.21***	-1.50 – -0.90
Sense of belonging			-0.26**	-0.43 – -0.09	-0.23**	-0.400.06
Covariates	Urban/rural, profit status, quality, licensed capacity, DCW tenure, shift, hours worked per week, speaks English as first language, highest education level, race/ethnicity, sex, age				Not shown	Not shown

Table 1. OLS regression showing mediation of the relationship between PCC (IV) and turnover intention (DV) by job satisfaction and sense of belonging.

Discussion & Conclusion

- PCC practices are fully mediated by job satisfaction and sense of belonging
- Our findings are consistent with observations commonly made about PCC practices and the work environment:
- When DCWs are provided the time and resources needed to spend time with residents, get to know them and their needs, and individualize support, they are more likely to provide PCC.
- When DCWs feel heard by their supervisors and feel the organization values their contributions, they are more likely to feel a sense of belonging and "part of the family."
- Integrating DCWs into the organization and improving their work environments may improve PCC practices