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Systematic Review of Retention of Direct-Care Workers in Long-term Care Facilities

Regina Evonne Goins
Walden University

Walden University

College of Health Sciences

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Regina Goins

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Review Committee

Dr. Mary Verklan, Committee Chairperson, Health Services Faculty

Dr. Jennifer Nixon, Committee Member, Health Services Faculty

Dr. Geri Schmotzer, University Reviewer, Health Services Faculty

Chief Academic Officer

Eric Riedel, Ph.D.

Walden University

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by

Regina Evonne Goins

Project Submitted in Partial Fulfillment of

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Abstract

Turnover among direct-care workers in long-term care (LTC) facilities is high, and has a

significant impact on residents, leaders, and owners of LTC facilities. The overall turnover costs

are also substantial and constitute a significant financial burden in LTC facilities. This

systematic review of the literature examined, retention strategies for direct-care workers in the

LTC workforce. The information may be used to develop and provide practice recommendations

that will help improve retention rates among direct-care workers in LTC facilities. The project

design involved a systematic examination of English-only studies from 2001-2004, retrieved

from 3 major databases: CINAHL with Medline simultaneous, ProQuest, and Ovid resources.

The review led to the identification of 858 publications out of which 17 articles met the inclusion

criteria. The manifested variables were critically analyzed and grouped into 8 categories: job

training, management style, acknowledgement of accomplishments, career advancements,

benefits, peer mentoring, competitive wages and work load. The findings from this systematic

review of the literature suggest that several factors affect turnover rates in the LTC setting,

including job training, management style, acknowledgement of accomplishments, career

advancements, benefits, peer mentoring, competitive wages and workload. This project aims to

provide insight to project developers, administrators, researchers, and policy makers concerning

factors that affect retention. The information can be used as a catalyst for positive social change

and reduce the turnover crisis among direct-care workers in the long-term care setting.

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Dedication

This dissertation is lovingly dedicated to my husband, Antonio D. Goins, my two sons, Raylon R. Lynch and Trelon D. Goins, my nephew Phillip R. Lynch and my brother Phillip L. Lynch. Their encouragement, love and support have guided me throughout the Doctor of Nursing Practice program. I would also like to dedicate this dissertation to my amazing grandmother, Hannah Lynch, who inspires me to live life to the fullest and love the life that God has given me. I love each of you dearly and my life would not be the same without you.

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Section 1: Overview of the Evidence-Based Project

Introduction

Turnover among direct-care workers is expanding. High turnover rates are contributing to higher organizational cost which affects an organization's ability to implement various programs and provide valuable services (Barbarotta, 2010). The financial burden related to high turnover of direct-care workers in LTC (LTC) facilities decreases the facilities ability to cover the costs of high skilled, quality workers (Barbarotta, 2010). The quality of care is at risk and affects residents' health outcomes (Barbarotta, 2010). Institutions can measure and track turnover, make informed decisions regarding retention issues and assess which investments best fit the organization. Each organization's infrastructure is unique requiring interventions that are specific to the organization (Barbarotta, 2010). Knowledge concerning the cost of turnover for a specific organization, actual turnover rates and proven retention strategies are essential for positive resident outcomes and the success of LTC facilities.

Turnover among direct-care workers in LTC facilities is a challenging facet within LTC organizations and discussed in both academic and corporate environments. Some of the existing literature is focused on identifying factors that cause high turnover rates while other researchers aim to examine possible ways to reduce turnover. The purpose of this review is to identify factors that contribute to high turnover rates and examine ways to reduce turnover and have a positive impact on residents' outcomes and the overall quality of residents' care.

Problem Statement

Staff retention, particularly retention of direct-care providers in long-term facilities, has proven to be a daunting task. High turnover rates of direct-care workers in LTC facilities reduces continuity of care, increase risks of harm to individuals who reside in these facilities and

promotes an unstable environment. Steps must be taken to identify and implement measures that will promote job satisfaction, reduce turnover rates and improve the stability of LTC facilities.

Purpose Statement

The purpose of the systematic review of the literature is to summarize and discuss the significance of research findings on direct-care workers in the (LTC) workforce. This paper includes qualitative and quantitative research findings, focusing on what has been learned from previous research. The information is used to make connections between the research findings. The information is used to develop a unique and interesting perspective concerning retention and provide general practice recommendations. The recommendations can effectively be applied to improve retention rates among direct-care workers in any LTC organization. The growing gap between organizational practices and retention of direct-care workers in LTC facilities is critical. This study will add to what is known about this topic from previous studies and literature reviews and provides comprehensive and updated research evidence concerning retention strategies for direct-care workers in LTC facilities.

Project Objectives

The primary objective is to identify initiatives that have worked to reduce retention and recruitment problems in LTC facilities. The secondary objective is to provide empirically based insight on factors that contribute to turnover in LTC facilities. This paper is intended to help researchers, administrators, policy makers and providers create a framework for future evidencebased policy and practice that will address this issue.

Significance/Relevance to Practice

Direct-care workers also known as frontline workers, nursing assistants or unlicensed assistant personnel are an integral part of the healthcare team. Direct-care providers perform day

to day tasks to support the nursing team while caring for residents with various illnesses, injuries, and disabilities (Ultimate Medical Academy, 2013). Effective direct-care workers increase licensed personnel's ability to focus on tasks that require more advanced training (Ultimate Medical Academy, 2013). Personnel's ability to proficiently perform tasks increases with experience.

One's ability to perform tasks without causing the client harm is important. High turnover rates prevent continuity of care and result in poor quality of care (Chou, 2012). High turnover rates reduce skill levels within the facility.

Turnover rates are high among direct-care workers in the nursing home, home health, and assisted living settings (Barbarotta, 2010). The annual turnover rates in the nursing home setting average 65.5% (Barbarotta, 2010). Staff turnover for home health aides' averages 40%-60% (Barbarotta, 2010). Average turnover among direct-care workers in assisted living facilities range from 21%-135% with an average turnover rate of 42% (Barbarotta, 2010). The cost associated with each instance of turnover for direct-care worker is $4,200-5,200 (Barbarotta, 2010).

Ninety percent of direct-care workers are women who have significant family/caregiving obligations (Khatutsky, Wiener, Anderson, Akhmerova, and Jessup, 2011). Seventy-five percent of direct-care workers have a high school education or less (Khatutsky, 2011). With an average pay of $11-12 an hour, many direct-care workers have low household incomes and previous use of public assistance (Khatutsky et al, 2011). Several direct-care workers decline employers' health insurance plans due to inability to afford it because it's too expensive (Khatutsky et al, 2011).

There are several retention strategies geared towards improving job satisfaction and reducing turnover rates. Education, mentoring, opportunities for advancement, climate change, wages, benefits, and management practices have all been evaluated in an effort to identify the cause of turnover and develop suggestions for improvement. It may be difficult to identify exactly which method to use to reduce turnover rates in a particular facility. However, retention efforts are suspected to have better results than simply doing nothing at all.

Practice Question

The question to be addressed is: Among direct-care staff in LTC facilities what retention strategies versus non-retention strategies successfully increase job satisfaction and organizational commitment? Further insight on this research question will provide facilities with the information required to improve job satisfaction and organizational commitment. Subsequently, the turnover rates in LTC facilities may be dramatically reduced which will improve clients' overall health status while also improving the stability of LTC facilities.

Evidence-Based Significance of the Project

There is a direct correlation between job satisfaction, quality of patient care, clinical outcomes and consumer satisfaction (Walker & Harrington, 2013). Residents residing in assisted living facilities are more satisfied when staff members are satisfied with their jobs (Walker & Harrington, 2013). Job dissatisfaction results in high turnover rates which negatively affects the consistency and stability of service (Walker & Harrington, 2013).

Direct-care turnover directly impacts the nursing profession, evidence-based practice, and society. Nurses are often required to monitor patients/residents, coordinate patient care, and ensure that the operations of the facility are being carried out accordingly (Walker & Harrington,

2013). The lack of direct-care assistant staff forces nurses to step in and assist with patient/resident care needs (Walker & Harrington, 2013). This inhibits nurses' ability to perform essential duties effectively.

Work stress, burnout and role strain are common trends in the nursing profession due to instability in the direct-care workforce. Time constraints hinder nurses' ability to review and incorporate evidence-based research and further impede delivery of quality care (Walker & Harrington, 2013). The lack of support services limit facilities acceptable capacity and forces families to either care for patients/residents in the home or seek facilities that are outside of the desired area (Walker & Harrington, 2013). The incidence of caregiver role strain may significantly increase which negatively affects patients/residents and other members of society.

Implications for Social Change

Implications for social change extend beyond the scope of simply replacing individuals who have left the facility. A systematic literature review that addresses informational gaps will strengthen the evidence base for future workforce improvement. Adaptation of new beliefs and ideas among individuals within the organization is required to implement change and engage in activities that will benefit the facility. Change is not always initially accepted. However, leaders' social influence may encourage positive change. An effective leader not only focuses on the task but focuses on the needs and requirements of the individuals performing the task. In the end, employees' negative perceptions, thoughts and behaviors may shift towards positive feelings and behaviors that are shared by direct-care workers and other employees in the organization. Creation of a positive work environment will likely increase retention and decrease turnover. In addition, direct-care worker involvement in the decision-making process will

promote a sense of ownership and pride and should increase job satisfaction and organizational commitment.

Definition of Terms

For the purposes of this study, the following terms are defined.

LTC Facility: A health care facility such as a nursing home or assisted living facility that provides personal care services on a continuing basis to individuals with chronic mental and physical limitations (Day, 2013).

Retention: The act of keeping or retaining an individual or employee ((Barbarotta, 2010).

Variable pay scale: Compensation that is paid in addition to base pay (Madhani, 2011). Variable pay is only offered to individuals who meet specific requirements that may include attendance and performance regulations.

Direct-care worker: Responsible for providing hands-on care to people in need of healthcare services; also known as a frontline worker, nursing assistant, or home health aide (Ultimate Medical Academy, 2013).

Assumptions and Limitations

An assumption is that administrators, nurses and direct-care workers are interested in retention policies and are willing to make changes to decrease turnover. Without proper intervention, turnover rates among direct-care workers in LTC facilities will continue to rise. Lack of funds/resources, insufficient time and resistance to change are limitations that hinder project implementation and jeopardize quality of care and resident/patient outcomes.

Summary

This paper provides an overview of a wide range of evidence on both problems and solutions concerning retention problems among direct-care workers employed in LTC facilities.

This study is important to administrators in the process of developing a retention policy and direct-care workers desiring a positive work environment and fair pay. Individuals/organizations need to know what workforce initiatives have been shown to work to address the direct-care workforce shortage.

Section 2: Review of Scholarly Evidence

There has been a variety of initiatives implemented to improve recruitment and retention of direct-care workers in LTC facilities. Some of these initiatives focus on one approach to reducing turnover such an as increase in wages. Other programs are multifaceted and aim to achieve broader organizational culture change. This section is a description of LTC retention programs that have been evaluated over the years. In addition, the effects, or lack thereof, on direct-care worker turnover and retention will be discussed.

Articles already written on the topic were used as resources for the Doctor of Nursing Practice (DNP) project. In addition, research articles on the topic served as models and assisted with the development of themes that might work when looking for ways to organize the final DNP project. The word "*review" was placed in the Thoreau search engine along with the topic terms LTC, LTC, LTC facility, LTC facilities, turnover, retention, quit, direct-care worker, direct-care workers, front line worker, front line workers, and unlicensed assistant personnel.* Only publications written in English were included in the review. Publications from the years 2009-2014 were included in the review. Once themes were identified search methods focused on locating information specific to each theme. The bibliography or reference section of established literature reviews were used to locate recent information regarding each theme.

Specific Literature

Multifaceted Initiatives

The multifaceted initiatives describe the use of a multifaceted approach in the assessment and program planning/implementation of strategies to reduce turnover rates in LTC facilities. There have been many attempts to address turnover rates among direct-care workers in LTC facilities (Barbarotta, 2010). The Workforce Improvement Program for Nursing Assistants: Support Training, Education and Payment to upgrade performance (WIN A STEP UP) program was designed to improve the working conditions of direct-care workers and in turn, decrease turnover and improve quality of care (Dill, Morgan, & Konrad, 2010). The program provides education and financial incentives in return for a commitment to the LTC organization for a period of time (Dill et al, 2010). Retention bonuses and raises were offered to individuals who complete the educational programs and continue employment with the facility (Dill et al, 2010). To examine the impact of the WIN A STEP UP program, Dill et al, used data collected from several nursing homes to employ random effects modeling and predict an outcome of above average vs below average turnover. Dill et al, suggests LTC facilities that participated in the WIN A STEP intervention were more likely to have lower turnover rates.

The WIN A STEP UP program appears promising but would benefit from further evaluation. The effectiveness of each component of the program was not examined which is a limitation of the study (Dill et al, 2010). It is difficult to determine if communication had more of an effect than coaching supervision and vice versa (Dill et al, 2010).

Banijamali, Hagopian, and Jacoby (2012) examined the relationship between wages, support, training, career advancement and improvement in benefits with job satisfaction and reduction in turnover rates. Banijamali et al. suggested that minimal wage increases are not

enough. Action should be taken to increase wages to bring individuals out of poverty

(Banijamali et al., 2012). Wage increases should be coupled with support, training, career

advancement and improvement in benefits (Banijamali et al., 2012). Banijamali et al. conducted

a survey that indicated that the best incentive to promote a career as a direct-care worker is to

increase wages (2012). In fact, 51% of survey participants confirm that higher wages make this

career more attractive (Banijamali et al., 2012). Twenty-three percent of participants report

support, training and career advancement as incentives. Twelve percent noted benefits as a

major contributor to job satisfaction (Banijamali et al., 2012).

Cultural Change

One initiative that has been described in the literature is the Green House project. The

project was developed in 2003, by Thomas. The Green House project focuses on cultural change

(Loe & Moore, 2012). Direct-care workers within traditional nursing homes focus on personal

care, while direct-care workers within Green House nursing facilities have expanded roles and

responsibilities. The redesigned role of the direct-care worker increases time available to engage

with residents and promotes a supportive environment. Residents in Green House skilled nursing

facilities have personal living spaces including homes or apartments (Loe and Moore, 2012).

Direct-care providers are a central part of the care delivered to residents in Green House

facilities. Direct-care workers in Green House facilities are viewed with high regards (Loe and

Moore, 2012). These individuals are highly trained in culinary arts, dementia care, and

habilitation (Loe and Moore, 2012). The Green House Project supports autonomy, dignity, and

privacy in a non-institutionalized environment which encourages reciprocal relationships

between residents and the staff (Loe and Moore, 2012).

Loe and Moore (2012) conducted a qualitative study using triangulation methods that included interviews, focus groups, and observations to gain an understanding of work satisfaction and perceived quality of care among direct-care workers. Direct-care workers who worked in a nursing facility while completing Green House training and those who recently completed training were the focus of the analysis. The five themes which emerged during the analysis process were a sense of empowerment, a more enabling work environment, enhanced control of time/space, stronger elder- caregiver ties and diminished guilt and stress concerning work (Loe and Moore, 2012). Results yielded traditional nursing environments are rushed, detached and adversarial whereas the Green House nursing facility produces interdependency, stronger ties and feelings of empowerment.

Loe and Moore (2012) noted the improvements of culture change, specifically implementation of the Green House concept. Loe and Moore mentioned both residents and direct-care workers experience positive outcomes with the Green House initiative. Results showed the quality of direct-care personnel work life improves with these initiatives and residents receive better quality care. There are over 80 Green Houses in the United States. However, this study only focused on one Green House. Researchers also focused on short-term effects of this initiative which is a limitation of the study. Further work is needed to determine if the same results would be noted outside of the sample population.

Wages

Morris (2009) conducted a two-wave survey among home health care workers in Maine to investigate the impact of wages, hours, and benefits on retention of home health workers. The analysis revealed that benefits have some significance in predicting turnover; however, hours and

wages have the most profound effect on turnover rates. It was concluded that higher pay and more work hours may be more of an imperative than work conditions (Morris, 2009).

Powers and Powers (2010) conducted a questionnaire to examine the determinants of turnover among direct-care workers in LTC facilities. The researchers found that higher compensation is associated with fewer turnover rates (Powers & Powers, 2010). The authors did not have information on the personal characteristics of direct-care workers which is a limitation of the study. However, the instrumental variable analysis was used to obtain consistent estimates concerning the impact of compensation on turnover rates (Powers & Powers, 2010). The use of this instrument reduced potential for bias. Powers and Powers focused on turnover in LTC facilities housed by individuals with developmental disabilities (2010).

Management Styles

Donoghue and Castle (2009) analyzed primary data from a survey using a general linear model to estimate the effects of nursing home administration leadership style and staff turnover. Forty-four percent of nursing assistants associated a consensus management style, leaders who solicit and act upon the most input from staff, with the lowest turnover (Donoghue and Castle, 2009). Refusal to solicit input from direct-care workers and provide workers with information that will assist with decision-making is associated with the stakeholder management style (Donoghue and Castle, 2009). One hundred and sixty-eight percent of nursing assistant staff associates stakeholder management style with the highest turnover rates (Donoghue and Castle, 2009). This study confirms that leadership style is directly related to staff turnover.

General Literature

Employees who feel unappreciated and undervalued by employers increase turnover rates

(Walker & Harrington, 2013). Low pay, lack of insurance benefits, inadequate training, lack of advancement opportunities, poor relationships with management and other staff members also increase the likelihood of high turnover rates in LTC facilities (Barbarotta, 2010). Physical and emotional stress associated with being a direct-care provider and lack of respect by residents and staff is other factors to consider (Barbarotta, 2010).

On the other hand, displaying appreciation towards employees will decrease turnover rates (Walker &Harrington, 2013). Employees that are offered competitive pay and benefits are more likely to stay with the company (Barbarotta, 2010). Regular review sessions allow management to get acquainted with direct-care personnel while also promoting an opportunity to provide policy and procedure updates. These updates will increase direct-care personnel's performance resulting in feelings of achievement and accomplishment. It is important to create a sense of ownership by giving employees responsibilities. Direct-care workers have several meaningful responsibilities which should not go unnoticed. They should be reminded that the skills they perform are not just activities, but responsibilities that are vital for positive health outcomes.

A positive climate is also important. An individual's poor morale may affect the morale of the organization (Walker &Harrington, 2013). Action must be taken when negative morale is detected (Walker &Harrington, 2013). Furthermore, adequate staffing is essential. Adequate staffing reduces work-related stressors and reduces turnover rates.

Temple et al., (2009) analyzed data from the 2004 national nursing home survey to examine nursing home characteristics and specific job characteristics in relation to turnover. Education, staffing levels, staff turnover and tenure, staffing practices and wage and benefits were central to the analysis process. The results of the study suggest that comparative wages and

benefits, maintaining high levels of nursing staff and involvement of direct-care workers in resident care planning reduce turnover rates.

Temple et al., (2009) offered valuable suggestions concerning factors that reduce turnover rates. However, the cross-sectional design used by these researchers only allows associations to be made between organizational and job characteristics. In other words, the inference that high wages reduce turnover rates cannot accurately be made as other factors may be the cause of the reduction in turnover rates. Several vital characteristics were not considered in the study. Such characteristics include but are not limited to, acuity of residents, quality care indicators, job satisfaction and intent to leave. Research using longitudinal data that includes facility, market and individual level factors are needed to determine if the suggestions are appropriate. More specific interventions are needed for replication and success with the implementation process.

Theoretical/Conceptual Framework

Simple knowledge obtainment concerning the factors mentioned in this systematic literature review is not enough to successfully manage change and address this issue. In other words, reduction in turnover is going to require a change in the organizations practice. Change is difficult for organizations and employees (Campbell, 2008). In fact, change can be quite difficult to implement and manage (Campbell, 2008). Evidence-based practice models for organizational change guide the change process and assists with determining potential outcomes of the projected plan (Campbell, 2008).

Kotter's Change Model offers a comprehensive guide for organizational change efforts (Campbell, 2008). This model has been widely used to manage change in healthcare, business and social science settings. Kotter's model has been chosen for this topic because it enhances the

researcher's ability to create a holistic approach for tackling this issue using knowledge obtained from the literature review.

According to Kotter's Change Model, there is a link between individuals, groups and the organization (Campbell, 2008). Steps involved in Kotter's Change Model include creating a sense of urgency, building guiding teams, getting the right vision, communicating for buy-in, enabling action, creating short-term wins, not letting up, and making it stick (Campbell, 2008). Kotter's Change Model focuses on showing individuals why change is needed (Campbell, 2008). Once individuals accept that a change is needed, activities can then be taken to motivate action (Campbell, 2008). Optimism, self-confidence and inspirational stories are essential to the change process (Campbell, 2008). Compelling information promotes organizational change.

Hard work is required to implement change and address turnover successfully. The use of Kotter's Change Model will assist managers when attempting to develop a foundation for organizational change that leads to a reduction in turnover rates. The manger's ability to create a sense of urgency, recruit powerful change leaders, form a vision, effectively communicate the vision, remove obstacles, create quick wins, and build the momentum required to successfully address turnover will be enhance with the use of this model. Kotter's Change Model can build organizational capacity to create and sustain improvement in turnover rates and subsequently improve the quality of care and outcomes of residents in LTC facilities.

Figure 1. Kotter's Eight Step Change Process

Adapted from *The Heart of Change Field Guide* by D. S. Cohen, 2005, Harvard Business

    Review Press.

        Every step of Kotter's Change Model must be addressed to ensure successful execution of

the model (Campbell, 2008). Kotter's Change Model process is time-consuming (Campbell,

2008). These factors are considered limitations of the model. However, the model is applicable

to most scenarios in which change must occur.

Summary

        Many of the initiatives mention wages and benefits as successful methods to reduce

turnover rates in LTC facilities. Mentoring, culture change, training, education and payment

have also been shown to reduce turnover. The exact method needed to incorporate successfully

each specific intervention was not mentioned in many of the studies which is a limitation.

However, each LTC organizations may find it necessary to build interventions based on the

capabilities of the facility. Since each of these factors influence turnover, a plan that uses all of

these methods to reduce turnover may have a significant impact. Models, such as Kotter's

Change Model, can assist LTC facilities with development of comprehensive plans using

evidence-based interventions to reduce turnover rates.

Section 3: Design and Methodology

Project Design/Methods

This project will include an extensive review of published articles in peer reviewed journals on retention of direct-care workers in LTC facilities including nursing homes and assisted living facilities. Electronic searches will be conducted using CINAHL with Medline simultaneous, ProQuest, and Ovid resources. The project design will include the identification, selection, inclusion, and synthesis of studies. There will be stick adherence to the protocol for the inclusion and exclusion criteria to eliminate bias and enhance the validity and reliability of the review. Only articles specific to the research question will be included in the review.

Researchers who examined links between general organizational practices, worker satisfaction and turnover rates will be included in the study. Studies that describe the issue of turnover without a direct link to a specific intervention will be excluded. The study characteristics, quality and effects of each study will be included in the review. The information discovered during the review will be use to propose innovative interventions to improve professional practice in the LTC setting, correct the retention issues among direct-care workers and improve residents' outcomes.

Population and Sampling

The studies selected for this systematic literature review will be chosen based on relevance and importance. The research questions will be highly considered while making a selection and determining which studies are most relevant. The studies in the review will be categorized based on the intervention used to reduce turnover rates.

Data Collection

The literature review will include all relevant articles from a wide range of databases including the CINAHL with Medline simultaneous, ProQuest, and Ovid database search engines. Search terms that will be used when conducting database searches include *long-term care, long term care, long term care facility, long term care facilities, turnover, retention, quit, direct-care worker, direct-care workers, front line worker, front line workers, and unlicensed assistant personnel*. Boolean operators will be used to combine different words in the search and combine synonyms in one set. The reference list of relevant articles will be reviewed to identify articles that might fit the inclusion criteria. Relevant publications will be identified based on the title and abstract review. The full papers of the remaining citations will be assessed to include only studies that are directly related to turnover or retention of direct-care workers in LTC facilities. Published articles in peer review journals will be included in the literature review. To allow for different types of evidence both qualitative and quantitative data will be included in the review. Articles that include languages other than English will be excluded from the study (See Appendix A for a flow diagram of study selection).

Data Analysis

A synthesis matrix will be used to record the main points of each source and document how sources relate to each other (See Appendix B for a synthesis matrix). The literature is classified based on the type of intervention used to address retention among direct-care workers in LTC facilities. After critical appraisal of the research, I will take measures to synthesize the data and communicate the research findings. Each study included in the review will be classified according to its level of evidence (See Appendix C for Hierarchy of Evidence for Intervention

Studies). Classification of the literature will provide information concerning the quality of each study.

Project Evaluation

Intrinsic errors may distort the results of the literature review. A critical appraisal will establish the methodological quality of the literature review and determine the validity of the results. Studies with methodological rigor reflect the truth and provide keen insight regarding the issue being researched (Abalos, Carroli, Mackey, & Bergel, 2001). Critical appraisal of the review yields evaluation of the clarity of the research question. The population, intervention and outcomes of the review must be apparent. Critical appraisal must include an evaluation of the criteria for the selection of the studies to be included and further enhance the validity and reliability of the review. Critical appraisal and evaluation of the project will ascertain the significance of the articles used in the review and the relevance, validity, and reliability of the literature review.

Summary

There are several factors that must be considered during the evaluation phase of a literature review. The lack of a successful evaluation plan may lead to the detriment of the project. During the evaluation process, the evaluator must consider whether the review is complete. Critical appraisal concerning the relevance of the project, inclusion of relevant articles, and the validity and reliability of the studies included in the review is vital.

Section 4: Discussion and Implications

The basis for the systematic review of the literature was to identify the problems and solutions to the dilemma of turnover among direct-care workers in LTC facilities. The question being addressed was, among direct-care staff in LTC facilities what retention strategies versus nonretention strategies successfully increase job satisfaction and organizational commitment? The process and findings of the systematic review of the literature concerning retention of directcare workers in the LTC workforce will be discussed in this section.

Summary Evaluation of Findings

A search of the literature was undertaken to find studies that examined retention strategies to reduce turnover of direct-care workers in LTC facilities. Search terms included *long-term care, long-term care facility, long-term care facilities, turnover, retention, quit, directcare worker, direct-care workers, front line worker, front line workers, unlicensed assistant personnel, WIN A STEP UP, wages, support training, career advancement, benefits, hours, management style,* and *organizational climate*. Inclusion criteria for this systematic review of the literature are included in the list below.

- Articles directly related to turnover or retention of direct care workers in LTC facilities

- Full-text articles

- Articles written in the English language

- All publication dates acceptable for the systematic review of the literature. The dates of the research publications identified and included in the systematic review of the literature range from 2001-2004.

The CINAHL with Medline simultaneous, ProQuest, and Ovid database search databases were assessed with no limitations on the time period of the articles included in the review. The initial search resulted in 376 publications. An additional 482 studies were identified after the review of the reference lists of the articles resulting in 858 publications. Sixty-three publications were duplicates. Review of the titles of the remaining articles revealed that 778 of the publications did not address retention of direct-care workers in LTC facilities and were excluded on this basis. The abstracts of the articles chosen for review were screened to determine further if the articles fit the eligibility criteria. The remaining full-text articles were screened for eligibility. Seventeen articles meet the inclusion criteria for the systematic review of the literature. The PRISMA Flow diagram was used to map the number of records identified, included and excluded in the systematic review of the literature (See Appendix A).

Discussion of Findings in the Context of the Literature

One of the focuses in LTC is to reduce turnover of direct-care workers in these facilities which will improve the quality of care provided to residents. The findings from this systematic review of the literature suggest that several factors affect turnover rates in the LTC setting. The factors identified include job training, organizational culture, management skills, career advancement, benefits, peer mentoring, wages, and acceptable work assignments. The majority of the research was qualitative, interpreting the rationale for high turnover rates of direct-care workers in LTC facilities. The findings of the systematic review of the literature will be discussed in this section.

Job Training/Organizational Structure

In general, job training is a central component of staff retention. Job training is an added expense to the employer. However, training sessions help employers identify employees'

weakness. Once the weaknesses are identified measures may be taken to strengthen those skills.

The knowledge base for the employee population heightens with the use of job training. This

helps reduce reliance on others to complete tasks that decrease the potential for work overload

and amplify turnover rates.

Using a latent analysis, Kim (2011), identified organizational structure, as it relates to

training and communication as an important factor for organizational change. The need for

organizational change increases as a result of performance gaps, technological advancements,

improvements in policies and procedures, and the need to change the structure and climate of the

organization. Provision of thorough training provides employees with the knowledge base

required to implement and engage in the organizational change process. Without the ability to

adequately implement change, attempts to employ initiatives that may reduce turnover will

potentially be unsuccessful. The ability to effectively communicate enhances employees' ability

to employ teamwork and adopt and implement change. Communication skills may be enriched

during the training process. Heightened job training and more channels for communication help

to prepare organizational members for change.

It is important to not only train direct-care staff, but to train management personnel

concerning techniques to implement the change that is required to reduce turnover. Management

teams create the organizational structure necessary to achieve organizational change (Brannon,

Kemper, Heier-Leifzell, & Scott, 2011). Implementation of practice changes that impact culture

necessitates extraordinary commitment at both strategic and operational levels of management

(Brannon et al., 2011). When implementing change, leaders will need to justify the disruption of

routines, values, and assumptions (Brannon et al., 2011). Otherwise, the acceptance of change

may be minimal and result in job dissatisfaction and amplified turnover rates.

Management Skills

Brannon et al, (2011) noted that there is an obvious connection between effective leadership and the overall success of LTC facilities. Kim, also supported the idea that without successful leadership organizational change will not be effective in the LTC setting. Management staff are instrumental leaders for change. Without effective leadership and successful change agents, job dissatisfaction and turnover rates of direct-care workers in LTC facilities are expected to grow.

There is a direct correlation between nursing home administration leadership and staff turnover (Donoghue and Castle, 2009). Leadership involves creating a vision, developing and implementing methods to obtain the vision, communication, motivation, and helping others adapt to change. Leaders must be able to influence employees' thoughts, attitudes, and behaviors. Without leadership, organizations might display suboptimal performance. The ability to implement practices that support organizational growth may diminish, and the success of the organization may be at risk.

Donoghue and Castle (2009) used a general linear model to estimate the effects of nursing home administration style, organizational characteristics, and local economic characteristics on staff turnover. Nursing home administrators, who are consensus managers, are associated with the lower turnover levels (Donoghue & Castle, 2009). The consensus manager solicits and acts upon the most input from staff (Donoghue & Castle, 2009). Consensus managers are approachable, amicable and typically compassionate which leads to satisfied employees and heightened retention levels.

Acknowledgment of Accomplishments

The perception of being undervalued is one of the strongest predictors of turnover of direct-care workers in the LTC setting (Choi & Johantgen, 2012). It is important to distinguish each individual for their achievements. Acknowledgment of accomplishments creates a supportive environment, a sense of ownership, and loyalty (Choi & Johantgen, 2012). Leaders may decide to recognize direct-care workers for their milestones, length of service, personal accomplishments and teamwork.

Dill, Morgan, and Weiner, (2014), discussed provision of financial rewards to improve job satisfaction and reduce turnover rates among direct-care workers. Provision of financial rewards demonstrates acknowledgement of accomplishments and appreciation for employees' efforts. Acknowledgment that is sincere and heartfelt is ideal and should be provided on a routine basis.

Career Advancement

The positive effects of career advancement cannot be ignored. Stone (2001), exclaims the lack of career ladders enhance recruitment and retention issues. Professional development promotes a sense of accomplishment and achievement (Dill et al, 2014). Many employees desire meaningful careers rather than job assignments. Coaching and helping direct-care workers achieve their goals will enhance commitment and retention (Dill et al, 2014). Professional development is a useful tool for improving job satisfaction and retention (Dill et al, 2014). Organizations that institute professional advancement opportunities may also attract other talented employees to the organization.

Programs such as the Green House Project promote interdependency among direct-care workers within these LTC facilities. After careful training and instruction direct-care workers

fully operate Green House LTC facilities. This practice is different from the traditional setting.

This career advancement among direct-care workers increases feelings of empowerment and job

satisfaction and reduce turnover among direct-care workers in the LTC setting. The Green

House Project will be discussed in greater detail later in this review.

Benefits

Benefits are necessary to improve job satisfaction and reduce turnover. Benefits include

tuition remission, educational release (Dill et al, 2014) and health insurance (Temple, Dobs, &

Andel, 2009). Tuition remission and educational release provide direct-care workers with the

tools required to advance their knowledge base which enhances career advancement potential

(Dill et al, 2014). The prospective for career progression increases job satisfaction and retention

potential. In addition, an enhanced knowledge base improves employee performance which

promotes feelings of accomplishment, fosters job satisfaction and improves intent to stay with

current employer (Dill et al, 2014).

Health insurance benefits help to ensure employees, and their families are protected

against hardships related to health expenses. The variation in turnover rates is in part due to lack

of affordable health insurance coverage (Temple et al, 2009). Direct-care workers are apt to seek

jobs that offer benefits. Making benefits such as health insurance, tuition remission and

education release available will increase the chances that dedicated staff members will remain

with the LTC organization.

Peer Mentoring

Peer mentoring is a process by which an experienced individual guides a novice with the

rules, regulations and operations of the organization (Hedgeman, Hoskinson, Munro, Maiden, &

Pillermer, 2008). In the LTC setting, the peer mentor may share knowledge and experience

regarding the policies and procedures of the facility. The peer mentor demonstrates positive

leadership skills and assists novice direct-care workers with the establishment of a positive

workflow. The peer mentor contributes to the success of novice employees. A descriptive study

by Hedgeman (2003), mentions that peer mentoring is likely to improve the orientation process,

reinforce critical skills and behaviors, teach the value of caring, support new staff during

transition and improve retention rates of direct-care workers. In addition, Hedgeman (2003)

notes that peer mentoring can be used as a career ladder for experienced direct-care workers.

Hedgeman et al. (2008), evaluated the implementation of the Growing Strong Roots

program which is a peer mentoring program designed to guide direct-care workers and enhance

retention. The findings reveal the average retention rates for mentees after initiation of the peer

mentoring program rises. The peer mentoring program is beneficial in the LTC setting because it

addresses the troublesome turnover rates without increasing the financial demands of the facility.

In addition, peer mentoring improves co-worker relationships which also decreases turnover

(Hedgeman et al, 2008).

Wages

The development of meaningful training programs must be coupled with other initiatives

including higher wages to successfully improve retention among direct-care workers in LTC

facilities (Fitzpatrick, 2002). Wage increases without adjustments to the organizational culture

or workplace conditions may result in bidding wars and may increase the risk of transfer from

one workplace to another. Training and wages independently affect job satisfaction. However,

one's overall satisfaction determines if an individual will lead to a decision to terminate

employment.

Bowers, Esmond & Jacobson; (2003) conducted a grounded dimensional analysis that also confirms the benefits of wage improvements to reduce turnover rates. In addition to compensation adjustments, organizations must accept input from direct-care workers and create a culture of respect (Bowers et al, 2003). Organizational policies, personal interaction, and compensation reflect an organization's level of appreciation and value of direct-care workers (Bowers et al, 2003).

Temple et al, (2009), piloted a cross-sectional study that validated that increases in wages must be addressed successfully to reduce turnover of direct-care workers in LTC facilities. The researchers believed salary adjustments should be coupled with the direct-care worker's ability to be involved with resident care and benefits including health insurance. Attempts to avoid wage increases and benefits packages will add to the growing retention issues in the LTC setting (Temple et al, 2009).

Workload

Demanding tasks are required of direct-care workers (Chou & Robert, 2008). Stressful workloads may result in anxiousness and cause employees to make mistakes (Chou & Robert, 2008). In addition, stressful work conditions contribute to the recruitment and retention crisis (Stone, 2001). Unsurprisingly, the ability to retain employees in environments in which they are overworked is challenging. Chou & Robert (2008) conducted a multivariate analysis that demonstrated job satisfaction is negatively associated with work overload and positively related to institutional support and emotional support. The benefits of workload reduction were also noted by researchers of the WIN A STEP UP Program, which will be discussed later in this section. The job dissatisfaction related to work overload suggests acceptable work assignments are essential to reduce the turnover crisis.

WIN A STEP UP

The Workforce Improvement Program for Nursing Assistants: Support Training, Education, and Payment to upgrade performance (WIN A STEP UP) program was designed to improve working conditions of direct-care workers (Dill, Konrad, & Morgan, 2010). The program focuses on education or training and improvement in compensation as methods to improve job satisfaction and reduce turnover among direct-care workers. Dill, Konrad, & Morgan (2010) found organizations that implemented the WIN A STEP UP program held higher retention rates. One of the major benefits of this program is that it addresses components of the workplace environment while also addressing compensation concerns shared among staff. There is not a lot of research about the WIN A STEP UP Program as the concept is fairly new. More research concerning the benefits and limitations of the WIN A STEP UP program would be beneficial.

Green House Project

Like the WIN A STEP UP Program, the Green House project involves a comprehensive approach to improve the structure of the organization and reduce turnover of direct-care workers (Loe & Moore, 2012). The Green House project involves the provision of extensive education and training for direct-care workers (Loe & Moore, 2012). Direct-care workers input is welcomed with this project (Loe & Moore, 2012). In fact, direct-care workers are the primary caregivers for residents within Green House organizations (Loe & Moore, 2012). Rather than having a traditional LTC structure, the Green House facilities are designed as small homes that resemble neighboring homes within the community (Loe & Moore, 2012). The Green House project produces interdependency, stronger ties, feelings of empowerment and improved

satisfaction among direct-care workers in the LTC setting (Loe & Moore, 2012). As a result, the turnover rates in Green House facilities are lower than that in traditional nursing homes (Loe &

Moore, 2012). Like the WIN A STEP UP Program, there is not a lot of research about the Green House Project. More research concerning the benefits and limitations of the Green House Project would also be beneficial.

Multidimensional Approach

Stone (2001) also believed in a multidimensional approach to reduce turnover rates. Inadequate financial incentives, stressful work conditions and lack of career opportunities contribute to difficulties in recruiting and retaining direct-care (Stone, 2001). Facilities that embrace career ladders and provide higher pay experience fewer turnovers (Stone, 2001).

Job Tenure

Lerner, Resnick, Galik, and Flynn (2011), view retention of direct-care workers from a different perspective. These researchers bring insight concerning the effect of employees' tenure and ability to provide exemplary care for job satisfaction and retention. Using a multiple regression analysis, these researchers identified length of experience and exemplary care as being positively associated with job satisfaction. With this in mind, the goal for LTC facilities may need to include implementation of measures that enhance the direct-care worker's ability to provide exemplary and quality care. LTC facilities may also consider hiring direct-care workers with experience. A wide database of information concerning the relationship between job tenure and turnover among direct care workers is not currently available and should be explored further in the future.

Implications of the Findings:

Policy

From a policy standpoint, knowing which methods reduce turnover rates in LTC facilities will provide rationales for allocating resources to change initiatives such as job training, management training, acknowledgment of accomplishments, career advancement, enhanced benefits packages, peer mentoring, wage increases and strategies to reduce direct-care workers work capacity are essential. Given that this systematic review of the literature provides evidence that multiple factors affect turnover in LTC facilities, policy leaders should consider making strides to incorporate each of these factors identified to enhance the overall results. An increase in retention is projected to decrease training costs, recruitment costs and loss of valuable talent and organizational knowledge (Barbarotta, 2010). By implementing policies and practices based on the initiatives discussed in this systematic review of the literature, LTC organizations have a greater chance of improving retention rates and reducing adverse outcomes related to high turnover.

Practice

Based on the results, there are a variety of initiatives to reduce turnover and improve job satisfaction and retention in the LTC setting. The most common theme noted in the literature is the need to improve the overall climate of the organization and provide job training, benefits, comparable wages, peer mentoring, opportunities for career advancement, and acceptable workloads. Supervisory support is crucial to the adoption and implementation of retention strategies that will reduce turnover. Supervisors must be open to implementation of career advancement and peer mentoring initiatives. Otherwise, the escalated turnover rates of directcare workers in LTC facilities may continue. Supervisors' abilities to communicate and demonstrate

appreciation towards direct-care workers is also vital. To remedy the high turnover situation, positive management skills must be combined with a healthy organizational culture, support and acknowledgment of accomplishments, job training, career advancement, benefits, peer mentoring, comparable wages, and acceptable work assignments. The combination of these practices will encourage employees to stay motivated and loyal towards management and the long-term organization.

Research

Several findings from this systematic review of the literature warrant more study. First, more information is needed concerning the components of a successful peer mentoring program and methods to implement career advancement opportunities successfully. More data is also required to determine how to incorporate wage increases and benefits packages that are reasonable to both the employee and the LTC organization. Perhaps, one suggestion would be to implement a variable pay scale. Variable pay is compensation that is paid in addition to base pay (Madhani, 2011). Variable pay is only offered to individuals who meet specific requirements that may include attendance and performance regulations. The amount may be added to the employees' hourly pay and paid with each paycheck, or the payment can be disbursed in the form of a monthly, quarterly or annual bonus. Variable pay is used to acknowledge employees and reward their contribution to the company. As previously mentioned, employee acknowledgment is an important factor for job retention. The variable pay scale may be a valuable compensation strategy that will assist with performance, payment, and retention concerns among direct-care workers in the LTC setting.

Social Change

Ideally, social change within LTC facilities, involves the adaptation of evidence-based interventions that improves the organizations climate as well as retention. This systematic review of the literature provided insight concerning factors that affect retention. Adverse factors, and factors that promote turnover, are identified in this systematic review of the literature. This systematic review of the literature provides beneficial information that can be used as a catalyst for valuable change that will reduce the turnover crisis among direct-care workers in the LTC setting.

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Project Strengths and Limitations

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Strengths

A systematic review of the literature is one of the strongest forms of research. The use of the systematic review of the literature design to address retention of direct-care workers in the LTC setting is strength of this project. This systematic review of the literature provides clear, explicit objectives with clearly stated inclusion criteria. Systematic search methods that reduce the risk of selective sampling of studies were implemented which reduces the risk of bias. In addition, this systematic review of the literature adds to the body of knowledge by producing information that clearly addresses the following research question: Among direct-care staff in LTC facilities what retention strategies versus non-retention strategies successfully increase job satisfaction and organizational commitment?

There were several implications identified by this systematic review of the literature. First, these results imply that job training, management skills, acknowledgment of accomplishments, career advancement, benefits packages, peer mentoring, wages and workload influence direct-care worker satisfaction. In addition, the findings from this project suggest that

the combination of these variables can positively impact job satisfaction and retention of directcare workers in the LTC setting. If leaders in the LTC setting create a positive work culture, provide comparable benefits and compensation and implement career advancement opportunities, they may be able to reduce turnover in a group that is overwhelmed by dissatisfaction and astronomical turnover rates. By implementing initiatives to reduce turnover, organizations may be able to gain a competitive edge and cut costs related to high turnover rates.

Limitations

The limitations of this systematic review of the literature must be acknowledged. First, only articles written in the English language were included in the systematic review of the literature. The inclusion of English only articles does not reflect the total body of knowledge of evidence on retention strategies among direct-care workers in the long-term setting. In addition, the inclusion of English only articles increases the risk for language bias.

One author searched for and extracted the full-text articles included in the systematic review of the literature. The use of two or more reviewers is more ideal and reduces the risk of bias. Bias affects the validity and reliability of the systematic review of the literature. Since measures were taken to reduce selection bias, this limitation is of diminutive significance.

The findings are not representative of the potential long-term outcomes of the interventions. Research concerning the long-term results will provide insight regarding the overall financial impact of these interventions. LTC organizations may have reservations toward allocating resources to improve retention rates. Knowledge concerning the potential positive outcomes, including impending financial gains, may help sway leaders toward implementing the initiatives identified in this systematic review of the literature.

The results of the search include documents from full-text publications. This search strategy eliminates the use of any abstract only articles. Abstracts do not generally undergo the peer review process which increases the risk of bias when using abstract only articles in the systematic review of the literature process. However, the use of only full-text publications may result in incorrectly disregarding relevant reports and thus is a limitation of this systematic review of the literature.

Recommendations for the Remediation of Limitations

To further reduce the risk of bias, non-English articles must be considered when conducting a systematic review of the literature. In addition, at least two reviewers should be taken into account when conducting a systematic review of the literature. A third individual may be required to help settle any discrepancies. It may prove difficult to gather multiple individuals interested in conducting a systematic review of the literature, particularly due to the limited funds available to support such investigation. However, this will strengthen the readers' trustworthiness concerning the results of the systematic review of the literature.

Consider eliminating the full-text limitation. The full-text limitation may result in the lack of identification of citations that may impact the systematic review of the literature. Inclusion of all articles will help ensure inclusion of all relevant publications. The full-text version of the article may be located at a later time, if not identified immediately.

Tracking direct-care workers over a period of time may prove difficult and expensive, but long-term data is needed to evaluate whether implementation of these interventions will reduce turnover on a long-term basis. Long-term data is useful when attempting to identify trends. Tends provide data concerning risk factors that warrant further study or investigation. In

addition, trends help identify where policies or interventions have been successful which enhances policy development and promotes positive outcomes.

Analysis of Self As Scholar

The university experience has provided a pathway for higher education, knowledge, and scholarly thinking. Participation in various assignments and the DNP project has enhanced personal research skills through practice. In addition, the experience has fostered an abundant breadth and depth of knowledge. Inquisitiveness and the sophisticated understanding derived from higher education at Walden University have heightened personal ability to identify and understand issues and opportunities and implement appropriate solutions to a variety of problems.

As Practitioner

The ability to implement appropriate solutions heightens one's ability to deliver patient care efficiently. The experience at Walden University has expanded the capacity to use analytical methods and research to develop best practices and practice guidelines, determine the nature and significant of health care issues and evaluate appropriate practice and care delivery models. The ability to use information systems and technology-based resources that support clinical and administrative decision-making has advanced with the education experience.

As Project Developer

All of the learning experiences link together and enhance personal ability to lead projects that positively impact the healthcare profession. As a project developer, it is important to have the skills to collaborate with stakeholders and manage, review, and coordinate the project. These are certainly skills that have been enhanced through education at Walden University. In addition, there has been a growth in the personal ability to recognize the potential costs, resources, and needs relating to project development and budgeting.

Future Professional Development

Involvement with the DNP project combined with the learning experience at Walden University has brought about the realization that change is constant. Meaning, current practices will be different in the future. This project is in line with promoting positive change that will create a different and more suitable future for direct-care workers, LTC organizations, residents in LTC and the community. Implementation of the methods mentioned to reduce turnover rates call for a higher skill set and competencies. This means future professional development may involve the provision of learning opportunities for direct-care workers. The increased knowledge base from the learning opportunities increases the likelihood that residents care will drastically improve. In addition to improvement in direct-care workers skill set, project developers, researchers, and administrators might consider developing an analysis tool that will help organizations determine strengths and weaknesses. This project contributes to future professional development in that it answers questions about current practices and provides insight concerning measures that can be taken to improve future professional development.

This project provides the knowledge required to help LTC organizations transition from a surplus state to a desired state. The project aids with identification of weaknesses in the LTC organization and implementation of initiatives ranging from leadership style to wages and benefits. The experiences encountered while completing the DNP project have strengthened ability to effectively communicate, initiate change initiatives, identify barriers to project implementation and incorporate methods to reduce resistance to change. Future career aspects are heightened as a result of the DNP program and participation in the DNP project.

Summary and Conclusions

The experience at Walden University has enhanced skills in information technology, evidence-based practice, leadership, ethics, and health policy. In addition, the ability to conduct research and apply problem resolution has grown exponentially as a result of the DNP program. These educational advancements provide the expertise to improve nursing practice and health care delivery. The ability to engage in the DNP project has heightened my ability to participate in other projects that will have a positive impact on the healthcare community. The project serves as a stepping stone for future projects and change initiatives.

Section 5: Scholarly Paper for Dissemination

Executive Summary

Systematic Review of Retention of Direct-care Workers in LTC Facilities

Regina Evonne Goins

Committee: Dr. M. Terese Verklan, Dr. Jennifer Nixon and Dr. Geri Schmotzer

Introduction

Retention among direct-care workers in LTC facilities has proven to be a daunting task. The high incidence of turnover reduces the availability of experienced, skilled direct-care providers which reduces continuity of care, increase risks of harm to individuals who reside in these facilities and promotes an unstable environment. This issue requires immediate attention as the number of elders in the population is increasing. The increased number of older adults will amplify the requirement for LTC services.

Purpose

The aim of this systematic review of the literature was to identify and review the literature on Retention of Direct-care Works in LTC Facilities. The intent of this systematic review of the literature was to develop a comprehensive report via the identification, appraisal, analysis and synthesis of all available and current literature on retention of direct-care workers in the LTC (LTC) workforce. Underpinning this plan, a specific research question was posed to identify specific evidence from the literature. The research question is as follows: Among

directcare staff in LTC facilities what retention strategies versus non-retention strategies successfully increase job satisfaction and organizational commitment?

The review outcome provides relevant, up-to-date information which will guide and assist in the development, and implementation of methods of reducing turnover rates among direct-care workers in the LTC setting.

Project Design

The systematic review of the literature was undertaken using a systematic, step-by-step approach to ensure accuracy of the review process. The stages involved in the step-by-step approach include defining the research question, setting the research parameters, literature extraction, literature synthesis and production of the final report. To be eligible for inclusion, papers need to be directly related to turnover or retention of direct-care workers in LTC facilities. In addition, the articles only full-text, peer-reviewed journals written in the English language were included. The systematic review of the literature has brought insight concerning eight critical factors that affect turnover rates. The eight factors include job training, management style, acknowledgement of accomplishments, career advancements, benefits, peer mentoring, wages and work load. Programs such as WIN A STEP UP and the Green House Project positively affect retention of direct care workers in LTC facilities.

Summary

The dilemma of turnover of direct-care workers in LTC facilities is well documented. Several strategies to reduce turnover exist; however, the issue pursues. Dissemination of the results of the Systematic Review of Literature for Retention of Direct-care Workers in LTC Facilities displays which retention measures have the most impact. Identification of these strategies will allow LTC facilities to focus on measures that will reduce turnover and decrease

organizational costs. In addition, the Systematic Review of the Literature for Retention of

Directcare Workers in LTC Facilities will impact healthcare delivery and quality of care among

residents in LTC facilities. In the future, the concepts and interventions applied may be used in

other areas of healthcare and produce a dynamic impact in various healthcare organizations.

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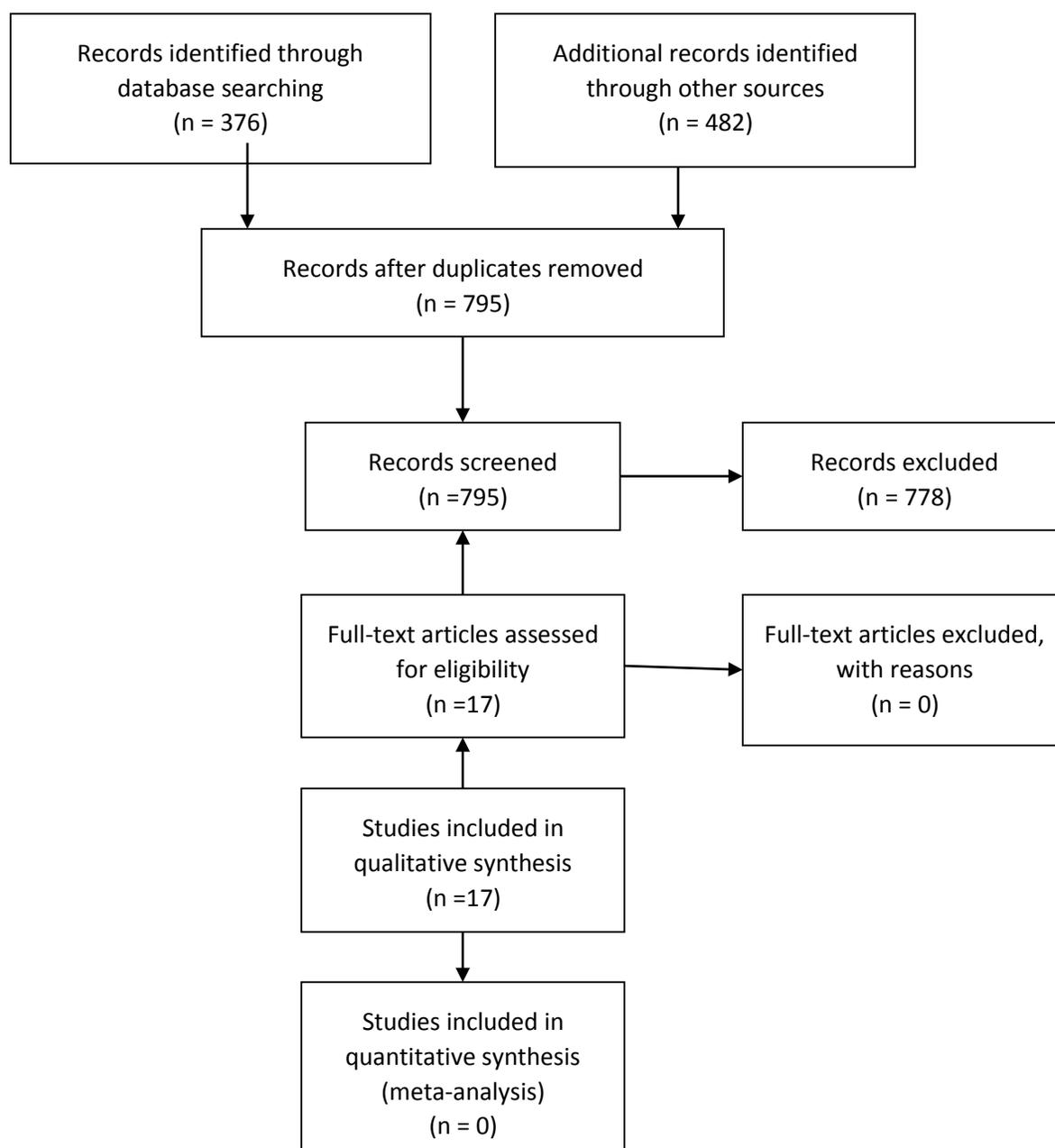
Appendix A: PRISMA Flow Diagram

PRISMA 2009 Flow Diagram

Appendix B
Synthesis Matrix

Author/ Date	Research Question(s)/ Hypotheses	Methodology/ Level of Evidence	Analysis & Results	Conclusions	Implications for Future research	Implications For practice
Brannon, S., Kemper, P., Heier-Leifzell, B., Scott, A (2011) Reinventing Management Practices in LTC: How cultural evolution can affect workforce recruitment and retention. Journal of the American Society on Aging, 34(4), 6874	Change management and project management skills need to be infused into the leadership of LTC organizations.	Qualitative VI	Implementation of lasting practice changes impacting culture requires extraordinary commitment at both strategic and operational levels of management For new approaches to become institutionalized leaders must justify the disruption of routines, values and assumptions that need to	Leaders, through their behaviors, largely determine the culture within LTC organizations and directly affect turnover/retention of direct-care workers.	Identify methods to improve leadership skills among management staff in LTC organizations.	Provide training to improve leadership/management in LTC organizations.

| | | | evolve.

Initiatives to improve staff management promote structural and regulatory changes to advance residentcentered care. | | | |
|---|---|---|---|---|---|---|
| Donoghue, C., Castle, N.G. (2009).

Leadership styles of nursing home administrators and their association with staff turnover.

Gerontologist, 49(2), 166-174 | There is a correlation between nursing home administration leadership style and staff turnover | Primary data from a survey using a general linear model

Qualitative Study VI | Forty-four percent of nursing assistants associated a consensus management style, leaders who solicit and act upon the most input from staff, with the lowest turnover | This study confirms that leadership style is directly related to staff turnover. | Research concerning the association between the Direct of Nursing and nursing assistants turnover may be of value | Implement a consensus management style |

Kim, J (2011)	Change initiates are	Crossed Sectional	Management teams create the	Organizational structure,	Identify methods to successfully adopt and implement change in	Improve job training and communication among staff
Organizational structure and change processes in LTC: A configurational approach

Journal of Healthcare Management, 56(6), 419-420 | required to improve the quality of the workplace environment and the retention of direct-care workers. | Survey/

Qualitative

VI | organizational structure which is a critical factor when attempting to implement organizational change | especially as it related to communication and training is an important factor for change.

Managers must understand their organizations structure and develop plans in a way that retains the positive side of the structure while offsetting the weakness of the structure | the LTC setting | in LTC organizations. |

Kim, J., Wehbi, N., Dellifraine, J. (2014) The joint relationship between organizational design factors and the HR practice factors on direct-care	There is a relationship between organizational culture and HR practices on direct-care workers job satisfaction and turnover intent	Latent Class Analysis Qualitative VI	Decentralized and less formalized structures and high levels of job training and communication are positively related to intent to leave	Human resource practices such as communication and job training and organizational practices (less formalized structures) are positively linked to job satisfaction and improved	Research concerning the potential variances in outcomes based on ethnicity and demographics	Managers in LTC facilities may want to consider adopting decentralized and less formalized structures
worker's job satisfaction and turnover intent Health Management Review, 39(2), 174-184				retention		

Hegeman, C. (2003) Peer mentoring of nursing home CNAs: A way to create a culture of caring Journal of Social Work in LTC, 2, 183-196	Peer mentoring is likely to improve CNA retention rates, improve the orientation process, reinforce critical skills and behaviors, teach the value of caring, use exemplary aides to role model exemplary care, support new staff, and provide recognition	Descriptive VI	Peer mentoring has the potential to promote cultural change, improve staff retention and reduce organizational costs	Peer mentoring is a way to create a culture of caring among aides in LTC facilities. Aides who embrace the culture of caring are recognized which will enhance satisfaction and retention.	Effective, replicable, and sustainable peer mentoring programs for new nurse aides that encourage retention and commitment to explicit caring values of LTC need to be examined.	Initiate peer mentoring in LTC facilities
	and career ladder for experience nurse aides.					

Hegeman, C., Hoskinson, D., Munro, D., Maiden, P., Pillermer, K. (2008) * Peer mentoring in LTC Gerontology & Geriatrics Education, 28(2), 77-90	Peer mentoring programs such as Growing Strong Roots promote supportive relationships among CNAs and reduce retention rates	One –Way ANOVA Lower Bound Test Survey Controlled trial III	Growing Strong Roots – Average retention rates for mentees for peer mentoring program was 59%. The average retention 3 months later was 84%. In the comparison group (no intervention) the retention rates were 38% and 48% three months later.	The retention rates are higher in facilities that implement programs such as Growing Strong Roots	The support sessions stopped prior to completion of this study. In the future, during replication efforts, researchers want to continue support sessions throughout the research	Implement mentoring programs such as Growing Strong Roots to improve retention among CNAs.
Fitzpatrick, P (2002) Turnover of certified nursing assistants: A major problem for LTC facilities	The development of meaningful training programs coupled with higher wages is required to reduce	Descriptive VI	Improvement in supervisor skills & higher wages are the primary contributions of high turnover	Improvement in supervisor skills & higher wages are the primary contributions of high turnover. However, the problem of turnover is	Research to determine if use of funds to increase wages will reduce turnover costs while improving job satisfaction and reducing turnover intent	Provide CNAs with the Opportunity to advance in healthcare careers by providing tuition reimbursement and

Hospital Topics, 80(2), 21-25	turnover in LTC facilities			multifactorial. Career advancement and reduced workload will also improve job satisfaction and reduce turnover.		time off for study Reallocate Medicaid funds to increase wages for CNAs thus reducing costs related to high turnover rates Reduce required staff to patient ratio Provide training to improve supervisory skills for individuals over the CNAs Have CNAs work in teams of two to reduce workload

Temple, A., - Dobbs, D., Andel, R. (2009) Exploring correlates of turnover among nursing assistants in the National Nursing Home Survey Health Management Review, 34(2), 182-190	Greater understanding of correlates of NA turnover is needed to provide insight into possible retention strategies	Cross Sectional Survey Qualitative VI	Wages, benefits (including insurance), and involvement in resident care are associated with reduced odds of turnover	Wages, benefits and the ability to participate in resident-care planning improves job satisfaction and retention of NAs in LTC facilities	Future research efforts are needed to examine facility, market, and individual factors associated with turnover	Provide equitable wages and benefits to NAs. Involve nursing assistants in resident-care planning.
Bowers, B., Esmond, S., Jacobson, N. (2003) * Turnover reinterpreted: CNAs talk about why they leave Journal of Gerontological Nursing, 29(3), 36-43	Facilities with CNAs who feel unappreciated and undervalued are more likely to experience high turnover rates	Grounded dimensional analysis/ Qualitative VI	Organizations that accept input from CNAs regarding staffing, create a culture of respect, and implement wage scales are more likely to reduce turnover rates	Organizations that accept input from CNAs regarding staffing, create a culture of respect, and implement wage scales are more likely to reduce turnover rates	Research the effect of wage scales based on individual contribution as a method to demonstrate appreciation and value, improve job satisfaction and reduce turnover rates	Accept input from CNAs regarding staffing Create a culture of respect

Chou, R., Robert, S. (2008) Workplace support, role overload, and job satisfaction of direct-care workers in assisted living Journal of Health & Social Behavior, 49(June), 208222	1. Institutional, supervisor, and coworker suppose are positively associated with job satisfaction. 2. Role overload mediates the associations between institutional, supervisor, and coworker support and job satisfaction. 3. Institutional, instrumental, and emotional support will buffer the negative effects of role overload on job	Survey Multivariate Analysis Qualitative VI	Job satisfaction is negatively associated with work overload and positively associated with institutional support and emotional support In addition, workplace measures and emotional support and independently associated with job satisfaction.	In order to improve job satisfaction and retention measures must be taken to improve support within LTC and reduce overload	Identify why difference in job satisfaction exist within different facilities.	Job satisfaction and retention will require a multipronged approach that includes improving institutional, supervisor, and coworker support while simultaneously addressing overload

	satisfaction					
Choi, J., Johantgen, M. (2012).

The importance of supervision in retention of CNAs.

Research in Nursing and Health, 35, 187199 | Specific aspects of work (supervision. Pay, and employee benefits are positively related to job satisfaction and negatively related to intent to leave | Probability Sampling Design

Qualitative VI | Supportive supervision, perception of being valued and provision of health benefits are strongly related to job satisfaction and retention. | Supportive supervision, perception of being valued and provision of health benefits are improve job satisfaction and retention. | More information concerning CNA turnover and cost is needed to understand the effectiveness of wage increases | Provide supportive supervision, acknowledge employee contributions and provide reasonable benefits to CNAs to improve job satisfaction and retention. |

Dill, J., Morgan, J., Weiner, B. (2014) Frontline health care workers and perceived career mobility: Do high performance work practices make a difference Healthcare Management	High performance work practices that focus on career development are related to an individuals' perceived mobility with their employer. There is a	Confirmatory Analysis and Structural Equation Qualitative VI	Tuition remission, educational release, financial rewards, workload and autonomy, perceived supervisor support for career development are predictors of perceived	High performance work practices related to career development may be effective tools in improving workers job satisfaction and intent to stay	More research is need to identify the effectiveness of high performance work practices.	Implement high performance work practices related to career development to improve job satisfaction and retention among workers in LTC facilities.

Review, 39(4), 318-328	relationship between perceived mobility, job satisfaction and turnover intent		mobility. Perceived mobility is a predictor of job satisfaction and intent to stay.			

Dill, J., Morgan, J., Konrad. (2010) Strengthening the LTC workforce: The influence of the WIN A STEP UP workplace intervention on the turnover of direct-care workers. Gerontology, 29(2), 196-214	The WIN A STEP UP program improves the working conditions of direct-care workers and in turn, decrease turnover and improve quality of care	Descriptive Study VI	LTC facilities that participated in the WIN A STEP intervention were more likely to have lower turnover rates.	The WIN A STEP intervention improves working conditions and results in lower retention rates.	The WIN A STEP UP program appears promising but would benefit from further evaluation. The effectiveness of each component of the program was not examined which is a limitation of the study (Dill, Morgan, & Konrad, 2010). It is difficult to determine if communication had more of an effect than coaching supervision and vice versa (Dill, Morgan, & Konrad, 2010).	Implement components of the WIN A STEP UP program such as improvement in work condition to improve job satisfaction and reduce turnover rates among direct care workers in LTC facilities
Loe, M., Moore, M.D. (2012) From nursing home to green house: Changing contexts of	The redesigned role of the direct-care worker with the use of the	Qualitative (VI) study using triangulation methods that included interviews,	Traditional nursing environments are rushed, detached and adversarial whereas the	Both residents and direct-care workers experience positive outcomes with the Green	Researchers focused on shortterm effects of this initiative which is a limitation of the study. Further work is needed to determine if the same results would be noted outside of the	Implement components of the Green House Project such as direct-care worker involvement in decision making to produce interdependency and feelings of empowerment to

elder care in the United States. Journal of Applied Gerontology, 31(6), 755-763	Green House Effect, increases time available to engage with residents and promotes a supportive environment. This improves job satisfaction and reduce turnover of direct-care workers.	focus groups, and observations to gain an understanding of work satisfaction and perceived quality of care among directcare workers	Green House nursing facility produces interdependency, stronger ties and feelings of empowerment.	House initiative	sample population.	reduce turnover rates in LTC facilities.
Stone, R. (2001) Research on frontline workers in LTC American Society on Aging, 25(1), 4957	Inadequate financial incentives, stressful work conditions and lack of career opportunities contribute to difficulties in recruiting and retaining CNAs.	Qualitative VI	Facilities that embrace career ladders and provide higher pay experience less turnover	The turnover crisis is simply not going to go away. Policy, practice and research worlds must apply their skills to find solutions	More research is required to 1). Determine the magnitude of the crisis 2) Determine elements of a successful program 3) Gain insight concerning the relationship between workers satisfaction and residents quality of life	Allow CNAs to be involved in career planning meetings Provide higher pay Implement the role of team leader

Lerner, N.,	Which factors	Multiple	Length of	In this study, only	More research is needed to	Implement measures that
Resnick, B., Galik, E., Flynn, L. (2011) Job satisfaction of nursing assistants. JONA, 41(11), 473-478	influence job satisfaction and retention?	Regression Analysis/ Qualitative VI	experience and exemplary care are positively associated with job satisfaction. Self-esteem is negatively associated with job satisfaction	length of experience and exemplary care were identified as factors that enhance job satisfaction.	understand the concept of selfesteem in the workplace and methods to reduce complications related to self-esteem	enhance nursing assistants' ability to provide exemplary and quality care

Temple, A., Dobbs, D., Andel, R. (2010) The association between organizational characteristics and benefits offered to nursing assistants: Results from the National Nursing Home Survey Health Care Management Review, 35(4),	Employment-based benefits are important for the recruitment and retention of CNAs.	Linear Regression Qualitative Study VI	Non-for-profit organizations and organizations with larger bed size offered more benefits to NAs that for-profit and smaller organizations. Job satisfaction and retention rates were high in non-for-profit and larger organizations	Job satisfaction and retention are higher in facilities that offer benefits	Identify job satisfaction and retention outcomes among for-profit and smaller organizations that offer a comparable benefits package to for-profit and larger facilities.	LTC organizations should consider cost-effective initiatives to enhance the benefits packages offered to nursing assistants
324-332						

Appendix C: Hierarchy of Evidence for Intervention Studies

Hierarchy of Evidence for Intervention Studies

Type of evidence	Level of evidence	Description
Systematic review or metaanalysis	I	A synthesis of evidence from all relevant randomized, controlled trials.
Randomized, controlled trial	II	An experiment in which subjects are randomized to a treatment group or control group.
Controlled trial without randomization	III	An experiment in which subjects are nonrandomly assigned to a treatment group or control group.
Case-control or cohort study	IV	Case-control study: a comparison of subjects with a condition (case) with those who don't have the condition (control) to determine characteristics that might predict the condition. Cohort study: an observation of a group(s) (cohort[s]) to determine the development of an outcome(s) such as a disease.
Systematic review of qualitative or descriptive studies	V	A synthesis of evidence from qualitative or descriptive studies to answer a clinical question.
Qualitative or descriptive study	VI	Qualitative study: gathers data on human behavior to understand why and how decisions are made. Descriptive study: provides background information on the what, where, and when of a topic of interest.
Opinion or consensus	VII	Authoritative opinion of expert committee.

Evidence-based practice in nursing and healthcare: a guide to best practice. 1st Ed.